THE COURIER

March/April 2002

NMCP Shapes Up with the CMC

By JO2 Duke Richardson

Photo By JO3 Theresa Raymond

Naval Medical Center Portsmouth's Command Master Chief wants you…to work out. NMCP Sailors now have a novel way of preparing for April's Physical Readiness Test, sweating and getting an active start to their day by exercising with the hospital's senior enlisted member.

Getting up before the sun begins to make its daily ascent into the sky, CMDCM(SW/FMF) David Carroll dons his workout gear and heads to the base gym to join over 100 fellow Sailors for a good time working out in what has been called "The CMC's Challenge."

The idea for "The CMC's Challenge" originated at one of Carroll's previous commands. "At my last command I was trying to decide how to do something that would get me involved with the Sailors. The idea came from a third class that said that I should have a CMC's Challenge once a week and rotate it through the departments, and let them come workout and see how they do against you," Carroll said. "That way I can get a good look at how the departments are doing and it's a good way to meet and greet the Sailors in a different way especially at a command this big."

Carroll also said this also serves as a good gauge for people to go by to see just how things look for passing the PRT. "There are definite benefits to this as it lets people see how much shape they are in and exactly how ready they are for the PRT," said Carroll. "We normally run about a mile-and-a-half just to let people know that if they can't keep up to this pace then they are probably not quite ready for the PRT and they should do more (exercising) on their own.

"I wouldn't say this is a PRT program," Carroll continued, "but it's actually a learning session that educates people on the proper ways of stretching, warming-up… and most importantly, showing them that PT can be fun (and benefit your health)."

The CMC plans on incorporating the challenge at special events held on the NMCP compound throughout the year. Within a matter of time, these workout sessions may not just be confined to the six a.m.-Thursday morning timeslot. "One thing I would like to do is to do this at special occasions where we would have an all-command run so all interested staff members can come out and just have fun," he said. "Overall, it's not about how fast you can run, it's mainly about teamwork, building camaraderie and helping each other out. We try to stay with the slowest people so everyone finishes together. This is not about seeing the jocks run six minute miles, it's about helping those who may have difficulty passing the PRT."

"Our main goal is to get everyone to pass the PRT in April," said Carroll. "I've seen a lot more people out on the road, on the track and in the gym exercising and that was the idea, to show people that PT can be fun and beneficial to your health. If you do it on a regular basis, you should have no problems passing the semiannual PRT."

The CMC's Challenge is open to all staff members. It is held every Thursday morning at 6 a.m. at the NMCP Base Gym. "Even if your group isn't scheduled to be there you are more than invited to show up," said the CMC. "This is also not just an enlisted activity, officers are also welcomed to attend, because this is a good way to get in shape and having a good time doing it."

Spring Easter Egg Hunt

Photo By Lt. Robert Lyon

Over a hundred children scoured the gounds in front of historic Building One for Easter Eggs during an event hosted by the Oakleaf club Saturday, March 23rd. The event was also sponsored by FCPOA, CPOA, JEA, MNA and MWR.

The **Command Heritage Comittee** invites anyone interested in committing themselves to recognizing and celebrating diversity throughout the command to join. Interested personnel should page Lt. Williams at 669-1111 or call Cecelia Brown at 953-5703

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Doctors secret to service: Treat patients like family

By JO2 Jodi Durie

Photo By JO2 Jodi Durie

Dr. Eggleston checks Suzin Lucas's blood pressure. Lucas recently gave birth to twins.

Joy, excitement and pride are words frequently used by Dr. Maurice Eggleston as he describes his job as a maternal fetal specialist and an obstetrician gynecologist at Naval Medical Center Portsmouth.

"Beyond a doubt the highlight of my job is delivering babies. You know, every time I deliver a child it is a brand new experience for me all over again and, it allows me to revisit the births of my own children," said the energetic doctor.

Eggleston, who has four children of his own, strives to provide every mother and baby the same care he would give his own wife and child in the delivery room.

"I have had the absolute, maximum privilege of being able to deliver three out of four of my children that is a joy and a privilege that most men don't get to have," said Eggleston. "Every time I deliver another woman it is like delivering my wife again. I just can't even begin to explain how much joy there is when you help bring a life into this world and I get paid to do it," said Eggleston.

Although he enjoys his job today, Eggleston's first career wasn't as a doctor but as an electronic's technician in the Marine Corps. Surprisingly, working as an electronics technician sparked his interest in the medical field.

"As an electronic's technician I enjoyed problem solving. There was a problem, there was a scientific approach to the problem and there was fixing the problem and after that the satisfaction of 'I fixed it.' That to a degree is what cultivated my interest in medicine because people, like electronic things, have problems and there's always a rational, reasonable approach to solving the problems. Unlike electronic things where everything starts working again once it is fixed, people are happy when you help them, they feel good, they make you feel good. There's this interaction between you and your patient that reinforces your well-being and worth in this world," explained Eggleston.

It's hard for Eggleston to do his job without feeling absolutely thrilled about what he does for a living, he said. Ideally, he hopes everyone who works in the OB clinic shares this feeling.

"I want people when they come into this facility to experience the joy and excitement that I have in everybody that they meet, that's my goal," expressed Eggleston. "I would want every single person, every enlisted staff member, every civilian staff member, every officer to be as excited about this woman's birth as they were about the births of their own children. If they were, there wouldn't be any complaints from anybody," he explained.

Eggleston's relationship with the military began long before his position at NMCP or even his four-year tour in the Marine Corps; Eggleston was born in a military hospital in Tennessee while his father was deployed.

Hearing his mother's perspective on giving birth without a support system has allowed him to deeply understand the viewpoints of many of the women he delivers.

"My mother was 16 when she had me and my dad was deployed at the time. She spoke about being in Norfolk all by herself. She was upset and didn't know what to do. She had just moved out of her mother's house and moved here. As the time came nearer for me to be delivered she went back home to Tennessee. More than anything, she spoke of the sheer terror giving birth as a Navy wife, all alone," explained Eggleston as a compassionate look swept across his face.

