

*Serving the People of the 'First and Finest' Since 1943*

# THE COURIER

*Naval Medical Center Portsmouth*

May/June 2004

## ***Women's Health Service Line Receives First NMCP 'Clinical Efficiency and Excellence Award' due to Expanded Services***

*Story and photo by JO1 Rebecca A. Perron*

Increasing patient satisfaction while reducing financing costs is among the top priorities of Rear Adm. Thomas K. Burkhard, commander, Naval Medical Center Portsmouth, since he took command of the medical center in November 2002.

Shortly after taking charge of the command, Burkhard met with the leaders of the Women's Health Service Line to discuss how obstetric and gynecological services could be improved to match the services of their civilian counterparts. This assessment resulted in the renovation of the Labor and Delivery Ward, expansion of the Post-Partum Ward and improvement or addition of several services over the course of the past year.

The dedication of departmental staff led to the service line exceeding Burkhard's demanding expectations. To recognize their hard work, Burkhard presented the Women's Health Service Line with NMC Portsmouth's first Clinical Efficiency and Excellence Award.

"I think this is great," Capt. Everett F. Magann said, department head of Obstetrics and Gynecology. "This certainly reflects the efficiency of the providers at the hospital and at the branch clinics."

Thirty providers at NMC Portsmouth and three branch clinics see 2,800 patients per month through routine scheduled appointments. Assessment of these scheduled appointments was the starting point for the changes that were made.

"We assessed how many patients had to go out in town for appointments," explained Cmdr. Denise A. Johnson, Labor and Delivery department head. "We looked at our scheduling practices and looked for ways to create additional appointments to bring them back into the hospital."

The additional patient load first increased for gynecological surgeries. GYN surgeries were moved to two of the Labor and Delivery Ward (L&D) operating rooms to consolidate services into one area

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## ***NMC Portsmouth Celebrates National Nurses Week***

*Photo by JO1 Sarah Langdon*

*Naval Medical Center Portsmouth's most senior nurse, Capt. Deborah Coleman, Fleet and Family Medicine, and most junior nurse, Ens. Derrick Lebeau, Nurse Intern Program, use an officer ceremonial sword to cut the National Nurses Week cake in the Dining Facility May 13. Coleman has been a Navy nurse for 30 years, while Lebeau has been in the Nurse Corps only a few months. The cake-cutting ceremony celebrated the 96th Navy Nurse Corps birthday.*

*For the story and more photos, please see Page 4*



# ***Congratulations to NCMP's Newest Frockees!***



Photos by HM3 Casey Price

*The newly frocked third class petty officers pose for a group photo after the frocking ceremony held May 14 in the auditorium of Bldg. 215. A total of 58 command members were frocked to the third, second and first class petty officer.*



Photos by HM3 Casey Price

*Naval Medical Center Portsmouth command members line up to congratulate the newly frocked petty officers after the ceremony.*



Photo by JO1 Daniel A. Bristol

*Capt. Martin Snyder, EMF commanding officer, congratulates HM3 Sunshine Padilla after she was frocked to third class petty officer.*

## ***The Courier***

The Courier is an authorized publication of Naval Medical Center Portsmouth, 620 John Paul Jones Circle, Portsmouth, VA 23708. The Courier is published monthly by the Public Affairs Office.

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This publication provides an avenue to circulate all useful information the NMC Portsmouth staff has to offer. Submissions are welcome. Contact the Public Affairs Office by calling 953-7986, by fax at 953-5118, or by emailing the PAO, Lt. Jacky Fisher, at [jefisher@mar.med.navy.mil](mailto:jefisher@mar.med.navy.mil). Submissions should be on a disk in text or Word format with a paper copy attached. Photos should be a separate submission from the document and in jpeg, bitmap or tiff format. Submissions will be placed in the upcoming issue, space permitting. PAO is located in Building One, Third Deck, Rm. 311.

**First Class Petty Officers**

HM1 Terry J. Brown  
ET1 Benjamin B. Burr  
CS1 Derrick M. Cook  
MA1 Jamal A. Cooks  
HM1 John P. Fitzgerald  
HM1 Jennifer A. Kendrick  
MM1 David L. Kronberg  
EN1 David W. Lohr  
HM1 Ricky A. Mosley  
HM1 Michael T. Oleary  
IC1 Bismarck J. Perez

**Second Class Petty Officers**

MM2 Christopher W. Bontje  
HM2 Phillip K. Brewster  
CS2 Sean D. Clark  
MM2 Michael J. Dugan  
HM2 Dessy L. Dumlao  
HM2 Anh H. Ho  
MA2 Brandon G. Keating  
HM2 James W. Robertson, Jr.  
BM2 Alexander Rosado, Jr.  
MA2 Natasha M. Tom  
HM2 Matthew J. Wessner

**Third Class Petty Officers**

HM3 Michelle L. Arment  
HM3 Jonathan O. Bowman  
HM3 Jenny M. Cardona  
HM3 Nicole G. Charles  
HM3 Aaron W. Christensen  
HM3 Kenneth S. Conklin  
HM3 Melanie B. Duquette  
CS3 Jeffrey C. Fallo  
HM3 Shannon M. Fansler  
HM3 Hannah M. Dollete  
HM3 Leslie A. Garcia  
HM3 Mary A. Rae Gray  
HM3 Raquel T. Gutierrez  
HM3 April N. Hambrick  
HM3 Terrian M. Harris  
HM3 Alihilani D. Hill  
HM3 Babatunde O. Ishiaka  
HM3 Alesha L. Lee  
HM3 Elizabeth A. Lees  
CS3 William E. Lewis  
HM3 Justin R. McCain  
HM3 Brandon E. Mcfarland

HM3 Freddy Mejia  
HM3 David Nadermann  
HM3 Sunshine M. Padilla  
HM3 Mary A. Rhudy  
HM3 Tyson E. Riccio  
HM3 Remi T. Riverarodriguez  
HM3 Alay Santiago

CS3 Latoya D. Shelton  
HM3 Hershel E. Snoddy  
MR3 Bradley D. Soltow  
HM3 Glencora R. Thompson  
HM3 Justin W. Ulrich  
HM3 Renada A. Wright  
HM3 William M. Yee

***Spouse Appreciation Day Celebrated May 14***  
*Spouse Appreciation Day celebrations included a cake cutting and drawings for gift certificates, movie tickets and Norfolk Tides tickets.*



*During the Spouse Appreciation Day celebration in the NMC Portsmouth Dining Facility, military spouses Dave Scubatt, Medical Boards and Mary Price, Health Benefits Office, cut the cake. CMDCM(SW/AW) David M. Carroll, command master chief, left, and Capt. Matthew Nathan, deputy commander, were also present.*

***C S C M ( S W )***  
***Steven L. Kruse,***  
***Dining Facility***  
***leading chief***  
***petty officer, pre-***  
***sents military***  
***spouse Eureka***  
***Collins with a***  
***\$25 American***  
***Express Gift***  
***C h e q u e .***  
***Collins was***  
***among 14***  
***spouses whose name was drawn to win one of the prizes.***



# Nurse Corps Celebrates Nurses' Week, 96th Birthday

Story and photos by JO1 Sarah Langdon

The Navy Nurse Corps at Naval Medical Center Portsmouth celebrated the 96<sup>th</sup> Navy Nurse Corps birthday with a cake cutting ceremony held in the galley May 12. The ceremony rounded out a weeklong celebration of National Nurses' Week, which ran May 6 to 12. This year, NMC Portsmouth hosted a myriad of events geared toward highlighting the nurse corps and the individuals who fill that role every day.

The establishment of National Nurses' Week has its beginnings in 1954 when Ohio Rep. Frances Bolton sponsored a nurse week bill for the week of October 11 through the 16th. The following year, another bill was proposed, but no action was taken. Attempts to celebrate nursing continued throughout the next several decades, but it was not until 1990 that the American Nurses' Association decided that recognition of nursing would last a full week, and it would take place during the same week in May every year. National Nurses' Week officially became a nationally recognized annual event in 1993.

"NMC Portsmouth celebrated this year's Navy Nurse Corps 96th Birthday and Nurses' Week 2004 with the theme of "Celebrate - Your Voice, Your Health, Your Life", said Capt. Ronald Forbus, who assumed the title of director for nursing May 13. "(The theme) reflects the impact of nursing on our patients,



*Passersby stop to look at the Command Fitness booth at the Health Fair held May 7 in the Charette Health Care Center.*

families, and society as take-charge providers and advocates who help guide our beneficiaries to healthier and productive lifestyles at home and abroad."

According to Lt. Cmdr. Terry Anderson, head nurse, Post-Partum Ward, nursing is about the personal connection between caregiver and patient.

"I think it is that interpersonal connection one gets when doing something for another person," Anderson explained. "My job is mostly management so when I have that rare opportunity to do some "bedside" nursing it recharges my batteries. That interaction with the patient reminds me of why I chose to be a nurse."

Nurses are dedicated to caring for patients and their families, and in keeping with that concept, the nurses at NMC Portsmouth decided to use the celebration of their calling by providing services to others.

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*Denise Kelly, medical technologist, Donor Team, takes a pint of a donor's blood during the Blood Drive held May 6.*

## ***Observation Focuses on Education, Vice Celebration***

*Continued from Previous Page*

They began National Nurses' Week by hosting a blood drive to benefit any Tricare beneficiary in need of this precious, life-saving gift. As well as staff members, anyone walking by was invited to donate. The blood drive collected blood from 35 people, with the Intensive Care Unit and Neonatal Intensive Care Unit tying for the most pints donated.

