



Naval School of the Health Sciences Changes Command

By JO1 Rebecca A. Perron

Clear blue skies and a warm spring day co-starred as Capt. Charles B. Mount, Nurse Corps, handed command of Naval School of Health Sciences Portsmouth to Capt. Brad L. Bennett, Medical Service Corps, during the change of command ceremony held June 2.

Following the change of command, Mount was honored in a retirement ceremony for his more than 38 years of naval service. Mount began his career as a hospital corpsman, achieving the rank of HM1, before being selected for the Navy Enlisted Education Program for Nurse Corps Officers. Mount was commissioned an ensign in 1974 after graduating from the University of Washington in Seattle.

During the ceremony, Rear Adm. Nancy J. Lescavage, senior health care executive, commander, Naval Medical Education and Training Command, spoke about Mount's accomplishments during his distinguished career. *Continued on Page 10*



Photo by JO1 Rebecca A. Perron

Capt. Charles B. Mount receives the Legion of Merit from Rear Adm. Nancy J. Lescavage, senior health care executive, Naval Medical Education and Training, for his more than 38 years of naval service.

TRICARE Hampton Roads Began July 1 as Part of New Region

By Deborah Kallgren, NMC Portsmouth Public Affairs Officer

July 1 marked the startup of TRICARE Hampton Roads, as TRICARE Mid Atlantic Region 2 is absorbed into the new, larger TRICARE North Region. Because of new health care contracts and the military's desire to make a good benefit better, TRICARE benefits will be more localized in some aspects, while more regionalized in others to lessen red tape.



TRICARE Hampton Roads encompasses the Military Treatment Facilities of Naval Medical Center Portsmouth and its clinics, 1st Medical Group (1MDG) at Langley Air Force Base, McDonald Army Community Hospital at Fort Eustis, and Kenner Army Health Clinic at Fort Lee.

To make an appointment, beneficiaries should call the new TRICARE Hampton Roads appointment number, (866) MIL-HLTH. If TRICARE information is needed, beneficiaries should call (877) TRICARE.

TRICARE Becomes More Regional

The Hampton Roads geographic area used to be part of TRICARE Mid-Atlantic which comprised

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Capt. Nathan Says Goodbye to Command during June 18 Picnic

Photos by JO1 Rebecca A. Perron

Right: During his going-away picnic held June 18 on Hospital Point, Capt. Matthew Nathan, deputy commander, told one of his infamous stories about how he accidentally swallowed a lemon about 20 years ago and had it removed in an emergency room. Nathan transfers July 16 after three years at NMC Portsmouth and will assume command of Naval Hospital Pensacola in Florida.



Right: Nathan shows off his farewell gift from the Oakleaf Club, an Oakleaf Club mug, presented to him by Susan Burkhard.



Above: Rear Adm. Thomas K. Burkhard, commander, NMC Portsmouth, second from right, and his aide, Cmdr. Dave Collins, present a skyline portrait to Nathan, his wife, Cmdr. Tammy Nathan and daughter, Bobbi, right. Also pictured is Collins' daughter, Brenna, standing to the left of Bobbi Nathan.



Left: Capt. Roberto Quiñones, director for Administration, talks about Nathan's tenure as deputy commander, while Nathan and his wife and daughter listen to the remarks. Collins and his daughter are standing with Nathan's family.

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, Deborah Kallgren, at drkallgren@mar.med.navy.mil. Submissions should be on 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 next issue space permitting. PAO is located in Building One, Third Deck, Rm. 311.

NMCRS Fund Drive Ends with Luncheon, Check Presentation

Photos by JO1 Rebecca A. Perron



Left: Rear Adm. Thomas K. Burkhard, commander, Naval Medical Center Portsmouth, and chairman, 2004 Active Duty Fund Drive, right, presents a ceremonial check for almost \$1.7 million to Rear Adm. Steve Turcotte, commander, Navy Region Mid Atlantic, and chairman of the NMCRS Norfolk Advisory Board, left, and retired Marine Lt. Col. Ed McCann, director of the Norfolk NMCRS office, during a luncheon hosted at the Town Point Club in downtown Norfolk June 4 to thank the drive's staff and sub-area coordinators.

Right: McCann presents the NMCRS National Headquarters Distinguished Service Award to Burkhard. The drive raised almost \$1.7 million for the society, reaching 105 percent of the goal, and surpassing last year's collection by more than \$82,000.



Left: Staff and sub-area coordinators of the 2004 Navy Marine Corps Relief Society Annual Fund Drive who attended the luncheon held June 4 in their honor pose with McCann, left, while holding the ceremonial check. The regional effort raised almost \$1.7 million dollars.

Right: Burkhard, right, and McCann, center right, present plaques to Quiñones, left, and Lt. Bradley Karovic, food service officer for the dining facility and NMCRS regional treasurer, for their participation in the annual drive. They also received a Navy Achievement Medal and Letter of Appreciation from Burkhard.



Navy Marine Corps Relief Society Centennial Quilt Visits NMC Portsmouth

Story and photos by JO1 Rebecca A. Perron

The Navy Marine Corps Relief Society (NMCRS) centennial quilt, titled "A World Wide Tribute," arrived at Naval Medical Center Portsmouth June 7 for display at the hospital. The quilt is making the rounds to all 54 NMCRS offices for show at their base. The quilt was displayed in the Podiatry Clinic/Health Benefits Office waiting room window across from the Pharmacy on the second floor of the Charette Health Care Center.

The quilt is composed of decorative squares handmade by each NMCRS office. In the spring of 2003, the NMCRS headquarters office in Washington, D.C., sent each office a seven-by-seven-inch piece of white fabric to serve as the background for the design. Various design elements were used, including machine satin stitching, cross-stitching, chain stitching, fabric, patches, paint and embroidery. The NMC Portsmouth office used a patch of an American flag and an anchor and embroidered Building One onto the white square, with the word Portsmouth and the year 1905, when the office opened, at the bottom.

Squares were returned to the headquarters office during the summer so the quilt could be assembled. Headquarters sent the squares to the NMCRS office at Marine Corps Air Ground Combat Center, Twentynine Palms, Calif., where three volunteers assembled the backing, sashing and squares through hand quilting.

In the center of the quilt is the new NMCRS logo. Headquarters held a logo contest, in which offices could submit their suggestions for the new design. A panel in D.C. selected six finalists, and then the volunteers of every NMCRS office voted to determine the winner. The Miramar Marine Corps Air Station, San Diego, Calif., office designed the winning logo.

Cherry Point Marine Corps Air Station in North Carolina displayed the quilt the week before NMC Portsmouth. After display at the medical center, the quilt was sent to Oceana Naval Air Station for display there. ♣



The square representing Naval Medical Center Portsmouth consists of a patch of an American Flag and anchor over an embroidery of Building One. Under the building is the word Portsmouth and the year 1905, which is when the office was established.



The square in the center of the quilt depicts the new Navy-Marine Corps Relief Society logo.



Susan Burkhard, honorary chairman of volunteers, left, Patricia Fulgham, director, center and Yvonne Potts, budgeting for baby chairman, all of the Naval Medical Center Portsmouth Navy-Marine Corps Relief Society Office, pose with the quilt shortly after it was placed on display in the Podiatry Clinic/Health Benefits Office waiting room window. The quilt is accompanied by a display stand and white gloves so skin oils do not collect on the quilt when handled during set up and disassembly. The quilt was on display from June 7 to June 10.

Three TRICARE Regions Vice 12 Reduce Reimbursement Claims

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North Carolina and Virginia (excluding Northern Virginia). Its health care support contractor was Humana Military Healthcare Services.

