



THE COURIER



July/August 2003

IG Dubs NMCP Center of Excellence

Submitted by NMCP Public Affairs Office

Naval Medical Center Portsmouth recently concluded a two-week combined inspection/survey conducted by the military's Medical Inspector General (MEDIG) and their civilian counterpart, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Rear Adm. Steven Hart, Medical Inspector General, declared NMC Portsmouth a "Center of Excellence that needs to be emulated by others." Hart was consistently impressed as his team of inspectors intensely scrutinized both NMC Portsmouth and the surrounding branch medical clinics (BMCs) asserting NMC Portsmouth as the "best tertiary medical center in the military."

Of a possible score of 100, MEDIG/JCAHO awarded NMC Portsmouth a stunning score of 96, with no Type 1 recommendations. According to Hart, the national average for military and civilian scores is only in the upper eighties. JCAHO noted that with a survey of this magnitude, "how rare it is not to have a single Type 1 recommendation." NMC Portsmouth received Accreditation with Full Standards Compliance, which means all performance areas were in full compliance.

As the inspectors and surveyors departed the

compound, Rear Adm. Thomas K. Burkhard, Commander, NMC Portsmouth made a public address system announcement with the preliminary results of the inspection. In comparing NMC Portsmouth to its military counterparts National Naval Medical Center Bethesda in Bethesda, Md., and Naval Medical Center (Balboa) in San Diego, Calif., Burkhard said, "We're not the flag ship, we're not the star ship, but we *are* the *best* ship."

The level of physician's participation with the inspection process and the day-to-day management of the facility were observed by JCAHO. "Civilian physicians often times maintain off-site offices, rarely interacting with their sponsoring hospital and the support staff," said Ms. Vikki Garner, Associate Director for Healthcare Quality Improvement at NMC Portsmouth. JCAHO surveyors also took note of the collaboration and teamwork among the nurses, medical service corps, corpsman and civilians.

But beyond the bricks and mortar of the Navy's First and Finest medical facility, NMC Portsmouth has given a new meaning to the phrase "Taking care of your own" that goes beyond merely treating the pa-

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Former CO from 60s Visits, Tours NMCP

By JO1 Rebecca A. Perron

Rear Adm. Joseph L. Yon (Ret.), a Vietnam era commanding officer, returned to Naval Medical Center Portsmouth July 7 to meet the current commanding officer and take a tour of the hospital. The tour was given by Al Cutchins, NMCP Command Historian, Capt. Martin Snyder, General Surgery, Lt. Jacky Fisher, Public Affairs Officer and Mr. Dan Gay, Asst. Public Affairs Officer. Prior to the visit, Rear Adm. Thomas K. Burkhard, commander, NMCP, greeted Yon with a handshake.

The two flag officers spoke about the differences between their tenures. Yon also met and had lunch with several of NMCP's service line leaders. This

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NMCP Eye Clinic Gives Improved Sight to Fleet

By JO2 Sarah R. Langdon

The Refractive Surgery Clinic at Naval Medical Center Portsmouth is always busy, but lately the tempo has picked up even more. The staff working in the refractive surgery clinic has always been dedicated to bringing better vision to the fleet and now they are reaching out, offering more and more Sailors and Marines the opportunity to shed their glasses and contact lenses permanently.

The Ophthalmology Clinic at NMCP began offering photorefractive keratectomy (PRK) in 1999. This FDA-approved laser procedure is used to correct nearsightedness, farsightedness, hyperopia, myopia and astigmatism (irregular shape of the eye).

The clinic also performs LASE K eye surgery, but only for about 25 percent of its refractive surgery candidates. As availability for the refractive eye surgery procedures has increased, more and more service members are put-

ting their name on the list and benefiting from corrective eye surgery.

“We want to see more service for the deck plate,” said Cmdr. Edgar Levine, Director of the Refractive Surgery Clinic at NMCP. “And we want to accommodate our returning war fighters. We have made refractive surgery for our fleet Sailors high priority. We are converting a portion of our slots to Priority One, our highest priority, for our war fighters.”

An extensive screening process evaluates each candidate’s suitability for the procedure. This screening is used to rule out undesirable candidates and also to select which procedure, PRK or LASEK, will produce the best outcome for the patient.

“Last year, we performed refractive surgery on about 2,500 patients,” said Levine. “We are the most productive clinic in the Navy and we are still operating at an accelerated pace because there is such a huge demand in the fleet.

“Since our budget only al-

lows us to staff the clinic with enough people to perform about 4,000 surgeries [each eye counts as one] per year, we’re double booking, and we’ve lengthened our working hours to accommodate the load. We were able to create 1,000 more spots and that is it. We are maxed out and at our limit, but we are glad to do it.”

There are 12 office visits, including pre-op and post-op, required for each surgery. The two pre-operative appointments are used to evaluate the patient’s eyes and another to explain the procedure and fill out necessary paperwork. Following the procedure, the patient has several follow-up, or post-op, appointments to evaluate their condition over the following year.

“The brunt of the work is born by our techs, but they are very gung-ho and patriotic. Unfortunately this is not a sustainable workload,” Levine said. “This is truly a Herculean effort over a

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The Courier

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The command’s monthly publication provides an avenue to circulate all the useful information the medical center staff has to offer and submissions are welcome. Contact the Public Affairs Office at 953-7986, Fax 953-5118, email the PAO, Lt. Jacky Fisher at jefisher@mar.med.navy.mil. Submissions should be on a disk in text or in Word format with a paper copy attached. Photos should be separate from the document and in jpeg, bitmap or tiff format. Please refrain from embedding photos in Word or creating text boxes and relative formatting in your submission. Send your submissions to the Public Affairs Office and we’ll put in in the next current issue, space permitting. PAO is located in Bldg. One, Third Deck, Rm. 311.

USS Ronald Reagan Now Active duty

By Matthew Dolan, *The Virginian-Pilot*

NORFOLK — Nancy Reagan seemed a little flustered by the applause.

“I only have one line,” the former first lady quipped after taking the podium. So she delivered it promptly: “Man the ship and bring her alive!”

