



THE COURIER



April/May 2002

FORCE MASTER CHIEF RETIRES IN MOVING CHANGE OF COMMAND CEREMONY

By JO2 Jodi Durie

Navy Medicine bid farewell to Force Master Chief HMCM (SW) Mark R. Weldon during a combined change of office and retirement ceremony held April 12, 2002 aboard the USS Portland (LSD-37) on Little Creek Amphibious Base. Weldon served as the seventh Force Master Chief for the Navy Medical Department and Director of Medical Department Enlisted Personnel since June 1998.

HMCM (SW/AW) Jacqueline L. K. DiRosa relieved Weldon and became the Navy's first female force master chief.

Guests included the Navy Surgeon General Vice Adm. Michael L. Cowan, former MCPON Robert Walker, Medal of Honor recipient Robert E. Bush, chiefs from around the world, family, friends and other distinguished visitors.

Weldon's strong passion and commitment to junior sailors was clearly evident through his selection of HM3 Daniel Henry as his guest speaker.

"Master Chief Mark Weldon has been shepherding the hospital and dental corps of the Navy for the last four years. Many of you, particularly the younger ones of you, have never known a different force master chief. It's been his guidance, his strength of character, his clarity of the mission and his absolute resolute unwillingness to accept anything but the very finest that has helped mold this corps that is both, I believe the heart and the backbone of Navy medicine," said Cowan, US Navy Surgeon General and chief, Bureau of Medicine and Surgery.

As force master chief, DiRosa is the advocate for more than 30,000 enlisted sailors of the medical department including dental technicians, hospital corpsmen and deployable medical assets. She is also the consultant in enlisted matters to the Navy Surgeon General.

Before her selection as the eighth Force



Photo by JO2 Jodi Durie

Departure- After 30 dedicated years in the Navy HMCM (SW) Mark Weldon departs from the service after retiring on board the USS Portland (LSD-37).

Master Chief for the Navy Medical Department, DiRosa served as the CMC of the forward deployed command ship the USS Blue Ridge (LCC 19). She completed two South Pacific Forward Presence deployments and multiple joint military exercises. Her other assignments include duty aboard Naval Hospitals San Diego, Calif. and Bremerton, Wash., the USS Acadia (AD 42), the USS Kitty Hawk (CV 63) and the USS Supply (AOE 6).

Her personal awards include the Navy Commendation Medal with three Gold Stars and Navy Achievement Medal with two Gold Stars.

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

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*How do I get something in
THE COURIER?*

The command's monthly publication provides an avenue to circulate all the useful information the Medical Center staff has to offer. Contact the Public Affairs Office at 953-7986, Fax 953-5118, via Guardmail, or you can E-mail the PAO, Lt. Lyon, at rtlyon@pnh10.med.navy.mil

Submissions should be on a disk in text or Word format with a paper copy attached. Photos are welcome and can be returned on request. The Courier now comes out once a month. Send your submissions to the Public Affairs Office and we'll put it in the next current issue, space permitting. Submission deadline for the next issue is the 15th!!

We are located in Bldg. 215, second deck, Room 2-118 (next to the Conference Room.)

FOURTH ANNUAL TRICARE MID-ATLANTIC GOLF TOURNAMENT

TRICARE Mid-Atlantic will be hosting its Fourth Annual Golf Tournament before the 2002 Commanders' Conference. The tournament will take place on Monday, May 20, 2002 at the Chesapeake Golf Club, 1201 Club House Drive, Chesapeake, VA. We have set a goal to raise \$5,000 to benefit the Fisher House. In order to reach this goal, we will have "Hole Sponsorships" for \$100 per hole.

What is the Fisher House and Who Can Use It?

The Fisher House is a national network of comfort houses, providing a "home-away-from home" for families of patients receiving care at major regional military and VA medical centers.

SHOTGUN start is at 1 p.m. Golfers should be checked in by 1230. The Tournament will be played under current USGA rules. Special prizes will be awarded for "closest to the pin on holes 5 and 11, straightest drive on hole 17, and "longest putt made on hole 4".

Price of participation is \$50 per person. The price includes green fees, cart, buffet, prizes, 1 Mulligan and 1 Toss. Number of players is limited to 144, so we recommend that you confirm your reservation as early as possible. Small coolers are allowed.