The second day of nurses' week provided an opportunity for everyone onboard the compound to stop by the health fair held on the second floor of the Charette Health Care Center. Clinics brought out their wares – various equipment, colorful posters and pictures for passersby to peruse. Patients and staff were invited to get information on wide range of health issues, such as nutrition and fitness, diabetes and breast cancer awareness.

The Nurse Corps also sponsored a fun-run and fun-walk Wednesday – open to all staff, and finally, rounded out the week with the cake-cutting ceremony. This year, the ceremony took place on the anniversary of Florence Nightingale's (1820-1910) birthday. Nightingale was a pioneer in the field of nursing, known for using statistics as a means to accomplish reforms in hospital conditions.

After opening remarks from Anderson and Capt. Robin T. McKenzie, who celebrated her last day as director for nursing at the ceremony, members of the Nurse Corps read letters of appreciation and statements about the status of



***Lt. Cmdr. Pashal Dawson, NMC Portsmouth chaplain, blesses the hands of Lt. Kristy Newton, Staff Education and Training, during the Nurse Corps Birthday celebration.***

the corps from the senior leadership in the Navy nursing community, such as Rear Adm. Nancy Lescavage, director of the Nurse Corps.

NMC Portsmouth's most senior nurse, Capt. Debra Coleman, Fleet and Family Medicine, and the most junior nurse, Ens. Derrick Lebeau, currently in the Nurse Intern Program, cut the cake together using a officer ceremonial sword, while members of the Nurse Corps, Chaplain Corps and honored guests, including Rear Adm. Thomas K. Burkhard, commander, NMC Portsmouth, and Capt. Matthew Nathan, deputy commander, NMC Portsmouth, looked on.

Coleman earned her commission in 1973 and has been serving as a Navy nurse for 30 years, while Lebeau, a prior-enlisted Sailor and HM3, received

his commission in January 2004 and has been in the internship program since April.

Following the cake-cutting ceremony, members of the NMC Portsmouth Chaplain Corps stood up and offered the nursing staff the chance to have their hands blessed.

"Nurses in the past and present will continue to be 'versatile, vital and in demand' in providing key support in times of war, epidemics and natural disasters," Forbus continued.

"Our nurses of today are being faced with ongoing strife in Iraq, terror alerts, acts of terrorism and reorientation to the management of bioterrorism incidents. The Navy Nurse Corps is more vital than ever as Naval medicine is challenged with reshaping peacetime and operational health care delivery for our patients and shipmates. Nurses are the quality difference in health care." ♣

# NMC Portsmouth Pins Four New Senior Chiefs

During a ceremony held May 11 in Building One at Naval Medical Center Portsmouth, chief petty officers received their first star atop the golden anchor when they were promoted to senior chief petty officer. HMCS(SW) Ted Plaucher, HMCS(SW/AW/FMF) David Lilley and SKCS(SW) Keith Owens were pinned at the same time, while HMCS(SW/AW) Scott Radke was pinned in a separate ceremony May 14.



Photo courtesy of the Radke Family

*Above: HMCS(SW/AW) Scott Radke, training officer for Medical Records and Staff Education and Training, Sewells Point Branch Medical Clinic, Norfolk Naval Station, center, poses after his pinning with his wife, Louise, daughter, Amanda, 11, son, Nathan, 9, HMCM Dana Goodwin, Sewells Point senior enlisted leader, left, and Cmdr. Diane L. Hoover, Sewells Point officer-in-charge.*



*SKCS(SW) Keith O. Owens, warehouse leading chief petty officer for Materials Management, is pinned by his wife, Alicia.*



Photo by JO1 Sarah Langdon

*Above: HMCS(SW) Ted Plaucher gets pinned by MSCM(SW) Steve Kruse, senior enlisted leader, Food Service Division, and Cmdr. Rachel Haltner, Preventive Care and Wellness service line leader, at the senior chief pinning ceremony.*



Photo by JO1 Sarah Langdon

*HMCS(SW/AW/FMF) David Lilley, senior enlisted leader, Operative Specialty Service Line, receives his new anchors from his father, Jim Lilley, and wife Sharon, while his son, Zachary, 10, and daughter, Samantha, 12, look on.*

# MWR Hosts Annual America's Kids Run for Second Year

Story and photos by JO1 Rebecca A. Perron

Naval Medical Center Portsmouth's Morale Welfare and Recreation (MWR) Department hosted the annual America's Kids Run May 15 for the second time. As part of Armed Forces Day celebrations and May Fitness Month promotions, the run provides a fun event for military children, with more than 20,000 children age four to 13 participating on 148 military bases worldwide.

The four to six year old group ran a half a mile, the seven and eight year olds ran one mile, and the nine to thirteen year olds ran two miles, with a finish line reward of an America's Kids Run T-Shirt the cheers of their proud parents and medals for the tops finishers in each category.

The event, open to children of active duty, retirees and DOD employee, drew in 41 children who participated in the run at NMC Portsmouth.

"I'm here to have fun," said Brooke Perry, 11, shortly before her run started. "I'm running two miles, and think I can make it without stopping."

Brooke's father, Lt. Michael J. Perry of General Surgery, said he like his kids "to participate to keep them active. Every time I run in a marathon, they are there to cheer me on. Now it's my turn to be here for them."

Brooke's brother Nicholas, 9, also ran two miles, and their mother, Jeannene, was there to cheer them both on.



*Kerry Kelley, foreground right, runs with the help of HN Dinh Hgo of Family Practice, who volunteered to help motivate the kids by running with several children throughout the event. Kerry finished first in her group, running two miles in 14:09. Brooke Perry, background right, finished second with a time of 18:00.*

*Elliot Smits ran one mile, finishing in second place with a time of 9:15. His dad, Lt. Bob Smits, a resident in the Anesthesia Department, ran alongside Elliot the entire mile to keep him motivated.*



Elliot Smits, 7, who ran one mile, said he likes to run because, as he put it "it's cool". "Everyone else had to stop and walk, but I didn't have to stop."

Elliot's father, Lt. Bob Smits, a resident in the Anesthesia Department, ran alongside Elliot for the entire mile. "We did it last year, and he was in the half mile category then. My goal for him this year was to not have to stop. I'm so proud of him."

For Kerry Kelley, 13, the run is all about the distance. "I love to run. I like the long distances the best. I want to be on the track team in high school."

Kerry's mom loves the set up of the run. "The parents are right there to encourage them," Gail Perry said, "and it becomes a family event."

Kerry's siblings, Billy, 9, and Kristy, 5, also ran in their respective age groups, with Kerry, their mom, and dad, Capt. Bill Kelley, a resident in Psychiatry, taking turns running with them.

HN Dinh Ngo of Family Practice helped motivate several children during the event, especially as they neared the finish line. He said he ran track in high school and loves the opportunity to help others find enjoyment in running.

First and second place medals were handed out to the fastest girls and boys in the four to six age group, while first through third place finishers received medals in the older two age groups.

MWR plans to host a training camp prior to next year's run to help the kids prepare for the event. ♣

## ***Women's Health Recognized for Hard Work, Dedication***

*Continued from Page 1*

and free up OR space on the third floor for the Orthopedics Department.

To better accommodate patients, an anesthesiologist is available around the clock, a second lactation consultant has been added to the staff and bedside Tricare Prime and DEERS enrollment is available.

The Nutrition Department offers special room service to new mothers who can order their desired meal over the phone and request a delivery time within meal hours so the tray will be delivered at a convenient time. The Public Affairs Office takes digital photos of mother and baby to send to dads via email when they are deployed.

L & D was renovated to accommodate the additional patient load.

"We remodeled the labor rooms, making them larger," Cmdr. Laurie L. Williamson, Women's Health service line leader, said, "and the triage spaces and waiting rooms, making those larger also."

L & D has 10 labor rooms, four special care rooms for high-risk patients, four operating rooms and five recovery rooms. As a result of the remodeling and higher patient load, the number of births per month increased from 278 in October to 358 in March, saving the command almost two million dollars per year by not having to finance referrals to the civilian community.

"The Labor and Delivery triage area also sees patients as walk-ins who think they're in labor or have questions about their pregnancy," Johnson said, "amounting to more than 1,200 visits per month."

Because of the increased number of births, the Post-Partum Ward needed more room, expanding to Ward 4A, which became the Mother-Baby Unit. Patients in this unit are allowed to leave the hospital after a shorter-than-normal stay, but are required to follow up with a doctor within 24 hours of discharge to ensure the health of the mother and baby.

In many cases, patients have special requests, such as a shorter stay, breast feeding within the first hour after birth or allowing siblings to attend routine OB appointments. To accommodate their needs, the department has set the tone for Family-Centered Care.

"Some patients have a certain birthing plan in mind, such as having a sibling in the room for routine



***Ens. Laarni D. Domagas, staff nurse on Post-Partum Ward 4L, explains feeding techniques to Mary Schuster, while she holds her son, Max.***

appointments, for ultrasounds and during the birth, so they can experience the entire process," explained Cmdr. Josephine Brumit, department head for the Post-Partum Ward, Complicated Obstetrics and the Gynecological Surgery Unit.

"Previously, we did not allow siblings in the room," continued Brumit, "but now we are embracing Family-Centered Care, so family members can be more involved in pre-natal, birth and post-natal care, which has increased the satisfaction level among beneficiaries. We try to fulfill any request the patient has."

