



THE COURIER

December 2002/January 2003



Officer Honored as Physician of the Quarter

Story by JO3 Theresa Raymond

Cmdr. Jose de la Pena, Adult Medicine Product Line Leader and Family Practice Staff Physician at Naval Medical Center Portsmouth, was recently named Physician of the Quarter. The distinguished award recognizes NMCP doctors who go above and beyond in service to patients, colleagues and the community.

"I didn't even know I was nominated, but once I found out I had been and was selected, I was extremely surprised and honored," said de la Pena.

The doctor from Cuba

Continued: See de la Pena Page 6



Cmdr. Jose de la Pena peeks into a patient's ear with a genuine concern in his eye. De la Pena was honored as the Physician of the quarter by Naval Medical Center Portsmouth. (Photo by JO3 Theresa Raymond)

Inside this issue:

Staff Soundoff	Pg 2
Breakfast with Santa	Pg 3
Christmas trees	Pg 4
"Operation Santa"	Pg 5
Physician of the Quarter	Pg 6
Civilian of the Year	Pg 7
Disaster Drill	Pg 8
Small Pox Vaccine	Pg 9
Chaplain	Pg10
Hospital Staff Helps	Pg 11
Managing Your Debt	Pg 12
von Trapp Children	Pg 13
Think about Smoking	Pg 14
TRICARE page	Pg 15
Galley Menu	Pg 16

First Breakfast With Santa Huge Success

Story by JO1 Daniel A. Bristol

"Santa Claus is coming to town." That's the way the song goes. Everyone knows that this is the season for Santa as he has worked hard all year long getting the toys ready for all the good little boys and girls on Christmas. Well, Naval Medical Center Portsmouth staff members and their families had the chance to meet Santa before Christmas and let him know what they would like. NMCP held its first ever "Breakfast with Santa," December 7, for all to enjoy.

As families walked up to the entrance of the dining area, one of the people greeting them was DT2 Robert Robinson, who works in the Dental clinic and is also a member of the Junior Enlisted Association. As they arrived at the end of the hallway leading to the dining area, there were more volunteers to greet them and show them to a table where they could sit. Once seated, pancakes and juice was served. To the left, there were tables for the children to do arts and crafts and draw and color.

With over 60 volunteers, there were people helping with the crafts, helping with the drawing, blowing up balloons and preparing and serving food. "It was a good example of the Navy

Continued: See Santa Page 3



Capt. Thomas K. Burkhard, Commander, Naval Medical Center Portsmouth, talks with some children as they do arts and crafts at the first ever breakfast with Santa December 7 from 9:00 to 11:00 a.m. The event was coordinated by Morale Welfare and Recreation and the Command Recreation Board. In total, there were more than 60 event volunteers from the Junior Enlisted Association, the barracks mess management specialists, the chaplain's office and the First Class Petty Officers' Association. (Photo by JO1 Daniel A. Bristol)

January Staff Soundoff

Question: *What was your New Year's resolution for 2003, and did you complete the one you set for 2002?*

An authorized publication of the Naval Medical Center, 620 John Paul Jones Circle, Portsmouth, VA 23708. The views expressed in this publication are not necessarily those of the United States Navy.

The Courier is published monthly by the Public Affairs Office. Be sure to check out NMCP's website at www-nmcp.mar.med.navy.mil.

Commander

Capt. Thomas K. Burkhard

Deputy Commander

Capt. Mathew Nathan

Public Affairs Officer

Lt. Jacky Fisher

Assistant PAO

Mr. Dan Gay

Staff Reporters

JO1 Daniel A. Bristol

JO3 Theresa Raymond

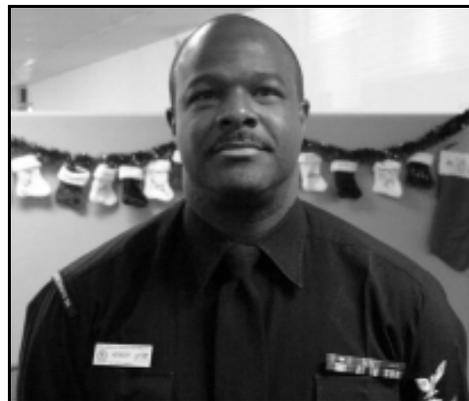
How do I get something in The Courier?

The command's monthly publication provides an avenue to circulate all the useful information the Medical Center staff has to offer. Contact the Public Affairs Office at 953-7986, Fax 953-5118, via Guardmail, or you can E-mail the PAO, Lt. Fisher, at jefisher@mar.med.navy.mil. Submissions should be on a disk in text or Word format with a paper copy attached. Photos are welcome and can be returned on request. The Courier now comes out once a month. Send your submissions to the Public Affairs Office and we'll put it in the next current issue, space permitting. Submission deadline for the next issue is the 15th!!

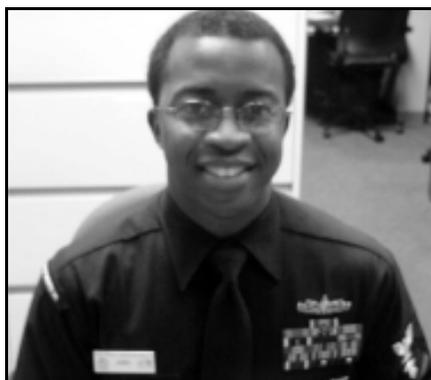
We are located in Bldg. One, fourth deck, Room 411.



"My New Year's resolution for 2003 is to become closer to my extended family and to be at all the events my kids participate in. Yes, I completed the one I set for 2002." HMI(SW) Sharon J. Brookins, Command Career Counselor



"I, for one, don't believe in making resolutions. I feel if you're going to make up your mind to do something you don't need a resolution, you need a made up mind, to finish what you start." HM1 Lorrin A. Herbert, Orthopedics



"Stay focused and to prepare for the next phase of my naval career of a rate change. Yes, to work on my physical fitness." DT3(SW/AW) Lewis E. Jones, Dental front desk supervisor



"My New Year's resolution for this year is to devote more time to my family and friends since I've been apart from them for so long." HA Erycka D. Waters, Staff Records

Santa Visits Hospital to Have Breakfast with Kids

Continued from Page 1

family at work," said Cmdr. Dom Rascona, a pulmonologist at NMCP, who brought his children there to see Santa. "This is a great thing that they do for the kids. I couldn't say enough good things about it."

"It doesn't matter what we do just helping is enough," said HM2 Bridgette Perry, who was helping serve food to everyone. "It's a lot of fun to me, and I am a big kid anyway."