On July 1, 2004, TRICARE Mid-Atlantic, TRICARE Northeast and TRICARE Heartland will merge into one mega-region called TRICARE North. Its headquarters is in the Washington, D.C., area and its contractor is HealthNet Federal Services. As TRICARE Hampton Roads is within the larger North region, it will be easier for beneficiaries to get health care when they are away from home.

That is because previously, there were 12 TRICARE regions throughout the continental United States. Now, the U.S. is divided into three TRICARE regions served by three contracts rather than 12. If a TRICARE beneficiary travelled outside his or her home TRICARE region and needed medical care, there were multiple portability issues.

In other words, if the beneficiary traveled outside of Virginia and North Carolina, he or she may have had to pay out of pocket for medical care and filed for reimbursement, rather than having no out-of-pocket expenses here at home.

Now with the larger TRICARE North Region, if beneficiaries travel from Norfolk to, say, New York, they will still be in the TRICARE North region and covered by the same contractor. If they need medical care out of town and see a TRICARE network provider, they will not have to pay the bill out of pocket as was the case under the old contract. However, if

beneficiaries travel to the new South or West region (which have different contractors) and need medical care, they will probably have to pay the bill out of pocket and file for reimbursement.

Changes Create a Better TRICARE

Apart from the new phone numbers and larger TRICARE regions, beneficiaries will continue to have the same great TRICARE benefit they have always had. All procedures for obtaining health care remain the same. Beneficiaries who have questions can call the information line at (877) TRICARE or log on to www.healthnetfederalservices.com.

TRICARE Service Centers

Beneficiaries can visit the TRICARE Service Center for assistance, too. The TSCs are located at Naval Medical Center Portsmouth; McDonald Army Community Hospital, Fort Eustis; and IMDG, 45 Pine Rd., Langley Air Force Base. ♣

*TRICARE MID-Atlantic is changing...
Starting July 1, 2004,
contact TRICARE Hampton Roads for
your military health care needs.*

*For appointments, call:
(866) MIL-HLTH*

*For TRICARE information, call:
(877) TRICARE*



Photo by JO1 Sarah Langdon

TRICARE Hampton Roads partners open the TRICARE Hampton Roads Appointment Center with a ribbon cutting held June 29 at the center. The center, located in Bldg. 215, has 85 customer service representatives answering the phones and has already demonstrated a significant drop in time it takes to speak with a customer service representative.

Pictured From Left: Orië Mullen, chief operating officer, Humana Military Healthcare Services; Army Col. Nadja Y. West, MC, commander, McDonald Army Community Hospital, Fort Eustis; Army Col. Betty J. Wiley, MSC, commander, Kenner Army Health Clinic, Fort Lee; Air Force Col. Deborah Bostock (representing Commander, 1st Medical Group), 1st Medical Operations Squadron Commander Langley Air Force Base; and Rear Adm. Thomas K. Burkhard, MC, commander, NMC Portsmouth.

14th Annual Clean the Base Event Helps to Improve Environment

Story and photos by JO1 Rebecca A. Perron

Naval Medical Center Portsmouth held its 14th Annual Clean the Base Day June 8, in conjunction with the 16th Annual Clean the Bay Day. Since 1990, about 200 volunteers have helped to collect almost 10 tons of trash every year from the 1.1 miles of shoreline along the base's border.

NMC Portsmouth is the largest contributor of clean up among the 12 Portsmouth zones. To help collect the amount of debris that accumulates along the shoreline, the Facilities Management Department begins clean up of large items days before the actual event.

"We use a backhoe to collect the large items too heavy for the volunteers to lift," explained Aubrey Ansell, environmental protection specialist. "We have removed items like telephone poles, tires and three-to-four hundred pound tree stumps."

The volunteers then pick up the smaller items, like soda cans and candy wrappers. According to Ansell, this annual event helps make people aware that trash and debris going into the sewer system end up in the Elizabeth River and Chesapeake Bay and then collects along the shoreline. The clean up helps improve the Chesapeake Bay watershed area, while showing Navy personnel's commitment to environmental stewardship. ♣



DT1 (SW) Dennis I. Ramilo of Dental picks up trash that collected in the rocks along the shoreline behind the pool.



Above: About 12 volunteers help clean the beach area in front of the Admiral's Quarters. Members of the Facilities Management Department drove trucks to the areas where the volunteers were picking up trash to collect the full bags. About 15 bags of trash were collected from this area, while many logs and branches that had washed ashore were also picked up and thrown into the truck. The volunteers endured 90-degree temperatures, and were kept hydrated with water from coolers provided for each area. The entire clean-up lasted about two hours.



CS1 Wilferd Olter, Bachelor Housing, right, and SK1 Michael Blum, Material Management Department, lift a log from the shoreline beyond the helo pad.



Left: HM3 Adrian Hicks of the Plans, Operations and Medical Intelligence Office (POMI), secures a bag of trash she collected while HMI Kymjamera Wells, also of POMI, readies another bag. They cleaned the area behind the pool.



Right: HMI Eduardo Ortiz, command drug and alcohol program advisor, cleans the shoreline in front of the Admiral's Quarters.



Left: HMI Milo M. Gonzaga, Cytology, uses a shovel to help break up the layer of trash and branches impacted into the ground to make the removal of the trash easier. Gonzaga worked with more than 30 other volunteers along the shoreline beyond the helo pad.

Healthwatch

By Jaime Farrar, Bureau of Medicine and Surgery Public Affairs

WASHINGTON - The vast majority of skin cancers are caused by the sun's ultraviolet rays, warns the American Cancer Society (ACS).

More than one million cases of skin cancer are reported each year, according to the ACS. A majority of these are sun-related. However, there are steps you can take to protect yourself and your skin.

Protecting yourself from the harmful effects of the sun is not difficult; simply wear protective clothing and a sunscreen suitable for your skin type each time you are exposed to the sun for an extended period of time.



Hail and Farewell



The Public Affairs Office staff wishes a fond farewell to Lt. Cmdr. Jacky Fisher, who transferred June 23, and is on her way to Naples, Italy.

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EMF Portsmouth Sets Standard for Fleet Hospitals

Story and photos by JO1 Daniel A. Bristol

Expeditionary Medical Facility Portsmouth, Kuwait — Back in the day when the United States was a mere 14 years old, the Commonwealth of Virginia erected the nation’s first marine hospital. It was the predecessor of Portsmouth Naval Hospital, and it started the cycle of innovative Naval Medicine and the medical facilities that continues today.

Navy Expeditionary Medical Facility Portsmouth, currently deployed to Kuwait, began constructing a new style of deployable medical units known as the BASE-X Expedition Shelter earlier this month. In doing so, EMF Portsmouth set the standard for fleet hospitals of the future.

“This is a big deal from a Navy perspective,” said Capt. Martin Snyder, commanding officer, EMF Portsmouth. “This is a prototype. It is the first fully modularized, task-oriented structure, and can literally be set up in no more than 48 hours.”

This prototype unit corrects the misconception that the Navy deploys only on ships. “Yes, we deploy on ships,” explained Snyder, “however, all Marine care during this and the first Gulf war was provided by units just like this one.”

The new hospital unit is located at Camp Arifjan, Kuwait, at China Beach. The “beach”, as it is called, is actually a blacktop parking lot located behind the Arifjan Troop Medical Clinic (TMC).

Snyder said the old style EMFs looked similar but were dependent on the number of beds in the hospital, and each 44-bed unit was configured the same.

The BASE -X model does not depend on beds, but on the overall mission of the hospital, so each 44-bed EMF can be configured differently based on its mission.

“This 44-bed EMF would normally be set up by my people plus about 250 medical staff,” said Lt. Cmdr. William Hartmann, deputy Navy fleet hospital program manager for logistics. “There are between eight and 11 Fleet Hospital Assistance Team members here and about 48 EMF medical staff members.”

