

NMCP Receives 2003 Muddy Boots Award



Photo by HM3 Casey Price

On March 27, 2002, Chief Hospital Corpsman and Navy SEAL Matthew J. Bourgeoise lost his life in Qandahar, Afghanistan, in support of Operation Enduring Freedom. An award was created in honor of his commitment to the troops he supported with medical care. The Muddy Boots Award is given to the command that demonstrates the highest level of quality service, information management and emerging technologies in support of Naval Medicine's core mission of Force Health Protection.

The Muddy Boots Award comes in the form of a pair of bronze-painted boots, mounted on a small pedestal, and represents four goals under Force Health Protection.

To create a healthy and fit force – So that when we put a pair of boots somewhere, the Sailor or Marine wearing them is physically, mentally and socially able to accomplish any mission our nation calls upon them to

perform.

To deploy with them to protect – The battlefield is the “office place” of the warrior, who deserves the best possible protection from hazards that could prevent mission execution.

To restore health: deployed and at home – If numbers one or two fail, we are with them to deliver world-class care: treatment, stabilization and medical evacuation. At exactly the same time *and* level of importance, we deliver care to the spouses and families at home.

TRICARE for Life – We help a grateful nation thank its retired warriors by giving them and their families health care for life.

NMC Portsmouth received the 2003 Muddy Boots Award, a recognition based on numerous accomplishments throughout the year. From January through March 2003, more than 650 NMC Ports-

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Boone Clinic Named 'First and Finest Team'



Photo by JO1 Daniel A. Bristol

The Adm. Joel T. Boone Branch Medical Clinic at Little Creek Amphibious Base received the Commander's First and Finest Team Award for the 4th Quarter during a ceremony held Feb. 27. HMC(CAC/FMF/NAC) Tyrone Kelly (left) and HMC(SW/AW) Patrick Profit show off the award in front of clinic staff. The award recognizes a team who displays outstanding coordination and cooperation to produce a product and service.

The clinic received the award for the establishment of the After-hours Walk-in Clinic, which

increased access to care, decreased emergency room usage and recaptured patients into the military health system. The efforts of the clinic resulted in reduced financing cost by 75 percent and achieved a \$1.5 million cost avoidance.

During the ceremony, Rear Adm. Thomas K. Burkhard, MC, commander, NMC Portsmouth, commented that Boone Clinic was doing the best of all branch clinics in the area, and the After-Hours Clinic has come a long way in a short time.

The Courier

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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. 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.

♪ *Happy Birthday to You!* ♪



Photo by JO1 Sarah Langdon

Capt. Matthew Nathan, deputy commander of NMC Portsmouth, got a birthday surprise Feb 9, when Spunky the Clown visited, much to the enjoyment of the Executive Steering Committee.



Correction

The Sailor of the Quarter in the photo on Page 16 of the January/February issue was mistakenly identified as HM1 Mine N. Forester of the Laboratory. The recipient of the award and person pictured is actually HM1 Tammy Jones of the Main OR. We apologize for this error.

As Identity Theft Rises, DFAS Changes SSN Policy

From Defense Finance and Accounting Service Public Affairs
ARLINGTON, Va. (NNS) — Leave and Earning Statements (LES) for all service members and Defense Department civilians, and paychecks for military retirees will soon have more protection against identity theft.

Over the next several weeks, the Defense Finance and Accounting Service will drop the first five digits of a person's social security number from all hard copy pay statements and checks to guard against identity theft.

"The changes apply to everyone," said Patrick T. Shine, acting director, Defense Finance and Accounting Service. The proposal "originated internally and will be phased in over the next couple of pay periods."

This change is for all hard copy leave and earning statements. This does not apply to electronic copies of statements found on myPay, the online system for access and control of customers' personal pay information (<https://mypay.dfas.mil>).

Reports of identity theft have substantially increased in recent years, according to the Federal Trade Commission.

Five years ago, the number of complaints to the FTC was roughly 23,400. By 2001, the rate had more than tripled to about 86,200. Based on figures released in January 2004, the number of complaints neared 215,000 for 2003. The Social Security Administration has taken the same step of eliminating the first five social security numbers on the millions of checks it issues. ▼

NMCP Stands Up 'TRICARE Kuwait', Supports Iraqi Freedom

By JO1 Daniel A. Bristol

Naval Medical Center Portsmouth excelled with their assistance in "Operation Iraqi Freedom," with the deployment of medical and support personnel throughout most of 2003. The Bureau of Medicine and Surgery Muddy Boots Award currently resides at NMC Portsmouth for their support of Force Health Protection during 2003. Those assigned to the hospital's Expeditionary Medical Facility (EMF) Portsmouth are getting their boots muddy once again as they head to the Persian Gulf region.

Two groups of six-month deployers have been established to fulfill a one-year deployment order given by the Joint Chiefs of Staff. Once again, EMF Portsmouth personnel will be assigned to the Central Command Area of Responsibility, and they will work for the Combined Forces Land Component Commander and the Army's 8th Medical Brigade.

"EMF Portsmouth is relieving two Army combat support hospitals," said Capt. Martin L. Snyder, Medical Corps, commanding officer, EMF Portsmouth, "and will operate jointly with Army high headquarters. EMF Portsmouth is providing medical care in support of the current personnel rotation, which will be the largest rotation of troops since World War II."

On Super Bowl Sunday, four members of the first group of six-month deployers traveled from Norfolk International Airport. They are the pre-advanced party, and their job is to set the stage for the rest of the crew.

The remainder of the first six-

month deployers were split into two separate waves. The first wave, called the advanced party, departed in two small groups. Eighteen Sailors traveled on Valentine's Day, and the second group consisting of 50 more Sailors, left on February 15. Both days, the advanced party met at the Norfolk International Airport with their families and friends by their side bidding them farewell. They will relieve Army personnel who are due to rotate out, and they are responsible for setting up communication and supply lines for the EMF to use while in theater.

The second wave of approximately 130 personnel is scheduled to travel sometime mid-March, and they are scheduled to be relieved by a second group of six-month deployers sometime in August or September.

Snyder explained to the families and friends of those deploying that Portsmouth was picked for this mission because, "...we have a reputation of getting the job done."

"I want you all to know that I am responsible for all your loved ones while deployed," said Cmdr. David Price, executive officer, EMF Portsmouth. "This is a job I take very seriously, and I intend to bring everyone back safely."

The primary mission of NMC Portsmouth is to maintain a medical

force ready for worldwide deployment in support of U.S. armed services engaged in combat operations. EMF Portsmouth is a type of medical unit capable of being forward deployed to fulfill this mission.

EMF Portsmouth is deploying in support of Operation Iraqi Freedom II. Health care services that will be offered to U.S. troops in the area include all aspects of medical care, from dental maintenance and immunizations to advanced trauma surgical care.

"You are the best and finest, and you will be taking care of our Airmen, Soldiers, Marines and Sailors," stated Rear Adm. Thomas K. Burkhard, Medical Corps, commander, NMC Portsmouth. "I thank you on behalf of the hospital and our country for what you're about to do.

"We will be looking forward to having you come back in a very short amount of time," explained Burkhard, "and we know that you are going to do a great job over there as 'TRICARE Kuwait'." ♣



Photo by Christine Guy, EMF ombudsman

HMC Douglas Pollock, a member of the advance party, said goodbye to his wife and two daughters Feb. 15.

'Muddy Boots' Signifies Best Support of Force Health Protection

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mouth personnel deployed on the ground and at sea in support of Operation Iraqi Freedom. Some servicemembers deployed with the Marines and Forward Resuscitative Surgical System (FRSS) teams. Others staffed a 200-bed Expeditionary Medical Facility (EMF), augmented *USNS Comfort (T-AH 20)*, three Casualty Receiving Treatment Ships (CRTS) Medical Augmentation Personnel System (MAPS) and Shock Trauma Platoons (STP).

"Our components deployed to the North with Fleet Hospital 15, forward deployed in FRSS's with the Force Service Support Group (FSSG) Marine Combat Support units and were on-scene to staff a 200-bed EMF Fleet Hospital just south of the (Iraqi) border," said Capt. Matthew Nathan, deputy commander for NMC Portsmouth.

"Our technical support staff was one of the first to augment the USNS Comfort, and we deployed three CRTS teams to warships," stated Nathan. "NMCP is proud to be involved in all aspects, from the fleet hospital and hospital ship to the tip of the spear, as seen in the CNN Documentary "Devil Docs!" featuring NMCP providers (on the front lines) with the Marines. On the home front, NMC Portsmouth continues to be a vanguard in Force Health Care Protection to the most powerful fleet in the world," he explained.

For those NMC Portsmouth staff members left behind, albeit in a different environment from the front lines, the work was strenuous and the hours just as long.