Between the three post-partum wards, there are 52 beds in 39 rooms. Because of the expansion to Ward 4A, patients should not expect to be doubled up, according to Brumit.

"The single-room experience really helps the bonding for families," Brumit said. "This is very important for them."

Satisfying each patient's needs and providing the best possible experience is the bottom line for the staff members of the Women's Health Service Line. Their hard work has resulted in numerous individual awards in the past 18 months, like Physician, Nurse and Bluejacket of the Quarter. Now, the entire department can be proud of their recognition as the most "efficient and effective" in the hospital. ♣

## ***Chaplains to Host Post Traumatic Stress Disorder Training***

The Pastoral Care Services Department of the Naval Medical Center Portsmouth will host a U.S. Navy Chaplain Corps Professional Development Training Workshop (PTSD) on Post Traumatic Stress Disorder June 15 and 16. The workshop will be held in the newly renovated Naval Medical Center Chapel on the second floor of Bldg. 215. Check-in will be from 7 to 7:30 a.m. June 15. Workshop lectures will begin at 8 a.m. and end at 4 p.m. both days.

This training is open to all chaplains, health care providers, doctors, nurses and social workers. Twelve continuing education units will be awarded to attendees. Please call the Pastoral Care Services office at 953-5550 to register before close of business Friday, June 11.

Participants will learn to identify the epidemiology and development of PTSD and its symptomatic manifestation in behavior, such as domestic violence, physical and sexual violence, substance abuse and terrorism. They will become familiar with the latest advancements in psychopharmacology and Psychotherapy techniques.

Based on this foundation, participants will be able to integrate spirituality into an effective treatment and recovery program. Special attention will be given to combat-related PTSD. ▼

## **After Hours Walk-In Clinic Announces Revised Hours**

The After-Hours Walk-In Clinic at the Adm. Joel T. Boone Branch Medical Clinic at Little Creek Naval Amphibious Base announced revised hours that began May 9. The revised hours are below:

**Mon through Fri: 4 to 9:30 p.m. (No Change)**

**Sat: 1 to 7 p.m. (No Change)**

**Sun: CLOSED (NEW)**

**Minor Holidays: 1 to 7 p.m. (No change)**

**Martin Luther King, Jr., Birthday, Presidents Day, Veterans Day, Columbus Day**

The Tricare Prime Clinic Hours remain unchanged: Mon through Sun: 7 a.m. to 7 p.m., except closed for Memorial Day, July 4<sup>th</sup>, Labor Day, Thanksgiving, Christmas and New Year's Day.

## ***Some Bldg. 215 Services Online***

*As of the week of May 24, the following are open on the second floor:*

*Navy Exchange*

*Dancing Goat Cafe*

*Subway/KFC/Pizza Hut/Taco Bell*

*Navy Federal Credit Union*

*The official ribbon cutting ceremony for the second floor services will be held June 4.*

## **Summer in Kuwait for EMF; Temperatures Average 110 Degrees**



*Lt. Cmdr. Marty D. McCue, EMF director for administration, holds a thermometer showing the temperature at 107 degrees. The temperature reached 122 degrees May 21. In June, the average temperatures reach 110 degrees during the day, while overnight lows are about 75 degrees.*

# Thrift Savings Plan: Good Way to Increase Wealth, According to Executive Director

By Rudi Williams, American Forces Press Service

WASHINGTON – Defense Department officials want thousands more service members to invest in their future through the Thrift Savings Plan, or TSP.

And now is a good time for service members to start paying themselves. The current TSP open season started April 15 and runs until June 30. This is the time service members can start or change their contributions to their TSP account.

Service members can contribute up to nine percent of their basic pay each month, and up to 100 percent of incentive pay and special pay, including bonus and combat pay. But their total contributions from taxable pay may not exceed the Internal Revenue Service limit of \$13,000 for 2004.

“You’re never too young or old to start a savings account in TSP,” said Gary A. Amelio, executive director of the Federal Retirement Thrift Investment Board and chief executive and managing fiduciary of TSP for federal employees. “The tax deferral benefits are excellent and compounded earnings are simply a phenomenal way to increase your wealth.”

TSP assets total more than \$110 billion. The plan maintains retirement savings accounts for more than three million participants. This includes federal civilian employees in all branches of government, U.S. Postal Service employees and members of the seven uniformed services.

Created by the Federal Employees’ Retirement System Act of 1986, TSP is a tax-deferred savings option and lowers the taxable income for participants in the 2004 tax year. The savings plan is similar to 401k plans offered by many private employers. It’s separate from and in addition to the military retirement system, which is based on years of service and rank.

Administered by the Federal Retirement Thrift Investment Board, TSP was available only to civilian employees until October 2001, when the program was extended to active and reserve component service members, including the Coast Guard. The program also was extended to members of the Public Health

Service and the National Oceanic and Atmospheric Administration.

Members of the National Guard and Reserve who are also federal civilians are allowed to have both a military and civilian TSP. “If you’re part of both work forces, you can have two different accounts,” Amelio noted. “And you can combine the accounts after you separate from either service.”

But Amelio said if TSP participants with military and civilian accounts exceed the IRS limit of \$13,000 before the end of the calendar year, the plan will return the excess contributions. “It’s called an excess deferral,” Amelio noted.

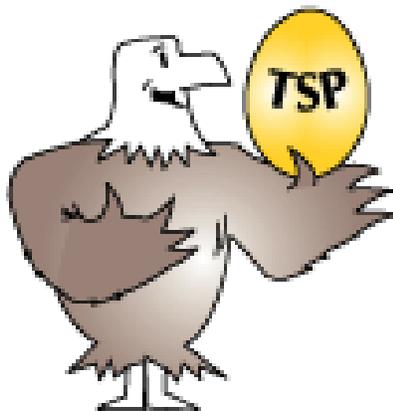
The government gives matching funds to Federal Employees’ Retirement System TSP participants. Uniformed services and Civil Service Retirement System participants normally do not receive matching funds, but the service secretaries can authorize matching funds for service members in critical military occupational specialties.

“FERS employees have a less lucrative defined benefit plan than does CSRS and the uniformed services,” Amelio explained. “So the TSP is intended to make up the difference for FERS participants.”

He also pointed out that CSRS and military participants are limited to contributing up to nine percent of their base pay, while FERS members are allowed to contribute up to 14 percent of their base pay.

When service members leave active duty, they have several options. They can leave their money in TSP, allowing it to continue to grow, take a partial or full withdrawal, roll the money into another plan or an Individual Retirement Account, or purchase an annuity. They also could choose to make periodic distributions to themselves, Amelio said.

More than 220,000 uniformed service members signed up for TSP in 2002, the first year they were



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## TALKING POINTS: GET MOVING NAVY!

*An excerpt from the April 9, 2004 edition of Rhumb Lines*

“Get Moving Navy” is a program designed to significantly improve health and fitness of active duty and reservists, family members, civilian employees, retirees and high-risk beneficiary groups by encouraging increased participation in moderate physical activity.

The impetus for the “Get Moving Navy” initiative was reinforced by the results of the 2002 DoD health survey that revealed an increase in military personnel classified as **overweight** or **obese**, in addition to a myriad of other unhealthy lifestyle habits.

America has become an inactive society. Technology, for example, has aided us in saving time and money, but has also added to our sedentary lifestyle. Dishwashers clean the dishes, TVs don’t come without remote controls, and now there are vacuums available that don’t require human participation - they are automatic. In short, idle behaviors have resulted in adverse health outcomes (diabetes, hypertension, obesity).

The Military Services are affected by the national epidemic of overweight and obesity.

Our business is being prepared to fight and win America’s wars.

*“Our goal is to create and maintain a fit and healthy force. That goal extends beyond the battlefield - to the home front. Encouraging healthy lifestyle choices and avoiding obesity, in particular, are among the most important factors in achieving this goal.” – Vice Adm. Cowan, Surgeon General of the Navy*

We need all Sailors and Marines physically fit to support that mission, and we want their families to enjoy that same level of health.

To put our lack of fitness into perspective:

-Physical inactivity and poor diet are now the leading contributors to death in the U.S., surpassing the use of tobacco.

-Obesity and unhealthy behaviors are associated with the rising cost of long-term health care.

-Almost 80 percent of recruits who exceed military accession weight for height standards at entry leave the military before they complete their first term of enlistment. This in turn increases the cost of recruitment and training.

-Obesity decreases the pool of individuals eligible for recruitment into the Military Services, because they do not meet standards necessary for acceptance into the military.

Naval Medicine’s ‘Get Moving Navy!’ fitness for life initiatives are focused on improving fitness and reducing obesity in the beneficiary population.

Obesity, lack of fitness and associated poor health outcomes are **PREVENTABLE**. Society is

eating too much and moving too little. Be a participant in your own health, and work with your doctor to make sure you remain healthy.

Are you overweight? The advice of your Navy Surgeon General:



### Get Moving Navy

-“Everything in moderation – a hamburger is fine...but **not EVERYDAY!**”

-“Your body is not a rental car – you own it! Maintain it, check the oil, and make it last.”

-“Get off the couch! And **GET MOVING!** Increased exercise is one of the best ways to increase fitness and reduce obesity.”

-“Participate in physical activity for at least 30 minutes at least five days a week, and if you can’t do this, ANY increase in physical activity helps.”