Along with those who work with Hartmann, there are members of two different Navy Seabee units helping out: Seabee Construction Battalion 133 of Gulfport, Miss., and Seabee Construction Battalion 415 of Groton, Conn.

The larger temper tents the Navy previously used were too big and bulky to move once erected. The new BASE-X model allows the hospital staff to set it up and take it down in a reasonable amount of time, which will greatly improve their mobility and increase their ability to provide top-of-the-line medical care wherever it is needed.

“Our mobility is what sets us apart from the Army medical brigades,” said Snyder. “With the BASE-X model, we can all work under the same conditions and with the same versatility.”

The new hospital is to be equipped with a casualty receiving area, two operating rooms (each with two operating tables), a laboratory, radiology, a pharmacy, a CT scanner and an intensive care ward. The facility

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Many EMF Portsmouth personnel work throughout the night to set up the new hospital. The tent pictured is the supply dome tent, which sits next to the administrative tents. The group of tents that comprises the new hospital unit takes about 48 hours to set up with the help of about 300 personnel, including medical staff and Seabees.



New Hospital Unit to be Fully Operation in July

Continued from Previous Page
has all the capabilities to provide efficient trauma care to the troops, Snyder said. The hospital staff will provide medical care for coalition forces and resident troops in the area as they prepare for the next surge of troops in and out of the area and for the war's next phase.

As the hospital becomes operational, EMF personnel will move out of the Kuwait Armed Forces Hospital (KAFH) and turn it back over to the Kuwaitis.

"We are the third unit to work in the KAFH," explained Snyder. "The Kuwaitis have changed their needs and now need the space back from us. They have been very cooperative and good to us while we worked alongside them."

EMF Portsmouth is expected to take possession of the billeting tents, which is where they will sleep, and move into the facility by the end of June. The hospital is expected to become fully functional in July. ▼



HN Kristina M. Sturkey stands on a garbage can, right, to put the light fixtures in place while HN Mercy A. Leji works at the other end on a ladder. Holding the ladder from right are HM2 Derielle A. Thurman and HM2 Edwin Figueroa. Holding the light are HM3 Daniel N. Biggers, right, and HM3 Aaron C. Scott.



HM2(SW) Patrick Tate holds the stake while DK2 Joseph Downing swings the sledge hammer to drive it into the ground. The stakes to hold the tents in place of heavy winds.

History of Naval Medical Center Portsmouth New Building Innovations

1790 - Commonwealth of Virginia erects the first marine hospital in the U.S. at Washington Point in Norfolk's Berkley section, the forerunner of Portsmouth Naval Hospital.

1811 - The Secretary of the Navy tasks Navy Surgeon William P. Barton to submit plans for operating hospitals and health care institutions, which leads to a program for Naval Medicine and establishing the Portsmouth hospital.

1827 - Thomas Nelson, Jr., sells Fort Nelson to the Navy for \$9,000. Construction of Building One, the first naval hospital, begins April 2.

1957 - Ground breaking for 778-bed, 15-story medical care facility (Bldg. 215).

1960 - Bldg. 215 dedicated April 22.

1999 - Charette Health Care Center opens April 30.

2004 - On June 10, Navy Expeditionary Medical Facility Portsmouth constructs a new style of deployable medical unit at Camp Arifjan in Kuwait.

Mount Retires after 38 Years of Service, Bennett Takes Command

Continued from Page 1

“When I think of Capt. Mount’s years of service,” Lescavage said, “I think of a dynamic and inspiring leader, with a desire to support the best training. Today we honor a person who has truly left a mark not only on Naval Medicine, but on every individual he has led. There are no doubt people in the ranks who are a bit sad to see you go.”

The guest speaker during the retirement ceremony, retired Capt. Michael T. Moran, Nurse Corps, has been friends with Mount for 30 years.

“You were always there to make a difference,” Moran told Mount. “Early on you discovered the secret to crafting a great career. You used your experience as a hospital corpsman to the benefit of others and the mission. It would take several volumes to capture the accomplishments of your almost four decades of commitment to Navy, nation and God. You have played the game of life with purpose, grace and ease. And you made others feel secure as you instilled confidence in them through knowledge.”

Bennett, formerly the commanding officer of Field Medicine Service School, Camp Pendleton, Calif., was grateful to Mount for the wonderful job he had done during his tenure.

“Thank you for showing me the great side of you that has led this school so well,” Bennett said. “May I be the first to wish you ‘fair winds and following seas.’ And to the students, I am committed to your success and professional development, as well as that of the staff. Naval School of Health Sciences will continue as a leading institution and a Navy center of excellence, located at the right place and right time to serve as worldwide stewards of Naval Medicine.”

Bennett becomes the fourth commanding officer of the school since becoming its own command in 1995 under the Bureau of Medicine and Surgery (BUMED). The operation of the initial school began five years after the establishment of the hospital corpsman rating, with the first class convening Sept. 2, 1902. In 1907, school functions were transferred to



Photo by HM3 Casey Price

Capt. Mount receives the American flag from one of the Naval School of the Health Sciences students at the end of the traditional flag passing during the retirement ceremony. The passing of the flag among 12 students represents the ranks held by Mount, from recruit to HM1 and from ensign to captain.

Washington, D.C., due to a lack of training space. The school returned to Portsmouth in 1921, under the name of Pharmacist Mate School. Preparing for World War II, new buildings were constructed and training began Oct. 28, 1942, in the same spaces the school uses currently.

The school was disestablished in 1956, consolidating courses with the hospital, while continuing to occupy the same buildings. In 1975, an internal reorganization of the Navy Medical Department re-established the school as a detachment of the Naval School of Health Sciences, Bethesda, Md. Today, the school provides training for 17 officer specialty and enlisted medical technical programs on four campuses in the Tidewater region for medical professionals in the Army, Navy, Air Force and Coast Guard. ♣



Photo by HM1 Brandan D. Krieger

Capt. Brad L. Bennett, new commanding officer of Naval School of Health Sciences Portsmouth, addresses the audience during the ceremony, while Capt. Charles B. Mount, outgoing commanding officer, looks on. Bennett was the commanding officer of Field Medicine Service School, Camp Pendleton, Calif.

The NMC Portsmouth Dream Team

By Lt. Cmdr. Paschal Lee Dawson, CHC, USN

Remember the 1992 USA Dream Team? Some of the greatest basketball players were assembled to represent the United States in the summer Olympic games in Barcelona. Larry Bird, Michael Jordan, Charles Barkley, Magic Johnson, et al were among such players. With relative ease, Team USA cruised through its qualifying rounds with a 6-0 record; and then went on to win the Olympic Gold with an impressive 8-0 overall team record. What an awesome dream team!

But what makes up a dream team? First, every member is a superstar—skilled, gifted and talented—in his or her own right. Second, it is team of a variety of styles and personalities. It is not a place where like meets like, but where difference meets difference.

The team's undaunting strength rests in its diversity. Individual play and prowess are important, but a superstar does not truly become a "one"—no matter how good he or she is—until learning to work in collaboration with others.

Here at Naval Media Center Portsmouth, I feel like I am part of a dream team. For example, last month I saw members of this dream team in action in the Intensive Care Unit. Doctors, nurses and chaplain worked side by side as they treated a patient in crisis, and supported the family who was faced with a difficult decision regarding their loved one. The outpouring of care, love and support for this patient and family were visibly evident. No one was more important than the patient and his family at that moment. As a result, the family departed the hospital feeling valued and loved, saying, "they were wonderful!"