Between the crafts, the coloring and sitting on Santa's lap to receive a candy cane, there was plenty going on to keep the children happy. There was always a line of smiling faces waiting to tell Santa what they wanted for Christmas. Some would sit on Santa's lap and smile because there were Polaroid pictures being taken, but some would just sit and make funny faces at the camera. There was even one that just didn't want to sit down at all. Rhonda Kraus brought her son, Derek, over to see Santa, but he didn't want to sit down. Instead, he had a hold of mommy's shirt and wasn't going to let go.

"Santa has 10 more minutes," said HMC Kevin Amick, chairman of the command recreation board. The line in front of Santa's chair finally started to

shorten as Santa's time became shorter and shorter. The crowd slowly started heading toward the door, and the

volunteers started cleaning up the dining area as the first ever breakfast with Santa came to a close.

Amick, who works in same day surgery section of Ambulatory Procedures Department, said since this was the first year for breakfast with Santa, they really didn't know what kind of a turnout to expect. He said they had about 180 children and about 300 overall. In addition to breakfast with Santa, Amick said they also raised many toys for the "Toys for Tots" campaign.

With the combined efforts of the Junior Enlisted Association, the

chaplain's office, Morale, Welfare, and Recreation, the barracks mess management specialists and the First Class Petty Officers' Association, the breakfast with Santa event was a success. "The kids were all excited going in," said Robinson, "and they were speechless when they came out, from all the activities."



Little Derek shies away from Santa as Rhonda Kraus tries to convince him to sit on Santa's lap. Derek was all excited about going to see Santa at Naval Medical Center Portsmouth's first ever breakfast with Santa held December 7 from 9:00 to 11:00 a.m. The event was held in the command's dining facility. (Photo by JO1 Daniel A. Bristol)

Twass the Season to Party NMCP Style

Story by JO3 Theresa Raymond

Naval Medical Center Portsmouth knows how to throw a Christmas party and 2002 was no exception.

The annual celebration, which was held on December 13, was sponsored by several base organizations such as the Morale, Welfare and Recreation department and the Junior Enlisted Association to name a few.

Capt. Matthew Nathan, NMCP's deputy commander, and CMDCM David Carroll, the command master chief, stopped by to acknowledge 2002's annual holiday decorations contest.

The party included other distinguished guests such as Mr. and Mrs. Santa Claus, Mickey and Minnie Mouse and Elvis.

The base-wide party featured a Christmas around the world display, which gave a small history of different cultures and how others celebrate the joyous season.



Mr. and Mrs. Santa Claus joined Naval Medical Center Portsmouth December 13 in celebrating the holidays at their annual Christmas party. (Photo by JO3 Theresa Raymond)

Happy Holidays from the Oak Leaf Club

Story by JO1 Daniel A. Bristol

Whenever we think of Christmas time, we think of two things that have come to symbolize Christmas, and they are Santa Claus and Christmas trees. Well, now it's beginning to look like Christmas at Naval Medical Center Portsmouth thanks to the Oak Leaf Club. Members of the Oak Leaf Club helped put up and decorate three Christmas trees throughout the hospital.

Pattie Guyer, a member of the Oak Leaf Club (right), straightens the lights on the Christmas tree in Building One. This tree was decorated with streamers, beads, ornaments, lights and

decorative candles. Each tree in the hospital was decorated a little differently from the others.



(Photo by JO1 Daniel A. Bristol)



(Photo by JO1 Daniel A. Bristol)

There were members from the Oak Leaf Club and some of the hospital staff on hand to help decorate the trees. HM3 Marion D. McFarland, who works in the admissions office (left), helped the Oak Leaf Club set up Christmas trees on the first floor of Charette Health Care Center. There was one set up there and one set up by the quarterdeck, as well as, the Victorian style tree in Building One. Happy Holidays from the members of the Oak Leaf Club.

Santa Rolls in on Motorcycle, Makes Children Smile

Story by JO1 Daniel A. Bristol

The sound of revving motors filled the oncology entrance to Naval Medical Center Portsmouth as a procession of about 15 motorcycles rolled to a stop in front of the entrance. December 15 marked the day Santa traded in his sleigh for a motorcycle as "operation Bright Light" got underway.

Operation Bright Light is the name given to Rolling Thunder Virginia Chapter Two, which is a POW/MIA advocate group, when they visit the hospital with Santa Claus to hand out presents to the good little boys and girls in the pediatric wards.



Santa visited the wards while being escorted by Chris Brogan, who is the facilitator for this event and who works in the pediatric ward. "I just want to make it fun and easy for Santa to see the kids," said Brogan. He said he feels like it really helps brighten the children's lives.

As Santa wondered throughout the ward wishing everyone he met a Merry Christmas, there were smiles on all the little faces. "Seeing the kids laying there, and then seeing them smile," said Santa, "I just want the chance to make everyone I meet happy."



Santa Brings Holiday Cheer to Hospital Wards

Story by JO1 Daniel A. Bristol

Where is the one place no one wants to be at Christmas-time? No one wants to spend his Christmas in the hospital. Well for those inpatients in the wards of Naval Medical Center Portsmouth, since they couldn't be home to see Santa, Santa came to them.

Coordinated by the Red Cross, "Operation Santa," was a huge success as Santa brought presents and smiles to many children within the hospital. Those in the hallways received holiday cheer and candy canes, and those inpatients in the wards of NICU, PICU and Labor and Delivery received a greeting from Santa as well as a present to start their Christmas off right.

Escorted by Capt. Thomas K. Burkhard, Commander, NMCP, Santa took time out of his busy, holiday schedule to visit with patients in the hospital wards and spread some holiday cheer. Mrs. Claus, a couple of Santa's elves and CMDMC David Carroll, also helped Santa pass out the presents.

When everything was all said and done, Santa passed around a little holiday cheer in the emergency room waiting area just before heading back to the North Pole to finish preparing for Christmas Eve.



Capt. Thomas K. Burkhard, Commander, Naval Medical Center Portsmouth, escorts Santa to various ward inpatients as Santa passes out some holiday cheer with some Christmas gifts. Coordinated by Maria Bell of the Red Cross, "Operation Santa," was an early Christmas for patients who otherwise might not have been filled with much cheer. (Photo by JO1 Daniel A. Bristol)

Healthwatch: Home First Aid Kits Need Not Be Extravagant

By Brian Badura, Bureau of Medicine and Surgery

WASHINGTON, DC - Where do you keep your home first aid kit? How about the one for your car? Or do you even have a first aid kit at all? A hodgepodge of miscellaneous bandages and over-the counter pills strewn about don't really qualify as a proper first aid kit. To be prepared for life's unexpected bumps and scrapes - or even more serious illnesses or injuries - take some time to assemble a first aid kit for your home and automobile.