"I think primarily my mother's stories impacted me in that I'm always cognizant of the fact that I am dealing with young women who often times are here without any support whatsoever. It's not like I'm in the civilian community where if the husband isn't here the rest of the family is. Here it is very likely that I'm dealing with a woman whose got no resources and that means I've got to be her advocate," explained Eggleston.

"Often times i'm her advocate in the face of the traditional Navy values of duty personnel," he added.

Eggleston remembers his mother felt completely alone when his father was away. This he keeps in mind as he sees his patients along with the consideration of the husband's perspective who is concerned with the welfare of his family he has left behind.

"What are we as military people fighting for? We're fighting for the rights of our families to enjoy freedom and when we can't take care of our own family because we are away at war it puts a tremendous burden on a man or woman's mind. I feel my task is making sure that the active duty service member that's sitting on a boat in harm's way has an understanding that his wife is well cared for and, if she's going to be delivered, that he doesn't have to be there in order to make sure she gets the best of care," said Eggleston.

Although the Navy doesn't routinely send service members home during childbirth, if there are other siblings and the mother has no resources to care for them or the mother or child's lives are at risk a call is made to the service member's command.

"I've got to convince the husband's command that his presence during this particular time is worthy of him taking time from duty. I can pick up my phone and within one minute be on the phone with an XO (executive officer) on a ship anywhere in the world and tell him about what's going on," said Eggleston.

An understanding of the military lifestyle and immediate accessibility to service member's commands are just a few of the advantages military care provides to expectant mothers to put them at ease during this ever changing moment in their lives.

"I think we have a thorough understanding of how the military healthcare system works and provide care that's integral to military families. I think the most important part to providing morale and reenlistment of service members is making sure healthcare is provided to their families. If you have to constantly apologize for the care you receive you won't want to reenlist," said Eggleston.

It's because of the patients that Eggleston looks forward to coming into work every day.

"I look forward to interacting with my patients and being able to work with them through their difficult times," said Eggleston with a smile.

NMCP's BJOY and JSOY continue to move forward

By JO2 Duke Richardson

Naval Medical Center Portsmouth's Jr. Sailor of the Year (JSOY) and Bluejacket of the Year (BJOY) are moving on. Moving on towards their goals.

To them, being named NMCP's 2001 JSOY and BJOY, respectively, is an honor they will always cherish and hold dear. However, neither HM3 Rebecca Morrell (BJOY), nor HM1 Richard Whitehead (JSOY) have any plans on just sitting back taking the pat on the backs, enjoying their own personal parking spaces, and relishing in being named two of the hospital's top sailors. They plan on using their distinctions to work towards even more successful endeavors in the future.

When she's not doing an award-winning job at NMCP's Pain Clinic maintaining databases and providing care to patients, HM3 Morrell works towards her primary goal, to get a commission. "I recently put my officers' package and I am working towards being a physical therapist," she said. "I had worked on the requirements for the past year and I should find out in March whether or not I'll get commissioned."

Morrell says she enjoys giving patients the top quality care and attention they deserve. It makes her feel as if she is helping make a difference in peoples' lives one-by-one. "I see a lot of cancer patients here and we help them through their pain which is not an easy thing to do at times," she said. "Generally, when people are in pain they are miserable, so we do all we can to make their visits here as comfortable as possible and help make their day a little bit better.

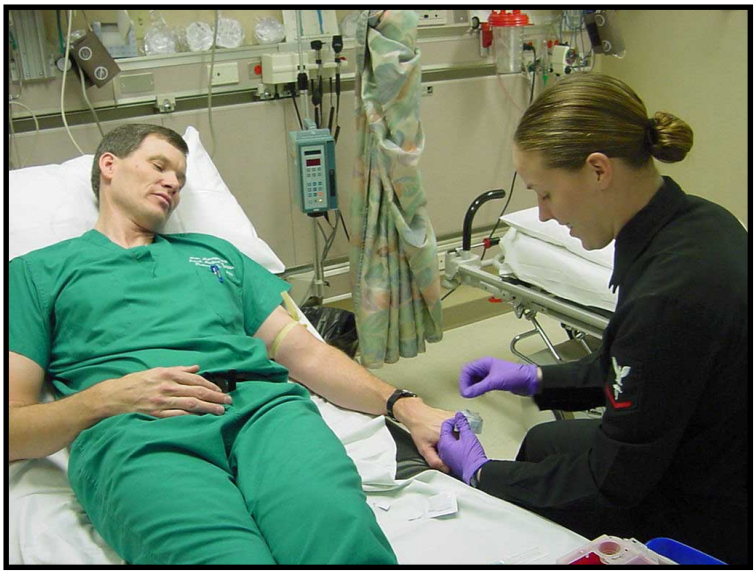

Photo By JO2 Duke Richardson

NMCP Bluejacket HM3 Rebecca Morrell, left, demonstrates the proper way of taking vital signs on fellow hospital staff member Bill Douglas.

Photo By JO2 Duke Richardson

NMCP Jr. Sailor of the Year HM1 Richard Whitehead, center, provides instruction as he trains his staff members on administering an IV.

"Sometimes all it takes to help is to listen to them," continued Morrell. "Sometimes they just need to vent and to have someone to listen to their problems. Even if a patient is miserable, that doesn't mean you have to make things worse."

According to Morrell, one of the hardest things about her job is when a patient fully succumbs to their ordeal. "It's a little hard to deal with when a patient dies because after a while you get so used to seeing them and getting to know them," she said. "It's like we see them once a month or every few weeks and you eventually have a friendly relationship with them and go beyond the 'health care provider/patient', meaning you get to know them as something more than just a client. (In the event) of them passing away gets hard to handle at times, but no matter how hard it may get, you have to move on."

One thing HM1 Whitehead enjoys about his work within NMCP's Anesthesiology Department is helping his people grow as naval professionals as a career counselor. "Whether it is helping people get the orders they want or guiding them at this point in their career, being a career counselor has to be the most satisfying part of my job," said Whitehead.