Another example of members of this dream team in action was in the Emergency Room. An elderly woman's husband suffered heart failure and was transported to the hospital by ambulance. From the initial emergency response team to the staff of health care specialists, to the supporting cast of social and pastoral care team players, all worked individually and

collectively to achieve the best treatment for the patient, and provide critical support to the spouse. This team of superstars worked superbly together.

Individuals are encouraged to develop personally and professionally, and have a sense of purpose and dogged determination in the pursuit of excellence in their personal and professional lives. Ideally, this drive toward self-fulfillment needs to be united with a desire for collective and creative interaction. It is recognition that "the self cannot be self without other selves." The "I" cannot reach fulfillment without the "we." In essence, no one effectively develops his or her fullest potential without this element of interrelatedness.

Dr. Martin Luther King, Jr., warned, "No nation or individual can live in isolation." We need each other and are dependent upon one another. A dream team may consist of individual superstars, but each player depends on the other if the team is to win. Otherwise, they will suffer a great loss. Remember the old adage,

"together we stand, divided we fall?" It is a truism we need to embrace.

But what about a leader? A good coach and/or wise leader can ably work with individuals, hone and develop specific gifts, bring an athlete along at the right moment and make him or her fully understand what it means to be a team. This kind

of leadership can also be applied to us spiritually. It is pertinent that we wed ourselves to something greater than ourselves. From a Christian perspective, Dr. King wrote, "Without God, all of our efforts turn to ashes and our sunrises into darkest nights. Without him, life is a meaningless drama in which the decisive scenes are missing" (King 1963, 16). In our pursuit to achieve personal excellence and connect with others, we must not forget to connect ourselves to God. We are one team at NMC Portsmouth. More importantly, we are one team under God. Go dream team! †



SEAL candidates display the ultimate example of a dream team during Basic Underwater Demolition School.

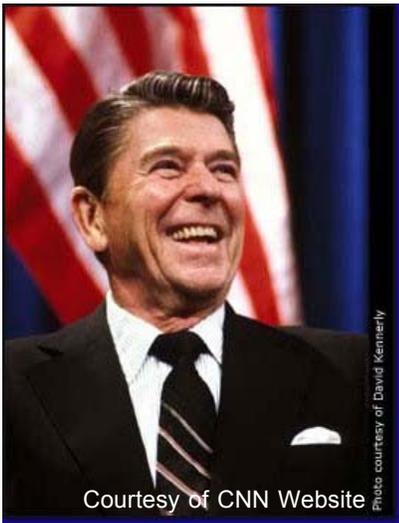
Remembering Ronald W. Reagan

1911 - 2004

Former U.S. President, Ronald W. Reagan died Saturday, June 5, after a long battle with Alzheimer's disease. He was 93 years old. Reagan, known as "the Great Communicator", served two terms as president, from 1981 and 1989. He is remembered largely for his gift of speech and his impact on world politics, such as calling for the dismantling of the Berlin Wall.

Reagan, a conservative Republican, beat Democratic Incumbent Jimmy Carter in the 1980 presidential election. He became the nation's 40th president and, at 69 years old, the oldest to man to assume the presidency. He survived an assassination attempt in 1981, and in 1984, beat Walter Mondale for the presidency and served a second term.

Throughout his presidency, Reagan maintained a platform based on building the United States military,



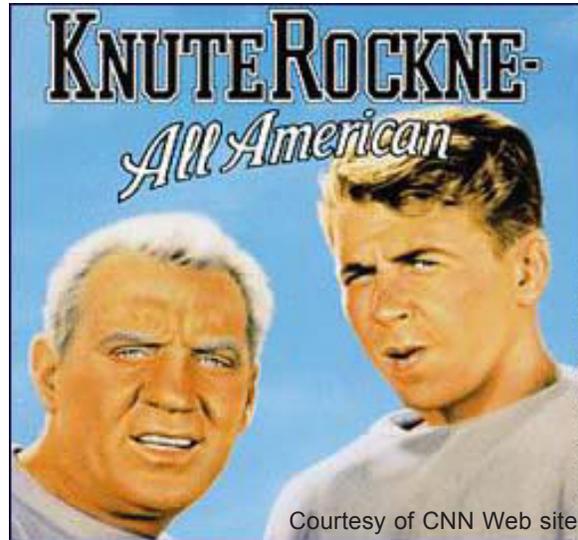
Courtesy of CNN Website

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l o o k i n g t o m i n i m i z e t h e p o w e r o f t h e U. S. g o v e r n m e n t.

One major milestone in Reagan's presidency is that he is considered a catalyst in the eventual fall of the Berlin Wall, a barrier made of 86 miles of barbed wire and seven and half miles of concrete slabs that divided the Republic of Germany's West Berlin and the communist East German city of East Berlin. Reagan stood at the Brandenburg Gate June 12, 1987, and challenged Soviet Leader Mikhail Gorbachev to tear down the wall.

"There is one sign the Soviets can make that would be unmistakable, that would advance dramatically the



Courtesy of CNN Web site

Before entering politics, Ronald Reagan was an actor in Hollywood. In the film, "Knute Rockne — All American" Reagan portrayed Notre Dame football star George "The Gipper" Gipp.

cause of freedom and peace. General Secretary Gorbachev, if you seek peace, if you seek prosperity for the Soviet Union and Eastern Europe. If you seek liberalization: Come here to the gate! Mr. Gorbachev, open this gate! Mr. Gorbachev, tear down this wall!"

Reagan left office in January 1989. Official deconstruction of the Berlin Wall commenced in June 1990.

In a letter to the American people in 1994, Reagan announced he had Alzheimer's disease. As his disease progressed, he was rarely seen in public.

Thousands of Americans paid their respects as Reagan lay in state in California and Washington, D.C. Following the memorial service in D.C., his body was flown to Simi Valley, Calif., where it was carried by motorcade to the Ronald Reagan Presidential Library for burial. "Taps" was performed and military jets flew by in a final salute. Some 700 friends and family members attended the service, including his wife, Nancy Reagan, former first lady and a constant at his side throughout his presidency and post-political life. Reagan is survived by his children, Michael, Ron Jr., and Patti. ♣

Former President and 'the Great Communicator'

All Photos Courtesy of CNN Web site unless otherwise marked



Bldg. 215 Vendor Services Open for Business, New Services Big Hit

Photos by JO1 Rebecca A. Perron



Above: Rear Adm. Thomas K. Burkhard, commander, Naval Medical Center Portsmouth, cuts the ceremonial ribbon during the vendor service area dedication ceremony June 4, with the help of, from left to right, Marva Russell, Navy Exchange branch manager, Debbi Stamey, Navy Federal Credit Union regional manager, Capt. J. Richard Trowbridge, vice commander, Navy Exchange Service Command, and Bill Monell, director, NMC Portsmouth Morale, Welfare and Recreation.

Below: Naval Medical Center Portsmouth staff line up for lunch in the food court on May 21, the food court's first day of operation. The Navy Exchange and Navy Federal Credit Union also opened May 21. The ribbon-cutting ceremony held June 4 officially dedicated the vendor services area of NMC Portsmouth, located on the second floor of Bldg. 215.



Above: The newly opened Navy Exchange at Naval Medical Center Portsmouth, consisting of more than 10,000 square feet, sports a barber and optical shop, in addition to the aisles of products found in most exchanges. The food court consists of 5800 square feet, offering Subway, Taco Bell, Pizza Hut, KFC, the Dancing Goat and Freshen's Smoothie Company.

Below: Navy Federal Credit Union members wait in line June 4 after the official ribbon cutting for the vendor service area of Naval Medical Center Portsmouth on the second floor of Bldg. 215. Services include the NFCU, Navy Exchange, Barber Shop, Optical Shop, a four-restaurant food court, a Morale Welfare and Recreation Information, Tickets & Travel (ITT) office, and an area for rotating vendors to display tables of goods for sale.



