MEMORANDUM FOR SGVT
ATTN: CAPT JOSEPH KLUESNER

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

1. Your paper, entitled An Atypical Presentation of Insulinoma presented at/published to American Diabetes Association 2017 Meeting, San Francisco, CA, National Conference, 9 June 2017 & SURF, San Antonio, TX, 16 June 2017 in accordance with MDWI 41-108, has been approved and assigned local file #17145.

2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.

3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are a 59 MDW staff member, we can forward your request for funds to the designated Wing POC at the Chief Scientist’s Office, Ms. Alice Houy, office phone: 210-292-8029; email address: alice.houy.civ@mail.mil.

4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

LINDA STEEL-GOODWIN, Col, USAF, BSC
Director, Clinical Investigations & Research Support
INSTRUCTIONS

USE ONLY THE MOST CURRENT 59 MDW FORM 3039 LOCATED ON AF E-PUBLISHING

1. The author must complete page two of this form:
   a. In Section 2, add the funding source for your study [e.g., 59 MDW CRD Graduate Health Sciences Education (GHSE) (SG5 O&M); SG5 R&D; Tri-Service Nursing Research Program (TSNRP); Defense Medical Research & Development Program (DMRDP); NIH; Congressionally Directed Medical Research Program (CDMRP); Grants, etc.]
   b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables or photographs for your publication. Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.

2. Print your name, rank/grade, sign and date the form in the author's signature block or use an electronic signature.

3. Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g. case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.

4. Attach a copy of your abstract, paper, poster and other supporting documentation.

5. Save and forward, via email, the processing form and all supporting documentation to your unit commander, program director or immediate supervisor for review/approval.

6. On page 2, have either your unit commander, program director or immediate supervisor: a. Print their name, rank/grade, title, sign and date the form in the approving authority's signature block or use an electronic signature.

7. Submit your completed form and all supporting documentation to the CRD for processing (59crdpubsres@us.af.mil). This should be accomplished no later than 30 days before final clearance is required to publish/present your materials. If you have any questions or concerns, please contact the 59 CRD/Publications and Presentations Section at 292-7141 for assistance.

8. The 59 CRD/Publications and Presentations Section will route the request form to clinical investigations, 502 ISG/JAC (Ethics Review) and Public Affairs (59 MDW/IPA) for review and then forward you a final letter of approval or disapproval.

9. Once your manuscript, poster or presentation has been approved for a one-time public release, you may proceed with your publication or presentation submission activities, as stated on this form. Note: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.

10. If your manuscript is accepted for scientific publication, please contact the 59 CRD/Publications and Presentations Section at 292-7141. This information is reported to the 59 MDW/CRC. All medical research or technical information publications/presentations must be reported to the Defense Technical Information Center (DTIC). See 59 MDWI 41-108, Presentation and Publication of Medical and Technical Papers, for additional information.

11. The Joint Ethics Regulation (JER) DoD 5500.07-R, Standards of Conduct, provides standards of ethical conduct for all DoD personnel and their interactions with other non-DoD entities, organizations, societies, conferences, etc. Part of the Form 3039 review and approval process includes a legal ethics review to address any potential conflicts related to DoD personnel participating in non-DoD sponsored conferences, professional meetings, publication/presentation disclosures to domestic and foreign audiences, DoD personnel accepting non-DoD contributions, awards, honoraria, gifts, etc. The specific circumstances for your presentation will determine whether a legal review is necessary. If you (as the author) or your supervisor check "NO" in block 17 of the Form 3039, your research or technical documents will not be forwarded to the 502 ISG/JAC legal office for an ethics review. To assist you in making this decision about whether to request a legal review, the following examples are provided as a guideline:

   For presentations before professional societies and like organizations, the 59 MDW Public Affairs Office (PAO) will provide the needed review to ensure proper disclaimers are included and the subject matter of the presentation does not create any cause for DoD concern.

   If the sponsor of a conference or meeting is a DoD entity, an ethics review of your presentation is not required, since the DoD entity is responsible to obtain all approvals for the event.

   If the sponsor of a conference or meeting is a non-DoD commercial entity or an entity seeking to do business with the government, then your presentation should have an ethics review.