The “Get Moving Navy” pilot program was launched at Oceana Naval Air Station. “Oceana In Motion” specifies physical activity goals for various community groups, tracks progress, and provides educational and motivational resources. The overarching goal is to encourage individuals to participate in their health care, thus getting healthy, improving quality of service, and driving down health care costs.

“Get Moving Navy” is a line leadership program, not a medical program – targeted at improved fitness. ▼

### GET MOVING NAVY!!!

# Asian-Pacific American Heritage Month

## 2004 Theme: Freedom for All- A Nation We Call Our Own

In May 1990, President George H. W. Bush designated May to be Asian-Pacific American Heritage Month. May was chosen to commemorate the immigration of the first Japanese to the United States on May 7, 1843, and to mark the anniversary of the completion of the transcontinental railroad on May 10, 1869. The majority of workers who laid the tracks were Chinese immigrants.

Today there are 24,163 Asian Americans in the Navy, 21,286 males and 2,877 females. There are 351,000 Asian American military veterans. Of these, 57,000 veterans are of native Hawaiian and other Pacific Islander heritage.

An estimated 13.1 million U.S. residents reported they are Asian or Asian in combination with one or more other races. This comprises five percent of the total population. Since 2000 census, the

number of people who are part of this group increased nine percent, giving them the highest growth rate of the entire U.S. population.

Forty-seven percent of adult Asians and Pacific Islanders have a bachelor's degree or higher, and this group has the highest proportion of college graduates of any race or ethnic group.

Two million people speak Chinese at home. Next to Spanish, Chinese is the most widely spoken non-English language in the country.

Half of the U.S.'s foreign-born population from Asia lives in three metropolitan areas: Los Angeles, New York and San Francisco. ▼



*Christina Edwards, a member of the United Ilocano Association of Tidewater, a Filipino American group from Virginia Beach, performs a dance demonstrating Thai and Phillipino styles during the Asian-Pacific American Heritage Observance held May 21 in the Bldg. 215 auditorium.*



*Sarah Montague (right), command heritage committee chairperson, cuts the Asian-Pacific American Heritage Month cake, while, from left to right, Vickie Scott, CSSN Robert Lopez, CS1(SW/AW) Christopher Aragon, CS1(AW) Jack Brown, Dining Facility leading petty officer, and CS2 Nicole McMillan, look on. The entire galley staff contributed to putting together the meal.*



*A display in the Dining Facility shows off traditional objects in celebration of Asian-Pacific American Heritage Month.*

*The Courier - [www-nmcp.med.navy.mil](http://www-nmcp.med.navy.mil)*

# NMCP Neurosurgeon Designs Departmental Insignia for Staff

Story and photo by JO1 Rebecca A. Perron

There are very few things that set medical providers apart when they are wearing their white lab coats. The doctors, nurses and hospital corpsman of the Neurosurgery Department can now distinguish themselves from the other medical professionals of the hospital through a departmental insignia patch made for wear on their white lab coats or blue work smocks. Capt. Robin Davidson, a staff neurosurgeon in the department, designed the insignia.

"I have seen other hospitals with departmental logos and a few departments here have them," Davison explained. "I thought it would be nice for our department to have one, promoting a sense cohesiveness, giving the department a visual identity."

The process of designing the patch took a few weeks from start to finish.

"I thought about the elements, looked at some color combinations and sketched out a couple of designs," Davidson said. "Then after consulting with two other staff members, I took a rough draft to Jean Bonnette, the command's graphic artist, and we came up with the final version together."

The design includes a picture of a caduceus to represent the medical field, a head and spine to represent the specific work of the department and Building One to represent the command. The words "Department of Neurosurgery" run along the top, "Naval Medical Center Portsmouth" along the bottom, while "For the Fleet" is centered between picture elements.

Aside from being turned into a patch for department members to wear on their coats and smocks, a few framed prints of the insignia are placed throughout the department.

"I am proud that our favorite doctor took the initiative and designed this symbol to represent the pride of our clinic," HN Michael A. Keeling said. "It makes me proud to walk around wearing the symbol of what we do."

Davidson also designed an insignia for the Neurosurgery Department at the University of Massachusetts Medical Center in western Massachusetts, where he worked as a civilian before coming back onto active duty a few years ago. Davidson has spent most of his time in the Navy as a reservist.

"I entered the Reserves in '65, commissioned as a lieutenant j.g.," Davidson said. "I came on active duty in '66, serving on *USS Randolph (CV-15)*, which was in



**Capt. Robin Davidson, a staff neurosurgeon, sports the insignia on his lab coat, while posing next to a picture of it.**

Norfolk. Then served here at the hospital as a general medical officer in the ER in '67 and '68."

Davidson went back into the reserves in 1968. He was activated during the first Gulf War, serving in Saudi Arabia with Fleet Hospital 15 for four months in 1991. He returned to reserve status until he was given an opportunity to go active two-and-half years ago.

"I had drilled here every year doing my two week AT," Davidson said. "The opportunity arose for me to come back on active duty. It's a unique opportunity to do what I love, and to work with people I've liked and respected for a long time."

Davidson plans to retire in January 2005. ▼

 <b>Happy 106th Birthday Hospital Corps!!!</b> 
<i>June 12, 2004 from 5 to 11 p.m.</i>
<i>Portsmouth Renaissance Hotel</i>
<b><i>Come join the fun! Door Prizes, souvenirs will be available!</i></b>
<b><i>Tickets prices are: E-4 and below: \$10, E-5/6: \$15,</i></b>
<b><i>E-7 and above: \$25</i></b>

## Energy Conservation Series

In this edition of The Courier, we begin a series on Energy Conservation, an important topic year 'round. Energy Conservation month is October, and in the months leading up to it, we will feature facts and a short quiz. This month, we also have a crossword puzzle. The answers are on Page 22.

### Energy Conservation Facts

On average, office lights are left on for 10 or more hours each day, even though the office is typically occupied for only six to eight hours. Get into the habit of turning off lights when you leave a room.

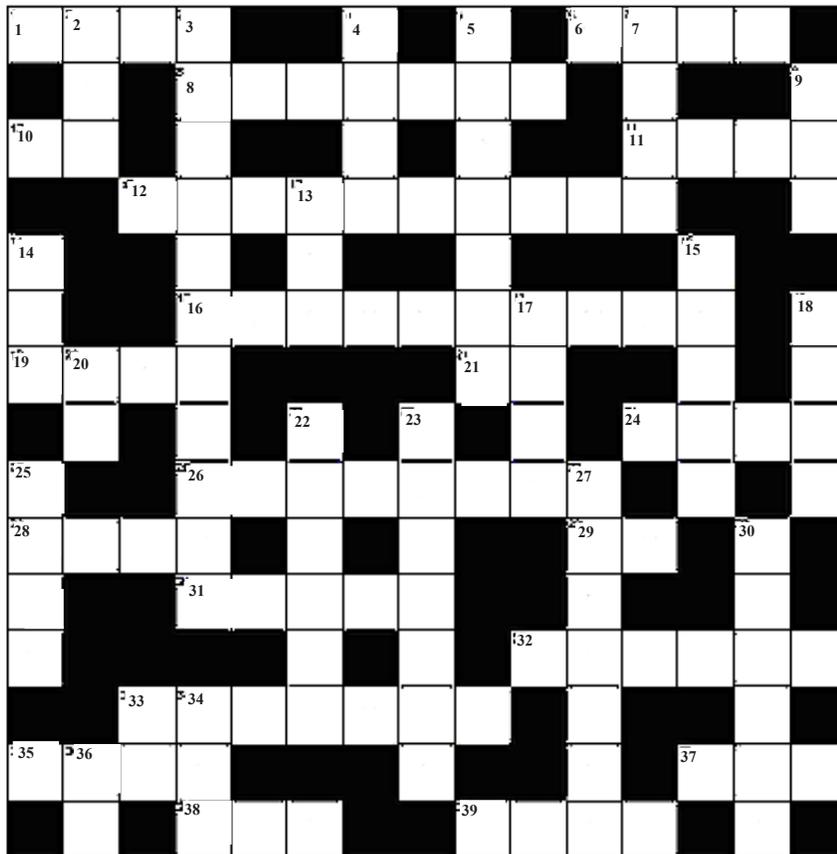
Use task lighting when you need lighting in one small area and reduce background or ambient light levels.

Use natural day lighting when possible and reduce or eliminate artificial lighting. Day lighting has been proven to have many benefits.

If 300,000 Navy personnel turned off their office lights during the lunch hour (four fluorescent tubes off per person for 250 hours per year), the Navy could save \$1.2 million each year.

A typical office could save approximately 50 percent on its electricity bills by using the power management features of ENERGY STAR Office Equipment.