"Accidents happen to everyone, at inconvenient times, and you don't know how long it will be before help arrives," said Cmdr. Lynn Welling, Medical Corps, Navy Medicine's emergency medicine specialty leader. "Therefore, you need to be prepared in advance by having a first aid kit at the ready."

According to the National Institutes of Health (NIH), a good first aid kit doesn't need to cost a lot or include extravagant medical equipment and supplies. In fact, many of the recommended items may already be in your home.

The NIH recommends these items when assembling your first aid kit: - Sterile adhesive bandages in assorted sizes - Two-inch sterile gauze pads (four to six) - Four-inch sterile gauze pads (four to six) - Hypo-allergenic adhesive tape - Triangular bandages (three) - Two-inch sterile roller bandages (three rolls) - Three-inch sterile roller bandages (three rolls) - Splints: ¼ inch thick by 3 inches wide x 12 to 15 inches long - Scis-

sors, tweezers, needle - Moistened towelettes - Antiseptic - Sterile saline solution - Thermometer - Tongue blades - Tube of petroleum jelly or other lubricant - Assorted sizes of safety pins - Cleansing agent/soap - Latex gloves (two pair) - Eye goggles - Sunscreen - Aspirin or non-aspirin pain reliever - Anti-diarrhea medication - Antacid (for upset stomach) - Syrup of Ipecac (used to induce vomiting if advised by the Poison Control Center) - Laxative - Activated charcoal (use if advised by the Poison Control Center)

Put these items in a suitable container that will keep them clean and dry, while at the same time allowing for easy, organized storage. Fishing tackle boxes, small tote bags and plastic tote bins work well for first aid kits.

Keep some change in the car first aid kit so you can make phone calls in an emergency. Be sure to include a list of emergency phone numbers as well. Check the kit periodically to ensure the supplies have not outlived their expiration date. Be sure to discard and replace any old items with fresh supplies. Welling recommends taking inventory of your first aid kit twice a year at the same time you change your smoke alarm batteries.

She also recommended keeping first aid skills current. "Keeping your first aid skills current is just as important as keeping the supplies current, and first aid refresher training is always a good idea."

De la Pena Starts Rewarding Career as Navy Commander

Continued from Page 1

felt this accomplishment would not have been met if it wasn't for his coworkers. "I would have not reached this level or became the physician of the quarter if it wasn't for the staff. They are wonderful people to work with. We are a team here, and I'm glad we work together," de la Pena explained.

De la Pena earned his medical degree from the University of Grenada, Spain, and completed both his internship and residency at Jackson Memorial Hospital in Florida.

Specializing in family medicine and being a chairman for NMCP's Utilization Review Committee, de la Pena strives to give patients the care they need while training other doctors, nurses and hospital corpsman on every aspect of family medicine and quality assurance.

"We in the committee strive to implement the guidelines or pathways for the whole command. That is something I have been trying to do through the Fleet and Family Service Line as well as the Utilization Review Committee," he said.

The Utilization Review Committee ensures optimum and maximum utilization of hospital facilities. The committee also discourages and prevents unnecessary utilization by reviewing past records.

De la Pena has an amazing naval history. He was commissioned in 1997 as a commander. "After completing medical school in Spain, I was eager to complete my internship and residency. I did apply to the Navy, but the University of Miami responded first," said de la Pena.

One day de la Pena received a call from a Navy recruiter. He was reluctant to respond due to his age. "I

wasn't sure the Navy wanted my services because I was over the recruiting age. At first, I was thinking it was a mistake," he said.

The Navy not only wanted de la Pena's services as a physician, they granted him 16 years of experience and commissioned him in 1997 as a commander.

"I was in charge of the residency-training program in Florida and the Navy felt that experience would be an asset to them," said de la Pena.

He acts as a role model for medical students interested in pursuing family medicine. De la Pena's goal is to help them maintain a natural enthusiasm and interest in the specialty. "I try to help them understand that family medicine is wonderful, challenging and fulfilling," he explained.

"The Navy is so different from the civilian world in that there isn't an HMO restriction or financial obligation. I can teach family practice without restriction because of the military," continued de la Pena.

This commander's career is just starting, as he sees no end to his military career or education. "I am currently enrolled at Troy State University training for my master's in management in the science health field. I plan to remain a Navy officer for as long as the Navy will have me and better myself by obtaining a master's degree," said de la Pena.

De la Pena has sound advice for anyone going up for a review board or committee. He says to "be yourself."

"This type of recognition isn't one you get by pushing others down or around. If you're always honest and do the best you can, people will notice, and you will get recognized for it," de la Pena explained.

The end of the next quarter isn't that far away. Keep your eyes open because the next Physician of the Quarter could be standing right next to you.

Please look around you and consider publicly identifying a uniformed physician who is outstanding in competence, leadership, mentoring, compassion, service...in all the qualities that embody the finest in Navy Medicine!

The nominations are in accordance with NAVMEDCENPTSVAINST 5305.5 (you'll find helpful guidelines in that instruction!) and the categories of "Physician of the Quarter" include:

1. medical officer in training, such as internship, residency, or fellowship,
2. staff medical officers in the 0-3 & 0-4 pay grades,
3. senior staff medical officers in the 0-5 & 0-6 pay grades.

These last two categories are the result of a split in the "staff" grouping, designed to allow the more junior physicians who are doing excellent work to be more competitive with their peers. This means that a LT or LCDR staff physician has a good chance at gaining recognition for his or her excellent achievements!

The nominees will be invited to meet with the Board for a brief interview during that time; please assist the candidates in clearing their schedules so that they can attend. In order to expedite the nomination process and per the instruction, the nomination, in the specified format, is to be endorsed by the nominee's Team Leader and/or Product Line Leader, then submitted for consideration.

Civilian of the Year Category I, Category II Honored at Breakfast

Story by JO1 Daniel A. Bristol

Peggy Adams (right), Clinical Nurse, Boone Clinic Immunization Division, receives Civilian of the Year category I honors from Capt. Thomas K. Burkhard, Commander, Naval Medical Center Portsmouth. Eugene Harsh (below), Computer Specialist, Management Information Department, Branch Medical Clinic, Sewells Point, receives honors as NMCP's Civilian of the Year category II in a ceremony December 5.