Since being named JSOY, Whitehead says he gets noticed in a different light than before. People come to him a lot more to take care of certain issues and responsibilities as they arise in his work center. "People do expect a lot more out of me now since winning the award. That is especially true with my supervisors. When things come up, they come to me a lot now for assistance and they expect a lot more from me."

Taking two of NMCP's top awards, Morrell and Whitehead have found themselves thrown into a high-profile position. Given the chance to do so, they would use that position to give newer sailors key tips to help them get the most out of their naval experience.

"Take advantage of special programs such as tuition assistance to further your education," said Whitehead. "There are a lot of things to choose in the Navy to help you grow professionally, personally and succeed in life."

"Anything you do and get out of life depends on what you make of it," said the BJOY. "If you believe something is going to turn out bad it most likely will, but it always pays to turn a bad experience into a positive one. Your time in the Navy and in life depends on what you make out of it, so it pays to get as much out of it as you can. The Navy has so many opportunities to help you succeed it would be wise to take advantage of as many of those chances as you can."

DoD, VA Hoping To Increase Medical Cooperation

By Sgt. 1st Class Kathleen T. Rhem, USA, American Forces Press Service

WASHINGTON, DC - The Defense Department is looking to build "a mutually beneficial partnership" with the Department of Veterans Affairs to minimize both organizations' health care costs.

"As we face the threat of terrorism, it is more important than ever that we ensure effective coordination and cooperation with other federal agencies and organizations with necessary expertise," Dr. Bill Winkenwerder said in remarks to Congress.

The doctor is the assistant secretary of defense for health affairs. He testified March 13 before the Personnel Subcommittee of the Senate Armed Services Committee on medical issues in President Bush's fiscal 2003 budget request. The administration seeks $20.9 billion for the military health system.

Organizations "with necessary expertise" especially include the VA and Department of Health and Human Services, Winkenwerder said. DoD hopes that a partnership with the VA "optimizes the use of resources and infrastructure to improve access to quality health care and increase the cost-effectiveness of each department's operations," he said.

The two departments currently have eight joint ventures around the country providing coordinated health care to both VA and DoD medical care beneficiaries. "However, all of these agreements are not fully utilized," Winkenwerder told the committee members.

He said the fiscal 2003 budget request lays out several concrete short-term goals:

- Establish solid business procedures for reimbursement of services.
- Improve access to health care through VA participation in TRICARE.
- Examine joint opportunities in pharmaceuticals
- Make it easier for DoD and VA to exchange health care information.
- Establish a "long-range joint strategic planning activity" between the two agencies.

DoD officials expect to be able to transmit computerized patient medical record data to the VA by fiscal 2005, Winkenwerder said. "The focus of our efforts is to move the relationship with the VA from one of sharing to a proactive partnership that meets the missions of both agencies while benefiting the service members, veteran and taxpayer," he said.

The assistant secretary also outlined force health protection and medical readiness issues covered in the budget request. "The terrorist acts of last fall placed us on a war footing and escalated the urgency of our need for preparedness," Winkenwerder told the senators.

He said DoD is working to develop investigational new drug protocols and guidelines for smallpox and botulinum toxoid vaccines, and pyridostigmine bromide, or PB, tablets, which are used to counteract the effects of nerve agents.

Experts, he added, are also examining the use of the anthrax vaccine and antibiotics as a post-exposure preventive measure - a technique used after the anthrax attacks loosed in the U.S. mail last year.

American Red Cross

Red Cross Summer Volunteer Program for Teenagers

When: 19 June-9 August 2002

Where: Naval Medical Center Portsmouth

Why: Learn new skills/ meet new people/ enjoy helping others

Who: Teens 14-18 years of age

For more information call the Red Cross at 953-5435

Yokosuka Tests Its Medical Response

By Bill Doughty, U.S. Naval Hospital Yokosuka, Japan

YOKOSUKA, Japan - A fishing boat pulls up to the shore-side restaurant at the naval base. Terrorists launch a chemical agent - sarin gas - through the restaurant's window, causing dozens of casualties.

How does the base respond?

That was the scenario tested at a mass casualty drill in Yokosuka last week, coinciding with the seventh anniversary of a sarin attack on Tokyo subways by the religious cult Aum Shinrikyo. Since it was a chemical attack, mock victims first were "deconned" - decontaminated by specially trained and equipped firefighters. Men in rubberized suits and special breathing devices hosed down and washed casualties so they could be evacuated safely and triaged by medical experts, also in special protective equipment.

"This is the primary response you would see in a real situation," explains HMC(FMF/PJ) Dave Sickle. "The last thing you want to do is go directly to the hospital without first being deconned."

Without adequate decontamination of casualties, the entire medical facility could become contaminated and shut down.

With practiced precision, the firefighters of the Naval Forces Japan Regional Fire Department moved casualties through decon. The Explosive Ordnance Disposal team responded and contained the chemical agent. Medical teams raced in and provided triage and evacuation, with assistance from the Japan Self Defense Force (JSDF).

"This drill was one of the best that I have seen anywhere," said Capt. Adam M. Robinson Jr., MC, commanding officer of U. S. Naval Hospital Yokosuka. "The Fire Department, under the leadership of Fire Chief Dan Marshall, is second to none. The Japan Self Defense Force participants were integral to the success of theevent."

Participating as "casualties" for the drill were members of the JSDF, American Embassy workers, Medical Holding Company, and more than a dozen seniors from the base's Kinnick High School.

The sarin gas attack in Tokyo seven years ago showed that terrorism could strike close to home. The attacks of Sept. 11, just over six months ago, reinforced the importance of readiness.

NMCP strives to exceed goals of Customer Service

By Lt. Robert Lyon

On the average healthcare is the largest expense, just behind food, for the average American. While the military has benefited from having relatively free healthcare, the prevailing perception was of poor quality and inadequate customer service. Since the opening of the Charette Health Care Center at Naval Medical Center Portsmouth, that perception has changed.