Registrations should be received by close of business May 10.

Registration Form

Fourth Annual TRICARE Mid-Atlantic Golf Tournament

Command/ Company: _____

Telephone: _____ Fax: _____

E-mail: _____

The names of players in my foursome are:

1) _____

2) _____

3) _____

POC: Mr. Dan Wilmoth @ 757-314-6445,

dan.wilmoth@mh.tma.med.navy.mil

Fax: 757-314-6496

(Checks should be made payable to: Dan Wilmoth)

HOLE SPONSORSHIP

_____, has donated \$_____ to the Fisher House/Pentagon Relief Fund Golf Tournament.

Date ___/___/2002 Signature _____

Golf Tournament Official

Summer Wallace, Shannon Whelan, NMCP's Command Ombudsmen



-PURPOSE OF AN OMBUDSMAN: TO SERVE IN AN OFFICIALLY APPOINTED POSITION AS A LIAISON BETWEEN THE COMMAND AND COMMAND FAMILIES.

Summer Wallace

Previous Command: First time serving as an Ombudsman but am familiar with the training schedules because my husband is a corpsman who just finished up three years at Kaneohe MCBH, Hawaii with 2/3 H&S Company. The schedules were very unpredictable and without much notice at times so I can relate in that aspect. In just the three years I've been with my sailor (married for two of those) I have encountered various situations with the Navy. I'm hoping that my experience being affiliated with the Navy will prove valuable to the command and their families for my role as an Ombudsman.

-Married to HM2 Psych Tech Heath Wallace, with two little girls (21 months and 6 months).

-Full time college student majoring in Pre-Law

-Born and raised in Honolulu, Hawaii. Just recently arrived here at Portsmouth last year in September.

Shannon Whelan

Previous Command: CVN-71, USS Theodore Roosevelt (very familiar w/large commands). I can relate to the busy schedules of underway and deployed periods as I was invited to fly out to the carrier to stay overnight for 24 hrs and watched the exercises going on. When they're out to sea, or somewhere else, they're very busy!

My position means a great deal to me and I consider it an honor and a privilege to serve the command in this capacity. I take my job very seriously and, am always looking for feedback. Please email me any suggestions and/or comments! email: SLWhelan@mar.med.navy.mil

-Married to ET2 Dennis Whelan in MID, three children (two boys and a little girl).

-Previously served in the Air Force in the field of munitions

-Have lived in the Hampton Roads area since 1986

How to contact the Ombudsman:

Call the Ombudsmen regarding financial issues, arrival/departure of platforms, Tidewater area info, birth/death/accidents of family members, command functions, numbers for clinics, ask us any question ~ if we don't have an answer we will find one! -working hours from 8a.m. to 9p.m. but on call 24/7, please use common sense when calling. The ombudsman phone is 953-5831.

Levels of confidentiality are kept except in cases of homicide or suicide, drug and alcohol, spouse or child abuse.

Pager: Shannon Whelan- 669-0909, Summer Wallace- 669-3105, or by e-mail, SWallace@mar.med.navy.mil

Meet the Wellness department

By Tarah Alkire, Wellness Department

What is the Wellness Product Line?

The Wellness Product Line is the new name for the Health Promotion Department.

Our Mission:

To support operational readiness, promote healthy lifestyles and enhance quality of life.

What we do:

Our job is to help you help yourself. Through a variety of classes and programs, we can enable you to choose a healthier lifestyle. We work with Active Duty, Retirees, Family Members, and DOD Workers.

Services Available

Tobacco Cessation

The American Cancer Society's Fresh Start four-session program designed to help participants stop smoking or using smokeless tobacco products through group support, education and medication. Use of Zyban and or Nicotine Replacement Therapy (NRT) as desired or appropriate.

Tobacco Cessation with Hypnotherapy

Four-session program designed to help participants stop smoking or using smokeless tobacco products through behavior modification and relaxation techniques. **NO MEDICATION IS PRESCRIBED.**

Walking Club

Weekly club that encourages exercise and healthy eating. Meets every Wednesday from 12:00 p.m. to 1:00 p.m. for a group walk.