Adams is a well motivated and experienced role model who has been at this command for 19 years. She daily manages the immunization clinic's workload that has doubled to nearly 6000 shots per month. She continues to meet the fleet's need for vaccine support, while serving as the resident expert in vaccine administration with strong leadership skills.

Harsh, is the senior computer specialist covering Sewells Point Branch medical and dental clinics. A retired senior chief, Harsh understands how to teach, mentor and motivate others. He covers a vast network of over 300 Department of Defense computers including installation and maintenance of computer hardware and software. Harsh knows the software systems, and he knows how to take care of unhappy people who can't get their computers to do

what they want them to do. He does it with a gentle smile on face.

"Our civilian employees are vital to the success of Navy medicine and Naval Medical Center Portsmouth," said Burkhard. "You provide the continuity and corporate knowledge in the ever-changing military health care system. When active duty personnel deploy to take care of the men and women defending our great Nation, civilian employees ensure that family members and Veterans continue to receive the premium level of care they are accustomed to receiving.

"I thank you for your dedication and service," said Burkhard. "You are truly an integral component of the 'First and Finest.'"



Drill Pushes Emergency Responders to Limit

Story by Dennis O'Brien, Virginia Pilot

The Portsmouth Naval Medical Center on Wednesday fine-tuned its planned response to a massive terrorist attack, with a mass-casualty treatment drill designed to overload hospital resources.

The exercise was designed to push hospital staff and emergency responders beyond the breaking point, so that contingency planners can shore up weak spots long before real victims of a mass-casualty attack show up for treatment. The hospital conducted a similar exercise last December. Wednesday's drill tested first responders' ability to juggle patients from bombings at the Portsmouth Federal Building and at the Sewells Point Branch Medical Clinic, a nerve-gas attack on the hospital grounds and a suspected anthrax attack within the hospital itself.

"A large portion of what we're drilling here isn't so much the treatment - it's the logistics of patient flow through the hospital," said Capt. Martin Snyder, head of surgery at the medical center.



Emergency room personnel assist in taking care of one of many victims during a mass casualty drill December 4 at Naval Medical Center Portsmouth. (Photo by Staff at Medical Photography Lab)

The sorting begins outside the hospital, where victims - even of an apparently conventional bombing attack - are screened for exposure to chemical or biological weapons. If nerve gas, anthrax or another agent were mixed with the explosive, victims of the attack could contaminate the hospital and its staff.

Those found to be exposed to unconventional weapons would be decontaminated in a pop-up station erected in the hospital parking lot before being admitted to a triage station in the emergency room. There, victims are sorted out by the gravity - and treatability - of their injuries.

"If the O.R. rooms are filled up, you have to make a decision - sometimes difficult decisions," Snyder said. "Do I take someone off the table to treat a different patient? Have I spent too much time on one patient?"

The drill was far more extensive than last year's. In addition to hospital staff, participants included the Coast Guard, Portsmouth police, ambulance and fire crews, Maryview Medical Center, and agents from the FBI and the Naval Criminal Investigative Service.

Not only did staffers have to deal with treating the victims of the attacks, but also the "worried well" - victims' loved ones, the general public and panicked people who are healthy but show up at the emergency room because they are afraid they have been exposed to a deadly chemical or pathogen.



One of many volunteer victims was strapped onto a back board in front of the decontamination tent during the mass casualty drill at Naval Medical Center Portsmouth December 4. (Photo by Staff at Medical Photography Lab)

DOD Details Military Smallpox Vaccination Program

By Department of Defense News Release

The Department of Defense today highlighted its plan to prepare for and respond to possible smallpox attacks against servicemembers. The Smallpox Vaccination Program is consistent with FDA guidelines and the best practice of medicine. This program supports the national smallpox preparedness plans announced by the President, but is tailored to the unique requirements of the Armed Forces. Like civilian communities, DoD will ensure preparedness by immunizing personnel based on their occupational responsibilities. These include smallpox response teams and hospital and clinic workers. DoD will proceed to vaccinate other designated forces having critical mission capabilities. DoD will use existing FDA-licensed smallpox vaccine. Like other vaccinations this will be mandated for designated personnel unless they are medically exempted.

"The Department of Defense is establishing a smallpox vaccination program to protect the health and safety of military personnel. Smallpox is a serious infectious disease. We cannot quantify the threat of it being used as a bioweapon; we know the consequences of its use could be great," said William Winkenwerder, assistant secretary of defense for health affairs. "Vaccinating servicemembers before an attack is the best way to ensure that our troops are protected and that they can continue their missions if a smallpox outbreak occurs."

Smallpox is caused by a virus called variola, which spreads from person to person through prolonged close contact. Smallpox can cause a severe rash covering the whole body that can leave permanent scars, high fever, severe headache or backache. Smallpox kills about three out of 10 people infected.

In the United States, routine vaccination against smallpox ended around 1972. In May 1980, the World Health Organization declared the global eradication of smallpox as a naturally occurring disease and recommended that all countries cease vaccination. Military smallpox vaccination programs continued longer. In 1984, routine military vaccinations were limited to recruits entering basic training. This practice was discontinued in 1990. In the wake of the terrorist attacks of September 11, 2001 and the subsequent anthrax letter attacks, the Department of Defense reassessed the threat of a smallpox attack. The resumption of a smallpox vaccination program is intended to ensure that the military can achieve its missions in case smallpox is used as a bioweapon. DoD continues to work closely with the Department of Health and Human Services and the Centers for Disease Control and Prevention to be prepared to protect the nation in the event of a smallpox outbreak.

Further information regarding the Department of Defense smallpox vaccination program can be found at <http://www.vaccines.army.mil/smallpox.asp>.

Navy Surgeon General Guidance 2002 *Our mission quite simply is this: Force Health Protection. Our relevance is that high quality care and health protection is a vital part of the Navy's ability to execute worldwide missions.*

- The health and well-being of Sailors, Marines and their families remain a top priority of naval leadership.
- Medical and dental readiness are force multipliers and crucial to our ability to take the fight to the enemy.
- Medical and dental professionals secure this readiness by providing total force health protection across the globe - wherever there are U.S. forces.
- Navy bio-medical researchers lead the world in Malaria research and DNA vaccination technology.
- Developing a DNA vaccine that will revolutionize protection against Anthrax, Malaria and Scrub Typhus.
- Anthrax team has successfully immunized mice and rabbits against inhalation Anthrax – testing in humans to see if Anthrax antibodies develop will begin next year.
- Navy dental researchers are also at the forefront of the fight against deadly disease and bio-terrorism.
- Developing two key salivary tests, one to detect tuberculosis and the other to verify Anthrax immunization status.