NMC Portsmouth Graduates Intern Class of 2004

Story and photos JO1 Sarah Langdon

Seventy-six naval officers marked the completion of their internship training during the Intern Class of 2004 Graduation held June 25 in front of Building One at Naval Medical Center Portsmouth. Surrounded by family, friends and colleagues, the graduates celebrated the close of a tough year of hard work and dedication/ The interns entered training as medical doctors, and as graduates, are now licensed to practice medicine.

Each year, the naval officers participating in the internship program choose among six programs – internal medicine, general surgery, pediatrics, obstetrics and gynecology, psychiatry and the transitional intern program. The transitional intern program offers interns broad-based training geared toward preparing them for operational medicine tours such as that of a general medical officer, undersea medical officer or flight surgeon prior to residency.

The ceremony kicked off with welcoming remarks by Rear Adm. Thomas K. Burkhard, commander, NMC Portsmouth, who congratulated the interns on their accomplishment.

“This is the largest single year in the life of a doctor,” said Burkhard said. “It’s the start of a journey of continuing education. You are always in the learning mode. Now you’re going to go out and complete this journey with the finest Americans.”

Capt. Adam M. Robinson, deputy chief for Medical Support Operations, Bureau of Medicine and Surgery, addressed the newly graduated interns, focusing on the importance of patient care.

“Congratulations to you all,” Robinson said. “You have much to be proud of and so much to be grateful for. You have much responsibility now and are obligated to help others achieve their goals. We only travel this way one time, so we’d better make the best of it.”

While some graduates are slated for residency programs at NMC Portsmouth and at other medical clinics and institutions, others have opted to continue their training through fellowship programs. ♣



Energy Conservation Corner

MYTH: We do not need to turn off equipment at night, since there is no energy used if no one is in the office to use the equipment.

REALITY: Many people are unaware of the “phantom” loads that lurk in the office and the home. Equipment such as computers, printers and copiers consume energy when turned on and left in their idle mode.

The U.S. Environmental Protection Agency is sponsoring the Energy Star Program to encourage equipment manufacturers to produce equipment that goes to “sleep” when left idle for a certain period of time. This mode consumes less energy than the conventional idle mode, but powers up instantly when the user wants to use the equipment.

MYTH: You just installed a screen-saver on your computer.



Energy Conservation Quiz

1. The President has mandated the Navy reduce energy consumption what percentage by the year 2005?

- A) 10%
- B) 29%
- C) 30%
- D) 50%

Now you can stop turning your monitor off each evening and weekend, since the screen-saver program will do the same job of saving energy.

REALITY: Screen savers do not reduce monitor energy usage. They only protect the monitor by saving the phosphors on the screen.

Office equipment is the fastest growing use of electricity in U.S. commercial buildings and one of the fastest growing in homes. The electricity used to run our office equipment costs businesses and homeowners about \$4.85 billion each year.

Turn off equipment not in use, especially evenings and weekends. NMC Portsmouth’s policy is to turn off monitors, which consume 75 percent of a work station’s electricity, but leave the central processing unit in sleep mode for periodic upgrades. Copiers and printers should be completely turned off, not just left in sleep mode. ♻️

2. Navy shore facilities have reduced energy consumption since 1985 by what percentage?

- A) less than 5%
- B) 10%
- C) 15%
- D) more than 20%

3. A successful energy awareness program requires the following “C” component:

- A) Communication and Cooperation
- B) Coordination and CO Support
- C) Commitment and Continuity
- D) All of the Above

See Page 23 for answers

Red Cross Seeks Volunteers for Language Bank

By Peggy Witte, NMCP Chapter of the American Red Cross

As the military community becomes increasingly diverse, we blend our multi-cultural backgrounds into one military family. The American Red Cross, through its Armed Forces Emergency Services division, is committed to helping to military members and their families whenever and wherever it is needed, regardless of their ethnic background.

The Naval Medical Center Portsmouth chapter is seeking volunteers to become part of our Language Bank. Anyone can volunteer, including staff, family members and community members who do not normally have access to military facilities. Volunteers will be asked to provide interpretation and translation services between patients and medical staff as needed.

Imagine a deaf dependent wife who is new to the military environment and has a medical emergency when her husband is deployed. The hearing impairment, which might have been inconvenient the day before, now becomes a medical emergency. Or consider the dependent child who becomes ill while on holiday in a foreign country and requires emergency surgery. The child is medically evacuated from overseas to NMC Portsmouth with accompanying medical records written in a

Continued on Next Page

NMCP Chapter of the American Red Cross Honors Volunteers

Photos by JO1 Rebecca A. Perron



The Naval Medical Center Portsmouth chapter of the American Red Cross honored hospital volunteers during the annual volunteer luncheon June 3 at Rear Admiral and Mrs. Burkhard's quarters. During the luncheon, certificates designating the years of service were presented to each volunteer by Capt. Jerry Shields, NMC Portsmouth senior chaplain.

Left: Sue Parker of Personal Services receives her certificate for 24 years of service.

Below Left: Joan Van Wye of the ARC Office receives her certificate for 19 years.

Below Right: Kay Oldfield of the Obstetrics Clinic receives her certificate for 21 years of service.



Red Cross Seeks Interpreters

Continued from Previous Page

language neither he nor the medical staff can translate.

These are examples of real-life situations encountered at this medical center. The Red Cross Office needs help with all languages, including sign language. The volunteers must be fluent in speaking the language or signing, be available on call and have transportation.

If you are interested in helping the Red Cross and the military community, please reply to Peggy Witte at mgwitte@mar.med.navy.mil or call 953-5435 to volunteer. 🇺🇸

**THE NEXT ROUND'S
ON YOU...
GIVE 'EM A PINT!**



For more information on donating blood for military personnel visit www.tricare.osd.mil/asbpo



DAPA Note

Inhaling Helium- Is it just hilarious or a health threat?

Submitted by HMI Eduardo Ortiz, Command Drug And Alcohol Program Advisor

Many adults have childhood memories of breathing in helium from an inflated balloon in science class or at a birthday party and hearing their own unrecognizable high-pitched voice that sounds like Alvin and The Chipmunks, or The Wizard of Oz Munchkins. While it's fun and generally harmless to inhale helium and chirp or squeak, some additional information may help put things in perspective.

Inhaling pure helium can be risky because it displaces oxygen (as breathing in any gas besides oxygen would do), the gas necessary to sustain life. In other words, since bodies need oxygen, but are getting pure helium instead, the result is suffocation.

One breath of pure helium can cause hypoxia (a deficiency of oxygen reaching the body's tissues) and result in dizziness. The next real breath of oxygenated air will allow everything to return to normal. That breath will happen automatically once the air from speaking (in a cartoon ducks voice) is expended. Inhaling continuous breaths of helium one after another starves the body of oxygen. A person will eventually pass out, and perhaps even worse.

Inhaling helium or any other gas from a pressurized tank, as opposed from a balloon, is dangerous. Inhaling pressurized gas creates the possibility of rupturing a lung or creating an air embolism (gas bubbles in the blood that can cause seizures). In this case it is not necessarily the helium that is dangerous, but the pressure of the gas itself. Breathing in pressurized oxygen would be just as dangerous.

I am sure parents, aunts or uncles have inhaled helium at children's party at one time or another to make the children laugh. Keep in mind that our children will emulate our actions and nowadays you can easily purchase helium tanks at Wal-Mart, Kmart or Target.

So if you happen to have a helium tank you might consider moving it some place where your children will not have easy access. ⚠

Helpful Tips for Moving Your Household Goods

Are you transferring soon? You can now apply for your household goods move online and get your move process started much easier and quicker.