Animated by those words of their ship’s sponsor, hundreds of Sailors ran from Pier 14 at Norfolk Naval Station onto their aircraft carrier and scurried through the mammoth hangar bays.

They climbed up its ladders and took their places on the flight deck, manning the rails of the nation’s newest flattop.

It was arguably the most dramatic moment at Saturday’s commissioning of the Ronald Reagan. And the enthusiastic crowd of some 20,000 applauded its approval at the sight of the bustling ship that intends to carry up to 6,000 Sailors and more than 80 aircraft for more than 20 years without refueling its nuclear reactors.

The time-honored ceremony marked the Navy’s official designation that the Reagan, once beset by construction delays, is now worthy to serve in the nation’s fleet.

Ninth among the Navy’s Nimitz-class carrier, the Ronald Reagan was honored Saturday. It was the kind of gala celebration where admirals wearing four-stars sit near movie stars. Sailors decked out in their best dress for the occasion.

The ship was in formal wear as well, wrapped in red, white and blue bunting and festooned with vibrant signal flags from bow to stern.

Sure, there were speeches and explanations of the 90-minute rite of passage — from the captain assuming command to the ship’s first watch to “bringing the ship to life” led by Nancy Reagan.

But the sound and fury of the day reigned else-

where. A thundering formation of two F-14 Tomcats and two F/A-18 Hornet fighter jets flew overhead after a booming 19-gun salute roared from the ship below.

The carrier will eventually find its homeport in San Diego after about another year in Norfolk.

The day must have been bittersweet for some admirers of the nation’s 40th president.

The ship’s namesake did not attend the festivities. Reagan suffers from Alzheimer’s disease and rarely leaves his California home.

Thousands of Reagan supporters and loved ones of the crew endured temperatures above 90 degrees to watch as the nation’s only carrier named after a living president became



Photo courtesy of USS Ronald Reagan (CVN 76) website

Former First Lady, Mrs. Nancy Reagan gives the command for the crew to “Man the ship and bring her to life,” at the commissioning ceremony held July 12 at Naval Station Norfolk, Pier 12. There were approximately 20,000 people in attendance.

officially operational.

To beat the heat, they held umbrellas over their heads and downed bottle after bottle of water. Each guest was given a small bag of Jelly Belly candy beloved by Ronald Reagan.

“He believed that history was on the side of liberty. . . .” Vice President Dick Cheney said of Reagan. “The free peoples of the world will honor his name for generations to come.”

U.S. Sen. John Warner, the long-serving Virginia Republican who once worked as Secretary of the Navy, saluted the shipyard workers at Northrop Grumman Newport News who used their “brains and brawn and skilled hands that built this majestic ship.”

He praised Reagan for promoting “peace through strength” — the carrier’s motto. He warned that America must be vigilant to affirm its “clarity of purpose and clarity of our exit strategy.”

JCAHO Team Gives NMCP High Marks in Safety, Patient QOL

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tient and their illness,” said Garner. “There is a definite unity between the staff, the patient and the patient’s family. This is not just a business, it is health care provided at it’s best.”

JCAHO completed their survey not only during working hours, but according to Garner they visited the NMC Portsmouth Emergency Room and In-Patient Units after normal working hours. MEDIG extended their inspection to included tenant commands on the waterfront as well as the BMCs.

In 1999 MEDIG and JCAHO combined efforts to streamline the effectiveness of these events, eliminating redundancy and reducing the overall impact on the Medical Treatment Facilities with reference to preparation time. Standards of inspection used by MEDIG and JCAHO compliment each other, but do not overlap. MEDIG’s major focus is on leadership and sound management of an MTF.

The focus of JCAHO’s inspections is safety and quality of care for patients. Additionally, JCAHO accreditation is required for Medicare and Medicaid reimbursements.

Both processes are mandatory, but by combining them, the end product is that Navy Medicine is better served with simultaneous broad-spectrum on-site consultative guidance.

MEDIG/JCAHO inspections and surveys are conducted only once every three years. So where does NMC Portsmouth go from here with their exceptional score of 96?

“It’s one thing to prepare for an inspection, it’s a whole other matter to maintain a standard of excellence,” according to Garner. “In a dynamic field such as medicine, you need to be constantly vigilant and open to areas for possible improvement. And in Navy Medicine, it’s even more so important.”

Yon Finds Present Day Hospital to be Finest Naval Hospital

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marked the first visit by the former commander to the hospital since Charette was built and Building One was renovated.

“I was very pleased with the changes,” Yon remarked. “The size of the new facility is excellent, with modern equipment and furnishings. It’s a great hospital. Certainly, without a doubt, the finest Navy, if not the finest military, hospital.”

Yon retired March 31, 1972 after 33 years of naval service and eight years as commanding officer of NMCP, then called the Naval Regional Medical Center. Yon was selected for flag rank and assumed the duties of commanding officer in November 1964.

Born in Coraopolis, Penn., on Sept. 7, 1912, he attended the Virginia Military Institute and the University of Virginia. He received his degree as a medical doctor from the University of Virginia School of Medicine in 1937. Yon then served a rotating internship at Saint Francis Hospital in Pittsburgh in 1937 and 1938.

In 1938, Yon volunteered for duty as a Naval Medical Corps officer and was commissioned a lieutenant junior grade on August 2. His first assignment was the Naval Hospital in Newport.

At the outbreak of World War II, Yon served as

the medical officer aboard *USS Pecos (AO-9)* in the Asiatic Fleet. His ship was sunk by the Japanese Feb. 1, 1942. After service for a year in the Bureau of Medicine and Surgery in Washington, D.C., Yon returned to sea. He served aboard *USS Miami (CL-89)* in the Pacific Theatre from September 1943 until the end of the war, next serving as senior medical officer at the Naval Operating Base, Bermuda, until 1947. He then was assigned to the Naval Hospital in Corona, Calif., for one year.

Receiving his residency training at Northwestern University and the Cook County Hospital in Chicago in 1948 and 1949, he served at the Naval Hospital in Philadelphia from 1949 to 1951. Yon then became the Head of the Department of General Surgery at the Naval Hospital in Saint Albans, New York, until 1952.