The Anthrax Threat and Vaccination

- The threat posed by Anthrax is real. Cheap and easy to produce, it is the most likely biological warfare agent U.S. forces will face.
- DOD is resuming mandatory Anthrax immunizations -- for personnel deployed for more than 15 days -- in higher threat areas, where mission critical capabilities are essential.
- The Anthrax vaccine is safe and effective, according to FDA, center for disease control and National Academy of Sciences.
- Vaccine does not cause Anthrax.

Over two million doses safely delivered to more than 5425,000 personnel since 1998.

The Value of Margins

Story by Chaplain Andrew D. Nelko LCDR, CHC, USN

One of the many things a young child learns early in elementary school is to leave a margin on either side of a page when they are writing. Needless to say a printed page often offends us unless it has good margins. We also know how important a margin is in framing a painting or piece of artwork. Conversely an attractive home or an impressive public building often needs an adequate margin around it to help provide an aesthetically pleasing vista.

It has been shown that it is equally important to have margins in our daily lives and work routines. When we find ourselves rushing madly from one activity to another, having scarcely caught our breath from one undertaking before quickly plunging into another, we are violating one of life's basic tenets, taking our time. In other words, we are not allowing the margin of time that enables us to do our best work and to make our best contribution.

It goes without saying that everyday life offers us many and varied challenges and opportunities, and this is especially true in a cutting edge medical facility. The fast paced routine of the Naval Medical Center environment, along with the life and death issues which daily confront the medical professionals, civilian personnel, patients and their families, cannot but add stress and tension to life. With this in mind it becomes imperative to make the time to unwind, relax and provide a margin for living which will enhance our readiness.

A few years ago a noted author, Karin Roon, wrote a book under the title, "The New Way To Relax." In it she provided some wise insights about this very need for margins in our daily schedule. She pointed out that most of our exhaustion and confusion came from trying to do too much in too little time. She added

these valuable bits of advice: "The art of living consists not in stuffing the day as full as possible, but in getting through the day with a sense of achievement, of enjoyment, and without excessive fatigue ...Being rushed is not a virtue ...Don't let the details of living swamp life itself."

A second piece of wise and timely counsel that this author provided was to plan the day so that one's best hours would be devoted to one's most important and creative work, and to keep a list of things to be done, trying to get the unpleasant and mundane things out of the way first.

With this thought in mind I like to think that God also added a margin to His work of creation when He rested on the seventh day. In Holy Scripture we find the words, "And on the seventh day God ended His work which He had done, and He rested on the seventh day from all His work which He had done. Then God blessed the seventh day and sanctified it..." (Genesis 2:2,3)

From this we see that as God rested following His labors so He too offers us the invitation to do likewise.

It is traditional that in January, at the beginning of the New Year, many of us subscribe to making New Year's resolutions. With genuinely sincere intentions promises are made to either change some negative behavior or enhance an already existing positive one.

In the Commander's Intent it is noted that the "Naval Medical Center Portsmouth prides itself in providing the highest quality of healthcare to our patients." With the New Year upon us one positive and personally beneficial resolution that we can all strive for is that of creating healthy margins for our daily lives. Margins for living which allow us to continue to provide the best care for those here at the Navy's "First and Finest" medical center.

MSC Officer is Named Honorary Marine

By Brian Badura, Bureau of Medicine and Surgery

WASHINGTON, DC - Being a Marine carries with it respect and tradition, and it is earned through tireless effort and dedication. To honor his years of dedicated

service to the Marine Corps, the Commandant of the Marine Corps Gen. James L. Jones has made Navy Capt. Roger Edwards, Medical Service Corps, an honorary Marine.

Marine Corps Order 5060.19A allows the Commandant to officially recognize an individual as an honorary Marine to acknowledge their contributions to the community and the Marine Corps. Edwards and three others received the award during a ceremony in Washington, D.C.

Edwards has spent 18 of his 36 years of naval service working to support the Marines. He is currently serving as the executive assistant to the Medical Officer of the Marine Corps.

"I've served in many capacities with the Marines over the years, but they managed to surprise me with this award," Edwards said.

As part of the ceremony, Jones presented Edwards with the symbolic Marine Corps Eagle, Globe and Anchor. Receiving the device symbolizes a rite of passage for Marines, and is worn by every Marine upon completion of basic training.

According to the Marine Corps, 46 individuals have been awarded the title of honorary Marine. The first honor was given in 1992.

Hospital Staff helps out local Salvation Army

Story by JO1 Daniel A. Bristol

The Salvation Army's work throughout the United States is greatly enhanced by volunteers. From ringing the bell at Salvation Army kettles during the Christmas season to working with young people in character-building activities, volunteers run the gamut of service in every program. Volunteers greatly increase the efficiency of the Salvation Army by providing "extra hands" to perform the work needed to help those less fortunate. A group of Sailors from Naval Medical Center Portsmouth added their own "extra hands" to help pack boxes of food for families in need.

Staff members of the operating room, ambulatory surgical unit and the post anesthesia recovery unit volunteered to help prepare boxes of food for families less fortunate. There was a total of 350 boxes prepared. Each box had 20 different canned goods,

bags of noodles, bags of rice and for those families with children under the age of 14 three toys.

"Taking the time to volunteer is what it's all about," said Lt. j.g. John Zalar, coordinator of the hospital volunteers.

"If you can put a lot of work and effort into it, they appreciate it.

"When you're down there working and seeing things happen, it makes you feel good," said Zalar.

Zalar is a believer of the old saying, "what goes around comes around." He is from a small town in Ohio, and one of the neighboring towns was hit by tornadoes. After he had volunteered to assist the Salvation Army, he noticed that they were assisting the people who were affected by the tornadoes, some of whom he knows personally.



Staff members from the operating room, ambulatory surgical unit and the post anesthesia recovery unit of Naval Medical Center Portsmouth volunteered their time and service to help out the Salvation Army prepare boxes of food for families less fortunate. The volunteers are from left; HN Kimberly Medina, HN Jessica Wheeler, HN Genesia Salgado, HN Marcia Correia, Lt.j.g. John Zalar, HN Benjamin Sensenbach, HN Aaron Smith, HN Kristine Jess, HM3 Roberta Enes, Lt.j.g. Kathleen Murtaugh, Zack Whear, Lt.j.g. Stephanie Whear and Lt.j.g. Julie Tyslan.