To get your application started, go to www.smartwebmove.navsop.navy.mil. You will need your official orders, proof of dependents (page 2) and an original power of attorney (if applicant is not the service member). These items can be faxed or delivered to the FISC Norfolk Personal Property Office to complete your online application.

Please also have readily available to enter in your online application your contact information on both ends of the move and your pickup and delivery locations (full address). If you don't have access to a computer, you may go to the Fleet Learning Resource Center at FISC Norfolk in Building W-143 on the first floor. Once you apply, the Personal Property Office will process your application, which generally takes two to three business days, and contact you to confirm a pack and pickup date.

Please keep in mind that the summer months are the busiest move season. Apply for your move as early as you can and be flexible on your desired move dates. The Personal Property Office will do everything they can to accommodate your desires.

Be advised that as of June 8, the Personal Property Office had scheduled all new move requests for July due to all local area commercial carriers having already been booked to capacity.



If you have any questions about what you are entitled to do based on your orders or any questions in general about your move, please call 1-800-444-7789 or locally 443-3791 (DSN 646-3791). You may also email us for answers to your questions at nvtrnshhghelpline@navy.mil or visit the FISC Norfolk Personal Property Office (Bldg. SDA-336) located on Hampton Boulevard in the Personnel Support Mall. ⚠

Career Planning Now Available on Navy Knowledge Online

By JO1 J. D. Walter, Naval Personnel Development Command Public Affairs

NORFOLK, Va. (NNS) — Navy Knowledge Online (NKO) now features access to 5 Vector Model (5VM) representations for enlisted ratings.

These models, while not tailored to any particular Sailor, are accessible by all registered NKO users and serve as a resource for career path selection and planning. Initially designed to provide Learning Center 5VM managers access, the models are an excellent resource for undesignated Sailors looking for their best-fit career path.

“This is really a great starting point for any of our junior Sailors looking for a rating, or for those looking to make a lateral transfer into another rating,” said Naval Personnel Development Command Claimancy Career Counselor NCCM(SW/AW) Paul Pierce. “Career counselors of all stripes, full-time and collateral duty, including leaders and mentors, may

also find these templates useful as they guide, help and develop Sailors with their careers.”

The Professional Development, Personal Development and Leadership vectors each display the



Skill Objects and associated tasks required of an individual in the chosen rating. Each task, when opened, features links to the associated learning event, as well as listings of related skill sets, abilities, unique knowledges, resources and tools. The certifications and qualifications

vector will not display any information, because it reflects unit level training and qualifications.

“With the depth of information provided by the models, Sailors can really get a better sense of what kind of work they might be doing if they choose a particular career path,” said Pierce. “And again, this is a good tool for division officers and department heads who are developing their Sailors, because it allows them to see with additional clarity what knowledge, skills and abilities Sailors are expected to possess as they develop professionally. It’s not a perfect tool yet, but it is definitely a new and useful part of the tool bag we can all use to make the Navy better.”

To access the models from the NKO homepage (www.nko.navy.mil), click the Programs link at the bottom of the left-hand menu. Then click the Sea Power 21 and Sea Warrior links to see the 5VM Manager Views. ⚓



Photo by JO1 Rebecca A. Perron

Swanson Receives Awards

Capt. Ronald G. Forbus, senior nurse executive, presents Capt. Nancy A. Swanson of the emergency room with the 2003 Rear Adm. Mary R. Hall Award June 29 during a video teleconference with 33 naval medical facilities worldwide. Recipients receive the award for research-related articles that appear in print.

Swanson’s research study was an experimental, randomized, controlled clinical trial comparing treatments for smoking cessation to a counseling-only group. This involved 140 subjects stationed on seven ships. Swanson’s manuscript was selected for publication by Military Medicine.

In Memorium **HM1(FMF) Luis Hernandez-Rivera** **1970 - 2004**

Naval Medical Center Portsmouth suffered a great loss when First Class Petty Officer Luis Hernandez-Rivera, Jr., died in a motor vehicle accident May 25. A memorial service was held in his honor June 4 in the auditorium in Bldg. 215

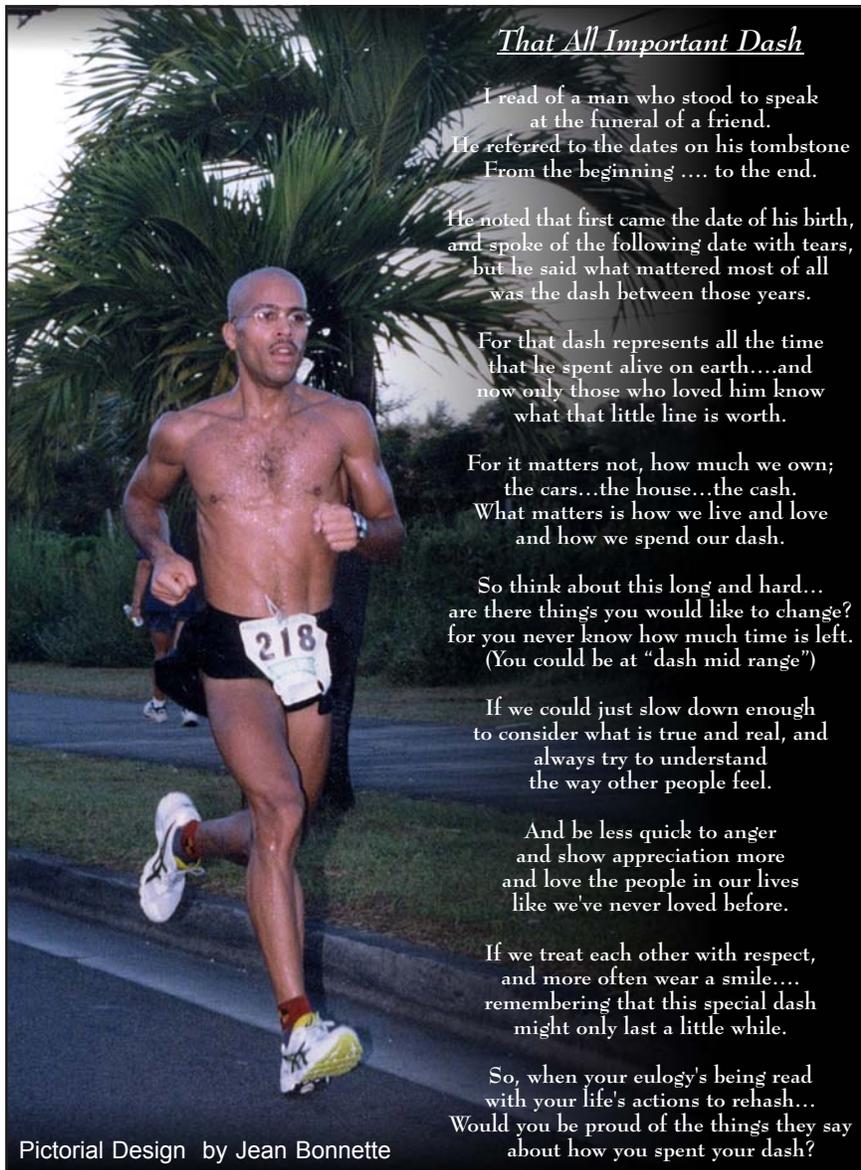


HM1(FMF) Hernandez was born June 2, 1970, in Puerto Rico to Gloria Rivera of Milwaukee, Wis., and the late Luis Hernandez, Sr. He is survived by his wife, Quetzy K. Hernandez, Luis III, 9, Bradley, six months, and a third child on the way. Luis Hernandez is also survived by two sisters and five brothers.