"Well in advance of the DOD directive to reinstitute an anthrax/smallpox immunization program," Nathan stated, "NMCP created a team of professionals who facilitated the training of fleet immunization personnel and processed servicemembers attached to over 50 platforms. The NMC Portsmouth vaccination center provided over 10,000 patient encounters, giving 6,000 immunizations. Flawless record keeping and meticulous screening resulted in no serious adverse reactions."

NMC Portsmouth also created a tele-consult email system which allowed fleet medical personnel access to more than 11 specialties for advice and disposition in a continually monitored email address. The "Bone Phone", a dedicated orthopedic cell phone, guaranteed the fleet immediate access to orthopedic specialists.

In the arena of Homeland Defense, NMC Ports-

mouth's efforts and commitment to facility and community preparedness were recognized as "the best in the claimancy," receiving the highest BUMED score from the DVATEX (Disaster Preparedness Vulnerability Analysis Training and Exercise) survey team. The medical center was cited for outstanding organizational innovations, such as comprehensive restorative care for area special warfare casualties from Afghanistan and Iraq, providing GITMO (Guantanamo Bay, Cuba) Camp X-Ray continuous short-fuse back up and specialty support, as well as reduction in the number of active duty fleet Sailors sent to civilian referrals from 120 per month to less than five.

"Even with significant staff deployed and a partial reserve backfill, our covenant to provide safe and quality health care to the families and troops who remain behind has never been stronger," Nathan stated.

"Coming on the heels of our deployment," he continued, "the tri-ennial July JCAHO/IG (Joint Committee on Accreditation of Healthcare Organizations/ Inspector General) survey resulted in a score of 96, no Type 1 findings, and the Med IG to comment, 'NMCP is a benchmark DOD tertiary care medical center'. JCAHO particularly commented on engagement in patient safety and the U.S. Navy's CHCS II (Composite Health Care System II) test site, heralding the advent of an electronic medical record."

Nathan goes on to list other impressive accomplishments of NMC Portsmouth for the 2003 year: easy access to care, targeting the demographics of the fleet and their families with after-hours clinics and specialists to branch clinics, as well as shifting urgent care costs and a reduction in patient waiting time. Patient satisfaction reports scored well above all civilian and Medical Treatment Facilities (MTF) averages on the DoD TRICARE survey with scores of 6.12 out of 7.00 and 6.35 out of 7.00, Nathan explained.

"NMCP is the leader in benchmarking and business case analyses to optimize productivity, increase capacity and recapture revenue in accordance with the Surgeon General's and CNO's challenge to Navy Medicine," Nathan stated.

The Muddy Boots Award will be officially dedicated and placed on display in Bldg. 215 in April. The award will stay at NMC Portsmouth for one year. ▼

NMCP Oncology Ward Hosts Ceremony for Respected Marine

By JO1 Sarah Langdon

On Feb. 6, 2004, at approximately 12:45 p.m., Marine Master Sgt. Amos “Famous Amos” Diaz succumbed to a terminal illness at Naval Medical Center Portsmouth. Diaz, a 23-year veteran of the Marine Corps, had been a patient for only a short while, but one worthy of remembering.

A week prior, on Jan. 30, Diaz was honorably retired during a special retirement ceremony held on the Oncology Ward at NMC Portsmouth. The ward was temporarily transformed into an official ceremony hall, holding the many guests, including military officers and enlisted members, and family and friends of Diaz.

“This ceremony, the magnitude of it, was unprecedented,” said Cmdr. Kathryn Ballantyne, product line leader, Oncology. “We were originally going to have it in our palliative care room, but when I got up to the ward, there were 200 people there. We ended up having the ceremony at the nurse’s station with everyone wrapped around the hallway. We had nine other patients on the ward, but it didn’t matter. Those who could, came out and cried too. Everyone who passed through stopped, everyone watched and their wasn’t a dry eye on the ward.”

Marine Maj. Gen. Gordon C. Nash, director for Joint Training, J-7, U.S. Joint Forces Command, and commander, Joint Warfighting Center, presided over the ceremony. Personnel representing all military services and the Coast Guard were in attendance, as well as a large number of family members who traveled from as far away as Okinawa, Japan; Puerto Rico, and Hollywood, Calif., for the ceremony.

The ceremony, originally planned for the POW/MIA Memorial Chapel located at the Commander, U.S. Navy Atlantic Fleet, Norfolk, compound, had to be shifted two days prior to its scheduled commencement due to Diaz’s deteriorating condition.

According to a close friend and colleague of Diaz, Marine Master Sgt. Todd Smalenberg, 1st Reconnaissance Battalion, Camp Pendleton, Calif., the large number of guests who attended the retirement ceremony was no surprise. Diaz was the type of man who made an impact.

“He was my best friend and brother for 20 years,” Smalenberg began. “Amos impacted every Marine, Sailor, Airman or Soldier he came into contact with.

He was always unique and always focused. Everyone he met was drawn to him. He was a born leader; he was continuously teaching.

“He would get you to do what he wanted you to do without you even knowing it,” Smalenberg continued. “And he had a great sense of humor until the end. He was still making comments and jokes when he was sick, and he was compassionate until the end. He was always a link, bringing people together, whether it was in the civilian or military community. He was a great friend and a great family man. It is our loss, but it is Heaven’s gain.”

Diaz was born in Ft. Leonardwood, Mo., in 1958. He was the third child of six, with five sisters. His father, Amos Diaz, was in the Army, and as a result, the family lived in many places, including the Midwest, Kentucky and Germany.

“Amos was pretty special,” said Mariana, Diaz’s wife. “He was always helping people and helping his friends. He was the best husband, very loving, and he would come home every day and spend two hours playing with his children. He was very good to us, and he worked very hard.”

Diaz’s impact on others showed in his desire to take care of others, even as a young boy, explained his older sister, Maritza Diaz.

“One time, Amos and I were playing in the woods in Ft. Leonardwood,” began Maritza. “We were playing in our tree house, and we met a man in the woods. He didn’t have any food or clothes, so Amos fed him and gave him clothes from the house. It turns out that he had escaped from the prison near where we lived, but he never did us any harm. That’s the just the type of person Amos was.”

At the age of 23, Diaz enlisted in the Marine Corps and completed basic training at Parris Island, S.C. He trained as a mortar man and joined the 3rd Marine Division in Okinawa, Japan, after completing infantry training school. He attended Reconnaissance Indoc-trination Program and Jungle Environmental Survival Training (JEST), Airborne School, Squad Leader School and the Ranger School.

He worked at the U.S. embassies in Helsinki, Finland and Niamey, Niger. In Niger, he served as assis-

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Marine Master Sgt. Touched Hearts, Left His Mark on Family, Friends

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tant detachment commander. Diaz earned awards such as Team Leader of the Year, while working with "B" Company, 1st Recon Battalion at Camp Pendleton, Calif., in the late 80s. Other duty stations include Fort Story, Va.; Chile; Special Operations Training Group, Camp Lejeune, N.C.; Headquarters, U.S. Joint Forces Command, Norfolk, Va.; and Expeditionary Warfare Training Group, Little Creek, Va. Diaz was slated for assignment to 3rd Recon Battalion, Okinawa, Japan, when he fell ill, and was instead, sent to Hampton Roads to receive medical care.

According to family members, Diaz made the most of his military career and left his mark wherever he went.

"Amos was very kind and loving," said Maritza. "He worried about people and he encouraged them. It didn't matter who they were – whether they were his family, people he worked with or complete strangers. He was very dedicated to the people he used to train. There were two guys he used to train in ROTC back in 1976. He hadn't seen them since then, and they showed up to the ceremony. They said that he touched their hearts. He had a tremendous heart and really wanted people to learn."

"He is a very honorable person," said Michelle Cancel, one of his nieces. "Whatever he did, he did with pride. We never lived close to him, but every year, we have a family reunion that he plans. He's always been in charge. Despite the fact that he is only 45 years old, I

think he has accomplished so much. People who've lived longer than he has haven't accomplished as much. He completed his life. I've only been here a day, and I've never seen so many friends."

"He is an incredible entertainer, comedian and always so enthusiastic," Marysol Diaz, another older sister, explained. "He was a link in their neighborhood – it didn't matter what race, color or gender someone was, he shared his culture (Latin American) and theirs."

"As an adult and single man, he never missed an opportunity to travel," continued Marysol. "He wanted to see the world. He wanted to know how the African natives lived so he went to live in Nigeria. Instead of staying in hotels, he went to live with some of the tribes. He brought his experiences back to us and shared them. He brought back handmade toys and showed his children. He wanted them to know how happy underprivileged children were with just those little handmade toys."

It was because he was this type of person, his family explained, that led to the great volume of guests at Diaz's retirement ceremony. For the Oncology Ward, stated Ballentyne, it was a great experience as well.