From left, HM3 Scott Thompson, HN Jon Alexander and HM3 Robbie Patterson were three of the volunteers from Naval Medical Center Portsmouth who assisted the Salvation Army in preparing 350 boxes of food to be given to less fortunate families. The hospital's volunteers came from the operating room, the post anesthesia recovery unit and the ambulatory surgical unit.

TRICARE Awards New Retiree Dental Program Contract

From DOD TRICARE Management Activity Public Affairs

WASHINGTON, DC - The Department of Defense, TRICARE Management Activity, awarded Delta Dental Plan of California, located in San Francisco, Calif., a contract to provide services for the TRICARE Retiree Dental Program (TRDP). The contract covers a five-year period and is valued at approximately \$987 million. "The new contract provides a greatly enhanced dental benefit package and improved customer service for our retirees," said Dr. William Winkenwerder Jr., assistant secretary of defense for health affairs.

The new dental contract will begin on May 1, 2003, and will continue to provide a voluntary enrollee-funded dental plan to uniformed service

retirees and their family members, certain surviving members of deceased active duty sponsors and to Medal of Honor recipients and their immediate family members and survivors.

The TRDP will offer dental coverage throughout the 50 United States, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa, the Commonwealth of the Northern Mariana Islands and Canada.

All premiums are paid by the enrollee and vary depending on where the enrollee lives.

Beneficiaries may find more information about the TRDP on the TRICARE Web site at www.tricare.osd.mil.

Consolidate, Take Charge of Your Debt

A public service announcement by Navy Federal Credit Union

Managing your debt wisely is critical to achieving financial success. That's because mishandling debt can cost you a fortune and prevent you from realizing many of your most important goals. Even if you're a diligent money manager, problems can arise that require more cash than you have on hand.

The root of potential problems is that credit is easy to get and easy to use, but it's not free. The monthly payment for a single big-ticket item like a car or a boat may seem relatively small, but it can take an unrelenting toll on your finances. Granted, you may be able to handle one or two of these debts at any given time, but if you pile one debt upon another, you may soon find yourself overwhelmed.

A crucial debt-management step is learning to distinguish between "bad debt" and "good debt." Bad debts means using credit to pay for everyday items such as groceries (if you're doing this, you might need budgetary counseling) or for optional items that you really can't afford. Good debt is what you use to buy anything you really need (a home, a car or college education for you or your children), but can't afford with out wifing out your savings account or liquidating your investments.

Good debt also includes debt consolidation plans that help you refinance some of your existing debt with a new loan at a lower interest rate or with lower monthly payments— or both.

Consider consolidating your debts when you can find a loan with a lower interest rate than you are now paying. If you're carrying expensive debt on credit cards with annual percentage rates (APRs) ranging from 16 percent to 30 percent you are an ideal candidates for debt consolidation.

Here's how debt consolidation works; Say you have \$10 thousand in credit card debt at an average APR

of 18 percent. If you refinance the \$10 thousand with a debt consolidation loan at 13.5 percent you will save more than that in interest cost in the first year alone.

Given this level of savings, who would pass up such a deal? Well, some people should. Only disciplined borrowers should consider debt consolidation. That's because if you take on a debt consolidation loan and then add new debt to your existing credit cards, you may wind up worse off than when you started.

Smart solution; When you take out a debt consolidation loan, make an absolute promise to yourself to incur no new debt.

Consumers should be aware that many bad consolidation loans exists. Among the very worst is the "Payday Loan," which is basically an advance on your paycheck. These advances don't come cheap. The short-term rates on payday loans often go as high as 30 percent to 50 percent, with some exceeding 500 percent on an annualized basis. No matter how dire your need, it's hard to find a loan that is work for you and your family than this one.

Instead of putting your financial future further at risk with an unsound debt consolidation plan, review these three solutions to help you pay off some troublesome bills and get your cash flow on track:

1. Consider applying for a short-term, low-interest consumer loan.
2. Tap the equity in your home with a home equity loan or line of credit.
3. Transfer the balance from high-interest credit cards to one that offers a lower interest rate.

Taking control of your debt isn't easy, but with lots of patience and a solid plan, you'll soon be enjoying something that no one can put a price tag on— financial peace of mind.

Allergist Wins Drawing, Receives X-box Game Console

Lt. Cmdr. David Carlton, who works as an allergist in Allergy/Immunology for Fleet and Family Medicine, (center right), receives an X-box video game console, which he won in a drawing. The drawing was held by the Naval Medical Center Portsmouth's Navy Exchange. Edna Elliott, Navy Exchange Representative, Michael Sumler, Pepsi representative, and Capt. Thomas Cox, Director for Administrative Support Services, presented Carlton with the X-box, which was donated by Pepsi. (Photo by JO1 Daniel A. Bristol)



The Sounds of Music Ring Throughout Hospital

Story by JO1 Daniel A. Bristol

One would have thought Christmas came early this year seeing all the smiles on patients' faces. The sounds of music filled the hallway in front of the pharmacy and the hallways throughout the wards on the fourth floor of the Charette Health Care Center Naval Medical Center Portsmouth. The patients' eyes lit up with happiness as sweet music came from the four voices of the von Trapp family children doing what they do best, singing.

The von Trapp children, Sofia, Melanie, Amanda and Justin, are the great grandchildren of Captain and Maria von Trapp of the famous singing family featured in *"The Sound of Music."* Captain von Trapp was a submarine captain in the Austrian Navy and the von Trapp children felt the need to sing at NMCP to show their support for the Navy. Their grandfather was Werner von Trapp, who was portrayed as Kurt in the movie.

The von Trapp children performed a combination of folk songs, spirituals, classical pieces and favorite songs from the movie. They have been singing together and taking lessons for about seven years. Their performances started in 1997 at the Trapp Family Lodge in Stowe, Vt. They have since opened several times for George Winston and sung for international audiences at the Glacier International Peace Park. They even sang at one of the largest international music festivals in Bethlehem, Pa., where in August they shared the week's program with such acts as Peter, Paul and Mary.

"It's really great to know that we make someone happy," said Sofia.

"It inspires you to keep singing," said Amanda, the youngest of the three girls.

Justin said he enjoys traveling to different places and meeting different people. "I like seeing the places we go to and seeing the people," said Justin, who doesn't have anyone favorite song. "I like singing them all."

The von Trapp family children sing as well as tell stories passed down from the older generation about their lives in Austria and America. The children have performed across the country, live, on radio and on television including appearances on Fox News in St.