We all need time off, including your office equipment. Turn off photocopiers, printers, computers and computer monitors, and other office equipment at night and on weekends. The Navy will avoid \$3.8 million a year in electricity costs if 100,000 Navy and Marine Corps personnel turn off their computers at night and on weekends. ♣



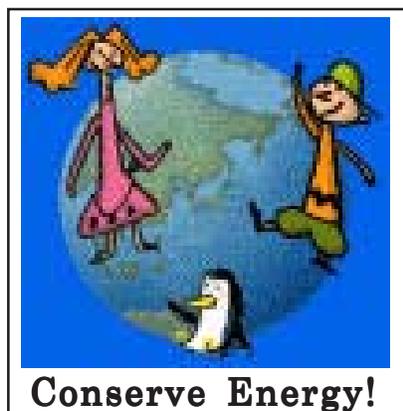
### Across

1. Opposite of hot
6. Heat sink for a water source heat pump
8. Alternate fuel for a car, not for the driver
10. A pronoun referring to an object
11. Double-\_\_\_\_ windows
12. Efficient ballast
16. Energy source based on heat from deep inside the earth
19. Hour when traffic moves the slowest
21. Symbol for radium
24. Common term for Energy Service Contractor
26. Keep your tires properly \_\_\_\_
28. Acid \_\_\_\_
29. Battery-powered car
31. A deep, prolonged sound indicating grief or pain
32. Platform above the ship's main deck, from which the ship is controlled
33. Electric energy storage unit

35. A ridge of sand or coral that rises on or near the water's surface
37. 3.413 of these equals one watt
38. Number of years the maximum payback of energy/water saving measure DON must implement by FY 2005
39. Opposite of heat gain

### Down

2. Opposite of in
3. Technique of using natural sunlight for interior illumination
4. Unit of electronic force



### **ENERGY QUIZ**

1. What is the single largest line item in the shore facility operating support budget
  - A) Utilities
  - B) Office Supplies
  - C) Food
  - D) Insurance
2. Utilities consume, on average, what percent of a CO's base operating budget?
  - A) 5%
  - B) 11%
  - C) 23.7%
  - D) 38%
3. How much is the Federal government's annual energy bill?
  - A) \$800,000
  - B) \$8 million
  - C) \$850 million
  - D) \$8 billion
5. Public official who determines the cause of deaths not due to natural causes
7. Third party financing with an Energy Service Contractor
9. Type of aircraft
13. Head of a corporation
14. Clean \_\_\_\_ Act
15. Common window glazing material
17. Compact fluorescents contain \_\_\_\_ earth phosphorus, also not common
18. Low \_\_\_\_ showerheads
20. Country in North America
22. At sea
23. 3' x 20' reusable signs drape base gates to assure high visibility for energy events
25. Repair a failed open steam \_\_\_\_
27. Set water heaters to 120 \_\_\_\_
30. Turn off the \_\_\_\_ when you leave the room
33. To exist
34. Toward the stern
36. A suffix used to form past tense

## **Flight Line Clinic Opens for business at LP-4**

*Story and Photo by JO1 Sarah Langdon*

The Sewells Point Branch Medical Clinic and the aviation community at Naval Station Norfolk celebrated the opening of a Flight Line Clinic with a ribbon-cutting ceremony May 13 at the new clinic, located in aircraft hangar LP-4. The clinic opened for business May 17 and is intended to serve all aviation personnel at the naval station.

Rear Adm. David Architzel, Command Operational Test and Evaluation Force, and Cmdr. Dana Borgeson, senior flight surgeon at BMC Sewells Point, cut the ribbon while Cmdr. Diane Hoover, officer-in-charge of the branch medical clinic, looked on. Also in attendance were Capt. Frank Aucremanne from Commander Navy Region Mid-Atlantic, Capt. Gerold Scholl from Commander, Naval Air Force, Atlantic Fleet and AIRLANT Force Medical, and Capt. Kenneth Burker, commodore, Helicopter Tactical Wing, Atlantic Fleet

"This is a real self-help venture, and it shows a lot of ownership on the part of the aviation community

and the clinic," Architzel said as he addressed the small crowd. "This is about people willing to do it themselves. This is a good idea. There's a loss of productivity on the flight line when personnel have to leave to go to sick call. This is what flight line medicine is all about, and the aviators, maintainers and (personnel on the flight line) really appreciate it."

The ceremony and clinic opening was dedicated to the memory and service of the two naval flight surgeons who died onboard the space shuttle Columbia, Capt. David M. Brown and Cmdr. Laurel B. Clark. The shuttle was lost Jan. 16, 2003 as it attempted to re-enter Earth's atmosphere upon completing a 17-day mission.

The Flight Line Clinic initiative, spearheaded by Borgeson, allows servicemembers to be seen quickly, effectively and in a location convenient to their work areas.

"The scope of the new clinic is intended to include all aviation sick call currently seen at the branch

*Continued on Page 23*



*Rear Adm. David Architzel, Command Operational Test and Evaluation Force, left, and Capt. Kenneth Burker, commodore, Helicopter Tactical Wing, Atlantic Fleet, cut the ribbon during for the Flight Line Clinic opening ceremony, while Cmdr. Diane Hoover, Sewells Point Branch Medical Clinic officer-in-charge, looks on.*

# Military Medicine Trains for Humanitarian Assistance, Civilian Crisis Response

By JOI Sarah Langdon

The majority of military doctors and nurses provide medical care from ships, clinics and hospitals throughout the world, and their patients are primarily relatively healthy active duty servicemembers, dependants and retirees. And because they are in the military, the opportunity often arises for nurses and doctors to travel outside the confines of a military medical center. Sometimes this travel takes them to remote, poverty-stricken places in the world. In these cases, patients are no longer healthy servicemembers, receiving regular preventive medical care; rather they are civilians and children, some of whom have never been seen before by a medical professional.

One way medical professionals train for this type of situation is in the Military Medical Humanitarian Assistance Course (MMHAC) and Defense Medical Readiness Training Institute. This course, available to any military facility, gives a two-day overview on how to deal with and treat civilian patients in a situation where there is a need for humanitarian assistance.

“This course has been done before in this hospital, and it’s the one course that really helps you learn about humanitarian assistance,” said Lt. Kevin O’Meara, third year pediatric resident at NMC Portsmouth. O’Meara was responsible for bringing the course back to the medical center this year. “It’s the one that teaches you how to take care of a civilian kid. It basically helps medical providers deal with the civilians and non-government people in foreign countries.

“And it’s the only course that is really focused on the patient and the person in front of you,” he added. “It really provides the most bang for your buck as far as training goes.”

According to O’Meara, the course offers lectures on key problems medical providers may encounter in the field, how to identify problems and plan for the types of injuries and illness they may see.

“Many of the patients we’ll see in a crisis situation are civilians who are malnourished and exposed to all kinds of (uncommon) diseases that no health care provider here has had to deal with,” he explained. “This is a good way for us to prepare people to go into a remote area to take care of the population there.

“The military gets put into these roles – whether it’s Hurricane Mitch down in Central America, some

other kind of natural disaster, or the kind of complex humanitarian disaster that occurred in Iraq in ‘91, ‘92,” O’Meara continued. “That was a situation where you had people, political refugees, in a country they formally lived in and they were hiding out in the mountains. The other health organizations couldn’t get to them, so the military just dropped in. The military can operate independently, which is great for crisis management.”

The course is not only beneficial for providers who set up temporary clinics in remote areas, but also helps the Sailors and Marines onboard ships know how to take care of and treat anyone brought onboard under non-combatative evacuation missions.

“I attended the course because I am stationed on an amphibious landing dock that transports Marines,” said HM1 Wendell Bates, an independent corpsman assigned to *USS Austin (LPD 4)*. “Some of those transports are for humanitarian missions like those discussed in the course. If we are at sea, we could intercept and be tasked with housing refugees. This platform could very well be called to answer a humanitarian of refugee mission. The course provides medical training in a humanitarian setting (and gave me) insight into what some medical students may have gotten in medical school already.”

The course provides a good foundation, Bates explained, which in his opinion, is applicable to real situations.

“I believe it is relative to what all physicians and non-physician health care providers do regularly,” Bates explained. “The course added insight and treatments to ailments that we don’t normally see in the states due to our advanced medical care.

“The course was taught by physicians who had been to Kenya and Afghanistan (who treated) refugees,” he continued. “They had first hand knowledge on what was being treated and what would be seen the most.”

O’Meara hopes to see the course offered at least once a year, but warns that seats in the class are limited. Only 24 students per course are accepted, and there is a waiting list. When a new class is announced, interested providers are encouraged to sign up as soon as possible. More information on MMHAC can be found at [www.pedsedu.com/MMHAC.htm](http://www.pedsedu.com/MMHAC.htm). ▼

## Increased Abuse of Narcotic 'Perc-a-Pops' Reported in U.S.

*Submitted by HMI Eduardo Ortiz, command drug and alcohol program advisor*

A narcotic painkiller that looks like a lollipop and is designed to speed relief to cancer patients is showing up in illegal sales with the nickname "perc-a-pop." The drug's easy use and sweet taste have law enforcement officials worried about the potential for abuse.

Actiq, a berry-flavored lozenge on a stick, contains the synthetic opioid fentanyl.

"We're starting to see it emerge as a drug that is, as we call it, 'diverted,' which is a legally prescribed drug being used illegally," said Kevin Harley, spokesman for state Attorney General Jerry Pappert. "It's a drug that is easily administered or taken by somebody who might be afraid to either take a pill, snort or inject a needle in their arm."

The attractive taste, described by the manufacturer as a "mild berry flavor," makes abuse more likely, he added. Harley said each Actiq lozenge retails for \$9.10. The street value of a perc-a-pop is \$20.

"We started seeing them in Philly, and that's where we understand the nickname came from," he said.

Manufactured by Cephalon Inc., Actiq's active ingredient is absorbed by rubbing the lozenge against the inside of the cheek.

It is approved by the Food and Drug Administration to combat "breakthrough pain," flare-ups suffered by cancer patients who are already taking narcotics in more conventional liquid or pill form to cope with chronic pain.