Hernandez joined the military Oct. 3, 1988. His duty assignments include Naval Hospital Newport, R.I.; Naval Hospital, Naples, Italy; Naval Hospital Guam and two tours at Naval Medical Center Portsmouth.

Hernandez was well known throughout the command as an avid runner and an excellent role model for Navy fitness. He exemplified the Navy's core values of Honor, Courage and Commitment.

Most of all, he was a true shipmate in every sense of the word. He was an extremely well liked and professionally dedicated person who always maintained a smile on his face and strived to be the best at whatever he did. He will be sorely missed. ♣



That All Important Dash

I read of a man who stood to speak
at the funeral of a friend.
He referred to the dates on his tombstone
From the beginning to the end.

He noted that first came the date of his birth,
and spoke of the following date with tears,
but he said what mattered most of all
was the dash between those years.

For that dash represents all the time
that he spent alive on earth....and
now only those who loved him know
what that little line is worth.

For it matters not, how much we own;
the cars...the house...the cash.
What matters is how we live and love
and how we spend our dash.

So think about this long and hard...
are there things you would like to change?
for you never know how much time is left.
(You could be at "dash mid range")

If we could just slow down enough
to consider what is true and real, and
always try to understand
the way other people feel.

And be less quick to anger
and show appreciation more
and love the people in our lives
like we've never loved before.

If we treat each other with respect,
and more often wear a smile....
remembering that this special dash
might only last a little while.

So, when your eulogy's being read
with your life's actions to rehash...
Would you be proud of the things they say
about how you spent your dash?

Pictorial Design by Jean Bonnette



Sunscreen and Sunglasses Help Prevent Skin Cancer

Continued from Page 7

Look for tightly-knit fabrics when buying skin-saving sun cover-up clothing. Wear UV-blocking sunglasses to protect the eyes and surrounding sensitive skin from damage. Wear a wide-brimmed hat outdoors, since a baseball cap may shade the eyes but may not provide enough coverage to the neck or ears.

Since some of your skin will most likely remain exposed to the sun, a good sunscreen is also vital.

“Look for sunscreens with ingredients that provide broad-spectrum protection,” said Jeanette Matthews, a civilian doctor of dermatology at the National Naval Medical Center in Bethesda, Md.

Mathews explains that there are two main types of ultraviolet radiation emitted by the sun which actually reach the earth: UVA and UVB rays. UVB radiation is known to be damaging to the skin, and recent research suggests that UVA radiation is just as harmful. Both may contribute to the growth of skin cancer.

“SPF is a sun protective factor that indicates a sunscreen’s effectiveness against UVB, but not UVA. Ingredients such as titanium dioxide, zinc oxide and avobenzone

are particularly effective against UVA,” she explained.

Sunscreen should be generously applied to any exposed area of the body. Apply sunscreen 20 to 30 minutes before going outside, and reapply it every two hours, or more frequently if you are playing sports or swimming.

Young children should be protected thoroughly before sun exposure, Matthews advises, since sunburns during the first 18 years of life increase chances of

developing melanoma. Children need the same sunglasses adults wear, but in a smaller size, as novelty sunglasses usually do not offer UV protection.

Other tips include avoiding prolonged exposure to the sun between 10 a.m. and 4 p.m., when the sun’s rays are the strongest and most harmful.

For more information about protection from the sun, visit the American Cancer Society’s Web site at <http://www.cancer.org/>. 

Congratulations to Naval Medical Center staff members who were selected for promotion to Captain

Cmdr. Pamela Grant
Cmdr. Vanessa Scott
Cmdr. Danette Svobodny
Cmdr. Michael Vernere

June/July 2004 - The Courier

Congratulations to Naval Medical Center Portsmouth staff members who were selected for promotion to Commander Medical Corps

Lt. Cmdr. John Baccus
Lt. Cmdr. John Bastien
Lt. Cmdr. Stephanie Bernard
Lt. Cmdr. William Brunsmann
Lt. Cmdr. Thomas Chupp
Lt. Cmdr. Mary Cook
Lt. Cmdr. Richard Dobhan
Lt. Cmdr. Brad Douglas
Lt. Cmdr. Robert Dunbar
Lt. Cmdr. Anthony Hoovler
Lt. Cmdr. Peter Johnson
Lt. Cmdr. Brian King
Lt. Cmdr. Christopher Kurtz
Lt. Cmdr. Robert Miller
Lt. Cmdr. Patrick Mullin
Lt. Cmdr. Amy Oboyle
Lt. Cmdr. Peter Roberts
Lt. Cmdr. Ashley Schroeder
Lt. Cmdr. Joel Stewart
Lt. Cmdr. Edward Waters
Lt. Cmdr. Steven Wechsler

Medical Service Corps

Lt. Cmdr. Philip Blaine

Lt. Cmdr. Mark Crowell
Lt. Cmdr. John Ferguson
Lt. Cmdr. C. J. Martinez
Lt. Cmdr. Marty McCue
Lt. Cmdr. Sharon Wright

Nurse Corps

Lt. Cmdr. Kristen Atterbury
Lt. Cmdr. Catherine Baine
Lt. Cmdr. Maureen Butler
Lt. Cmdr. Sally Butler
Lt. Cmdr. Paula Chamberlain
Lt. Cmdr. Brian Clement
Lt. Cmdr. Bradley Hartgerink
Lt. Cmdr. Tammy Jones
Lt. Cmdr. Barbara Kincade
Lt. Cmdr. Catherine McDonald
Lt. Cmdr. Glenda Sink
Lt. Cmdr. Amy Tarbay

Dental Corps

Lt. Cmdr. Steven Alfano
Lt. Cmdr. William Shoemaker

MSC Hosts Softball Tournament to Raise Money for MSC Ball

Story and photos by JO1 Rebecca A. Perron

The Medical Service Corps (MSC) hosted the second annual MSC Softball Tournament June 18 to raise money for the annual MSC Ball. The first round of games featured the Junior Enlisted Association against the Civilian team, the MSCs versus the Nurse Corps, and the Chief Petty Officer Association (CPOA) playing the First Class Petty Officer Association (FCPOA).

The Civilians, CPOA and MSCs advanced to the semi-final round. The CPOA won by the largest margin, giving them a bye directly to the finals. After the first round, 14 players participated in the homerun derby, eyeing the prize of a \$250 Mizuno Techfire Crush bat. HM2 Marc Alvarez of Radiology won with seven homeruns out of 10 attempts.

Then in the semi-final game, the MSCs beat the Civilians, pitting the MSCs against the CPOA for the trophy. The final game was initially delayed due to lightning and thunder in the distance, but for safety reasons, the game was postponed before it started. ⚡

Below: Nurse Corps Team Member Cmdr. Sally Butler of the Nursing Service Office hits the ball to left-center field, keeping the ball out of the hands of MSC Catcher Lt. Cmdr. Ralph Marro of Radiology.



Right: Nurse Corps team members Lt. j.g. James Driscoll of the Intensive Care Unit/ Step-Down Unit, playing right field, right, and Ens. Trevor Carlson of the Neonatal Intensive Care Unit, playing center field, collide as they run to catch the ball.



Above: CSSN Alex Moleon of the Junior Enlisted Association Team and the Dining Facility pitches to a member of the Civilian Team during the first game of the tournament.



Left: Cmdr. James Hosack, contingency planning officer and Nurse Corps team member, awaits a pitch from Lt. Cmdr. Les Moore, officer-in-charge of Oceana Branch Medical Clinic, during the game between the MSC and Nurse Corps.

First Round

Game 1- JEA 12 Civilians 13

Game 2- CPOA 10 FCPOA 6

Game 3- MSC 14 NC 13

Semi-Final

Civilians 6 MSC 7

Final

MSC vs. CPOA- postponed due to incoming thunderstorm



Left: CPOA batter HMC Richard Morrison of Orthopedics hits to center field as FCPOA team member HMI Lamar Bethel of Radiology plays catcher.