The von Trapp children sang songs from the musical "The Sound of Music" in the hallway by Naval Medical Center Portsmouth's pharmacy. They travel around the United States and Canada singing folk songs, spiritual songs, classical pieces and songs from the musical. This was their first time on a Military installation. They were in Norfolk to sing at the Roper Theater on Granby Street. (Photo by JO3 Theresa Raymond)

Louis and WGN in Chicago. They've sung live performances from San Diego to New York City. They have also traveled to Calgary and Baniff, Canada. The children's parents, Stefan and Annie, are supportive of their children's singing and travel with them every step of the way. The von Trapp children performed at the Roper Theater on Granby street downtown Norfolk December 8.

The von Trapp children will fill your hearts with the joys of the holidays and fill your minds with memories as your ears will be filled with the sounds of music.

Think Again About Smoking

By Operations Specialist 2nd Class Wendy Kahn, NNMC Public Affairs

BETHESDA, Md. (NNS) -- In the early part of the 20th century, Hollywood legends like Rudolph Valentino, Humphrey Bogart and Frank Sinatra defined America's culture with smoking. Smoking became the hallmark associated with the "macho man" image that would attract many followers.

However, smokers would discover years later that they couldn't stop smoking, and, eventually, many would develop lung cancer.

One such smoker wanting to project a macho image is Cmdr. Rudolph Brewington of LIFELines. A smoker for nearly 38 years, he was diagnosed with lung cancer earlier this year and underwent surgery Sept. 11, where doctors at the National Naval Medical Center (NNMC), Bethesda, Md., removed the top lobe of his right lung.

Brewington began smoking as a teenager in the 1960s and admits the enjoyment aspect from smoking had disappeared years ago. However, he was already addicted and couldn't stop the habit until he was diagnosed with lung cancer.

According to statistics, an estimated 47 million adults in the United States currently smoke, and approximately half will die prematurely from smoking. Lung cancer is the leading cause of cancer death for men and women, and in 2002, there will be about 169,400 new cases diagnosed in the United States. More than 80 percent of lung cancers are thought to result from smoking.

Although the Navy smoking rate is declining, it is still at 36 percent and exceeds the national average of 31 percent.

The Navy's policy is to reduce tobacco use and protect nonsmokers from involuntary exposure to envi-

ronmental tobacco smoke. It states, "Where conflicts arise between the rights of nonsmokers and the rights of smokers, the rights of nonsmokers to a smoke-free air space shall prevail."

Brewington's purpose for publicizing his surgery is his concern for Sailors who are addicted to smoking "I want them to understand that lung cancer is real," he adds. "The surgery, even with pain medications, is a painful process. If we can get people to stop smoking, we can reduce the number of lung cancer cases."

Cmdr. Donald Bennett, a thoracic surgeon at NNMC, wants smokers to understand that it takes 20 years to reduce the risk factor for lung cancer down to normal population. In other words, if a person refrains from smoking for 10 years, he or she is still at risk for lung cancer.

Bennett says the stage of the cancer is based on the size of the tumor, where it's located, the nodes, and any distant disease in the liver, other lung or the brain. In Brewington's case, he was diagnosed as Stage 1A, or cancer at an early stage. As a result, no chemotherapy or radiation treatment is required, and the survival rate is good. Because smoking is a significant factor of lung cancer, the possibility of developing other cancers exists for those people with lung cancer, explains Bennett.

For Brewington, the surgery was a wake up call. "When the surgery was over, I felt relieved that I was still here. The cancer was out of my body and did not spread to any other area. I quit 'cold turkey' after realizing that this object [cigarette] almost killed me.

"If one Sailor or one Marine would stop smoking as a result of what happened to me, that would be wonderful for both themselves and the Navy."

Salute to the Medical Community

Capt and Mrs. Thomas K. Burkhard accepted a Portsmouth area coffee table book presented by Mr. Al Thompson, Chair, Armed Forces, Hampton Roads Chamber of Commerce - Portsmouth Division at a Salute to the Medical Community gathering held on 4 December 2002. The Salute was to say 'Welcome' to Capt Burkhard as the new Commander, Naval Medical Center Portsmouth and 'Thank you' to RADM Adams as he moves on to his next assignment as the Fleet Surgeon, Commander, U.S. Atlantic Fleet. Eastern Virginia Medical School, Bonsecours Maryview Medical Center and First Command Financial Planning joined Portsmouth Chamber of Commerce in hosting this event. (Photo by Lt. Jacky Fisher)



TRICARE Pharmacy Service Honored at Award Ceremony

By Sgt. 1st Class Doug Sample, American Forces Press Service

WASHINGTON, DC - Among the finalists for the 2002 President's Quality Award, annual awards given to those in government organizations that have demonstrated efficient business and management practices, was DoD's TRICARE Management Activity for its Pharmacy Data Transaction Service. The pharmacy service uses state-of-the-art technology to link patient information between pharmacies at military treatment facilities, the National Mail Order Program and civilian retailers that are part of the TRICARE managed-care network. Navy Medicine, as well as the other services, use PDTS.

Hundreds of submissions from government agencies and organizations across the country were submitted.

"(The awards) are examples of what can happen when people put their mind to delivering excellence on behalf of the taxpayers," President George W. Bush said. "There's creativity and flexibility, people willing to think outside of the proverbial box. And as a result, our country is better off."

The criteria for the President's Quality Award is based upon the 2001 President's Management Agenda that calls for government-wide reforms.

TRICARE Dental Program Monthly Premiums Change January 2003

By United Concordia

Harrisburg, PA - TRICARE Dental Program (TDP) enrollees will notice a small increase in their monthly premiums beginning January 2003. The new rates are effective on February 1, 2003; however, since premiums are collected one month in advance, TDP enrollees will notice the change in their January 2003 billing statement, payroll allotment or deduction.

The new monthly premium rate for active duty family members, members of the Selected Reserve, Individual Ready Reserve (Special Mobilization Category), and family members of Reservists who are on active duty for more than 30 consecutive days will be \$8.14 for a single enrollment and \$20.35 for a family enrollment. Members of the Individual Ready Reserve (Other than Special Mobilization Category) and their family members, and the family members of the Selected Reserve (not on active duty) will pay a new monthly rate of \$20.35 for a single enrollment and \$50.88 for a family enrollment. (See chart below for monthly premiums applicable to each category of enrollee).

Tom Harbold, United Concordia's TDP Senior Vice President said "The 2003 TDP premium increase of about 3% is less than the annual increase in the dental services component of the Consumer Price Index. The TDP continues to provide excellent value for members of the military community."