Yon was chief of surgery and executive officer of *USS Consolation (AH-15)* in Korea in 1953 and 1954, chief of surgery at Camp Lejeune, N.C., until 1960 and also served as the executive officer of Camp Lejeune in 1959 and 1960. He had received his first command while a captain in 1960, where he commanded the Naval Hospital in Newport until 1962. He also commanded the Naval Hospital in Saint Albans until 1964. Yon currently resides in Chesapeake, Va.

Clinic Dedicated to Providing Procedure to Fleet

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handful of months. We've reached the top without additional staff and funding, but we'd love to do more."

According to Levine, the push to get as many service members in as possible is not a long-term service, rather a big push to serve as many as possible and reduce the current three-to-six year waiting list for the treatment. In all the clinic receives approximately 800 to 1,000 consults for the surgery per year and there are currently 4,300 people, including aviators, on the waiting list at this time. This lists includes not only Sailors and Marines, but also members from the Air Force and Coast Guard.

So why the big push to perform this elective surgery?

"First and foremost, we want to improve the service member's ability to perform their duties in a safe and effective manner," Levine explained. "We want to improve quality of life and have a positive effect on retention in the Navy. We appreciate the interest and patients service members have for the procedure and the wait, and we want you to know we are committed to providing this life-changing procedure."

"It's great, it's absolutely great," raved ET2 Christopher



Photo by JO1 Daniel A. Bristol

Cmdr. Kristen Zeller, an ophthalmologic surgeon in NMCP's Ophthalmology Clinic controls the laser as it reshapes the patient's left eye. Prior to the procedure, the patient's eyesight was 20/450.

Tomlinson. Tomlinson, a native of Lake City, Mich., works aboard *PCU Texas (SSN 775)* and underwent the PRK surgery July 24. At his follow-up appointment the next day, Tomlinson, whose vision had been 20/100, had plenty of praise on the results of his procedure.

"I've worn glasses since second grade," he explained. "This has been completely life-changing. The biggest difference is that I could read the alarm clock. With glasses, I'd wake up in the morning and had to put them on before I could see the clock. It has a huge digital display and I could never see it without my glasses even though it was only two feet away. Now I can read it. It's really great."

Under the Ship of the Month program, the refractive surgery clinic hopes to perform corrective surgery on approximately 250 fleet service members by February 2004, allowing service members along the waterfront to experience improved vision and improved quality of life. ⚡

A Note from the Fleet and Family Support Center Norfolk Naval Shipyard, Portsmouth

FFSC is hosting the following programs at the Chapel/FFSC Bldg. 67, 2nd Deck at NNSY. To register for a workshop or for more information, call 396-1255. Visit www.ffscnorva.navy.mil offer a full schedule of upcoming programs and services.

CPO Select Resource Training Aug. 27 & 28 9 a.m. - 12 p.m. -- This workshop educates newly selected CPOs about resources available in both the military and civilian communities.

Smooth Move Workshop Aug. 21 8:30 a.m. - 11:30 a.m. -- This single-session workshop offers tips to help make your PCS move as painless as possible -- from tips on shipping household goods to financial planning.

CO of Fleet Hospital Expresses Gratitude for Packages

By Jarad I Wilk, *The Leader-Herald*

AMSTERDAM, N.Y. — Capt. Martin Snyder said it was the 18- and 19-year-olds who were under fire for the very first time during Operation Iraqi Freedom who appreciated the generosity of the employees at Amsterdam Memorial Hospital the most.

“You have no idea what it’s like to be overseas in the line of fire, in enemy territory,” Snyder said. “They didn’t know what it was like to receive packages from home, especially when the things we take for granted here are not there.”

Snyder, commanding officer of Fleet Hospital 15 out of Portsmouth, Va., was in Amsterdam Wednesday to show his appreciation for a series of packages that were sent to his hospital unit while deployed over-



Photo courtesy of The Leader-Herald

Capt. Martin Snyder, commanding officer of Fleet Hospital 15, presents a framed picture of the hospital and FH15 crew to Don Massey, CEO, (left) and Dr. Michael Sherida, board chairman(right).

seas during Operation Iraqi Freedom. He said the fact that employees who didn’t even know the people they were sending packages to was truly an exhibit of support for the troops.

“Receiving the wet wipes, the toilet paper and snack foods that were in those packages are some times better than receiving a letter from mama,” Snyder said. Snyder said he gave all the items in the boxes to the members of the units and the troops. He said AMH was one of several groups to show their support through

packages and letters.

“They were blown away,” Snyder said, “to see the letters from kids we got. We had all of the stuff posted on the walls, and these people had no idea who we were. That’s the stuff that makes you go back and do it again.”

Snyder is presently head of the Surgery Department and director of the Breast Center at NMCP and also serves as the Command Advisor for Health Care Excellence.

Licensed Physical Therapist Assistant Dan Smith, who works at the Sports Medicine Center at Amsterdam Memorial, was the driving force behind Operation Care Package, through which a total of 16 boxes were shipped to medical personnel assigned to Fleet Hospital 15 Portsmouth.

Smith was 18 years old when he was a medic at the Navy Field Hospital based in Portsmouth during the first Gulf War. Prior to serving in Operation Desert Storm, Smith was stationed at NMCP from December 1989 through August 1990. Smith was unable to be at the presentation on Wednesday.

During Operation Iraqi Freedom, Fleet Hospital 15 Portsmouth was staffed by about 255 Navy health care providers, including doctors, nurses, medics and paraprofessionals, whose regular duty assignment is with the NMCP and 32 Seabees from two Naval Construction Battalions, Snyder said.

Snyder took some time to describe the conditions he and his unit had to work under while in Iraq. He said he has been shot at in several places in the world - Iraq, Bosnia, Kosovo and Liberia - while trying to perform his duties. He said the hospital’s role during war has changed over the years.

“We’re putting medical people in harms way,” Snyder said. “We were in enemy territory, and all the units were further forward. It’s becoming a lot more expeditionary. The battlefield is moving so fast.”