Weight Management

Four-week interactive program designated to help participants set sensible weight loss goals and incorporate healthy eating, exercise, and behavior modification into daily lifestyle.

Weight Management with Self-Hypnotherapy

Four-week program uses relaxation techniques and guided imagery to help participants achieve weight loss goals. This class also discusses lifestyle changes through healthy eating, exercise and behavior modification.

Ship Shape

Ten-week program focusing on nutrition education, increased exercise and behavior modifications that support a healthier lifestyle. To participate in this program, active duty personnel and participants must have command approval.

Hypertension Control

Individual blood pressure screening followed by a two-hour information class discussing tips and strategies for controlling high blood pressure. Topics discussed include lifestyle changes through diet and exercise as well as information on anti-hypertensive medication.

Cholesterol Management

Two-hour group class discussing the importance of cholesterol management through diet and lifestyle modification. Also discussed are risk factors for heart disease.

Nutrition

Two-hour group class designed around the Food Guide Pyramid. This class discusses general nutrition and good eating habits.

Classes are open to active duty, retirees, beneficiaries and civilian staff unless otherwise noted. Prior registration is required. For general information, dates, locations of classes or to sign up for a class; please call **314-6014**.

Attitude is key, says one corpsman

By JO2 Duke Richardson

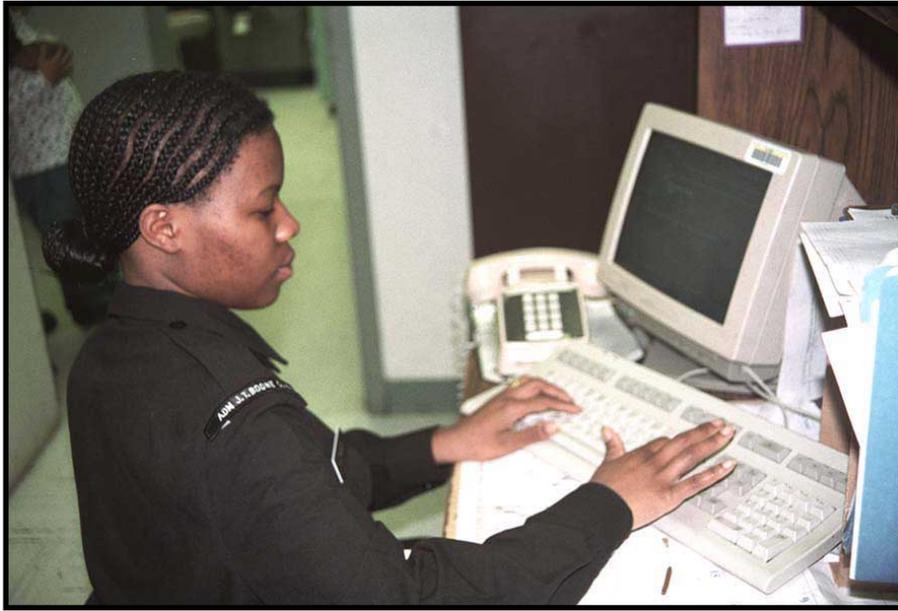


Photo By JO2 Duke Richardson

HM3 Shaunika Johnson, the assistant leading petty officer of BMC Boone's Pediatric Clinic, enters a patient's lab results into their database. Johnson says the main thing she likes about pediatric care is doing her best in ensuring children receive the best possible care.

A hospital corpsman at Branch Medical Clinic Boone helps take care of 40-50 children a day and believes she couldn't ask for a better job.

With three years of military service under her belt, HM3 Shaunika Johnson, assistant leading petty officer of Branch Medical Clinic Boone's Pediatric Center, says the best thing she loves about her job is working with the children. "It really is great working with and providing care to the kids that come here," she said. "I love it even though it's challenging and hectic at times, but I manage to get through and help ensure they get the care they need."

Even with the occasional "cranky" youngster she encounters from time to time, Johnson still manages to maintain her composure and keep that sense of professionalism needed to get the job done. "Sometimes if a child gets really (temperamental) you have to take a step back and let the parents deal with the situation," she explained. "This is especially true when a child sometimes fight, kick, or bite. But overall you have to try to get them to have confidence in you and help them understand that you are here to help them feel better and healthier."