"Like any opioid, there is a potential for misuse," said company spokeswoman Stacey Backhardt. She said the company believes, however, "there has not been a substantial diversion of this product in the state or elsewhere."

Fentanyl was first introduced as an intravenous anesthetic called Sublimaze in the 1960s. Besides being taken orally, it is also dispensed as a transdermal patch under the trade name Duragesic.

Hospitals in the lower 48 states reported 576 incidents of non-medical use of fentanyl products in 2000; with the number rising to 1506 by 2002, said Leah R. Young, spokeswoman for the Federal Substance Abuse and Mental Health Services Administration. ▼

*May/June 2004 - The Courier*

## 'Clean the Base Shoreline Day' Set for June 4; Picnic to Follow

Naval Medical Center Portsmouth has scheduled the annual 'Clean the Base Shoreline' for June 4. This base-wide effort is held annually before the Clean the Bay event.

Because of recent projects near the shoreline, the usual debris build-up around the seawall in front of Bldg. 215 and Hospital Point has been kept to a minimal. This year, efforts will focus on the shoreline behind the pool, bachelor's quarters and the gym, as well as the area west of the helo pad.

The kick off will be at 1 p.m. behind the pool. Facilities Management will provide dumpsters, trucks, drivers, gloves, bags and drinking water. After the cleanup, MWR will provide hot dogs, drinks, etc.

Departments should provide an approximate head count of volunteers by 4 p.m. June 2 to Bob Wall, either via phone at 953-6992 or e-mail, so estimations can be made for food preparation.

### *A Note from From Fleet and Family Support Center*

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.ffcsnorva.navy.mil](http://www.ffcsnorva.navy.mil) for a schedule of upcoming programs and services.

**Thrift Savings Plan (TSP)-** June 3, 10 to 11:30 a.m. TSP provides all service members with the opportunity to get an immediate tax break while saving for their and their family's future. Learn how to take advantage of this exciting government-sponsored savings and investment program to build wealth and achieve financial independence in this ninety-minute workshop.

**Smooth Move Workshop-** June 10, 8:30 to 11:30 a.m. This single-session workshop offers tips to make your move as "painless" as possible! Topics include hints on shipping household goods, travel and financial planning, entitlements, family preparation, and ways to reduce relocation stress. Open to all active duty, retiring, and separating military personnel, and their families.

## Military Phone Card, Gift Certificate Donation Program Goes Public

The Department of Defense announced that any American can now help troops in contingency operations call home.

The Defense Department has authorized the Armed Services Exchanges to sell prepaid calling cards to any individual or organization that wishes to purchase cards for troops who are deployed. The "Help Our Troops Call Home" program is designed to help service members call home from Operations Iraqi Freedom and Operation Enduring Freedom.

For those wishing to donate a prepaid calling card to a military member may log on to any of the three Armed Services Exchange web sites:

The Army and Air Force Exchange Service at  
<http://www.aafes.com/>

The Navy Exchange Service Command at  
<http://www.navy-nex.com/>

The Marine Corps Exchange at  
<http://www.usmc-mccs.org/>

Click the "Help Our Troops Call Home" (or "Help Our Sailors Call Home") link. From there, a prepaid calling card may be purchased for an individual at his or her deployed address or to "any service member" deployed or hospitalized. The Armed Services Exchanges will distribute cards donated to "any service member" through the American Red Cross, Air Force Aid Society and the Fisher House Foundation.

The Armed Services Exchanges operate telephone call centers in Iraq, Kuwait, Afghanistan and other countries and aboard ships — anywhere service members are deployed in support of Operation Enduring Freedom and Operation Iraqi Freedom. All



of these locations stay busy around the clock to keep up communication between deployed troops and their loved ones. The cards available through the "Help Our Troops Call Home" program offer the best value for calls made from the call centers, never expire, and there are no added charges or connection fees.

Individuals and organizations also can show their support to deployed troops and their families with gift certificates. The "Gift of Groceries" program allows anyone to purchase commissary gift certificates at <http://www.commissaries.com> or by calling toll free 1 (877) 770-GIFT. The Armed Services Exchanges offer the "Gift From the Homefront" gift certificate for merchandise at these exchange web sites: <http://www.aafes.com> and <http://www.navy-nex.com> or by calling toll free (877) 770-GIFT. Gift certificates may be purchased to be mailed to service members and family members or will be distributed to "any service member." Only authorized commissary and exchange patrons may redeem the gift certificates at military commissaries and exchanges, including those stores supporting deployed personnel around the globe. ▼

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## ***NMCRS Fund Drive Completed; Area Donations Up by Five Percent***

As the 2004 Navy Marine Corps Relief Society Fund Drive comes to a close, the Sailors and Marines of the Hampton Roads area can be very proud of themselves, as their contributions to the centennial campaign drive have increased by five percent over last year's regional contribution.

To date, the regional fund drive has raised almost \$1.7 million, according to Ed McCann, director, NMCRS Norfolk.

"That (amount) reflects an increase of \$82,649 from last year's total," McCann said. "What a wonderful Centennial gift to the Society, and more

important, to our shipmates in need throughout the Norfolk Region. 'BZ' to all involved!"

Naval Medical Center Portsmouth's contribution reached 115 percent of its goal, amounting to a \$49,389 donation. This year's drive topped last year's, which brought in \$19,037.

"The Portsmouth sub-area brought in \$66,708, 111 percent of its goal," reported Lt. Bradley Karovic, NMCRS regional treasurer, who was responsible for nine sub-areas in the Tidewater area. "One of 12 commands within the Portsmouth sub-area, the hospital brought in 74 percent of these proceeds." ▼



## Hot Coffee and a Phone: The Helper's Hierarchy

By Lt. John Cometa, CHC, USNR



Dr. Gerald Caplan, known as the 'Father of Crisis Psychiatry,' used an adaptation of Dr. Abraham Maslow's Human Needs of Hierarchy, called "The Helper's Hierarchy." Dr. Caplan encouraged caregivers and counselors to pay special attention to the survivor's emotional state at the time of crisis. What does this mean?

As duty chaplain, one day I responded to a Code Blue involving a female Sailor. She was admitted for a pancreatic disorder and a serious heart problem. Earlier, she was still talking to the staff when her heart stopped beating at noon. When I got there, the medical team was trying to revive her. She did not make it in spite of their last ditch heroics.

The charge nurse asked me to meet the patient's husband when he arrived, waiting with him for the doctor. After the doctor explained what had happened, I escorted him to his wife's room. He burst into tears. I put my hand on his shoulder, shedding tears as well. They were married for one year. All the scripture verses and comforting words I knew seemed to fall short of what I wanted to say. I knew all he needed was my presence. Then he asked to use my phone to call family. The nurse let him use her phone. After 30 minutes, he returned and thanked me. "I greatly appreciate your help."

I replied, "It is very painful for me to see what you are going through. I just want to tell you I will keep you in my prayers." Then we hugged.

In addition to pastoral care, the husband really needed a **phone**. We cannot underestimate a phone's value in a crisis. I remember a story of a plane crash survivor who was denied immediate access to a phone soon after the incident because the phone was for executive use only. This plane crash survivor just needed a **phone** so she could call her family. That was her immediate and basic need after the plane crash. Counselors for 9/11 interviewed several survivors in the Pentagon and asked what was most helpful to them a few hours after the tragedy. Their response: **hot coffee** and a **phone**.

Another example is the prophet Elijah. When he heard the evil Queen Jezebel threatened to kill him,

*"He was afraid and ran for his life. He came to a broom tree, sat down under it and prayed that he might die. He said, 'I have had enough, Lord, take my life; I am no better than my ancestors'"* (I Kings 19:4). What explicit suicidal language! How did God respond? The Lord sent an angel to feed him. *"All at once, an angel touched him and said, 'get up and eat.' Elijah looked around, and there by his head was a cake of bread baked over hot coals, and a jar of water. He ate and drank and then lay down again."* (I Kings 19:7-8)

The angel gave him food and water again. No doubt God knows Elijah's most basic needs at the initial stage of his crisis are food and water. He knows Elijah's composition: he is both spiritual and physical being. After God ministered to Elijah's physical needs, God counseled him, re-commissioned him, and in the end, Elijah accomplished immeasurable amount of works for God.

At NMC Portsmouth, we have the privilege to influence through few words and great caring, comforting actions in the early stages of a crisis. Small amounts of help will produce larger effect. A **hot coffee** and a **phone** can be most helpful to survivors during the initial phase of the crisis. The founder of Christianity once said, *"even a cup of cold water given in His name will surely not lose his or her reward."*

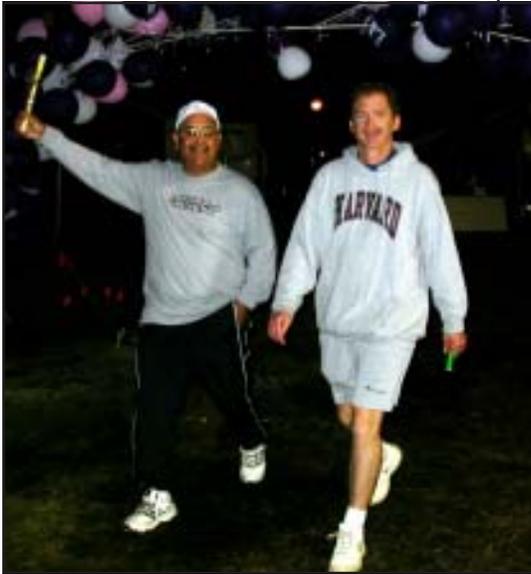
When we talk about the helper's hierarchy, the bottom line is either the phone or the cup of coffee/cold water. In the health field, patients can perceive if health care providers really care and listen. Providing them with their most basic needs is one thing and how we give them their needs is another thing.