Snyder said some of the hospitals, which are set up in large tents, could be as large as 500 beds and take up as much as 39 acres of land. He said for hospital units that size, it could take up to two weeks to set up.

However, he said his unit was more than 100

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Snyder Says Thanks to N.Y. Hospital for Support, Care Packages During War

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beds and took up about two acres of land. He said it takes about six days to set up the entire transportable hospital. Snyder said he has treated everyone from injured American troops to enemy prisoners of war.

“The enemy gets taken care of just as any of our men,” Snyder said. “When they take off their uniforms, they all bleed the same.”

He said before he takes civilians, or enemy prisoners of war, the unit has to make sure they are not carrying any weapons, such as grenades. He said his biggest fear is having a terrorist attack on his hospital unit after not properly searching someone. However, while he has been back on United States soil for a few months, he believes it is only a matter of time until he will have to go back.

“Americans have gotten used to relatively bloodless wars,” Snyder said. “We lost 147 [U.S. soldiers]. We expected a lot more. The first Gulf War was large tank battles. The ones [enemies] who saw the fire power, ran away. If they didn’t run, they didn’t see another day. Now, we’re worried about chemical warfare.”

Snyder said while there was a war going on, those working in the hospital units got their opportunity to have some free time. He said, however, there is not as much “down time” when on land during the war. He said he had satellite televisions, e-mail and even cell phones that could be used.

He said it was harder for the younger troops to deal with the fact that all of that was not available to them on a daily basis.

“The kids today are spoiled. They expect e-mail. They expect the cell phones,” Snyder said. “Wives would complain when the e-mail was off, and they didn’t get an e-mail everyday. Sorry, the e-mail was turned off, but we’re at war.”

Snyder also has ties to the Capital Region - he received his bachelor’s degree from the State University of New York at Binghamton and his medical degree from Albany Medical College. He also served his residency at Albany Medical Center, where he was the chief resident in general surgery. His wife’s family also lives in the area.

Charles and Kathy Beers, who are Snyder’s brother and sister-in-law, said as a family they are “very proud” of what Snyder has done for the United States. They said they watched the news daily to see if they could get any information on him.

Charles said he is also proud of his sister, Snyder’s wife, not only because of her living her life while her husband was overseas doing his job, but because of what she has done on her own.

“She knows what has to be done,” he said. “She organized a support group for women whose husbands were away in the war. We’re very proud of her.”



Photo Courtesy of NMCP Medical Photography

This photo was taken shortly after Fleet Hospital 15 returned from the Gulf Region and Operation Iraqi Freedom. This photograph was presented to the Amsterdam Memorial Hospital along with an artists rendition of Naval Medical Center Portsmouth.

If a Marriage License Came With Instructions

By Lt. Cmdr. Raymond Houk, CHC USNR

I finally bought a new lawn mower. I shopped around for the best price, considered brand reputation, and plunked down some cash so I could properly retire my old mower to the trash in favor of a new, improved, high-tech version. Along with this lawn mower came the instruction manual. The manual told me all I needed to know to keep the lawn mower happy: how it was put together, how to maintain it, what to feed it, when to sharpen it, even the most effective way to employ it in its task of cutting the lawn.

What if marriage licenses came with instruction manuals? Wouldn't life be so much easier? But people are not machines. Each one of us is unique, made up of different parts to our ever complex and interesting selves. This is what makes marriage such a fascinating and dynamic journey, partnering with a whole "other" person to become "one". But what maintains love? What destroys love? Can we at least get the basics, even if we do not get the whole manual?

The answer, I found, is a resounding, "Yes!"

What destroys love is no longer a mystery, what makes relationships last is not just "luck". For more than 30 years researchers at the University of Denver Center for Marital and Family Studies have designed and refined a program called PREP.

PREP stands for Prevention and Relationship Enhancement Program. PREP is a positive program. Much like maintaining my lawn mower or doing exercises to maintain physical health, PREP teaches skills which help couples maintain and improve their marriage. PREP gets results. Studies show a 50% reduction in the divorce rate and higher rates of marital satisfaction in PREP couples compared with the average population.

This workshop teaches skills which are proven to create a relationship in which love and commitment may flourish. It does not treat domestic violence or

function as part of the Family Advocacy Program, but is run by Chaplains to help hospital staff prevent problems before they start, or at least until they escalate beyond help.

Topics include: How to recognize and counteract danger signs, gender differences, applying structure to communicate 'ground rules' for effective relationships, strategies to identify and deal with issues, clarifying core beliefs and maintaining commitment over the long haul. The classes at the hospital are held the third Tuesday of each month, from 8:00 a.m. to 3:00 p.m. in a relaxed, civilian clothes atmosphere.

All that is asked is participants come with their spouses or fiancés and learn. This training is put to use immediately in the classroom as participants learn and practice different communication tools in this safe, structured setting.

PREP is for you if ...

- You're determined to knock down those walls that creep up with time and stress.
- You want to quit playing tug-of-war and learn to problem-solve more effectively.
- Sometimes you'd like to shut out all of life's hassles and just be together.
- You want romance and passion in your marriage.
- You'd like to be able to talk together as friends.

When most people marry, they do not plan on getting divorced or going through a harrowing domestic violence situation. This course gives participants the tools to make a difference in their lives, and stop problems before they start. "Wow, this really works!" was one of the many positive comments received in the course evaluation process.

One-hundred percent of participants so far this summer say they feel more confident about discussing issues in their relationship after taking this course.

Call Pastoral Care at 953-5550 to enroll. ⚡

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Congratulations 'Physicians of the Quarter' for Spring 2003

- Medical Officer-in-Training of the Quarter
- Lt. Cmdr. Romeo C. Ignacio (Chief Resident in General Surgery),
- Staff Medical Officer of the Quarter
- Lt. Cmdr. Matthew T. Mayr (Neurosurgery)
- Senior Staff Medical Officer of the Quarter
- Cmdr. Joel A. Roos (Emergency Medicine)

NEHC Offers Training on Patient-Centered Preventive Counseling

By Capt. Bruce K. Bohnker, Navy Environmental Health Center

The Navy Environmental Health Center (NEHC) in Portsmouth is Navy Medicine's Center for Public Health and Preventive Medicine. As such, NEHC focuses on the prevention of illness and injury in support of force health protection.