"This (retirement) ceremony was a wonderful, fitting way to bridge the active duty with the holistic end of life care that is afforded at this hospital. Providing this ceremony for him was an honor," Ballentyne explained. "He spent 23 years serving his country in reconnaissance in the U.S. Marine

Corps. He's so deserving of this. We see sick patients all the time, and that's how we know them, but they are so much more. There are some really amazing stories. If it weren't for the active duty members, we (military medicine) wouldn't be here. They demand and deserve good care, and that's why we are here."

"The resourceful, professional and caring attitudes displayed by Cmdr. Ballentyne, Cmdr. Rochelle Kay (division officer, Oncology) and the entire Oncology Department Staff were instrumental in ensuring both patient and his guests were comfortable during their visit to the ward," stated AWCS(AW/NAC) Joseph Weisenburger, U.S. Joint Forces Command Joint Warfighting Center, who also attended the ceremony. "The hospital staff enabled Diaz to receive a proper, esteemed military retirement ceremony in the face of an adverse medical condition and limited space."

HMCS (SW/FMF) Anthony Polanco, hospital operations senior enlisted advisor, also played a significant role, stated Wiesenburger.

"Polanco, upon notification of the short-notice ceremony requirement, coordinated numerous hospital resources to ensure the comfort of visiting dignitaries and guests," he said. "All NMCP personnel should be justifiably proud of the professional, caring demeanor displayed by these personnel."

Diaz is survived by his wife and three children, Daniel, 11, Monica, 7 and Christina, 4. ▼

How Can It Be All Right When It's All Wrong?

By Lt. Cmdr. Roger Bouma, CHC, USN

"How Can It Be All Right When It's All Wrong?" is the title of a book by Lewis Smedes. But, this is also a question that we ask ourselves. What if one were beaten five times, shipwrecked three times, went hungry, or stoned and left for dead. All these events did take place to the apostle Paul. The Christian scriptures record a list of these difficult events. Yet, for all these terrible experiences, he shares what he has learned: he has learned to maintain a sense of well-being, **WHATEVER** the circumstances. The apostle actually uses the term "WHATEVER," as an inclusive term and therefore must include the beatings, the shipwrecks and the stonings.

The apostle tells his readers that a sense of well-being has more to do with one's inner attitude than it does with circumstances. One can meet a person who has undergone difficult circumstances, yet maintains a

sense of peace through the stormy times. One can meet another who has undergone very similar circumstances, yet he or she remains very unhappy. The key variable in these two circumstances is one's attitude.

Two patients were diagnosed with similar types of cancer. Both patients were very upset by the news. After the initial shock and talking over the diagnosis with the Oncologist, one patient had trouble making important decisions with respect to his treatment. The other patient had been given news of the same diagnosis; however, through talking to his family, along with the support of his faith com-

munity, he came to accept his diagnosis and work with his doctor on a plan of appropriate treatment.

These are two similar cases in which the patient's attitude is an important variable. Dr. Harold Koenig is a professor of Psychiatry and founder of Duke's Center for the study of Spirituality and Health. In his book "Spirituality and Patient Care", he references studies of 542 patients, sixty years and over, which were admitted to Duke University Medical Center. Those patients who attended religious services once a week or more were 56 percent less likely to have been hospital-

ized during the previous year. In terms of actual number of days hospitalized, those who attended services regularly were hospitalized an average of six days in the previous year, compared to twelve days for

those attending services only a few times per year or not at all.

The good news is that spiritual practice can have a dramatic effect on attitude and health. Every person needs a sense of hope to live and to gain a sense of well-being about his or her circumstances. No person is happy about being beaten, shipwrecked, stoned or diagnosed with cancer. Through one's attitude, one can gain a sense of well-being about their situation. A wise person once uttered this prayer: "God give me the strength to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference." ♣

The Serenity Prayer
God, grant me the Serenity
To accept the things I cannot change...
Courage to change the things I can,
And Wisdom to know the difference.
Living one day at a time,
Enjoying one moment at a time,
Accepting hardship as the pathway to peace.
Taking, as he did, this sinful world as it is,
Not as I would have it.
Trusting that he will make
all things right
if I surrender to his will.
That I may be reasonably
happy in this life,
And supremely happy with
him forever in the next.
Amen.



New Class 'Take Charge of Your Weight' Takes Shape

By JO1 Sarah Langdon

For the folks in the Nutrition Department at Naval Medical Center Portsmouth, healthy lifestyle programs are in full swing. There are plenty of classes to choose from, such as Weight Management Orientation and the Internal Medicine Weight Management Class. One of the classes, Take Charge of Your Weight, began in January and is heading into its third session of the year.

The six-class program is geared toward anyone who wishes to lose weight, said Ens. Carolyn Skelton, R.D. (registered dietician) for NMC Portsmouth – whether they're looking to lose 10 lbs. or 100. Participants attend four healthy living lectures, one each Tuesday for four weeks, and follow up with Skelton in person twice after that. The two follow-up visits count as the remaining two classes.

"The first class is an introduction to weight management (Nutrition 101)", Skelton explained. "You come to the class, we get your height and weight and measure your waist and hips. The second class, Healthy Eating, Here, There and Everywhere, teaches you how to stock your fridge, how to plan meals and how to shop at the commissary."

The third class of the program, Stop Those Stress Pounds Before They Start, addresses stress management, including life priorities, how to manage stress and how to recognize triggers, among other things. According to Skelton, the class participates in a relaxation exercise at the end. The fourth, Exercise for Life, covers exercise.

During this class, measurements are taken again. Skelton is

certified through the American College of Sports Medicine and is certified as a fitness instructor and is qualified to help participants develop healthy exercise habits. Once a member completes the four courses, Skelton continues monitoring the member.

"I keep in contact with the individual via email, and they are seen again in three months and again at six months," Skelton said. "At these appointments, their weight and body measurements are taken again.

"We've been pretty successful so far," Skelton commented. "Our first class began with five people, the second had eight, and there are five enrolled for the March session. So far, it's been going pretty good. Everyone has been corresponding with me, and they are all still losing weight. This can work for anyone. If they stick to the program, they will lose weight."

According to Skelton, healthy

living is an issue for many people, but one people can incorporate into their lives.

"Well, everybody struggles with weight gain, so learning how to eat healthy throughout your life cycle is important, and that's what we are trying to teach," she said. "It's important for people to realize that losing weight takes time. If it takes six months to a year to gain weight, than it is going to take the same amount of time to take it off."

The only requirements of the program is participants have to be active duty service members, and they must have a referral from their primary care provider (PCM) or have attended the Weight Management Orientation class to in order to join.

Anyone interested in participating in the program is encouraged to contact their PCM to get a referral. Please call 953-2627 for registration and location. ♣

NEW WELLNESS PROGRAM - "The Right Weigh"

The Wellness Department, in partnership with Clinical Nutrition, developed a Healthy Lifestyle course for adult health care beneficiaries. The program focus will be on Exercise, Nutrition and Behavior Modification. Classes will meet for an hour each week for five weeks. Follow-up for participants who attended all sessions will be conducted at three- and six-month intervals.

Program goals include:

- Utilize healthy nutritional guidelines in daily routines
- Understand the self-esteem, stress and weight connections
- Develop a regular exercise routine
- Promote and maintain healthy lifestyle and body composition

Our first NMCP class met enrollment quota within one week! Our next Right Weigh class will begin on 31 March. Classes will also be provided at the branch medical clinics.

Call Ms Cathy Waters at 953-9242 to register for all classes.

10 Members of Shock Trauma Platoon Earn CAR from Iraqi Battle

By JO1 Rebecca A. Perron

To earn the Combat Action Ribbon, service members must have actively participated in ground or surface combat in which the member was under enemy fire, and his or her performance was satisfactory. Enemy fire includes mortar, missile and artillery attacks.

While no one wants to be in this situation, Navy doctors, nurses and hospital corpsman are aware of this possibility while deployed with a Marine unit during combat.

While deployed with Combat Service Support Detachment 22, 10 Naval Medical Center Portsmouth personnel were involved in the Battle of An Nasiriyah March 26, 2003. These 10 medical staff members initially deployed with the Expeditionary Medical Facility (EMF), then were part of a mobile Shock Trauma Platoon (STP) traveling with the Marines into Iraq when the attack occurred.

“Everything happened so fast,” explained Lt. Cmdr. Ferman S. Godinez. “It was dark, and at night. Cmdr. Timby was in the tent, everyone was scattered throughout the compound. We got down, and were trying to figure out where the hostile fire was coming from.”

“We were redoing our equipment that day,” recalled HM3 Porfirio J. Rodriquez. “Some members of our team were in a meeting. Some action started

around the berm. The Marines were handing out ammo. I was walking from the back of the berm to the medical tent when they started attacking. All I saw was white flashes. My first instinct was to duck, to get under a vehicle.”