Thousands of people visit our hospital every year. They come from various faith groups. Others have no religious preference. Regardless of their backgrounds and beliefs, health care providers should know how to address the most basic needs of the patients and their family members who enter our doors. Some just need simple direction. Others need a place to stay. But one of the most basic needs of the patients and their family members is our *tender loving care* which may simply take the form of a glass of cold water or **hot coffee** and a **phone**. †

# NMCP Staff, Family Members Walk Relay for Life

Story and Photos by JOI Sarah Langdon

Every Spring thousands of people all over the U.S. walk through the night, at different sites and in different towns, during the annual Relay for Life. Relay is a huge fundraising event geared toward raising money and awareness for cancer and cancer treatment. This year, NMC Portsmouth participated on a large scale, providing seven teams for the Portsmouth City Park, Relay for Life which took place April 30 through May 1 from 6 p.m. to 10 a.m. the next day. In all, over 70 staff and family members showed up to walk, support each other and the American Cancer Society in this 15-hour walking relay.



*Above: Capt. Roberto Quinones, director for administration, and Lt. Cmdr. Dave Collins, admirals' aide, walk during the wee hours of the night.*

*Below: Cathy Barnham, a member of the Stars and Stirrups, made a HOPE quilt to be raffled off at the event. The raffle brought in more than \$170.*



*Many members of the seven NMC Portsmouth Relay teams decorated Luminaria Bags for the Portsmouth City Park Relay for Life.*



*Lt.j.g. Tara Kobberdahl and Lt. Cmdr. Amy Wagar, both on the Stars and Stirrups team, set up a tent for one of the other members of the NMC Portsmouth Relay for Life team. Many of the team members showed up early to pitch tents and get the food set up for the teams. The Relay for Life is an overnight event and many participants choose to stay through the night, catching a few winks here and there, whenever they can.*



*Above Left: HN Sue Ellen Turner (Left) and HN Dana Busby, two of the Relay Team Captains, make their way around the track in the early morning hours of the Relay.*

*Above Right: Lt.j.g. Emily Dover lights luminaria bags prior to the luminaria ceremony at the Relay. Each bag is dedicated in memory of, or in honor of, someone who has been personally touched by cancer.*

*Left: Cmdr. Jean Scherrer puts the red sash on Vikki Garner prior to the Survivor's Lap. The Survivor's Lap kicks off the Relay, and is for anyone who is currently undergoing treatment for, or has survived cancer.*

## TSP Participation Numbers Continue to Rise; Three Million So Far

*Continued from Page 10*

eligible. By December 2003, more than 390,000 people were investing in TSP.

"Participation numbers have been rising steadily since the plan was made available," Amelio noted. "Today, we have about 410,000 members of the armed services participating. We've been putting a special focus with DoD on getting more and more armed service members to participate. So we're very pleased that the numbers continue to go up, and DoD is helping us get the word out to the members."

Amelio attributes the increase in participation to knowledge, familiarity and comfort.

"As members of the armed services become more familiar with TSP, the more they like it," he said. "They find that it's a wonderful saving program, easy to

participate in, and doesn't cost them anything. The more they talk to their colleagues in the Armed Forces about it, they become more comfortable about the plan, and they like it more and more. That's why the participation is going up."

TSP has investment funds, which vary in risk and investment mixture: government securities investment (G fund); fixed-income investment (F fund); common stock index investment (C fund); small capitalization stock index investment (S fund); and international stock index investment (I fund).

Enroll in TSP online through the MyPay Web site, or by complete an enrollment form (TSP-U-1) and turn it in to the local pay or personnel office. Forms are available online at the TSP Web site. ♣

## Wetting Down- Kuwait Style!



*Members of Expeditionary Medical Facility Kuwait congratulate Cmdr. David Price, EMF executive officer, upon hearing of his selection to captain, dousing him with many bottles of water. Price stands in disbelief, as the last of the water is dumped on him by HMCS Tony Polanco. Price is one of 15 NMC Portsmouth selectees.*

## Wives of Warriors Bible Study Begins

Mrs. Betty Price and several other spouses of deployed personnel have come together to offer a weekly lunchtime gathering for study and social support specifically for spouses of deployed (and deploying) personnel. The sessions will be held Wednesdays starting June 9 from 11:30 a.m. to 1 p.m. in the new Pastoral Care offices located on the second floor of Bldg. 215. This program is sponsored by the Pastoral Care Service Line.

Any spouse of a deployed or soon to be deployed person from the hospital may attend. The Bible study will use the book "Wives of the Warriors: Living Confidently in Christ" by Ronda Sturgill. Books are provided for attendees.

Childcare is provided free for children ages six months to five years at the Child Waiting Center (CWC). Each parent must comply with their regulations; including updated shot records on file, and fill out downloadable forms found at the CWC website, [www-nmcp.mar.navy.mil/PatientInfo/cwc/index.asp](http://www-nmcp.mar.navy.mil/PatientInfo/cwc/index.asp), or call the CWC for details at 953-6873.

Participants will learn to face challenges and support each other by living confidently in Christ. If you have any questions, please call Pastoral Care at 953-5550. ♣

***Congratulations to the NMC Portsmouth commanders who were selected for promotion to captain.***

### Medical Service Corps Selects

Cmdr. Diane Hoover

Cmdr. Peter Kopacz

Cmdr. Bryce Lefever

Cmdr. David Price

### Nurse Corps Selects

Cmdr. Pamela Grant

Cmdr. Vanessa Scott

Cmdr. Danette Svobodny

Cmdr. Michael Vernere

### Medical Corps Selects

Cmdr. Christopher Culp

Cmdr. Brett Hart, Brett

Cmdr. John Kellogg, John

Cmdr. James Radike

Cmdr. Peter Sherrod

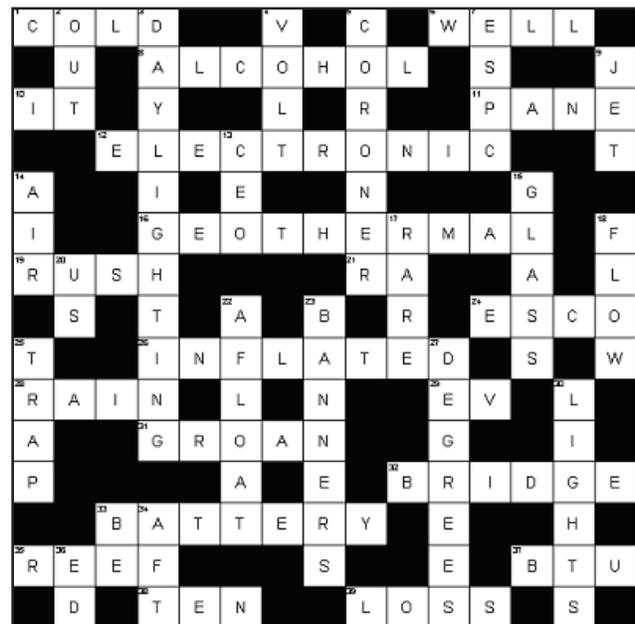
Cmdr. Joseph Slakey

Cmdr. Scott Zackowski

### *Energy Quiz Answers from Page 15*

1. A) Utilities—the Navy spends \$752,000,000 on shore facility utilities each year.
2. D) 38%
3. D) \$8 Billion

### *Crossword Puzzle answers from Page 14*



## Flight Line Clinic Opens

*Continued from Page 15*

medical clinic," Borgeson explained. "Its primary mission will be to see all sick-call for any aviation command personnel, and to provide this in an easily accessible, convenient location to the flight line.

"This clinic can see admin-up chits and other flight surgeon visits that don't require labs or X-rays," he continued. "All physical exams, including flight physicals, will continue for the present to be seen at the physical exams department at Sewells Point."

The clinic offers two exam rooms, one administrative room and one waiting room. Each room has telephone lines, and all computers are online with the military's medical information tracking system, the Composite Health Care System II (CHCS II). Exam rooms contain necessary medical equipment, including exam tables, blood pressure gauges and otoscopes, and medical records for all personnel will be maintained at the Flight Line Clinic.

The clinic will also maintain a small pharmacy with the top 40 prescribed medications. At this time, Borgeson said, most exams, including pregnancy tests, can be performed at the sick call clinic, although patients will still have to be seen at the branch medical clinic for laboratory and X-ray services.

"In the next one to 10 years, Naval Station Norfolk will acquire an as yet undetermined, but sizable array of aviation personnel, squadrons and flight surgeons," Borgeson explained. "Our current facilities must expand in capability, facility and personnel to accommodate these additions."