The major determinants of health for the Navy population are associated with behavioral choices. For example, choices related to physical activity, nutrition, tobacco and substance use, sexual behavior and injury prevention are key to preventing the most common and costly illnesses and injuries.

In order to cause changes in behavior, the staff at NEHC looks for creative ways to educate the beneficiary population.

Steve Heaston, a public health educator in the population health directorate, has adapted prevention strategies from the Centers for Disease Control and Prevention and the Department of Health and Human Services in the development of a course for patient-centered prevention counseling.

This two-day skills training course enhances the ability of health care professionals to provide patient-centered prevention counseling within routine primary care appointments, within preventive health assessment counseling, or during specialized counseling sessions.

The course is targeted toward physicians, nurses, dieticians, health educators and others who counsel individuals about health be-

havior changes.

The course teaches a six-step counseling process for behavioral change highlighting specific techniques to make the provider-patient encounter more productive and efficient.

It shows providers how to identify risk behaviors with patients, identify safer goal behaviors, form an action plan and deal with barriers to change.

The course also provides some instruction on counseling and behavior change and is highly interactive, giving students many opportunities to practice their new skills.

At the end of the training, each student conducts a complete counseling session, based on real-life patient scenarios.

Heaston and fellow NEHC staff member Lynn Kistler recently completed the third session in San Diego.

The course will be conducted at the NEHC workshop March 2004 and is presented on a request basis at other sites.

Medical personnel can call (757) 953-0962 to discuss the details of sponsoring this training for their local staff. ♣



Civilians of the Quarter Named

By JO1 Rebecca A. Perron

Naval Medical Center Portsmouth recently selected Brenda J. Murdock and Dale Fuller as the Civilians of the Quarter for the 3rd Quarter. Murdock works as an immunizations nurse at the Dam Neck Annex of the Oceana Branch Medical Clinic, while Fuller is the department head for the Health Benefits Department at the Adm. Joel T. Boone Branch Medical Clinic at Little Creek.

Civilian of the Quarter for Category One- Murdock, a licensed practical nurse, has worked in the Navy's medical community since 1989. She started working in the Complicated Obstetrics unit at NMCP in 1989, moving to the Rheumatology Clinic in 1990. After five years there, Murdock left NMCP for work at the branch clinics.

"I started working at Oceana in 1995 in military sick call and immunizations," Murdock explained. "After two years there, I moved to Dam Neck. I still help at military sick call when I'm needed, but mostly, I work in immunizations.

"As the head of the immunizations clinic," Murdock continued, "I make sure the client is ready at all times to deploy."

Murdock determines which shots are needed when the patient enters the clinic.

"I educate the patient about the vaccine and its possible side effects," Murdock

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WAVES Donate Stained Glass Window to NMCP

By JO1 Rebecca A. Perron

The dedication ceremony for the stained glass shadow box donated to Naval Medical Center Portsmouth by the Women Accepted for Volunteer Emergency Service (WAVES) National was held July 19 in the Charette Health Care Center Dining Facility.

The shadow box, dedicated to the women of the sea services past, present and future, was donated to NMCP in honor of the WAVES organization.

"This window is beautiful," said Dassa Carvey, President, Tidewater Tidal WAVES, the local chapter. "This window is the sixth one that has been sponsored by WAVES National and is the most beautiful so far."

The idea for the windows originally started in 1984 after 40 members of WAVES National toured England with the British 'Women of the Royal Navy,' and saw a stained glass window made in honor of the WRN's diamond jubilee. During the return trip, the members decided they would follow suit and donate a window honoring the WAVES.

The chapel at the Navy Yard in Washington, D. C., became the recipient of the WAVES window. Although originally intending to be only one window, donations received were in excess of the cost of the first window, so WAVES National began a project for donating commemorative windows at locations throughout the country.

In January 2002, WAVES National was looking for a place in the Tidewater area to donate their sixth stained glass window and



Photo by JO1 Daniel A. Bristol

Portsmouth City Councilman J. Thomas Benn, III, and Stained Glass Artist Michelle Hatfield pull off the cover unveiling the stained glass window during the dedication ceremony held July 19 in the Charette Health Care Center Dining Facility. From left to right are Rear Adm. Thomas K. Burkhard, commander, NMCP; Coast Guard Rear Adm. Sally Brice-O'Hara, commander, Coast Guard Fifth District; Councilman Benn; Ms. Hatfield; Jan Roy, former president, WAVES National; and Dassa Carvey, president, Tidewater Tidal WAVES, the local chapter.

NMCP was selected.

"At the time, we thought Building One would be an ideal location, and that we could dedicate the window during the (Building One) rededication ceremony last year," Carvey explained. "But altering the windows would have affected the historical value. So, we decided the dining facility would be a great location, since so many people would have the opportunity to see it."

The overall construction of the window and the shadow box took about three months, which included time spent completing the design, selecting glass, then waiting for the materials order to be filled.

"I'm glad it turned out so

well," said Michelle Hatfield, the stained glass artist who created the window. "It was a challenge. I learned a lot with this one."

Hatfield, who has completed more than 200 windows in her 21 years in the business, said this window created a unique set of challenges.

"The light source and look of the window is unique," Hatfield continued. "I used gold glass with a mirror behind for the propeller, so no light would pass through. Some of the glass was discontinued by my normal distributors. I had to have one piece shipped from China and one from Indiana."

Continued on next page

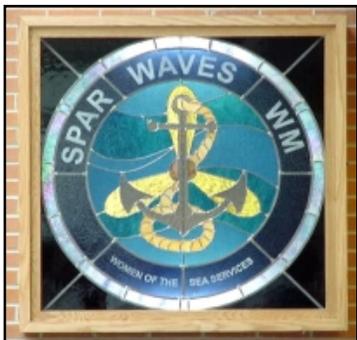
Stained Glass (con't)

Continued from Page 10

During the dedication ceremony, the guest speaker, Coast Guard Rear Adm. Sally Brice-O'Hara, commander, Coast Guard Fifth District, gave several examples of the dedication service women have given our country.