   If your travel is being paid for (in whole or in part) by a non-Federal entity (someone other than the government), a legal ethics review is needed. These requests for legal review should come through the 59 MDW Gifts and Grants Office to 502 ISG/JAC.

   If you are receiving an honorarium or payment for speaking, a legal ethics review is required.

   If you (as the author) or your supervisor check "YES" in block 17 of the Form 3039, your research or technical documents will be forwarded simultaneously to the 502 ISG/JAC legal office and PAO for review to help reduce turn-around time. If you have any questions regarding legal reviews, please contact the legal office at (210) 671-5795/3365, DSN 473.

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement:

"The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense or its Components"

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving humans:

"The voluntary, fully informed consent of the subjects used in this research was obtained as required by 32 CFR 219 and DOD 3216.02_AFI 40-402."

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving animals, as required by AFMAN 40-401 JP:

"The experiments reported herein were conducted according to the principles set forth in the National Institute of Health Publication No. 80-23, Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act of 1966, as amended."
**TO:** CLINICAL RESEARCH  
**FROM:**  
(Kluesner, Joseph, CAPT, O3, SGVT)  
**GME/GHSE STUDENT:** ☒ YES ☐ NO  
**PROTOCOL NUMBER:** NA - Case Report

**PROTOCOL TITLE:**  
An Atypical Presentation of Insulinoma

**TITLE OF MATERIAL TO BE PUBLISHED OR PRESENTED:**  
An Atypical Presentation of Insulinoma

**FUNDING RECEIVED FOR THIS STUDY?**  
☑ YES  
**NO FUNDING SOURCE:**

**DO YOU NEED FUNDING SUPPORT FOR PUBLICATION PURPOSES?**  
☑ YES  
**NO**

**IS THIS MATERIAL CLASSIFIED?**  
☑ YES  
**NO**

**IS THIS MATERIAL SUBJECT TO ANY LEGAL RESTRICTIONS FOR PUBLICATION OR PRESENTATION THROUGH A COLLABORATIVE RESEARCH AND DEVELOPMENT AGREEMENT (CRADA), MATERIAL TRANSFER AGREEMENT (MTA), INTELLECTUAL PROPERTY RIGHTS AGREEMENT ETC.?**  
☑ YES  
**NO**

**MATERIAL IS FOR:**  
☑ DOMESTIC RELEASE  
☐ FOREIGN RELEASE

**HAVE YOUR ATTACHED RESEARCH/TECHNICAL MATERIALS BEEN PREVIOUSLY APPROVED TO BE PUBLISHED/PRESENTED?**  
☑ YES  
**NO**

**EXPECTED DATE WHEN YOU WILL NEED THE CRD TO SUBMIT YOUR CLEARED PRESENTATION/PUBLICATION TO DTIC**  
DATE: 3/2/2017

**AUTHORSHIP AND CO-AUTHOR(S)**  
List in the order they will appear in the manuscript.

<table>
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<tr>
<th>LAST NAME, FIRST NAME M.I.</th>
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**IS A 502 ISG/JAC ETHICS REVIEW REQUIRED (JER DOD 5500.07-R)?**  
☑ YES  
**NO**

**I CERTIFY ANY HUMAN OR ANIMAL RESEARCH RELATED STUDIES WERE APPROVED AND PERFORMED IN STRICT ACCORDANCE WITH 32 CFR 219, AFMAN 40-401, IP, AND 59 MDW 41-108. I HAVE READ THE FINAL VERSION OF THE ATTACHED MATERIAL AND CERTIFY THAT IT IS AN ACCURATE MANUSCRIPT FOR PUBLICATION AND/OR PRESENTATION.**  
DATE: 2 March 2017
TO: Clinical Research Division  
59 MDW/CRD  
Contact 292-7141 for email instructions.  