“It was so surreal, things moved slow, not sure what was going on,” Godinez said. “We had a fire hole with barrels to get into. We were expecting something that night. Villagers nearby were digging holes that day in their front yards to get into for protection, so they knew something was coming.”

At the time of the attack, the STP was taking care of 15 Iraqi civilians and enemy prisoners-of-war (EPOWs). After the firefight started, injured Marines began arriving for treatment.

“We started getting casualties,” explained Rodriquez. “We had 15 EPOWs. We had to get them out of medical to make room for our wounded Marines. We started taking care of the Marines, triaging the worst first. During the firefight, it was so hectic with so many patients. It would get quiet for a while, then rounds would start going off. It seemed to take forever, but it lasted for two hours at the most.”

“Everything was hectic and surreal,” Godinez continued. “The hostile fire ended a while before we finished taking care of the patients, which was around 8:30 the next morning. I would rather not have earned this award, because you have to be fired on to receive it. But we were very fortunate. The Marines took great care in protecting us.”

The team received 33 wounded Marines in all. They were transported for further medical treatment to Camp Viper. Rodriquez was one of several from the team who escorted the wounded.

“Our priority was to get patients to the EMF at the rear,” Rodriquez said. “When it was deemed secure, we took the injured in seven-ton humvees and ambulances and convoyed them back to Camp Viper, a Life Support Activity set up south of An Nasiriyah. This was early the next morning, after the firefight, sometime after sunrise.”

“I wear this medal with pride,” Godinez said. “Some really good folks from the medical center did some really great things out there.”

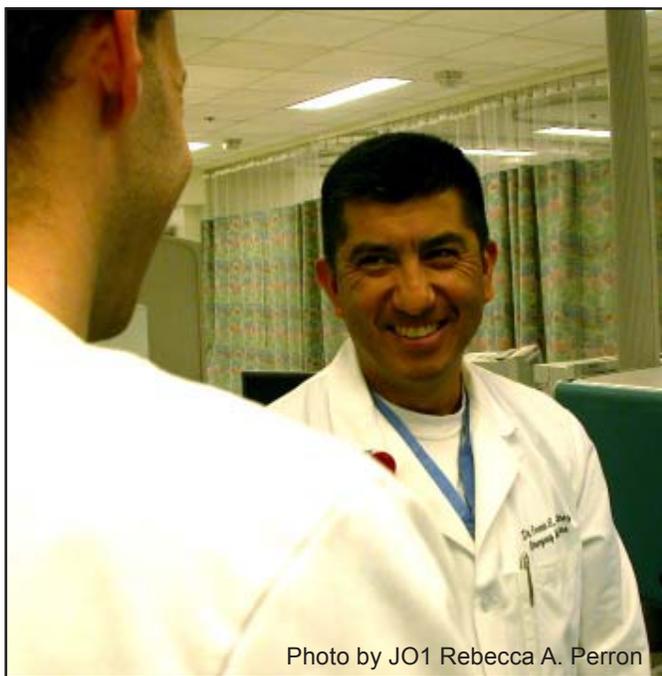


Photo by JO1 Rebecca A. Perron

Lt. Cmdr. Ferman S. Godinez consults with a colleague in the Emergency Room.

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Combat Action Ribbon Awarded for Service under Enemy Fire

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“I feel humbled to be included in the crowd of people who have earned this ribbon,” Cmdr. James Ritchie said.

Cmdr. Jeffrey Timby said he is “Proud, very proud. The Marines who were out there did so much to earn this award. I just happened to be there.”

Although Timby might feel he just happened to be there, Navy doctors, nurses and hospital corpsman are an intricate part of a Marine unit in combat, experiencing the firefight right along with the Marines. The Marines and the Navy docs have a mutual understanding- part of the Marine mission is to protect the doctors, while the doctors are there to treat the wounded. They protect each other while accomplishing the mission. ▼

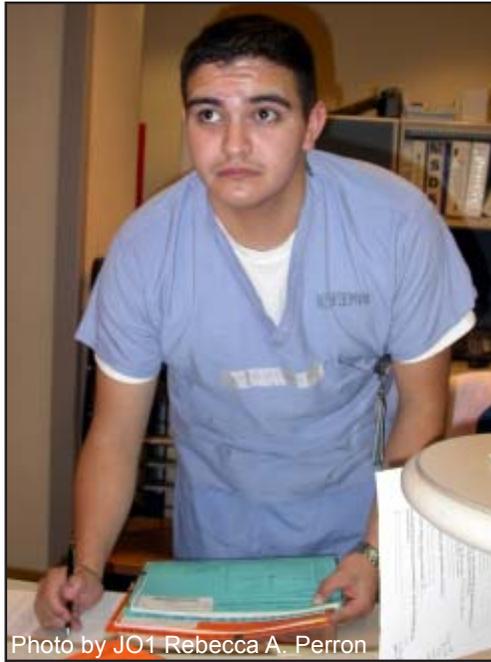


Photo by JO1 Rebecca A. Perron

HM3 Porfirio J. Rodriguez tracks the status of a patient in the Same Day Surgery Ward. Rodriguez helped transport injured Marines to Camp Viper the morning after the attack.

Combat Action Ribbon Recipients from the March 26, 2003, Battle of An Nasiriyah during Operation Iraqi Freedom.

- Cmdr. James Ritchie
- Cmdr. Jeffrey Timby
- Lt. Cmdr. Ferman S. Godinez
- Lt. Cmdr. Alan Heffner
- Lt. j.g. Pandora Liptrot
- Lt. j.g. Michael Oviatt
- HM2 Jay Carson
- HM2(FMF) Salvador Peralta
- HM2 Kayle Wallace
- HM3 Porfirio J. Rodriguez



Photo by Lt. Cmdr. Ferman S. Godinez

Patients are loaded into an ambulance for transport for further medical treatment.

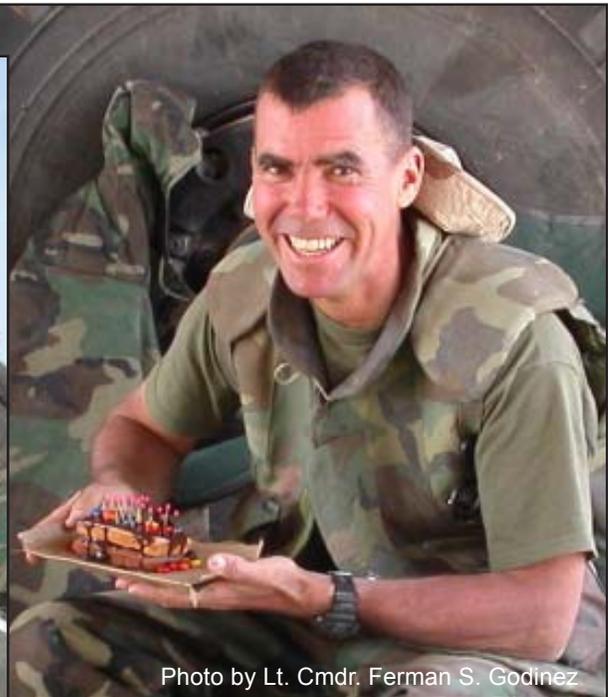


Photo by Lt. Cmdr. Ferman S. Godinez

Cmdr. Jeffrey Timby shows off his Meals-Ready-to-Eat (MRE) birthday cake presented to him by the Shock Trauma Platoon shortly before the Battle of An Nasiriyah.

NMCP Recycling Program Benefits Command, Environment, MWR

By MMCS(SW) Thomas L. Fortune, Base Operations Senior Enlisted Leader

Naval Medical Center Portsmouth has developed an extremely aggressive recycling program over the last eight years. The efforts of personnel assigned to the Recycling Center result in eliminating unnecessary waste, reducing dumpster disposal costs and selling recyclable materials to recycling contractors.

In addition to keeping unnecessary waste out of the environment and saving the command excess disposal costs, the money received from the sale of the recyclable materials benefits command members through funding the recycling program at NMC Portsmouth, paying for other environmental programs and donations to the Morale, Welfare and Recreation Department.

For every cardboard box, soda can and piece of paper that is recycled, the command, the environment and MWR benefit. But, this program cannot be successful without the full participation of every command member.

“To fully support this program, it is incumbent upon every individual at the command to maximize their recycling efforts,” explained Ed Bick, recycling manager. “For every item that could be recycled but is thrown away instead, we are paying disposal costs instead of receiving money for selling it.”

Last year alone, the Recycling Center sold 192 bales of old corrugated cardboard, 99 bales of white office paper, 630 pounds of aluminum cans, and 1,106 wood pallets. The command received almost \$14,000, paying for the overhead of and new equipment for the recycling program.

“But, we are still paying almost \$160,000 annually for disposal costs,” continued Bick. “We could reduce that cost by 40 percent, about \$63,000, if the recycling program was maximized.”