"Because of their determination and the values that have been passed down from generation to generation," Brice-O'Hara said, "we are no longer just called women in the Army or the Navy, women in the Marine Corps or Air Force, women in the Coast Guard. We're called Soldiers, Sailors, Marines, Airmen and Coasties."

At the end of the ceremony, the Tidewater Tidal WAVES Choral Group sang the "Navy Hymn" and "WAVES of the Navy," which was written in 1943 to harmonize with "Anchors Aweigh." ♣



*WAVES of the Navy,
There's a ship sailing down the bay,
And she won't slip into port again
until that Victory Day.
Carry on for that gallant ship
and for every hero brave
Who will find ashore, his man-sized chore
was done by a Navy WAVE.*

Nurse, Dept. Head Take Quarterly Award

Continued from Page 9

said. "I love teaching the patients and interacting with them. I love working with people and helping protect them by making sure they receive the proper vaccines on time."

For the times Murdock is not in the clinic or with another patient, she makes sure everyone receives the same quality of care by ensuring all the hospital corpsman are trained and certified to administer shots.

"I train all new hospital corpsman in the clinic within six months [of their arrival]," Murdock said, "and everyone receives refresher training once a year. I keep the staff and providers current on changes and new information concerning immunizations."

Murdock recently started a new program that will help moms-to-be know when their babies will need those necessary vaccines.

"I put together an information packet that contains a schedule of immunizations for babies and information about the reason why each shot is needed and what the potential side effects are."

The packet is now offered at the "New OB" class held at Dam Neck, and Murdock hopes that in the future, she will have a 15-minute slot in the class to show a video and give further explanation of the information. She also said her packet should be included in similar OB classes held at other local branch clinics and NMCP in the near future.

Civilian of the Quarter for Category Two- Fuller's job as department head of Health Benefits encompasses assisting Tricare beneficiaries in a wide range of issues.

"We assist beneficiaries with

claims, claims questions and a wide array of enrollment issues," Fuller said. "If there are problems with a person's enrollment, we will get involved."

Fuller is based at the Health Benefits Office at Boone and is also in charge of the offices at the Chesapeake Tricare Prime Clinic and the Northwest Branch Medical Clinic at NSGA Northwest also in Chesapeake.

Fuller said since he is in charge of offices in different locations, it is important to routinely visit everyone and be more personal.

"I love the interaction with my folks," Fuller said. "Going to the clinics makes me available to them."

In addition to the trips to the Chesapeake clinics, Fuller said what he loves most about his job is that no two days are the same.

"Everyone who walks in here has a different issue. It's not the same repetitive work."

Fuller has been working at Boone as a civilian in the Health Benefits Department since 1995.

"I had been assigned here doing this job as a hospital corpsman from '91 to '93. Then I got out of the Navy in September '94. After a few months, I applied for this job and started working here in January."

Fuller joined the Navy in 1984, and was assigned to *USS Elrod (FFG-55)* after completing boot camp and apprenticeship training. He struck for the hospital corpsman, and attended "A" school in 1986. His first tour as a corpsman was at Parris Island, S.C., from 1986 to 1988. He then served on *USS San Jacinto (CG-56)* from 1988 to 1991. ♣

NEX Moving Center Simplifies Your PCS Move

By Kristine M. Sturkie, Navy Exchange Service Command Public Affairs

VIRGINIA BEACH (NNS) — The Navy Exchange Service Command (NEXCOM) now offers a free residential connection service to military personnel in conjunction with the Naval Supply System Command's (NAVSUP) SmartWebMove program. These services allow users to arrange their household goods moves, and order utilities and other home-related services online with one-stop shopping convenience.

"The NEX Moving Center provides a valuable tool to make military moves easier," said Rear Adm. William J. Maguire, NEXCOM commander and NAVSUP assistant chief of staff for Navy Family Support.

"With this service, NEXCOM shows an overall Navy commitment to improving the quality of life for our families during the stress of moving, by simplifying the process as much as we can."

With the NEX Moving Center, users can select and purchase utilities, select billing and payment methods, and disconnect utilities and other services. There is also a referral feature to a variety of other useful services, such as self storage facilities, local movers and alarm monitoring.

A key benefit of the NEX Moving Center is that it allows customers to compare pricing and plan offerings from multiple service providers.

At SmartWebMove, servicemembers and their families can plan and arrange household goods moves online. Eligible users fill out a questionnaire to receive a report of entitlements available to them. The system also allows members to receive pre-move counseling, arrange their move, choose pack out and move dates, and submit the forms to their Personal Property Office via the Internet.

Customers can access the NEX Moving Center through the Navy Exchange Web site at www.navy-nex.com/moving or at NAVSUP's SmartWebMove site at www.smartwebmove.navsup.navy.mil.

The NEX Moving Center service is currently available to personnel moving to the San Diego and Norfolk, Va., areas and will gradually be expanded to other Navy bases.

In addition to the connection service and referrals, the NEX Moving Center will also post links to other Navy-related Web sites, such as Tricare and Defense Finance & Accounting Service (DFAS).

NEXCOM's mission is to provide authorized customers quality goods and services at a savings, and to support quality of life programs for active-duty military, retirees, reservists and their families.

NEXCOM is responsible for the technical and oversight for 109 Navy Exchanges worldwide, 42 Navy Lodges, 187 Ships Stores, and the Uniform

Program Management Office. These four independently functioning programs of the Navy Exchange System generated \$1.9 billion in sales in 2002 and gave \$56.9 million to Morale, Welfare and Recreation (MWR) programs. Since 1946, nearly \$2.2 billion has been given to MWR to enhance Sailor quality of life.