In a recent survey of all other military care facilities, the Charette Health Care Center was ranked consistently higher than other facilities in customer care. Overall satisfaction for inpatient service continues to be greater than 90 percent. Over the two years since the opening of the Charette Health Care Center the average has been nothing less than 88 percent satisfaction. The average customer service satisfaction survey for civilian HMO's is 77 percent on average.

The average patient load is 50 - 80,000 visits per month here at NMCP and the nine outlying clinics. The average number of monthly complaints are 250 per month totaling 04 - .06%.

According to Cmdr. Ava Abney, Product Line Leader for Patient and Guest Relations, "The goal of the NMCP is "extreme customer delight," said Abney. "We are a center of excellence and thrive because we truly try our best to exceed the expectations of our active duty, the fleet, and our beneficiaries. Although at times we do receive comments that are less than positive, we view it as feedback and sincerely thank our customers for taking the time to provide it to us. This is critical to our growth and standing in the community we serve and military medicine," Abney explained.

Staff members have taken these feedback reports seriously and have made a number of significant changes to improve customer service. These changes include:

- The addition of more disabled parking spaces. Federal law mandates a fixed number of parking spaces for the disabled. Currently, Naval Medical Center Portsmouth exceeds this requirement.

- Added hours on Thursday for allergy clinic patients. This was due to active duty and beneficiary concerns regarding removing their children from school and the numbers of hours lost in the day having to receive allergy shots. The Allergy Clinic remains open late on Thursdays to be more accommodating.

- Relocation of the ATM. A Navy Federal Credit Union ATM machine was relocated into the Charette Health Care Center for ease of patient and staff use. Future plans are to include Navy Federal in Building 215.

- Physical Therapy appointments at Branch Medical Clinic Oceana. Prior to this, an hour one-way trip to NMCP was necessary for physical therapy.

- Inpatients complaining about cold food – Nutrition management adjusted the food tray delivery schedule providing inpatients with hot meals.

Other future improvements include private rooms and reserved parking for expecting mothers and improved data collection to reduce the wait for patients.

Customer satisfaction has been the primary goal of Naval Medical Center Portsmouth since day one. Through the use of feedback reports, compliments and complaints the Charette Health Care Center continues to meet the healthcare needs of its beneficaries.

Education important for new moms -- dads too.

By JO3 Theresa Raymond

Expecting a new addition to the family can be overwhelming, but Naval Medical Center Portsmouth eliminates some of the uncertainty and apprehension by offering programs and classes that can benefit families of all sizes. Classes ranging from budgeting to breastfeeding for first time parents as well as parents with children.

These classes allow both parents, or whomever else mom brings as her support system, know what to expect at NMCP. Topics ranging from prenatal care to birth control after delivery are discussed to help give mom an idea of what's going to happen over the next few months.

The classes don't stop after the baby is born. Classes on how to care for the baby are highly encouraged for the new mom, and dad is also encouraged to attend. This class offered after delivery covers every aspect of caring for a newborn. This training also provides the latest information on problems that may arise after childbirth such as postpartum depression.

NMCP also includes dad in the education process. These classes help dads become part of the pregnancy. In all classes, expecting fathers are always welcome.

NMCP also offers classes for siblings. These classes teach children what having a new baby brother or sister actually means. Children over four are even allowed in the delivery room to watch their new brother or sister enter this world.

Following is a list of some of the classes offered by NMCP OB/GYN.

· Prenatal Class- This class provides information on prenatal care, pregnancy, lifestyle, common discomforts related to pregnancy, nutrition, problems of pregnancy, and available command and community resources. The class is for newly pregnant patients and their significant other. Call Tricare at 1-800-931-9501 for more information.

: Great Beginnings- This class provides a comprehensive overview of the expected hospital experience beginning with labor and delivery through the first few weeks at home after discharge. Call Tricare at 1-800-931-9501 for more information or to register for classes.

: Prepared Childbirth- A refresher course on relaxation techniques, breathing techniques, and labor pain management. The class reviews breast feeding, as well as giving a tour of the labor deck and delivery rooms. Call OB/GYN at 953-4300 for more information.

: Budgeting for Baby- The class, sponsored by Navy Marine Corps Relief, provides a practical knowledge on budgeting for expecting parents future family. The class also offers a free layette to new mom. Call 399-1675 for more information.

: Sibling Class- A class for children who are expecting a new addition. The two-hour class includes topics like, what to expect, how to treat the baby, and gives a tour, so children can see where their mother will deliver the baby. The class is for children between the ages of four and 10. Call 953-4601 for more information.

: Healthy Pregnancy, Healthy Baby- This class provides information on what to expect during the third trimester. It also teaches how to care for a newborn and the proper use of a car seat. The six-session course offered by the Red Cross, does have a small fee. Call Pam Warefield at 393-1031 for more information.

: Breast Feeding Class- Provides information on breast feeding to expecting parents. Call OB/GYN at 953-4300 for more information.

: Birth Control Option Class- This class discusses available birth control methods to help patients find the right method. Call 953-4300 for more information.

For new parents, let NMCP provide you with appropriate information before the new one arrives. If you have a special interest in these subjects and would like to volunteer, please contact the Red Cross at 953-7524 or Navy Marine Corps Relief at 423-8830.

Fitness Instructor makes fit sailors job one

By JO3 Theresa Raymond

Naval Medical Center Portsmouth offers many fitness and recreational programs for its Sailors, and one woman is responsible for implementing all of them.

Suzan Lowry, Health Promotion's Health Educator and Programs Director, started all of the fitness programs at NMCP upon arriving here almost nine years ago.

Lowry, who has been working for the government for 10 years as a health instructor, enjoys working with the military and keeping service members in shape.

"I enjoy my job because I'm promoting health and well being. Basically, I'm here for the military. I get to make them as good as they can get, physically," she explained.

Starting the programs was just the beginning for Lowry as she was assigned the job of health educator in addition to being the program director, after the hospital made some changes in the realignment process.

"Being health educator allows me to help more military personnel from all around the Hampton Roads area. I deal with injury prevention, physical readiness testing and weight management. I believe my skills are being utilized," said Lowry.