Every time a square eight cubic yard dumpster is emptied, it costs the command \$8.50. The

open top 20-yard dumpsters are about \$225 per dump. The hospital compactors are \$300. Currently, the large dumpsters are emptied twice a week and the compactors three times a week.

“Many times, the open top dumpsters are full of furniture that should have gone to DRMO,” explained Bick. “Furniture and cardboard take up valuable space that could better be used for trash. So, by not placing furniture or cardboard in the dumpsters, we can save money instead of spending it.”

The command averages about \$25 for each bale of cardboard it sells. It takes four trailers full of cardboard to make one bale.

In the past, housekeeping has helped command members with the task of transporting cardboard to the recycling trailers. Housekeeping did this out of courtesy, not because they were required to by contract. With the reduction of housekeeping services, which has resulted in an annual command savings of more than \$800,000, housekeeping can no longer support these requests.

Per NMCPINST 5090.4C, it has always been the responsibility of each department to recycle their cardboard and to deliver the flattened boxes to the recycling trailers. Cardboard is not supposed to be placed in trash containers.

Cardboard recycling is just as important as white paper and aluminum cans. So, by doing your part to recycle these materials, the command benefits, the environment benefits and you, the command member, benefit. ♣



Photo by MMCS(SW) Thomas L. Fortune

Cardboard recycling is the responsibility of each department. Housekeeping is not required to take cardboard to the recycling trailers. Do not let cardboard pile up in your space.

Do your part to recycle!

Cardboard

Cardboard recycling trailers are pre-positioned at the following locations:

-Between Bldg. 2 loading dock and Bldg. 20

-Bldg. 215 parking lot on the east (water) side past the courtyard.

-Between Bldg. 256 (Exchange) and Bldg. 252 (pool)

Cardboard must be flattened before being placed in the trailer. Trailers are emptied twice daily. For additional pick-ups, call the Recycling Center at 953-5625. Please DO NOT place the cardboard on the ground if the trailer is full or away for emptying.

Aluminum Cans

Aluminum recycling containers are for soda cans only. The cans must be empty to prevent the infestation of flies. No trash is allowed in these containers.

White Paper

Paper bins are for white paper only, including shredded white paper. No colored paper, plastic (divider tabs), phone books, newspaper or trash.

Any batch of recyclables that is tainted with other materials becomes trash. The command does not possess the personnel to be able to sift through each bag to sort out unacceptable items. When the whole bag, container or bale becomes trash, it defeats our program goals.

If you have any questions about the program, contact MMCS Fortune, Base Operations senior enlisted leader, at 953-9562, or Ed Bick, recycling manager, at 953-6145.

Uniform Shift Set for April 19

The shift to the summer uniform of the day for all ships present and stations within COMNAVREG MIDLANT Area of Responsibility will take effect 0001, 19 April 04.

The uniform of the day for officers and chief petty officers will be service dress whites with summer white and service khaki optional. For E-6 and below, the uniform will be service dress whites with summer whites optional.

Dates for other east coast regions are as follows:

ComNavReg SE (Jacksonville, Fla.) - 29 March 04

ComNavReg NE (Groton, Conn.) - 03 May 04

Naval District Washington, D.C. - 03 May 04

Pennsylvania and West Virginia - 03 May 04

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 for a schedule of upcoming programs and services.

Overseas Transfer Workshop- March 9, 8 a.m. to 3 p.m. This helpful, single-session workshop is a great way to prepare yourself and your family for this challenging adventure. Information will be provided on household goods and auto shipment, financial planning, travel arrangements and passports, personal security and culture shock. Open to active duty members, spouses and dependents 12 years and older.

Financial Responsibility- March 11, 10 to 11:30 a.m. This single-session program covers Navy policy and disciplinary procedures in the area of personal finances, checking and loan procedures, and Hampton Roads consumer issues.

Smooth Move Workshop- March 18, 8:30 - 11:30 a.m. This single-session workshop offers tips to help 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 active duty, retiring and separating military personnel, and their families. ♣

Happy 111th Birthday to the Chief Petty Officers!

The Chief Petty Officer community will celebrate their 111th birthday April 1. The Chief Petty Officer grade was established April 1, 1893. At first, only nine ratings included chiefs. The grades of senior chief



petty officer and master chief petty officer were not established until 1958.

Steroid Use Helps Treat Certain Diseases, But May Impact Health When Used for Muscle Building

Submitted by HMI (FMF) Eduardo Ortiz, NMCP Drug and Alcohol Program Advisor

Steroids (Anabolic-Androgenic)

Anabolic-androgenic steroids are man-made substances related to male sex hormones. “Anabolic” refers to muscle building, and “androgenic” refers to increased masculine characteristics. “Steroids” refers to the class of drugs. These drugs are available legally only by prescription, to treat conditions that occur when the body produces abnormally low amounts of testosterone, such as delayed puberty and some types of impotence. They are also used to treat body wasting in patients with AIDS and other diseases that result in loss of lean muscle mass. Abuse of anabolic steroids, however, can lead to serious health problems, some irreversible.

Today, athletes and others abuse anabolic steroids to enhance performance and also to improve physical appearance. Anabolic steroids are taken orally or injected, typically in cycles of weeks or months (referred to as “cycling”), rather than continuously. Cycling involves taking multiple doses of steroids over a specific period of time, stopping for a period, and starting again. In addition, users often combine several different types of steroids to maximize their effectiveness while minimizing negative effects (referred to as “stacking”).

Health Hazards

The major side effects from abusing anabolic steroids can include liver tumors and cancer, jaundice, fluid retention, high blood pressure, increases in LDL (bad cholesterol), and decreases in HDL (good cholesterol). Other side effects include kidney tumors, severe acne, and trembling. In addition some gender

specific side effects:

-For Men- Shrinking of the testicles, reduced sperm count, infertility, baldness, development of breasts, increased risk for prostate cancer.

-For Women- Growth of facial hair, male pattern baldness, changes in or cessation of the menstrual cycle, enlargement of the clitoris, deepened voice.

-For Adolescents- Growth halted prematurely through premature skeletal maturation and accelerated puberty changes. This means that adolescents risk

remaining short the remainder of their lives if they take anabolic steroids before the typical adolescent growth spurt. In addition, people who inject anabolic steroids run the added risk of contracting or transmitting HIV/AIDS or hepatitis, which causes damage to the liver.

Scientific research also shows that aggression and other psychiatric side effects may result from abuse of anabolic steroids. Many users report that extreme mood swings also can occur,



including manic-like symptoms leading to violence. Depression often is seen when the drugs are stopped and may contribute to dependence on anabolic steroids. Researchers report also that users may suffer from paranoid jealousy, extreme irritability, delusions, and impaired judgment stemming from feelings of invincibility.

Research also indicates that some users might turn to other drugs to alleviate some of the negative effects of anabolic steroids. For example, a study of 227 men admitted in 1999 to a private treatment center for dependence on heroin or other opioids found that 9.3 percent had abused anabolic steroids before trying any other illicit drug. Of these 9.3 percent, 86 percent first used opioids to counteract insomnia and irritability resulting from the anabolic steroids. †

Navy and Marine Corps Relief Annual Fund Drive Begins, Continues Celebration of 100 Years of Service

By JOI Rebecca A. Perron

The time for the Annual Navy Marine-Corps Relief Society Fund Drive is upon us. This year's fund drive is significant because the Society is celebrating 100 years of service this year. Naval Medical Center Portsmouth's drive started March 1 and will run through the end of the month. The ceremonial first check will be presented at a later time on the Fleet Headquarters compound.

The Navy-Marine Corps Relief Society helps with unexpected expenses, such as funerals, medical and dental bills, emergency transportation, disaster relief and car repairs. Sailors and Marines can contribute to the Society through cash donations or through

monthly allotments. A service member's donation may ultimately benefit them and their dependents in times of need.

Over the past century, the Society has provided more than \$1 billion in grants and no-interest loans to Sailors and Marines, eligible family members and survivors, who were in need. In Hampton Roads alone last year, \$1.6 million was raised, and \$4.5 million was dispersed by the Society through no-interest loans and grants.

The Society handled more than 50,000 individual counseling and referral cases, and distributed 9,000 layettes to parents of newborns. Their visiting nurses made more

than 35,000 patient visits.

The Society also provides college scholarships, no-interest loans and tuition aid for eligible family members. Thrift Shops run by the Society provide used household items at extremely low cost. "Helping us take care of our own" has been the hallmark of the Society since 1904.

For additional information, watch the NMCRS video on the NMC Portsmouth Web Page, visit www.nmc.rs.org or contact your departmental key person.