Right: CPOA catcher HMCM Dan Whiting, senior enlisted leader for Sewells Point Branch Medical Clinic's, watches FCPOA Team Member HMI Terry Brown of Ophthalmology hit the ball to center field during the third game of the first round.



Above: FCPOA team member HMI Gary Duncan of the Healthcare Support Office rounds first after hitting the ball into the outfield. CPOA First Baseman HMCS Chris Aldis of Ancillary Services at Oceana Branch Medical Clinic, right, Short Stop HMCM M. "Festus" Frear of the Plans, Operations and Military Intelligence Office, center, and Third Baseman HMC David Amick of Radiology, left, get into position to receive the ball as it is thrown back to the infield.



Energy Quiz Answers from Page 16

1. C) 30 percent-- President Clinton's executive order 12902 mandates that all federal agencies reduce energy consumption 30% by the year 2005 relative to the baseline.
2. D) More than 20%-- At the beginning of FY-98, DON shore facilities energy consumption (including housing & industrial) was 20.9% per square foot lower compared to the 1985 baseline.
3. D) All of the Above

Bravo Zulu!!!

Meritorious Service Medal

Capt. Steven L. Bailey
Capt. Gary A. Tanner
Cmdr. Deborah E. Nelson
Cmdr. Brian D. Smullen
Lt. Cmdr. Mark C. Crowell
HMCS Mary H. Cromer

Navy Commendation Medal

Capt. Paul M. Blöse
Cmdr. Thomas L. Amerson
Cmdr. Charles D. Bissell
Cmdr. Michael A. Mazzilli
Cmdr. Teresa L. Priboth
Lt. Cmdr. Ethan A. Bachrach
Lt. Cmdr. Elizabeth Brumfield
Lt. Cmdr. David T. Castellano
Lt. Cmdr. Barbara A. Coleman
Lt. Cmdr. Matthew E. Grimes
Lt. Cmdr. Anthony R. Hoovler
Lt. Cmdr. Phillip A. Kanicki
Lt. Cmdr. Richard C. A. Lalonde
Lt. Cmdr. Tamera L. Lane
Lt. Cmdr. Daniel P. McCartan
Lt. Cmdr. James E. McGrory
Lt. Cmdr. James M. McKee
Lt. Cmdr. John M. Uecker
Lt. Jerome J. Christensen
Lt. Aida S. Bernal
Lt. Terri L. Bowes
Lt. Don Caraway
Lt. Phillip D. Davis
Lt. James E. Gross
Lt. Todd J. Luyber
Lt. Jacqueline R. Williams
MSCM(SW) Steven L. Kruse
FCC(SW) Richard A. Holland
HMC(SW/FMF) Gary L. Snyder
HM1(SW) Margaret Clay
HM1 Enrique Escajeda
HM1 Cheryl A. Lacey
HM1 Paul E. Powers
HM1(FMF) Thomas V. Reidy
HM2 Selinda Simmons

Joint Service Achievement Medal

HM2 Jewell B. Bowman

Navy Achievement Medal

Lt. Cmdr. Neil M. King
Lt. Cmdr. Adam D. Lichtman
Lt. Matthew J. Brickey
Lt. Jennifer M. Espiritu
Lt. Keith J. Goldston
Lt. Jill M. Grassman
Lt. Bradley J. Karovic
Lt. Rhonda K. Stell

Lt. Julie A. Tyslan
Lt. j.g. Greta L. Benton
Lt. j.g. Carmen M. Brosinski
Lt. j.g. James F. Cotton
Lt. j.g. Charles E. Dickerson
Lt. j.g. Sara M. Fuehrer
Lt. j.g. Erin M. Kohl
Lt. j.g. Colleen M. PerlakSoto
Lt. j.g. Steve A. Pylpyiak
Lt. j.g. Natalie L. Wolf
HMC(SW/AW) Calvin P. Miller
HMC(SW) Tina Pantaleo
HMC(SW) Anthony J. Reale
DTC Paul S. Thomas
HM1(SW) Charles T. Canterbury
CS1(SW) Reuben A. Checkley
MA1 Rita A. Maclin
HM1 Catherine L. Montfort
SH1(SW) Jeffery A. Rhoades
HM2 Ruben M. Banaag
HM2(FMF) Donald A. Bow
HM2 Andrew D. Elliott
HM2 Tina M. Felipe
HM2 Shaeye Frierson
SK2 Priscilla O. Gonzalez-Palama
HM2(FMF) William E. Harding
HM2(FMF) Gregory N. Johnson
HM2(FMF) David L. Lowe
HM2(FMF) Jose H. Nisperos
HM2 Christal T. Pierce
HM2(AW) Tyson D. Rager
HM2 Esteban S. Rivera
HM2 Craig Rogers
HM2 Laurie L. Steurer
MA2 Alfred H. Wooten
HM2 Ann M. Young
HM3 Elizabeth V. Barrett
HM3 Timothy A. Bivens
HM3 Bryan O. Britt
HM3 John A. Connors
HM3 Rachel L. Horton
HM3 Theresia R. Hubbard
HM3 Natalie P. Lindsey
HM3 Rhoneli C. Merilos
HM3 Michael A. Tuck, Jr.
HN Jenny M. Cabral
HN Kayla M. Long

Letter of Commendation

Lt. Cmdr. Nancy E. Holmes
Lt. Cmdr. Shawn D. Kosnik
Lt. Bradley J. Karovic
Lt. j.g. Margaret W. Braus
Lt. j.g. Paul E. Pellini
HMC(FMF) Christopher Aldis
HM1(SW) Gary D. McFadden
IT2 Benjamin B. Burr
HM2 Kayla D. Coleman

HM2 William F. Feters
HM2 Tanisha McKinney
HM2(FMF) Christopher R. Miller
HM2(FMF) Jason Noble
HM2(SW/FMF) Jerald J. Poole
HM2(FMF) Dexter L. Raysor
HM2 Robert C. Robinson
HM2 Laura L. Rodriguez-Calderon
HM2 Michael A. Schermer
HM3(SW) Alaji F. Abdullah
HM3 Mashaun G. Brown
HM3(SW) Eric M. Forstrom
HM3 Trang V. Kien
HM3 Richard S. MacPartland
HM3 Jerod M. Napier
HM3 Lerici M. Racine
HM3 Racquel L. Sanders
HM3 Gregory J. Semrau
HN Ray A. Adams
HN Jeremiah W. Brammer
HN Michelle M. Cummins
HN Tanya T. Doss
HN Eric J. Goede
HN Summer D. Hunter
HN Paris Johnson
HN Marie Suro
HN Tommy L. Turtle
HN Gavin G. Wheeler
HA Samuel Etienne
HA Hugo E. Vela
Catherine E. Callahan, Civ
Brenda L. Stith, Civ
Emergency Management Team
Ward 4K, 4L, 4E & Labor

Letter of Appreciation

Lt. Cmdr. Christian T. Peterson
HM2 Candyce Clark
HM2 Japonica Perkins
HM2 Selinda Simmons
HM2 Dorenda Smith
HM2 Tony Stringer
HN Michael A. Keeling
HN Alay Santiago
Ramiro Aguilar, Civ
Cheryl M. Garrett, Civ
Wendell L. Osborne, Civ
Michele Rusnak, Civ
BMC Boone 4th Qtr First and Finest Team
Progress Reports and Statistics Division
Team

Navy Meritorious Civilian Service Award

Roberta K. Carroll
Kathryn E. Powell
Kelly M. Silard
Judith N. Simmons