Lowry implemented new programs at North Island in Coronado, Calif. before coming to NMCP. She also maintained fitness through direct contact with ships in the area.

Lowry feels that being a military wife is what drives her to help service members stay in shape. "My husband is military, and I feel they are my employer. I should give my best at whatever services I can provide," explained Lowry.

Some of the programs she implemented are the water aerobics classes and the fitness classes offered throughout the day at NMCP. Lowry also works as a personal trainer, an aerobics instructor, and a PRT coordinator.

Lowry attended the University of South Carolina and the Cooper Institute in Dallas, Texas. She also holds many national certifications for fitness, water and aerobics.

"I have the most rewarding job. When someone sets goals and accomplishes them with some assistance from me, it doesn't get any better," said Lowry.

Shatter the silence, Vote !!!

By Lt. A. Hall, JAG, USN, Asst. Staff Judge Advocate

The right to vote is one of our most important civil liberties. From the formation of our country, the right to vote has played an integral part in the preservation of our democratic system, and yet it all too often goes unexercised. In 2002, 37 governors, 35 U.S. Senators, 430 U.S. House Representatives, and many state and local officials will be elected.

The Legal Department is available to assist active duty members and their families with exercising their right to vote. The Voting Assistance Officer (VAO) is Lt. A. Hall, JAGC, USN. The Assistant Voting Assistance Officer is SMC W. Schisel. The VAO or AVAO are the points of contact to facilitate the right to vote for active duty and their family members.

Often active duty members retain ties to their home state and exercise their vote in that home state. Family members are often eligible to vote in the locality of the duty station as well as in the home state. Careful thought and consideration should be given regarding this choice of voting residence. Family members may have a direct interest in, and wish to vote on local initiatives that directly relate to public schools, transportation, and other local issues, which affect their welfare and that of their children.

The Federal Post Card Application (FPCA, SF-76) is available to all service members and their family members. FPCA's must be filled out legibly. Election officials will not process FPCA's that cannot be read. Illegible handwriting is a primary reason absentee voters fail to receive their ballot. An electronic version of the FPCA is available at www.fvap.ncr.gov. The Voter Assistance Guide 2002-2003, available from the VAOs and online, gives specific instructions for completion of the FPCA.

Visit the Federal Voting Assistance Program website, www.fvap.ncr.gov, or stop by the Legal Department (Bldg 215, Room 135, 2nd Floor) for more information about your specific state requirements and to download a FPCA or federal write-in ballot.

www.humana-military.com Your TRICARE Program Resource Center

Make the Humana Military Healthcare Services Web site, www.humana-military.com, your go-to site for TRICARE program information, beneficiary services, TRICARE forms, and health and wellness information.

Just visit www.humana-military.com, click on your region on the map, then select from the many beneficiary resources available to help you.

·Learn more about your TRICARE benefits by clicking on "Program Information" or "TRICARE For Life."

·Keep up with the latest TRICARE news by checking the "Hot News" feature.

·Access the "Online Member Services" section to . . .

-Locate a TRICARE network provider near you by selecting "Find a Provider."

-Make your Prime re-enrollment payment online by using the "Payment" feature.

-Check on the status of your claims by clicking on "Check Your Claims."

-Download TRICARE forms by selecting "Download Forms."

-Request information or enrollment kits online, or access links to the Web sites of DEERS, the TRICARE Mid-Atlantic region, or the TRICARE Mid-Atlantic region claims processor by clicking on the "Contact Us" feature.

·Follow the latest developments in healthcare or learn more about specific ill nesses by visiting the "WebMD" section.

TRICARE Mid-Atlantic Region: (800) 931-9501

Co-workers Take Sewells Point's Top Three Awards

By JO2 Duke Richardson

Not many people that work within the same chain can say they took their command's top awards but three Sailors who worked within the same department (military acute care or MAC-D) at Branch Medical Clinic Sewells Point can do just that.

HM1 Eric Duchesneau, HM3 Subrina Strauss, and HN Karl St. Fleur were named Sewells Point's Sailor of the Year (SOY), Jr. Sailor of the Year (JSOY), and Bluejacket of the Year (BJOY), respectively.

Photo by JO3 Theresa Raymond

HM3 Subrina Strauss is BMC Sewells Point's newest Jr. Sailor of the Year.

Duchesneau, Sewells Point's SOY, felt pride sharing the distinction of being one of the clinic's top three Sailors with his subordinates. "This has to be one of the most satisfying things about my time at Sewells Point. My junior personnel were selected for (Jr. Sailor and Bluejacket of the Year)," he said. "They are both my corpsmen and it makes me very proud to share this honor with them."

Things were not always exactly on the easy side for Duchesneau at the clinic. With the high volume of people that go to Sewells Point for treatment, he always had to keep on his toes to get things done. "The number of patients we have come through here is astounding. "We're definitely (one of) the busiest clinics in the Navy and maybe more so than some hospitals," said Duchesneau. "The amount of people we see, as well as the number of positive feedbacks we have received from patients, truly indicates we are definitely doing something right. Everyday (at the clinic) is a new challenge."

St. Fleur, the BJOY, enjoys the versatility of his job and experiencing different aspects of the medical field. "Here at the clinic I have seen different parts of medical care by working in acute care then moving on to optometry, giving me a good all-around learning experience," he said.

He plans on parlaying everything he has learned during his time in service to help him get a commissioning in the medical field. "Right now I'm doing all I can to learn as much as I can about medicine. I've been taking different courses and classes earning credits, 'getting my hands dirty,' and absorbing the knowledge necessary to get a commissioning as a physician's assistant."

He also said since receiving the distinction of being named one of Sewells Point's finest, he has been looked upon in a different light. He feels having the honor of being named Bluejacket of the Year has earned him a lot more respect from his colleagues. "Before it seemed as if I was just another face in the crowd, but now a good number of people look at me in a new way," said St. Fleur. "Winning this has helped me stand out a little more and receive a lot more respect and responsibilities which will help me grow as a leader. Some of the junior personnel have come to me far more often for (professional) advice and have asked me what I did (to win the award)."