24. DATE RECEIVED  
March 09, 2017  

25. ASSIGNED PROCESSING REQUEST FILE NUMBER  
17145  

26. DATE REVIEWED  
March 13, 2017  

27. DATE FORWARDED TO 502 ISG/JAC  

28. AUTHOR CONTACTED FOR RECOMMENDED OR NECESSARY CHANGES: ☒ NO ☐ YES If yes, give date.  

29. COMMENTS ☒ APPROVED ☐ DISAPPROVED  
Case study with appropriate disclaimers. Approved  

30. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER  
Kevin Kupferer/GS13/Human Research Subject Protection Expert  

31. REVIEWER SIGNATURE  
KUPFERER.KEVIN R.1096667270  

32. DATE  
March 13, 2017  

33. DATE RECEIVED  
March 13, 2017  

34. DATE FORWARDED TO 502 ISG/JAC  

35. COMMENTS ☐ APPROVED (In compliance with security and policy review directives.) ☐ DISAPPROVED  

36. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER  
Kevin Inuma, SSgt/E-5, 59 MDW Public Affairs  

37. REVIEWER SIGNATURE  
INUMA.KEVIN.MITSU.GU.1296227  

38. DATE  
March 14, 2017  

39. DATE RECEIVED  
March 14, 2017  

40. DATE FORWARDED TO 59 MDW/PA  

41. COMMENTS ☒ APPROVED (In compliance with security and policy review directives.) ☐ DISAPPROVED  

42. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER  
Kevin Inuma, SSgt/E-5, 59 MDW Public Affairs  

43. REVIEWER SIGNATURE  
INUMA.KEVIN.MITSU.GU.1296227  

44. DATE  
March 14, 2017  

45. DATE RECEIVED  
March 14, 2017  

46. SENIOR AUTHOR NOTIFIED BY PHONE OF APPROVAL OR DISAPPROVAL: ☐ YES ☐ NO ☐ COULD NOT BE REACHED ☐ LEFT MESSAGE  

47. COMMENTS ☐ APPROVED ☐ DISAPPROVED  

48. PRINTED NAME, RANK/GRADE, TITLE OF REVIEWER  

49. REVIEWER SIGNATURE  

50. DATE  

59 MDW FORM 3039, 20160628  
PREVIOUS EDITIONS ARE OBSOLETE  
Page 3 of 3 Pages  

Prescribed by 59 MDW 41-108
An Atypical Presentation of Insulinoma

Joseph Kluesner MD, Alexis Beauvais MD, Jeffrey Colburn MD, Irene Folaron MD

The presentation of an insulinoma can be insidious, leading to delays in diagnosis that can last years. A seizure is a severe manifestation of hypoglycemia, but focusing on the neurological evaluation can overlook an insulinoma as the primary etiology. Consequently, there are several reports of insulinomas initially misdiagnosed as epilepsy. Contrary to these reports, we present a case of new onset seizure that immediately led to the diagnosis and treatment of an insulinoma.

A 53-year-old obese male without history of seizures, altered mentation, or neuroglycopenic symptoms presented to an emergency department (ED) due to a new development of aggressive behavior followed by whole body convulsions. Initial workup was unremarkable and the patient was discharged to home. The following day, family members reported a recurrence of altered mentation for which he returned to the ED. His blood glucose was <40 mg/dL with otherwise normal electrolytes, complete blood count, hepatic and renal function. Drug screen and alcohol screens were negative. Brain MRI and electroencephalogram were normal. He received a 10% dextrose drip IV and eventually required octreotide 150 micrograms three times daily to maintain euglycemia. He started a supervised 72 hour fast, which was terminated within 1 hour due to a low blood glucose of 36 mg/dL with associated neuroglycopenic symptoms. Insulin antibody was not detected and the sulfonylurea screen was negative. Other studies revealed inappropriately elevated C-peptide, insulin, and proinsulin levels, with low β-hydroxybutyrate, overall suggesting the presence of an insulinoma. Abdominal MRI demonstrated a 4.4 cm enhancing pancreatic tail lesion. He underwent a distal pancreatectomy, revealing a 2.5 cm well-differentiated insulinoma. Genetic analysis was negative for MEN1. After surgery, hypoglycemia completely resolved and he had no seizure recurrence.

An insulinoma is an uncommon but treatable condition. Failure to associate the effects of an insulinoma with seizures can lead to a delay in diagnosis. An insulinoma should remain in the differential diagnosis of new onset seizures.

Disclaimer: The views expressed are those of the author(s)/presenter(s) and do not reflect the official views or policy of the Department of Defense or its Components.