Not only does she share the goal of ensuring customer satisfaction, but as the assistant leading petty officer in pediatrics, she has the task of doing whatever it takes to ensure everyone works towards a common objective. This also means making sure everyone does his or her fair share of work in the clinic. "When the job is done at a good level everyone benefits overall," she said. "It's unfair to have most of the work and a lot of the responsibility fall on one or two people, which makes things hard on them. When you have a situation like that, it can only lead to eventual disaster."

Pediatrics sees approximately 40-50 patients on any given workday. A full schedule of children appointments keeps the staff busy. "We do get pretty busy here," said Johnson. "More so than you would expect. From 7:45 in the morning to 3:15 we have people in and out all day long. That's about 10-15 patients for each of the doctors we have here in pediatrics."

When she is not thinking of ways to keep her colleagues and patients satisfied Johnson has been working towards getting a commission through the Medical Corps Enlisted Program. "I have already completed a number of courses, and I am now currently working on my package for admission into the program," she said. "So hopefully in a matter of time I'll be receiving some good news about it. But if things don't work out this time around I'll continue to take classes towards a degree. It always helps to have a backup plan."

According to Johnson, it is normal for some people just starting out in their naval careers to have some ambivalent feelings about being in this environment. But, she says Sailors new to the service should stick it out because initial anxieties do subside and things do seem better. "It felt a little bit hard to me when I first came in, but as time went on it wasn't as bad as I got used to it—especially after I made E-4," she said. "Overall, it just pays to just relax and take things easy, because the way I feel about the Navy right now, and how much I enjoy taking care of patients, I'm definitely going to make a career out of it."

Sewells Point Holds Bone Marrow Drive

By JO2 Duke Richardson

Branch Medical Clinic Sewells Point Naval Station Norfolk recently made a very important plea. A plea for potential bone marrow donors.

Working with the Department of Defense Marrow Program, the clinic was out in full force looking for people interested in being a part of the National Marrow Donor Registry. Placement on the registry could possibly lead to them having the rare opportunity to help save a life in the future if they are matched with someone who needs bone marrow.

HM1 David Ramirez, a staff member at Sewells Point who coordinated the drive said it was not because of one particular case, but as a way for more people to get involved in the life-saving program. "We're here trying to get as many people as possible to register for the program because there are a lot of people out there that need bone marrow," he said. "The more people we have in the program, the more lives we can save."

"Three thousand people a day search the registry for matches," said Jerry Gillespie, senior donor recruiter for the Department of Defense Marrow Program. "It is very hard finding a match for people that need bone marrow, especially for African-Americans and Hispanics since there is (a fewer number of those racial groups) in the database. It's been discovered that ethnic background does have a lot to do with finding a positive match for bone marrow donors, so we are trying hard to get more African-Americans and Hispanics into the national registry."

Approximately 30,000 children and adults in the United States are diagnosed each year with leukemia, aplastic anemia, or other fatal blood diseases. For many, the only hope for survival is a marrow transplant, but nearly 70 percent of these patients cannot find suitably matched marrow donors within their families, so they need to find unrelated donors.

If a volunteer matches a patient in need of a marrow transplant, they will receive extensive counseling to review the donation process and their options as a donor. The donor will also have a physical examination to ensure they are in good health. As for the donating process itself, no more than five percent of the donor's marrow, which is a liquid, is collected from the back of the pelvic bone using a special needle and syringe. General or regional anesthesia is used during this simple surgical procedure. A donor will usually stay overnight in the hospital after the surgery. The donor's marrow naturally replenishes itself within a few weeks.

The need for donors is an ongoing one. If you would like additional information about the Department of Defense Marrow Program or how you can become a donor, call 1-800-MARROW-3 or go to their website at www.dodmarrow.com.

Child Development Center treats kids like family

By JO2 Jodi Durie

"Children's needs are number one at the Norfolk Naval Shipyard Child Development Center," according to Janis Long, Director of the Norfolk Naval Shipyard and Naval Medical Center, Portsmouth Child Development Centers.