The newest Jr. Sailor of the Year says she has to overcome a great challenge of a small staff in order for her to do her part in ensuring mission successfulness at the clinic. But still, serving as the assistant leading petty officer and training petty officer of Sewells Point Family Practice, Strauss feels fortunate to have the people she has working with her. "We're a little under-staffed here, but I still feel lucky to have the people here that I do because they are all really hard workers who care about the people we see," she said.

It's not everyday you come across a junior-grade petty officer working in a position traditionally held by those of a higher rating. So how did Strauss manage to slide into this position? "When I was working in MAC-D, my chief came to me and asked me if I wanted a leadership position since I was doing really good on the job and I said 'yes, anything for a new challenge.'"

Strauss has kept herself busy since being named JSOY. She has been working towards getting a nursing degree, but as training petty officer of her work center, she has also done what she can do to ensure her fellow workers are doing all they can to better themselves. "While I'm working towards my college degree I want to be sure people working under me know of the opportunities available to them and that they are happy with the job they are doing."

Photo by JO2 Duke Richardson

St. Fleur the Blue Jacket of the Year has this advice, "Even though you may be at the bottom of the totem pole and may feel you are treated unfairly at times, you have to stay focused. Set your goals, keep your goals and you will be set."

Combined, the "MAC-D Trio" has about 20 years naval experience and a career-long's worth of knowledge. Looking at their accomplishments, you can say with a little bit of know-

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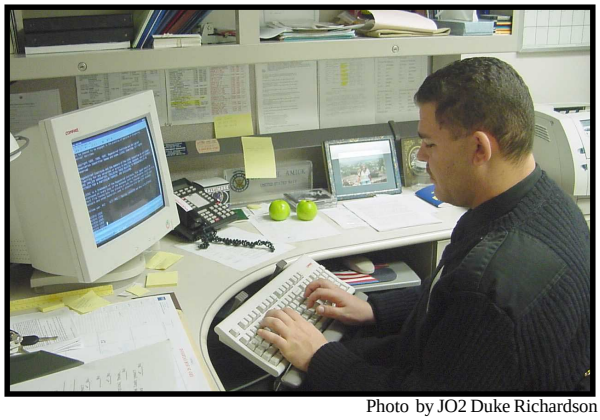

Photo by JO2 Duke Richardson

HM1 Eric Duchesneau, BMC Sewells Point's latest Sailor of the Year believes leaders should take a positive role in junior Sailors careers to help them go far in tomorrow's Navy.

From previous page

how, dedication and people-ability, the average "Joe Sailor" can go from being another face on the deckplates to a shining example for others to emulate.

"Always try make the best out of a bad situation," Strauss advises. "Even though something may be the worst thing you can be a part of do whatever it takes to make it work out to be a positive situation that will ultimately work in your favor."

The BJOY believes personal attitude and how one conducts themself in hard times plays a heavy factor in how well they will do in the long run. "Keeping a positive attitude is very important if you want to succeed in this game," advises St. Fleur. "Even though you may be at the bottom of the totem pole and may feel you are treated unfairly at times, you have to stay focused because the bad times won't last forever. Set your goals, keep your goals and you will be set."

According to Duchesneau, following the example of respected higher-ranking individuals is a key to a successful naval career. "Good advice for the junior personnel I would say is to look at their senior personnel, at their first classes and people in the khaki community and get in good with them," he said. "Find out what they have done throughout their careers that have led to their successes during their time in service. I believe mentorship is absolutely imperative for junior personnel. As soon as a new person checks in, take him (under your wing) and show them the right way because they are the future of the Navy and we have to mentor the way we all want the Navy to go."

Friday Night Fever Sock Hop!

1800 to 2200 17 May 2002

Gymnasium, Bldg. 276

Enjoy a great evening of fun, good food, great music, good times!

There's going to be a sock hop sponsored by the First Class Petty Officers' Association with assistance from Junior Enlisted Association and MWR. So come party with DJ Julius McRoe to the groovy tunes of the '60s and '70s. Win prizes for Best 60's Dress, Best Socks, Best Karaoke, Dance Contest, and Door Prizes.

Open to all staff members and their guests over 18 years of age. Advance ticket prices are $5.00 for E1 through E4, and $7.00 for E5 and above and civilians. Tickets can be obtained from the following:

HM1 Smith 3-5332 MS1 Jones 3-1009
MSC Robinson 3-6224 YN1 Way 3-5049
HM1 Felton 3-2512 HM1 McGee 3-2274
HM1 Creighton 3-0269 YN1 Yimsatt 3-5624

To volunteer, contact one of the above persons.

DAPA News

By HM1 Luann Smith

Alcoholism, also known as alcohol addiction or dependence, is a disease with far reaching medical, psychological, social, and financial consequences. Together with alcohol abuse, an estimated $148 billion each year is lost in missed workdays, illness, injuries and death. And in 2000, more than 15 million adults were believed to be either alcoholic or borderline alcoholic.

Alcoholism is a disease that can never be cured, but there are treatment plans to help alcoholics get and stay sober. No treatment will work, however, unless the alcoholic recognizes the problem. That's why it's crucial to know the telltale signs.

How do you know if you're at risk? While anyone can become dependent on alcohol, certain factors may increase your risk. If you started drinking early in life (age 14 or younger), your chances of developing alcohol related problems are greater. The tendency toward alcoholism may also run in families – for both genetic and lifestyle reasons. Having an alcoholic parent doesn't necessarily mean you'll become an alcoholic yourself. It just means you need to be aware of your risks so that you can protect yourself.

Life events may also play a role. Severe stress, such as that caused by the loss of a loved one, can lead even a light or moderate drinker to start drinking excessively.

Older people may be at higher risk, especially for alcohol related injuries. As we age, our tolerance for alcohol changes, and it takes less alcohol and less time to get drunk. This combined with senses that aren't as sharp and reaction time that isn't as quick later in life can increase the chances of falls, car crashes, and other accidents. Finally, older people are more likely to be taking one or more medications, some of which can interact harmfully with alcohol.