NMC Portsmouth coordinators for the fund drive are Lt. Bernard McDonald (314-6790) and HMC(SW) Rodney Granlund (953-0241). ♣



Photo by Lt. Jacky Fisher

Rear Adm. Thomas K. Burkhard, MC, commander, Naval Medical Center Portsmouth, seated center, receives his pledge form on the opening day of the annual fund drive during the February/March 2004 - The Courier

Executive Steering Committee meeting March 1. Pat Fulgham, director of NMC Portsmouth's chapter of the Navy-Marine Corps Relief Society, seated right, was present for the kick-off.

ICU Nurses Get a Taste of Winter During Polar Plunge

By JO1 Sarah Langdon

Every year, many residents of Hampton Roads, military and civilian alike, take part in the Polar Plunge, a positively chilling event dedicated to raising money for the Special Olympics. This year, several Intensive Care Unit (ICU) nurses from Naval Medical Center

of the Coast Guard, as well as Larson's 8 year-old son, Lucas, to hit the waves.

"I had a lot more people say they were going to come, but in the end, they chickened out," Zalar explained. "The temperature was 37 degrees that day, and there were

"We actually went in two times and tried to go out and shake the hands of the safety guys — they were out a bit deeper to make sure everyone stayed safe, but it was too deep for my son," he added.

Despite the cold, Zalar said the plunge was worth it.

"It was definitely a good time," he said. "The sand was cold, the wind cut through you, but it was a lot of fun. There were games, live bands and a lot of fun events."

Zalar and his group raised more than \$800 for the Special Olympics by participating in the Polar Plunge.

"You have to raise a minimum of \$50 to participate," Zalar explained. "I basically raised my share by walking around the ICU. Some of the other nurses went to other wards, such as the PICU (Pediatric Intensive Care Unit)."

Zalar said he definitely plans on participating again next year.

"I can guarantee we will do it again next year, and I'm sure even more people will get involved. This is a great opportunity to get involved and raise money for a noble cause." ♣



Photo provided by Lt. John Zalar

Portsmouth joined the throes of brave souls willing to take a dip in the ocean during the annual winter ritual, which took place Feb. 7.

"I did this two years ago and had a great time," said Lt. John Zalar, an ICU nurse who initiated the ICU nurses' participation. "You have to raise a minimum of \$50. Basically, people donate money for you to run into the ocean."

For this year's event, Zalar recruited four staff members; Lt. Ben Kershner, Lt. Shawn Beckman, Lt. Jessica Pipkin and Lt. Charlene Crandall from NMC Portsmouth's ICU, two of his neighbors, Lt. John Hennigan and Lt. Jim Larson, both

about 2,000 plungers participating. The water was so cold that when you came out (of the water), the air felt like 100 degrees.



Photo provided by Lt. John Zalar

NMCP Celebrates Black History Month with Dance Competition in Gym, History Skit at Local School



Photo by JO1 Sarah Langdon

Left: Partnership in Education Program (PEP) members, Lt. Cmdr. Cassandra Darden, left, of the Legal Department, and HM1 Lucrecha Calleance, of the Neurology Clinic, performed a skit Feb. 20 for 54 second-graders at the Parkview Elementary School in Portsmouth in honor of Black History Month. Calleance played "Oprey Winfrey" who interviewed Harriet Tubman, played by Darden, about her life and participation in the Underground Railroad.

Below Left: In honor of Black History Month and Healthy Heart Month, Dee Hunt, command fitness trainer, organized a "You Got Served" dance/aerobics combination competition. Team G&J and Team Cookies-N-Cream squared off Feb. 25 after several weeks of training and practice taught by Hunt.

Team G&J, pictured right, (DT3 Sofeji Gandony, left, and DT3(SW/AW) Lewis Jones, both of Dental), beat Team Cookies-N-Cream, pictured below right, (from left: Vicki Eason, Customer Service Desk; HN Kelli Taylor, Inpatient Ward 4F; and CS3 Melissa Patchell, Barracks), for the prize of nylon windbreakers provided by MWR. About 40 staff members watched the competition.

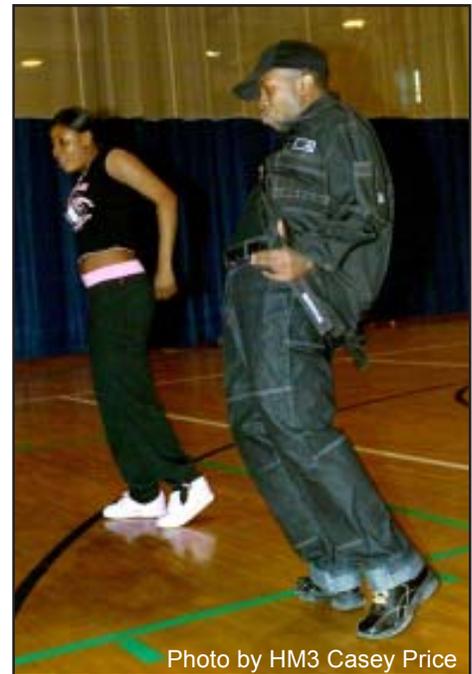


Photo by HM3 Casey Price



Photo by HM3 Casey Price



Photo by HM3 Casey Price

Fisher House: Truly a Home Away from Home

Story and photos by JO1 Sarah Langdon

Naval Medical Center Portsmouth is the business of providing outstanding medical care to all of its active duty service members, their dependants and retirees both in and outside the Hampton Roads region. Many people would say that the surgical services, nursing wards and long term care units provided here are some of the best in the military. In addition to its services, the medical center also maintains a Fisher House.

There are currently 32 Fisher Houses, which are located at every major military medical center and several veterans' hospitals around the world. Fisher Houses provide a place to stay, for active duty service members and their families during times of extended medical care. The houses are located on board medical facility compounds and keep the service member close to medical care and the visiting family members close to the active duty member receiving care.

"The Fisher House at NMC Portsmouth opened in June 1995 and has been a haven for over 1,500 family and service members since then," said Loretta Loveless, housing manager for the Fisher House. "It houses up to seven families at a time and relies completely on donations to keep it running."

To stay at the Fisher House, Loveless said, the guest must meet three criteria.

"First of all, guests must live outside a 50 mile radius," explained Loveless. "They must be staying a minimum of three nights and they have to be an active duty patient or a family member of an active duty member. We also look at need. If we only have one room and the patient of one of the families is in ICU and the patient of the other family is less serious, the room is

going to go to the family of the ICU patient.

"Also," Loveless continued, "you can't make a reservation. It's first come first serve, even out of CONUS (continental U.S.) We don't know who's going to be here or who's going to need it so we can't reserve rooms."

According to MSCM(SW) Steven L. Kruse, senior enlisted leader, Nutrition and Staff Support, patients and their families can be referred to the Fisher House by the officer of the deck as well as other staff throughout the hospital.

"If someone at the nursing station on one of the wards sees someone they think is in need, they can refer them to the Fisher House," he explained. "The most important thing is that they make sure they (the member or family) is qualified first. The criteria will soon be posted on the Internet so staff can check to see if someone is eligible. The rules of the Fisher House, appropriate contacts etc., will be available as well.

Guests who stay at the Fisher House will find every effort has been made to make the house as comfortable as possible. Everything in the house has been

donated and many groups pitch in from time to time to make things a bit easier for the families staying there.

There is a communal dining room with several tables for families to eat at, and high chairs and booster seats are available. A large kitchen is available with a double refrigerator/freezer and most, if not all, the

amenities and appliances of home. Guests need to purchase their own food for the most part, but there is a communal cupboard of donated food such as soups and snacks. Each room is assigned one kitchen cupboard that can lock if necessary.

Continued on Next Page



Fisher House Features Private Rooms, Many Amenities

Continued from Previous Page

"Members of the Officer's Wives Club cook a meal every other Tuesday and bring it by," Loveless said. "The wife of Capt. (Roger) Hirsh brings food for the families as well. She just cooks up a big meal every so often and drops it off."

The Fisher House also features private rooms and bathrooms. Each bedroom, whether it contains twin beds or a full size bed, has a 27 inch television, a telephone, alarm clock and linens. The living room also has a 27 inch TV, as well as a VCR/DVD player, gas fireplace, hundreds of books and movies, and plenty of toys for the occasional little guest. Guests also have access to two online computers.

Kruse said he credits Loveless with much of the success of the Fisher House because she takes personal care of everyone who comes through.

"Loretta is a shoulder to cry on for anyone who needs it," Kruse said. "Sometimes the outcome looks bad. She offers support and

listens to them and helps them get through it. She also ferries them around, whether it's to the commissary or the ICU."

"I try to help them go around and kind of act as the social coordinator," Loveless explained. "If they need a break I can give them a good restaurant, tell them where the malls are and how to get to the children's museum in Portsmouth."

Loretta is assisted by Candace Edwards, operational assistant. Edwards helps maintain the house and does the majority of the cleaning. She also helps ferry patients and their families around as needed.