The clinic is open Monday through Friday from 6:45 through 11 a.m. for morning check-in and 12:45 to 2:45 p.m. for afternoon check-in. Services are expected to expand in the future. ♣

## Bravo Zulu!!!

### Legion of Merit

Capt. Richard W. Foley

HMI Luann J. Smith

HM2 James D. Ward

Cheryl Ann L. Kraft, Civ

### Meritorious Service Medal

Capt. Timothy D. McGuirk

Cmdr. Christopher M. Culp

Cmdr. Freddie R. Guyer

Cmdr. Jeffrey M. Hardin

Cmdr. Casey A. Knapp

Cmdr. Edwin T. Long

Cmdr. David E. Price

Cmdr. Ann E. Rael

Cmdr. Todd R. Williams

Lt. Cmdr. Karen Leahy

### Navy Achievement Medal

Lt. Cmdr. John B. Baccus

Lt. Cmdr. Ethan A. Bachrach

Lt. Cmdr. Robert P. Englert

Lt. Cmdr. Susan J. Letterle

Lt. Cmdr. Dennis B. MacDougall

Lt. Cmdr. Amy M. Tarbay

Lt. Laurie E. Basabe

Lt. Aida A. Bernal

Lt. Charles Bruker

Lt. John A. Carlson

Lt. Kathleen Harlow

Lt. Michelle M. Liu

Lt. Robert S. Meadows

Lt. Todd A. Saylor

Lt. Kelly E. Stetson

Lt. David J. Stewart

Lt. Johnny V. Rodgers

Lt. Jacqueline R. Williams

Lt. j.g. Rachid Elbadri

Lt. j.g. Marie A. Ullrich

HMC(SW/AW) Reginald R. Barnes

MAC(SW) Ward B. McPherson

HMC(SW/AW) Terry W. Witherspoon

HMI(SW) Jason L. Bond

HMI Lucrecha D. Calleance

ITI(SW) Cheryl A. Engle

HMI Monica L. Florence

HMI Jennifer J. Moniz

HMI Gerald J. Thomas

HM2 Darrell L. Baker

HM2 Jennifer E. Carson

HM2 Michael Clifton

SH2(SW) Manuel E. Dulucgomez

BM2(SW) Alexis H. George

HM2(FMF) Adam N. Goulas

HM2 Jeri L. Fitz

HM2 John Fitzgerald

HM2 Julie M. Gerfy

HM2(FMF) Randall D. Hammock

HM2 Lasha-Wanna S. Loritts

MS2 Isaiah N. Marauta

SK2 Ronald D. Miller

HM2 Jennifer S. Pierce

HM2 Sharon Raymond

HM2 Bridget L. Ruiz

HM2 Blake V. Towns

HM2 Maria P. Villanueva

SH2 Robert T. Wilson

HM3 Kali L. Amador

*Continued on Next Page*

### Navy Commendation Medal

Capt. Leroy T. Jackson

Capt. Douglas H. McNeil

Cmdr. Bruce M. Anderson

Cmdr. Jeffrey P. Blice

Cmdr. Joan M. Culley

Cmdr. Barbara Hadden

Cmdr. Alisa K. Hodges

Cmdr. Richard B. Wolf

Lt. Cmdr. Michelle E. Campbell

Lt. Cmdr. David C. Collins

Lt. Cmdr. Barbara A. Gies

Lt. Cmdr. Charles E. Olson

Lt. Cmdr. Kenneth A. Page

Lt. Cmdr. Pamela Plotner

Lt. Cmdr. Joanne M. Tuin

Lt. Cmdr. Ruth Walton

Lt. Karen L. Alexander

Lt. Cynthia M. Bryant

Lt. Eric D. LaCross

Lt. Andres Medina

Lt. Scott D. Pennington

Lt. Cynthia A. Wilson

Lt. j.g. Teresa L. Ceballos-McArthur

SKCS(SW) Gary J. Landess

HMCS(SW) Carlton Sanders

HMC Kevin P. Amick

HMC(SW/AW) James T. Bailey

HMC(FMF) Peter Damianidis

HMC William J. Harris

HMC(SW) Victoria E. Harvey

HMC(SW) Sean P. O'Reilly

HMC Mark A. Watson

HMC Roosevelt B. White

HMI Jody L. Batte

HM2 Dierdre E. Desmond

MA1 Jamie K. Kennerly

DTI(FMF) Kinkela H. Kuedituka

HMI(SW) Roger D. McGee

HMI John F. Small

# Bravo Zulu!!!

*Continued from Previous Page*

HM3 Carrie J. Bale  
HM3 Dedra A. Boyd  
HM3 Katy Charman  
HM3 Rakiyah N. Cook  
HM3 Sara J. Forkey  
HM3 Jillian L. Gibson  
HM3 Steven R. Hilleman  
HM3 Jonathan W. Jones  
HM3 Brandi A. Levonas  
HM3 Cristina M. Ortega  
RP3 Leon J. Passariello, Jr.  
HM3 Erica S. Person  
HM3 Therica Reynolds  
HM3 Betty K. Robertson  
HM3 Teresa Roulhac  
HM3(FMF) Eric S. Rubin  
HM3 Roxanne M. Schronce  
HM3 Joseph A. Uke  
HN Melissa Bowers  
HN Amber P. Logan  
HN Sylvia A. McBee  
HN Benjamin R. Sensenbach  
HN Tanya Zamarripa

## **Combat Action Ribbon**

HM3 Jeffrey Taylor

## **Presidential Unit Citation**

Capt. William Hurst  
Cmdr. Josephine Brumit  
Cmdr. Mark Fontana  
Cmdr. Steven Moll  
Cmdr. Cheryl Ruff  
Cmdr. Audrey Santana  
Cmdr. Kevin Sumption  
Cmdr. Wade Wilde  
Lt. Cmdr. Carl Barr  
Lt. Cmdr. James Hosack  
Lt. Cmdr. Kenneth Page  
Lt. Cmdr. James Pierce  
Lt. Cmdr. Ethan Bachrach  
Lt. Cristina Cushman  
Lt. Amy Gavril  
Lt. Roberto Gonzalez  
Lt. Phyllis Jones  
Lt. Andres Medina  
Lt. Maria Norbeck  
Lt. Andy Steczo  
Lt. Robert Talbot  
Lt. Gregory Woodson  
Lt. j.g. Kathleen Murtaugh  
Lt. j.g. Jason Robinson  
Lt. j.g. James Spradling  
HMCS Donald Widener

HM1 James Evans  
HM1 Vincente Santos  
HM1 Gerardo Yumul  
HM2 Michael Clifton  
HM2 William Dalton  
HM2 Christoffer Smith  
HM2 Michael Spears  
HM2 Blake Towns  
HM3 Bebe Carabio  
HM3 Dennis Concepcion  
HM3 William Grijalba  
HM3 Jacob Hastly  
HM3 Rueben Hays  
HM3 Lakeisha Jones  
HM3 Ronald Lorenzo  
HM3 Natieva Perkins  
HM3 Mary Seeley  
HM3 Anoop Shamin  
HA James Briggs  
HN Agyei Domfeh  
HN Neda Fink  
HN Brandon McFarland  
HN Roy Washington

## **Letter of Commendation**

Cmdr. William Woods  
Lt. Cmdr. Alana C. Heffner  
SK1(SW) Sandra G. Blake  
HM1(SW) Margaret Clay  
DT1 Louis B. Gilbert  
HM1 Tammy D. Jones  
EM1(SW) Steven D. Pate  
HM2 Kenneth W. Dambrosio  
HM2 Eric M. Elizee  
HM2 Francesca Harris  
MA2 Glenn R. Hill  
HM2 Lakeisha N. Jones  
HM2 Tamika Richardson  
HM2 Esteban A. Rivera  
HM2 Selinda T. Simmons  
HM2(SW) Beth A. Taylor  
HM3 Karl R. Daley  
HM3 Brian C. Duenas  
DT3 Clinton J. Edwards  
HM3 Shannon Galewski  
HM3 Patricia A. Henegar  
HM3 Adrian D. Hicks  
HM3 Sabrina J. Lindsey  
HM3(FMF) Casey T. Price  
HM3 Alan M. Tubban  
HM3 Karla A. Vargas  
HN Hayley M. Bow  
HN David A. Clark  
HN Melissa A. Fisher  
HN Babatunde O. Ishiaka

HN Michael A. Keeling  
HN Deana D. Johnson  
HN Glencorrea R. Thompson  
HN Martin J. Truitt  
HN Luisa Sersch  
HN Andrea N. Strecker  
CIV Lisa Beach  
CIV Susan F. Boyd  
CIV Paul Knapp  
CIV Frances M. Wakefield

## **Letter of Appreciation**

Cmdr. Scott W. Zackowski  
Lt. Cmdr. Heidi Kulberg  
SK1 Jay Hilbelink  
HM2 Angelina Brannon  
HM2 Lakeisha N. Jones  
HM2 Michael P. Jump  
HM2(SW/AW) Sybil S. Litchfield  
HM2 Derielle R. Thurman  
HM2 Lloyd A. Wilson  
HM3 Nadirah A. Abdul  
BM3(SW) Tracy A. Herndon  
HM3 Khanh H. Le  
HM3 Kenneth R. Walker  
HN Gregory S. Garcia  
HN Adam N. Goulas  
HN Rashida S. Gramby  
HN Bradley T. Furtado  
HN David G. Rudisill  
HN Genesis Salgado  
HN Alay Santiago  
PNSN Guy I. Walker  
Lynn D. Clarke, Civ  
Constance M. Berry, Civ  
Susan Lowery, Civ

## **Certificate of Appreciation**

HM2 Kenesa Albert

## **Navy Marine Corps Civilian Service Award**

Suad Jones  
Carmen M. Lopez  
Lucia G. Morales  
Brenda Murdock  
Celia Ortega  
Sherri Killam-Wilson

## **Certificate of Appreciation**

SKC Patrick Maclan

## **Military Outstanding Volunteer Service Medal**

HN Michael A. Keeling