What are the warning signs? The four major symptoms of alcoholism are (1) alcohol cravings, (2) an inability to stop drinking once you've started, (3) going through withdrawal (nausea, sweating, shakiness, and anxiety) when you stop drinking, and (4) needing more and more alcohol to feel "high." Other signs that may indicate a problem include drinking to calm your nerves or relieve depression; losing interest in food; drinking alone often; covering up your drinking habits; getting drunk more than three or four times a year; feeling irritable, resentful, or unreasonable when you're not drinking; and having medical, social, or financial problems caused by drinking.

So when do you know you need help? Because of the serious problems alcohol dependence and abuse can cause, it's important to get help if you have *any* of the warning signs. Still unsure? Ask yourself questions such as these:

·*Have you ever felt you should cut down on your drinking?*
·*Have you ever felt annoyed by others suggesting you drink too much?*
·*Have you ever felt guilty about drinking?*
·*Have you ever had an "eye-opener" (a drink first thing in the morning to "cure" a hangover)?*
·Is there a family history of alcohol abuse or dependence?

Of course it doesn't have to get to this. Moderate drinking isn't always a problem. In fact, some experts believe that having one drink (defined as a 12-oz. beer, 5-oz. of wine or 1.5 oz. (shot) of 80-proof distilled spirits) per day may lower the risk of death from coronary artery disease. Older people also may find that a drink a day stimulates appetite, promotes regular bowel function, and improves mood. On the other hand, moderate drinking can lead to heavy drinking. When deciding how much (if any) drinking is okay for you, always consider all of the factors: your age, physical and mental health, lifestyle and family history. Also consider that even light drinking can be dangerous in combination with certain medications including those given for pain, sleeplessness, allergies and especially blood pressure or heart disease. Always check with your doctor and pharmacy for interaction information.

If you have been diagnosed as alcoholic or alcohol dependent (or meet the criteria based on what you've read) you will need to stop drinking altogether. This is usually very difficult, as your body and mind have been taught to need alcohol.

Programs are available to take the first step, which may be detoxification. Both medication and counseling may be used to help with the symptoms of withdrawal. Once this is complete, rehabilitation and recovery are possible. At this stage you learn to adjust your way of thinking about yourself and your drinking and to rearrange your daily life so that it doesn't include alcohol. Some medications may be used during this time to help reduce cravings. The continuation of care after rehabilitation is important to recovery and can be provided by groups such as Alcoholics Anonymous.

For more information or available resources talk to your Primary Care Manager or contact the DAPA. Alcoholism doesn't have to ruin your career or your life, not doing something about it will.

Clinical Pastoral Education brings Canadian Chaplain to NMCP

By JO3 Theresa Raymond

Photo By JO3 Theresa Raymond

Capt. Jerry Shields (left) and Cmdr. Bruce Anderson (right) of NMCP's Pastoral Care pose with Lt. Col. David Kettle (center), a visiting chaplain from Canada.

Canadian Chaplain, Lt. Col. David Kettle, visited Naval Medical Center Portsmouth in March to monitor a clinical education program for chaplains at the hospital.

The Clinical Pastoral Education program, or CPE, is for mid-career chaplains who want to learn clinical pastoral care. A select number of candidates are selected for the year-long program after a battery of qualifications and boards are reviewed. Canada only elects one person a year for the program.

"The program allows chaplains to learn advanced counseling techniques and gives them a chance to effectively work in a hospital setting," said Cmdr. Bruce Anderson of NMCP's Pastoral Care.

Kettle visited NMCP to evaluate the year-long program, which gives chaplains a chance to work alongside residents and learn valuable clinical practices.

"I came down here to see what's going on and am happy to see the extraordinary repor the chaplains have with their patients," said Kettle.

Although Canadian chaplains have been a part of the program for the past three years, this is Kettle's first time at NMCP.

"The skills learned in this program can be used anywhere," said Kettle. "The programs give the chaplains a chance to be more effective in trauma situations and so much more, and this hospital gives the correct environment," he explained.

CPE offers chaplains a chance to learn how to react to trauma situations in a hospital environment. The training is conducted alongside residents, and gives chaplains the accreditation needed to work as hospital chaplains.

"The chaplains are trained with residents as well as Hampton Veterans Medical Center and the drug and rehabilitation program. They train in all clinics and wards, and they get to critique each other twice a week," said Anderson.

The critiquing is the most crucial part for the trainees. In this type of environment, the chaplains find out their weaknesses and learn to evaluate without any biases.

"Chaplains have very little exposure to the critical process, and the (critiquing) gives the chaplains a chance to understand their weakness and learn to compensate for those weaknesses," explained Kettle.

CPE also includes lectured classes broken down into four quarters and hands on training through the wards of NMCP, helping family members cope with whatever reasons brought them to the hospital.

"I know if a Chaplain is getting out there and doing a good job, by visiting. If patients know who the chaplain is and is happy to see them then I know they are making progress," Kettle explained.

Kettle works at the Canadian National Defense Headquarters in the Office of the Chaplain General in Ottawa and is a Presbyterian chaplain. CPE is what brought Kettle to NMCP, since he monitors training for chaplains from Canada, making sure they are learning everything they can.

"CPE is unlike any other clinical pastoral program there is. The program here is marvelous and the facility is outstanding," Kettle said.

Kettle was born in Toronto where he also attended school, earning many degree's ranging from a Bachelors in History and Political Science to a Masters of Divinity and Theology. In all, Kettle has over seven degrees.

Kettle joined the Canadian Army after seeing an ad in a religious magazine and has been a military chaplain for 21 years.

"CPE gives the chaplains a greater comfort level for themselves. Their active listening skills are sharpened. Overall, this course makes chaplains more effective," Kettle said.

New appointment system big hit with patients

By JO2 Jodi Durie

From the moment a woman discovers she is pregnant she experiences changes-physical changes, emotional changes, and changes in the decisions and choices she will begin to make for the rest of her life. To help simplify and provide comfort and support to expectant mothers as they begin adjusting to these abundant changes, Naval Medical Center Portsmouth's OB/GYN department is making some changes of its own.