Organizations such as the Chief Petty Officer Association, Junior Enlisted Association and First Class Association also contribute services and make various donations to the house. Currently, the JEA and FCPOA are taking turns cleaning the house at the end of the week.

"We really want to increase support and awareness of the Fisher House," said Cmdr. Karen Al-Koshnaw, department head for

between hotels off-base and the hospital. They don't have deal with traffic and they are safe.

"Donations are a wonderful benefit to these families," she added. "It's nice for the families to have the some of the amenities they have at home to keep them occupied. Having some of these items helps decrease their level of stress by keeping them occupied. It's nice for them to have something to do while they are going through such an uncomfortable situation."

Anyone wishing to donate to the NMC Portsmouth Fisher House is encouraged to call Loretta Loveless at 639-6211 between 8 a.m. and 8 p.m. Additional information on the Fisher House will be available in the near future on the NMC Portsmouth website, <http://www-nmcp.med.navy.mil>. 

Fisher House Wish List

If you would like to donate to the Fisher House, Loretta Loveless, Fisher House housing manager, has compiled the following list of items which would greatly be appreciated:

- Non-Perishable Food*
- Phone Cards*
- Money*
- Restaurant Gift Certificates*
- Movie/Sporting/Etc. Gift Certificates*
- Grocery Store/Gas Station Gift Cert.*
- Detergent/Bleach/Softener*
- Cooked Lunches or Dinners*
- Postal Stamps*
- DVD/VCR for each room (7)*
- Wall-Mounted Hair Dryers*
- Camcorder*
- Van for Transportation*
- 35mm Film*
- Water Sprinkler System*
- Back Storm Door*
- Glide Rockers (Cherry Wood-7)*



Nutrition and Staff Support. "I think it's really important that families are close to the patient and that they don't have to go back and forth

Visit from Fido Gives Patients Reason to Smile

Story and photos by JOI Rebecca A. Perron

Muki walked down the main hallway of Naval Medical Center Portsmouth with a bit of curiosity in her gait. She looked left, pausing briefly to sniff the shoes of a passing patient, then continued to the waiting room of the Hand Clinic. The three-year-old fawn pug stopped short of the carpet and waited for her escort to allow her to walk inside.

“Would any of the children like to see the pet therapy dog?” asked HM2(SW) Jazmin L. Davis, a neuropsychiatric technician from Biopsychosocial Services. “Is any one allergic to dogs?”

“It’s the ‘Men in Black’ dog,” joked one of the patients in the waiting room. Several children came over to pet Muki, including one who had been crying in his mother’s lap.

Muki’s visit is part of the Pet Therapy program run by Davis.

Once a week, a staff member brings in a dog for Davis to take to various clinics and wards in the hospital for the special visit.

Throughout Muki’s visit, patients and staff smiled at the dog as she passed by, often asking why she was in the hospital, giving her a pat on the head and wanting to know what kind of dog she is.

“We have been doing this program since ’99,” explained Davis, “but on a limited basis. I took over the program in January, and this is my third week to take a dog around. I hope to expand the program to two days a week and be able to take the dogs to more clinics and wards than where we visit now. I would also like to visit staff, giving them a break in their day.”

Davis said he loves the satisfaction of seeing people’s face light

up and making people happy.

“I want to increase patient’s morale and alleviate their anxiety before being seen by the doctor. It’s a wonderful feeling to help brighten their spirits.”

Staff members like Muki’s owner, HM2

Christine J. Semens, the leading petty officer of the Ultrasound Clinic, get involved in the program as a means of helping the command and the patients and giving their dog something fun to do.

“Muki loves people,” said Semens. “I thought she would love being around the patients and the kids, and that they would love her. I have another dog, and when Muki came home that day, it was like she was saying, ‘I got to go somewhere and you didn’t. Ha ha.’”

Davis’ current route includes the Emergency Room, clinics on the first and second floor where children are in the waiting room, the Pediatrics Ward and the Inpatient Psychiatric Ward, which is the last stop. During this last visit, Davis lets the dog off the leash so patient and canine can interact.

“This dog is a good dog,” said Davis. “She mingles with the patients. Some dogs will lie down and go to sleep. But she came in my office for a drink, and then went back out to play.”

Davis specializes in behavioral care for patients who have mental and behavioral health issues.

“Some of these patients are low functioning, and experience panic attacks or low self-esteem,” explained Davis. “Pet therapy gives these patient a break. The visit becomes a stress reliever and gives them a sense of security.

The dog helps take away from their problems, sometimes even

Continued on Next Page



Food Service Officer Named MSC of the Year

By JOI Sarah Langdon

The Naval Medical Center Portsmouth Medical Service Corps Officer of the Year for 2003 doesn't work in a clinic. He doesn't oversee patient records or handle decedent affairs. But he provides a valuable service to patients, guests and staff at NMC Portsmouth ... he feeds them breakfast, lunch and dinner.

Lt. Bradley J. Karovic, R.D., is the food service officer (FSO) and barracks manager for NMC Portsmouth. He is in charge of all food services for the medical center and supervises two bachelor-housing units, which hold 522 beds.

"Our number one priority is feeding the inpatients, whether their diet is regular or therapeutic," said the Cortland, Ohio, native. "We serve around 12,000 meals for inpatients per month and serve around 23,000 to 25,000 galley meals a month. We have an open mess so we serve anybody who can get on base and has \$3.30. Basically, we feed the base."

As the Bachelor Housing Division division officer, Karovic oversees 14 staff and holds overall responsibility for all furnishing and supplies at the barracks.

"I've only had bachelor housing for about five months," Karovic said. "But we provide accommodations for the Sailors who opt to live in base housing

and try to provide them the nicest facilities within budgetary constraints."

According to Karovic, much of his job is planning and re-working the menu, coming up with new products and ideas on how to save money, and performing daily damage control.

"I spend a lot of time putting out fires," he said. "Every day is not the same in food service. We're always figuring out how to handle a given situation. My day ends up being at least nine to ten hours, and I take a lot of my work home.

"I spend a lot of time trying to come up with new ideas after hours," he continued. "I go to restaurants and look at their set up and the way they do things. As a food service officer, you're always thinking of what to do next."

Although he is a registered dietician, Karovic said he prefers working as an FSO because he enjoys seeing a tangible measure of progress.

"The best thing about food service is that it is all about production," he explained. "At the end of the week, you can literally assess, 'are you making progress?' And you can measure your success. For

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Pet Therapy Relieves Tension

Continued from Previous Page

helping a therapy group interact with each other when they haven't wanted to open up to that point. They have something to talk about, and it brings the group together."

Dogs must be screened at the Veterinary Clinic located at Norfolk Naval Station. Each dog must be friendly and pass the temperament test at the vet's office to be certified to participate in the program. Dogs must be certified before being brought to the hospital. Staff members interested in participating in this program may contact HM2 Davis at 953-4928 for more information. ▼

Nineteen-month-old Thomas Whittinghill, son of Lt. Craig and Wendy Whittinghill, was in the hospital visiting his new sister, Aubrey Isabel, when he stopped to pet Muki in the passageway.

Historically Speaking: The Norfolk Fire of 1931

By Al Cutchin, Command Historian

Since the beginning of American history, Norfolk, Virginia has been known as the Home of the Navy. This kinship has grown through the centuries and has evolved into a special tie that bonds the Tidewater communities with the seafaring service. The Navy has always shown its appreciation to the area by becoming involved in many civic projects, providing manpower and material to be used for improving the quality of life for local citizens. This outpouring of generosity by the Navy is not just restricted to times of normalcy, but also when the community faces disasters that threaten lives and property damage.

One such incident took place Sunday afternoon, June 7, 1931. The normally busy downtown Norfolk was idle and quiet. Only a few tranquil hours of the weekend remained before the city would once again come alive with its normal commercial activities. Suddenly, at 5:30 p.m., the peaceful afternoon was shattered by a tremendous explosion that rocked the city and could be felt for miles. A fuel barge docked at the foot of Church Street ignited, sending flames onto the adjacent pier. Soon, the flames spread quickly from one wooden pier and warehouse to the other until the entire Old Dominion terminals became engulfed. A 24-mph. wind intensified the inferno and soon most of the wooden structures along the Norfolk waterfront were ablaze. The fire threatened to destroy the entire downtown area.

Merchant seaman, with their seabags on their shoulders, fled boarding houses. Businessmen and residents were evacuating with everything they could carry by whatever means they could find to make the desperate salvage attempt.

By now the fire was out of control and distress calls were sent out for all possible help. Fire units from Portsmouth, Suffolk, Hampton, South Norfolk, Craddock, the Navy Yard, the Naval Base, and units as far away as Hampton and Elizabeth City, North Carolina responded. Ferry boats suspended their routine scheduled runs and lay in wait at the foot of High Street in Portsmouth with their engines running, eager to transport the out of town units to the fire scene.