United Concordia Companies, Inc. has administered the TRICARE Family Member Dental Plan (TFMDP) and the follow-on TRICARE Dental Program for the Department of Defense since 1996. Headquartered in Harrisburg, Pa., United Concordia is the fifth largest dental insurer in the country with more than six million members worldwide. In 2001, the company processed more than 10 million claims and paid more than \$700 million in dental benefits.

TRICARE Dental Plan Monthly Schedules

Shared Premium

- Active Duty Family Members
- Selected Reserve
- IRR—Special Mobilization Category

	Single	Family
• Active Duty Family Members	\$8.14	\$20.35
• Selected Reserve		
• IRR—Special Mobilization Category		

Full Premium

- IRR – Non- Special Mobilization Category
- SELRES & IRR Family Members

• IRR – Non- Special Mobilization Category	\$20.35	\$50.88
• SELRES & IRR Family Members		

January 1,15,29**Lunch**

Vegetarian veg. soup
 Beef teriyaki
 Cat fish
 Macaroni and cheese
 Green beans
 Black eye-peas
 Apple pie

Dinner

Minestrone soup
 Jerk chicken
 Grilled salisbury steak
 potatoes/gravy
 Green peas/Carrots
 Angel food cake

January 2,16,30**Lunch**

Knickerbocker soup
 Grilled chicken strips
 Sweet and sour pork
 Fried rice
 Mixed veggies
 Cake/Blueberry pie

Dinner

Mulligatawny soup
 Fish creole
 Baked chicken
 Lyonnaise potatoes
 Beets/ Asparagus
 Orange cake
 Brownies

January 3,17,31**Lunch**

Clam Chowder
 Swiss Steak w/Gravy
 Chicken Curry
 Mashed Potatoes/Rice
 Turnip Greens/Carrots
 Chocolate Chip cookies

Dinner

Beef vegetable soup
 Pot roast w/gravy
 Mac and Cheese
 Green beans/Squash
 Florida Lemon Cake
 Vanilla Pudding

January 4,18**Lunch**

Chicken soup
 Beef Stew/Pizza
 Mashed Potatoes/
 Noodles
 Broccoli/Peas
 Dinner Rolls
 Coconut cream pie
 Oatmeal cookies

Dinner

Veggie soup
 Pork chops/pizza
 Mashed potatoes/rice
 Cauliflower/Spinach
 Pumpkin Pie/Yellow
 Cake

January 5,19**Lunch**

Veggie Bean Soup
 Stuffed Pepper/
 Grilled Cheese
 Rice/Potato wedges
 Beets/Carrots
 Cheery Crisp/Banana
 Cake

Dinner

Turkey Rice soup
 Beef Stroganoff/
 Chicken Vega
 Potatoes/Noodles
 Brown Gravy
 Squash/Peas
 Cookies/Peach Pie

January 6,20**Lunch**

Chicken Noodle Soup
 Chicken/Eggplant
 Steamed Rice
 Asparagus/tomatoes
 Oatmeal Cookies/
 Chocolate Cake/Peach
 Crisp

Dinner

Veggie Soup
 Beef Strips/Baked Fish
 Mac n Cheese/Rice
 Carrots/Spinach
 Pound Cake/Apple Pie
 Dinner Rolls

January 7,21**Lunch**

Mushroom soup
 Salisbury Steak/Pork
 LyonnaisePotatoes/
 Rice
 Beans/Squash
 Dinner Rolls
 Blueberry pie
 Sugar cookies

Dinner

Minestrone soup
 Chicken/Spaghetti
 Mashed potatoes
 Cauliflower/Turnip
 Cherry Pie/Brownies

January 8,22**Lunch**

Beef Veggie Soup
 Chicken/Beef Yakasoba
 Rice
 Broccoli/Corn
 Beets/Carrots
 Oatmeal Rasisin/
 Banana Cake

Dinner

Lentil soup
 Baked pork/Baked fish
 Mashed Potatoes/Rice
 Brown Gravy
 Asparagus/Carrots
 Brownies/Potato Pie

January 9,23**Lunch**

Potato Soup
 Turkey/Chili-Mac
 Potatoes/Dressing
 Succotash/Fried Okra
 Dinner rolls
 Coconut Pie/Cookies

Dinner

Corn Chowder
 Pork Loin/Pasta
 Potatoes/Rice
 Carrots/Cauliflower
 Orange Cake/Oatmeal
 Cookies
 Dinner Rolls

January 10,24**Lunch**

Clam Chowder
 Spaghetti/Baked Fish
 Mac N Cheese
 Green Beans/Squash
 Dinner Rolls
 Apple Crisp/Banana
 Cake

Dinner

Beef Noodle soup
 Pasta/Meatloaf
 Mashed Potatoes/
 Rice
 Brown Gravy
 Broccolli/Corn
 Brownies/Lemon

January 11,25**Lunch**

Cream of Broccoli
 Lasagna/Ham &
 Cheese Sandwich
 Potatoes/Garlic Bread
 Cauliflower/Italian
 Blend
 Blueberry Pie/Cake

Dinner

Onion Soup
 Fish/Beef Tips
 Potatoes/Noodles
 Spinach/Beets
 Cheery Crisp/Vanilla
 Pudding
 Dinner Rolls

January 12,26**Lunch**

Chicken Rice Soup
 Turkey/Swiss Steak
 Mashed Potatoes/Rice
 Carrots/tomatoes
 Dinner rolls
 Yellow Cake w/Fruit

Dinner

Clam Chowder
 Meat Loaf/Baked
 Chicken
 Potatoes/Noodles
 Corn/Green Beans
 Pumpkin Pie/Pudding
 Dinner Rolls

January 13,27**Lunch**

Split Pea Soup
 Chicken/Lasagna
 Steamed Rice
 Green Peas/Cauliflower
 Garlic Bread
 Cake/Cookies/Peach
 Pie

Dinner

Mushroom soup
 Ham/Baked Fish
 Sweet Potato/Noodles
 Tomatoes/succotash
 Brownies/Apple Crisp
 Corn Bread

January 14,28**Lunch**

Beef Noodle Soup
 Turkey/Chicken pot
 pie
 Potatoes/Nocoles
 Broccoli/Squash
 Dinner rolls
 Sweet Potato Pie/Cake

Dinner

Chicken Noodle Soup
 Chicken/Roast Beef
 Potatoes/Rice
 Mixed veg/Corn Cob
 Coconut Cream Pie/
 Pudding
 Dinner Rolls