The first change took place in February with the opening of a new appointment room, which allows patients to make follow-up appointments in private, shortly after their appointment.

"We've improved our checkout process with our separate appointment room. We've moved the checkout process from the front so that patients aren't standing in line and feeling like they've gotten lost in the shuffle. Again we're trying to provide a more private approach to patient care as well as something more expedient that makes our patients more comfortable," explained Cmdr. Susan L. Chittum, head of maternal infant health care at NMCP.

"We're hoping that with our own appointing process when patients leave the clinic, whether it's here or at one of the branch clinics, they will have a follow-up appointment already arranged. They will then have had a say in who they want to see, what day and what time," said Chittum. "Appointments are available all day long every day of the week. We're trying to make it as user friendly as possible," added Chittum.

Additionally, a patient's first encounter with the OB Clinic will be customized to meet their individual needs rather than having patients meet in a group environment as done in the past.

"Some patients are in very good health when they come to their first appointment and other patients may have an extensive medical history and are obviously high risk from the very beginning due to their health condition; we'd rather not have every patient sit around and go through everything together," she said. "So, we're essentially doing away with the registration class, and we're going to register patients individually. As of this month (March) patients will come in and, instead of going to a class of 12 to 20 people where they will all hear the same information and fill out paperwork, each patient will individually meet with an obstetric-trained nurse, one on one," said Chittum.

This obstetric-trained nurse will interview patients to determine their specific needs and provide them prenatal vitamins, arrangements to perform initial lab work and, answer their personal questions for a healthy pregnancy. The nurse will also provide basic information including what an expectant mother should do initially. They will be informed on risk factors, which would indicate what kind of first appointment they might need, and what is best for them, said Chittum.

Additional changes will be made to the complimentary classes offered. Expectant mothers will soon have reserved parking, most mothers will have private post-partum rooms increasing the probability of the father remaining in the room with her, and finally a post-partum is schedule to open in April.

The postpartum clinic will provide medical care for patients with special needs within 48 to 72 hours after discharge from the hospital. This visit will not be in lieu of the six-week postpartum visit.

You are in control when you decide to eat right

By Maggie Malson

After years of good information on the importance of a nutritious diet, most of us still choose diets that contribute to major medical problems such as heart disease and cancer. Years of unhealthy eating will probably not be broken overnight, but we have to start making an effort to change our bad habits. Make short term goals. Choose a new low-fat item to replace a higher fat favorite each week. Shoot to incorporate five fruits and vegetable in your diet each day. You will be surprised at how quickly you will find yourself making good food choices most of the time.

Eating healthy begins in the commissary or grocery store. If you choose low-fat products there, when you are ready to cook at home or have a snack, you will have low-fat items to choose from, and will not be tempted by high fat items. The recommended fat intake is that no more than 30 percent of your calories should come from fat, and no more than 10 percent from saturated fat. Look for lean trimmed cuts of meat. Lean ground meat (beef, chicken, or turkey). Dairy items should be low fat. Choose 1percent or skim milk, lower-fat cheeses, and low-fat yogurt, ice milk, and popsicles.

Research has shown that nutrients can prevent or delay the development of cancers. A diet high in fiber is shown to protect against most types of cancer. High fiber diets have five or more servings of fruits and vegetables and whole grain breads, cereals, and crackers. Make sure you choose lots of fresh fruits and vegetables on your grocery list. Including fruits and vegetables is an easy way to get the recommended fiber into your diet. Try new fruits and vegetables that you do not usually buy; you might find some new favorites and you will increase the variety of your meals.

About one-third of the 500,000 cancer deaths that occur in the United States each year is due to dietary factors. Therefore, we as individuals can make a major impact on decreasing our risk for cancer by making better food choices.

Identify any barriers that would keep you from making good food choices. Decide how you can eliminate them or work around them. Reward yourself for your new healthy eating plan. Do not let food control you. Your motto should be "Eat to Live," not "Live to Eat." You decide what emphasis you will put on the food choices you make. It is up to you to be in the best health that you can be. While nutritious eating is only one way to decrease your risk of developing cancer, it is an easy risk factor to decrease. You can start today by committing to healthy food choices.

Tips to help get your fruits and vegetables in:

Pack a ½ cup fruit in your lunch
Drink ¾ cup juice for breakfast
Add ½ cup vegetables to rice at dinner
Have a salad
Eat a medium size apple for a snack
Drink some vegetable juice
Drink to your health:
¾ cup frozen Florida orange juice concentrate, thawed
2-1/4 cups carbonated water or tonic water, chilled ice cubes
Florida grapefruit slices, quartered (optional)

Pour thawed orange juice concentrate into a pitcher. Gently stir in the chilled carbonated water or tonic water. To serve pour over ice cubes in glasses. If desired, garnish with quartered grapefruit slices. Serve at once. Makes 4, 6oz servings.

For more information on nutrition classes, contact **The Wellness Department @ 314-6014.**

APRIL 2002 CYCLE
OFFICIAL PHYSICAL FITNESS ASSESSMENT
RECOMMENDED DIRECTORATE DATES

Sun	Mon	Tue	Wed	Thur	Fri	Sat
	1 CO/XO DMA DNA DBO	2 CO/XO DMA DNA DBO	3 CO/XO DMA DNA DBO	4 CO/XO DMA DNA DBO	5 CO/XO DMA DNA DBO	6
7	8 DFFM DRCS DASS DCSS DKL	9 DFFM DRCS DASS DCSS DKL	10 DFFM DRCS DASS DCSS DKL	11 DFFM DRCS DASS DCSS DKL	12 DFFM DRCS DASS DCSS DKL	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	April 1st-26th Weigh-ins 0700-1200 Mon-Fri COD Bunk Room. April 1st-30th PFAs 0700-1200 & 1400-1500 Mon-Fri Brown Pavilion next to Helo Pad. *FEP PERSONNEL 1 APRIL THRU 5 APRIL 02. FLEET HOSPITAL –15 APRIL 26 APR			