Large crowds lined the shore along the Elizabeth River. Many of these spectators took their vantage places on *Hospital Point*. Soon, an estimated 50,000

people gathered to watch as the city burned. Norfolk police were overwhelmed by a mob that threatened to take unscrupulous advantage of the situation. To assist in the crowd control, a detachment of 150 Marines from the Navy Yard Marine Barracks, with fixed bayonets, was sent to guard the streets. More than 500 Sailors from *USS Arizona (BB-39)*, *USS Utah (BB-31)* and the Naval Base jumped in to volunteer to fight the stubborn blaze. Many of these Sailors were on liberty and clad in dress whites when the explosion occurred. Their only concern was fear of reprimands from their superior officers for being late in returning to duty. By now the fire began to take their toll on the firefighting personnel. Most of the injured suffered from smoke inhalation or minor burns. Norfolk's St. Vincents Hospital received most of these patients for treatment.

Captain James S. Woodward, commanding officer of the *Portsmouth Naval Hospital*, ordered a hospital ship to stand by in case additional medical assistance would be required. He also ordered six ambulances with physicians to the scene.

As night began to fall, a bright orange glow hovered over the Norfolk skyline and could be seen as far away as Deep Creek. Firefighting methods by conventional means appeared to be futile and serious thought by officials was given to the use of dynamite to help bring the blaze under control. At 11 p.m., just as all efforts to save the city appeared to be in vain, conditions quickly turned for the best. Maliciously, the wind that hampered firefighting efforts suddenly diminished and the heavens opened up with a heavy rain that began to inundate the fire. By midnight the inferno was finally under complete control.

Once the fire was out, the combined efforts of the civilian and military community continued as the volunteers worked together during clean up operations. The fire caused more than \$1 million in property damage as it consumed seven square business blocks. Seventy-five fire companies pumped more than three million gallons of water on the blaze. Fortunately, there were no fire-related deaths, however, forty men were injured: twenty-three of them severely enough to be admitted to hospitals. *The Portsmouth Naval Hos-*
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Norfolk Fire

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pital shared with St. Vincents Hospital in providing medical treatment to those brave men who risked their lives fighting the great Norfolk fire.

On June 16, the Council of The City of Norfolk approved a Certificate of Resolution to be presented to the *Portsmouth Naval Hospital*, in grateful appreciation for the sympathetic response and valuable assistance to the emergency call. The Resolution was signed by the members of the city council and accepted by *Captain Woodward*.

The fact that a catastrophe of this magnitude did not cause more damage nor cost a single human life was due largely to the spontaneous and determined efforts of the Navy and civilian personnel working together in the spirit of community.

Apparently, the City of Norfolk presented Certificates of Resolutions to other commands and units as well. A similar Resolution presented to USS Arizona can be found at the Portsmouth Naval Ship Yard Museum, located at the foot of High Street.

It is interesting to note that 10 years and six months to the day after the great fire of Norfolk, USS Arizona and USS Utah would become victims of the attack on Pearl Harbor by Japan, Dec. 7, 1941. Today, their rusting hulks serve as a memorial and tomb for those brave Sailors who perished on that day, "A date that will live in infamy."

The Hospital's Resolution is now on display and can be seen in the Crews Library located on the fourth floor of Building One.

Karovic Credits His Staff for His Success

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example, the Black Heritage Meal. This year we broke our own record for meals. Last year, we served 962 meals, but it felt like we did so much more because it was chaotic. This time around, we served 1,166, but it felt like 800 because things went so smoothly. It's nice to be able to measure your progress like that."

Another aspect of the job Karovic said he enjoys is the in-

teraction with his staff, a total of 125 culinary specialists (CSs), civilian employees and contractors. "I get a kick out of interacting with the CSs, especially the E-2s, 25 year-olds, etc," he said. "These guys and girls come in here, and I love to see where they are from. We have people here from Louisiana, Texas, Florida and Georgia. I get a real kick out of talking with them every day, and I try to mentor them and keep them involved. "I try to sit in on all counseling, whether it's positive or negative, and I'm heavily involved in their evaluations," Karovic continued. "I like to take time to get involved in what they are learning and any other issues, whether its personal, legal, social – you name it. I believe as a manager and a leader, you just don't stick your head in every once in awhile. You learn your workforce and put those people in key positions that will train them."



Photo by JO1 Sarah Langdon

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According to Karovic, one of the reasons for his current success is the involvement of his right hand man, MSCM(SW) Stephen Kruse, senior enlisted leader for Nutrition and Staff Support.

"I have a very good rapport with Master Chief Kruse, and there is no way I would have gotten this award without his support," Karovic explained. "He's a great person, and he is awesome administratively and makes it possible for me to get out on

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Bravo Zulu!!!

Meritorious Service Medal

Capt. Catherine A. Wilson
Cmdr. Karen L. Salomon
Cmdr. Mark S. Sorin

Navy And Marine Corps Commendation Medals

Capt. John Dewalt
Cmdr. Karen Dizenzo
Cmdr. Brian M. Gilfeather
Lt. Cmdr. David W. Carlton
Lt. Cmdr. Rebecca Hernandez
Lt. Cmdr. Alberto A. Rullan
Lt. Cmdr. Pamela A. Schwartz
Lt. Linda C. Dunn
Lt. Maria T. Gamoboa
Lt. Jose Henao
Lt. Shannon R. Muehe
Lt. Kimberly D. Roquemore
HMCS(SW) Gerald S. McNeil
HMC(SW) Mark R. Fullerton
HMC(SW/AW) William D.
Nicely
HMC Cheri R. Snaza
HM1(AW/NAC/FMF) Loren H.
McAllister
HM1 Laurie J. Monteiro

Navy And Marine Corps Achievement Medals

Lt. Cmdr. Terry M. Anderson
Lt. Cmdr. Jeanne M. Busch
Lt. Cmdr. David R. Clark
Lt. Cmdr. Christopher J. Hogan
Lt. Marnie S. Buchanan
Lt. Santiago B. Camano
Lt. Gabriele E. Tsung
Ens. Susan A. O'Connors
HM1 Edwin E. Labra
HM1(SW/AW) Eric D. Tatum
HM2 Katherine D. Aguilar
HM2 Jay D. Carson
SK2(SW) Christopher L.
Henderson
GM2(SW) Theodore W. Lang
HM2 Oscar Luna
HM2 Rosalyn M. Malixi
BM2 Patrick L. McGill
HM2 Thomas A. Neumann
YN2 Wallace V. Powell
HM2 Benjamin C. Silk
HM2(SW/AW/FM) Steven A.
Starr
BM2 Ina M. Young
SH3 Jason E. Cole

DN Derrick L. Stancil

Army Achievement Medal

Lt. Jose Henao

Letters of Commendation

HM3(FMF) Bradley A. Dudding
HM3(SW) Roberto J. Enes
HM3 Daniel Gibbons
HM3 Matthew C. Ostrander
HN Passion L. Brown
HN Japheth R. Tillman

Navy Meritorious Civilian Service Award

Cecilia Brown
Victoria B. Garner
Marsha Henegar
Libradi Ilamni
Batrina Martin
Timothy McNeill
Linda Turnage
Ida G. Whitt

Command Coin

Cmdr. Ted Schafer
Susan L. Bohlander

Navy Flyer Set Karovic on Road to Becoming Navy Dietician, FSO

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the floor. We sit around and brainstorm and try to come up with cost-saving initiatives. He is a great asset to the job, and I wouldn't be where I am without him."

After graduating from Bowling Green University, Bowling Green, Ohio, in 1994, Karovic received a flyer in the mail offering a Navy dietician program, which set him on the path to becoming a food service officer. Karovic, having recently graduated with a B.S. in Dietetics, saw an opportunity to further his training and do something different. After finishing a Navy-sponsored nine-month internship at St. Francis Medical Clinic, Peoria, Ill., 1994 to 1995, Karovic headed to his first duty station.

Karovic worked as a dietician at Naval Medical Center Bethesda, Bethesda, Md., from 1995 to 1998 and at the Okinawa Naval Hospital, Okinawa, Japan,

from 1998-2000. From there he went on to pursue a master's degree in Hospitality Management from Florida International University, Miami, Fla., until 2002.

As for receiving recognition as MSC of the Year, Karovic said it is all due to the support he gets from the Nutrition Department, his colleagues and staff.

"I have to give the credit to Cmdr. (Karen) Al-Koshnaw, because she gives me the latitude to come up with ideas, and she does a great job of tweaking them," Karovic said. "There is a real team effort down here, and I couldn't have done it with the galley team. I have to thank the CSs that are putting in 110-hour pay periods for their hard work and efforts."

"Lt. Karovic's mentorship and guidance to the personnel in his divisions has inspired the department as a whole to excel," Kruse said. ▼