NAVSUP's primary mission is to provide U.S. naval forces with quality supplies and services. With headquarters in Mechanicsburg, Pa., and employing a worldwide workforce of more than 24,000 military and civilian personnel, NAVSUP oversees logistics programs in the areas of supply operations, conventional ordnance, contracting, resale, fuel, transportation and security assistance.

In addition, NAVSUP is responsible for quality of life issues for our naval forces, including food service, postal services, Navy Exchanges and movement of household goods.

For related news, visit the Navy Exchange Service Command Navy NewsStand page at www.news.navy.mil/local/nexcom. 



Clinic Dedicated to Improving Mental Health Through OCIP

By Lt. Sean P. Convoy, NC Team Leader, OCIP

Familiar stories echo throughout the fleet from sea to shore and back again. These stories include people of all rates, ranks and positions. They cross all boundaries of gender, class, race and religion. These stories are surprisingly ordinary. As the reader is looking at this very sentence he or she can remember a situation that speaks to these stories... stories that speak to mental health.

The realities of military service are that people are at increased risk for mental health problems. These problems are far ranging. Although they may seem insignificant to some, they are very serious to those experiencing them. Many consider deployments, permanent change of station, problems with supervisors, performance concerns, changes in workload, separation from family, conflicts of interest between military and family and many more unnamed to be the problem. If that is the case, then why don't all people feel better after the problem is resolved?

The reason why people don't always return back to 'normal' is because what they think is the problem may not actually be the problem. For many, the problem is not the day-to-day situations that affect them. For many, the problem is the way they think about themselves in relation to the problem they are having. An example may be useful here.

Jason is a newly frocked third class petty officer assigned to a pre-commissioned submarine. He is working through submarine qualifications while at the same time learning how to be a new husband and father. He has one child and another on the way. His wife is experiencing some minor problems with her second pregnancy. Jason has \$40,000 of credit card debt and his car is currently in the shop getting a new transmission. He has taken a part-time job to help decrease his debt. He is hardly at home and is now having marital problems because of this. He has been having problems at work and has recently been counseled for being UA. He seems to be getting hassles from all directions. He becomes desperate. He can't see beyond his problems to find answers. He can't distinguish between his problems and himself. He confides in a shipmate that he has recently considered suicide. His shipmate informs his chain of com-

mand and he is sent to the Naval Medical Center for a psychiatric evaluation.

This scenario may sound strangely familiar to some. Problems usually don't come one at a time and take a number. When problems come, they come in waves. Our problems are like the undertow. As hard as we try to swim back to shore in an undertow situation, the tide pulls us farther and farther out to sea. When we are in the undertow, we consider the undertow to be the problem. If the undertow is the real problem, what are the chances that we can stop the undertow? We can't change the undertow any more than we can change the weather. We are wasting our time and effort trying to change something that we are unable to. The answer to surviving the undertow has to lie somewhere else.

Let's get back to Jason. His behavior in the undertow is the problem here. If Jason learned how to swim back to shore under these difficult conditions, the undertow would no longer be a problem. Likewise, if Jason were to learn how to think differently about himself in relation to the military, his family and his financial problems, he may be able to decrease many of the negative physical, behavioral and emotional reactions he has. Simply stated, Jason can change his life for the better if he learns how to think about everyday problems in a different, more realistic way. The way to change how you feel is to change the way you think.

Naval Medical Center Portsmouth's Behavioral Care Service Line offers a weeklong program called the Outpatient Cognitive Intervention Program (OCIP). OCIP is a treatment program serving the TRICARE Prime population. The goal of the program is to challenge people to think differently about themselves and the day-to-day problems they have.

OCIP's staff is highly integrated, motivated and trained to assist the OCIP client to achieve these goals. The staff consists of a consulting Board-Certified Psychiatrist and a Board Certified Psychiatric-Mental Health Nurse. Additionally, OCIP utilizes a registered art therapist and specially trained neuropsychiatric technicians to provide comprehensive mental health care.

Continued on next page

OCIP Shows Results by Challenging Thought Process

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OCIP strives to present challenging problems and situations for each client to solve within a group setting. This process challenges clients' communication and social skills.

By the end of the five-day experience, each client has learned several new life skills and has actually practiced them in a challenging yet supportive setting. Clients learn by repetition how to 'think about how they think', to recognize and alter their thinking distortions, and to express themselves assertively.

With the support of an experience like OCIP, Jason learned that it is not really the family, military and financial problems that are causing him to feel so bad. In OCIP, he learned that the thoughts he has about himself in these situations are far more damaging.

Jason learned how to challenge these strong negative thoughts he has about himself in relation to his problems. In essence, Jason learned how to swim parallel to the shoreline until he got free of the undertow. He now takes control of his own actions and immediately feels better for doing so.

Below are just a few quotes from previous OCIP students about their experience,

"This was the toughest experience of my life, but probably the most valuable, too." — Lieutenant Commander, U.S. Navy.

"The answers were so simple, I just needed to ask myself the right questions. Now I can." — Seaman, U.S. Navy.

"OCIP didn't preach to me. They let me learn by experiencing things. I wish everyone in the military could have this experience." — Senior Airman, U.S. Air Force.

"It really is amazing to learn that I cause the majority of my problems by the way I think about myself. In

retrospect, that is a good thing because at least that is something I can change." — Senior Chief, U.S. Navy.

"If you are coming to OCIP with the hope that they will fix your problems, you will be disappointed. If you come to OCIP with an open mind and are willing to look at yourself, you will learn some amazing things." — Family Member, U.S. Marine Corps.

OCIP teaches individuals to 'rethink how one thinks.' With effort Jason can regain control of his life. So can you. ▼

OCIP is waiting for you!

Prospective OCIP clients can either self-refer or be referred by licensed providers within the TRICARE Network.

The OCIP administrative office is located on the 5th floor of the Charette Health Care Center, room 530224-85. Clients can walk in for a screening during business hours, 7:30 a.m. to 2:30 p.m., Monday through Friday. Clients must be in the uniform of the day (or appropriate civilian attire for non-active duty) and bring their medical record and original referral from the referring provider to the screening appointment.

Lt. Sean P. Convoy, NC, and OCIP team leader, can be reached at 953-4880 or 4877.

The access standard for enrollment is two weeks. Enrollment ratios are 80 percent for active duty and 20 percent for all other Tricare beneficiaries. OCIP is scheduled for three out of four weeks per month, from Monday to Friday, 7 a.m. to 4 p.m.

For more information on these services, visit the following websites:

TRICARE Prime: www.tricare.osd.mil
Board Certified Psychiatrist: www.abpn.com
Board Certified Psychiatric-Mental Health Nurse: www.nursingworld.org/ancc

Come One, Come All!

Any history buff looking to learn the secrets of Naval Medical Center Portsmouth's past is invited to join Al Cutchins, NMCP command historian, on a historical tour of the medical center.

Starting in September, Mr. Cutchins will conduct a walking tour of NMCP the 1st Thursday of every month to anyone interested in learning the lore of one of America's oldest naval hospitals.

The tours will run from September to November and from January to April.

Tours will begin at 1 p.m. on the quarterdeck of the Charette building.

Don't miss this chance to see the grounds, the old operating room and even the dungeon.

See you there!

Luncheon Held to Honor Sailors of the Quarter

By JO1 Daniel A. Bristol

“I am committed to excellence and the fair treatment of all.” This final line of the Sailor’s Creed are words to live by for those Naval Medical Center Portsmouth Sailors who were honored at the Blue Jacket, Junior Sailor and Senior Sailor of the Quarter luncheon held at the Sand Bar July 15.

“These Sailors are just some of the ‘First and Finest’ on board,” said MSCM(SW) Steven L. Kruse, the guest speaker at the luncheon. Kruse said being the leading master chief of the nutrition department and learning the jargon and other aspects of the medical field, he has more respect for how hard corpsman work.

HN Patricia Henegar, of the Family Care Clinic at NMCP, received the honor of Blue Jacket of the Quarter. She said it was surprising to find out she was selected.

“I am a people person,” said Henegar. “I try to help out others.” She said that made others more willing to help her when she needed it.

Henegar said she asked others, who have gone before the board, what kind of questions she

could expect.

“Walk around the command, talk to others, but more importantly, study and practice,” said Henegar. These are Henegar’s words of wisdom for others who may go up for this in the future.



Photo by JO1 Daniel A. Bristol

HM3 Francesca Harris was named the Junior Sailor of the Quarter. Harris said she couldn’t believe she was selected.

“I just do my job, and I try to help others.” Harris, who works in the laboratory, said she thanks God for everything she has and for being se-

lected.

For others who are nominated in the future, Harris explains that when in front of the board, “Just relax, and if you don’t know the answer to a question, don’t be afraid to say so.”

HM1 Loretta Connatser, chosen for the Senior Sailor of the Quarter, said the most important thing to do to prepare for the board is to, “keep up-to-date on current Navy events.

“Since it took me three boards to get here, I feel privileged to have been selected,” said Connatser. ♣



Photo by JO1 Daniel A. Bristol

Steady, Steady, Don’t fall!

Bill Monell, Recreational Director for Naval Medical Center Portsmouth’s Morale Welfare and Recreation Department, fights to steady himself on the mechanical surfboard at the Hawaiian Luau held at the Sand Bar July 18.

The Luau was a product of the efforts of Monell and his staff and the General Manager of Sand Bar, Carol Houchin and her staff. Prizes, donated by a local beverage company, were given to anyone who even attempted to stay on the surfboard.

Prizes included Hawaiian-style T-shirts, ball caps, key chains and cup warmers/coolers.

Congratulations

Letters Of Commendation

Lt. Xanthe R. Miedema
HM3 Ann M. Anop
HM3 Codie Coyle
HM3 Shawanna L. Murphy
HN Shaun P. D'Agostino
HN Patricia Henegar
HN Aaron D. Lopez

Navy and Marine Corps Achievement Medal

Lt. Cmdr. Audrey D. Arthur
Lt. Cmdr. Michelle L. Garnett
Lt. Cmdr. Sharon C. Newton
HMC Leon F. Walker
HM2 Jennifer M. Gordon
HM3 Rosa M. Cedillo
HM3 Phillip P. Macon
DN(FMF) Carlisle C. Pennycooke

Military Outstanding Volunteer Service Medal

Lt. Cmdr. Sandra Whittaker-Hill
Lt. John P. Murphy

Meritorious Service Medal

Cmdr. Dawn M. Cavallario

Joint Services Commendation Medal

Cmdr. James K. Radike

Navy Meritorious Civilian Service Award

Teresa Fly

Letters Of Appreciation

Lt. Cmdr. Raoul Allen
Lt. Chad Hardy

Navy and Marine Corps Commendation Medals

Capt. David M. DeVecchio
Cmdr. Mark A. Fontana
Cmdr. Jon L. Hopkins
Lt. j.g. John L. Bastien
Lt. j.g. Margaret A. Jacobsen
Lt. Melody Armstrong
Lt. Ralph J. Gargiulo
Lt. j.g. Carla A. Little
Lt. Megan Y. Miller
Lt. Brian Parton
Lt. Geoffrey W. Young
Lt. Sabra S. Rawlings
ENS(SS) Shawn P. Kratzer
RPC Michael S. Flower
MMCTodd L. Kolbeck
SKC(SW) Lawrence R. Nutter
HM1(SW) Diane K. Weirich
HM2 Joann M. Coleman
HM2 Mary A. Matthews
SK2 Watley L. Turner
HM3 Cheng A. Tung
HN Candice L. Wilson
HM3 Todd Woodard

Certificate of Appreciation

HM2 Tamika Richardson



**Goin' bananas at
NMCP!
Boy, that MSC
sure is smooth!**

Members of NMCP's Medical Service Corps, Lt. Michelle Grimes and Lt. j.g. Darla Howell, mix smoothies and sell treats during a Smoothie and Bake Sale held July 25 on the bridge between Bldg. Two and Bldg. 215. Sale proceeds will go to the annual MSC Celebration.

Photo by JOSN Christopher "Moe" Taylor