"We're here for military families so that they feel comfortable while they're at work," explained Nadia Carolino, the center's training and curriculum specialist. "Our caregivers provide safe, quality care for our service members' children," she added. "Although our caregiver is not a substitute for the children's mother, they still provide the kind of quality care that a mother would provide," said Carolino.

The child development center provides childcare for infants as young as six weeks to children up to five years old. The center is designed to prepare children for kindergarten. Caregivers teach children a number of valuable skills, which prepare them for that big moment in their lives.

Although caregivers do not set aside one particular time to teach children things such as numbers and letters, the children learn through play. "Caregivers make learning a natural part of the child's environment," according to Carolino.

"We ensure the children are getting the developmental skills they need; such skills enhance cognitive, physical, social, and emotional growth," said Long.

Various activities designed for each spe-

cific age group help to augment each child's skills on a daily basis.

Manipulative activities enhance a child's small motor control, outside play enhances large motor control. We also teach skills for positive social interaction, such as problem solving skills. In some instances we teach children how to work problems out between each other without always seeking adult intervention," said Carolino. "We try to teach children by providing them with concepts. For example the children eat family-style meals together and learn to help set the table and can count the number of place settings," explained Carolino.

All of the meals served to the children are USDA approved. "We follow the nutritional guidelines of the USDA to teach good eating habits early on," explained Long.

On a daily basis, the CDC strives to consistently provide a quality environment for both children and caregivers. Although both the center's director and the training curriculum specialist acknowledge that care of the children is the prime concern, the child's individual needs must also be met.

"I think we have a lot of positives at our center, said Long. "We have such dedicated, well-trained staff who are very experienced. Caregivers are always updating their child care techniques," she said.

Initially, caregivers are required to be high school graduates, but within 18 months they must complete 13 sets of training modules.

Topics of the modules range from keeping a child safe to building a child's self esteem.

After each module is completed, the caregiver must take and pass a test. Following this test, Carolino will perform a competency evaluation on the caregiver to ensure they can implement everything they have learned into the classroom. Once completed, cumulative modules are equivalent to college credits in early child development at Tidewater Community College.

In addition to the 13 introductory modules, caregivers are also required to complete four hours of additional training each month, said Carolino. Before Carolino assigns the training she observes each class to determine what improvements can be made and provides training for those areas.

The CDC, which has been accredited by the National Association for the Education of Young Children (NAEYC), undergoes numerous unannounced inspections throughout the year. The CDC is always prepared for these inspections, because at any time the Department of Defense, Bureau of Naval Personnel, or the shipyard's team of inspectors could drop in to ensure the center is within standards.

"We're here to be sure parents can complete their military missions without being worried about their children throughout the day," said Long.

Upcomming MWR Events

WOMEN'S VARSITY SOFTBALL

There will be an organizational meeting for NMCP's Womens Varsity Softball on Thursday, May 2, 1100, in the MWR office. All active duty females assigned to hospital, tenant commands, or outlying clinics are eligible to participate. In addition to players, we are also in need of a coach for the 2002 season. If you can not attend this meeting please contact Bill Monell, at 953-5096.

POOL TOURNAMENT:

MWR's monthly pool tournament is scheduled for Wednesday, April 24 at the Sand Bar Center. The tournament will begin promptly at 1700 and sign ups will begin a 1630. Individuals may also sign up any time

beforehand at the club. The cost is \$2 per player. Prizes will be awarded to top finishers. Contact MWR for details. 953-5096.

RUN TO THE TOP:

Start training now for MWR's annual Run to the Top 5K scheduled for Saturday, May 18 beginning at 0830 from in front of the gym. Runners will run to the parking garage and complete a full circle on each level and then continue to the next, finishing at the top. The race is open to all active duty military, retirees, dependents, and NMCP DoD civilians with current MWR memberships. Awards will be given to top finishers in each age group and surprise give-aways to the first 75 at the race site. This is a very unusual and challenging run -

DON'T MISS IT !!! Call for details 953-5096.

COMMANDERS CHALLENGE:

Join us for some friendly competition by entering a team in MWR's annual Commander's Challenge. The events will take place during the month of May and will feature canoe, kayak, hydrobike, field events, and a tug-of-war. Each directorate can enter teams consisting of active duty military members - 15 per team (at least 3 female). In addition, there will be other events during the month in which teams can earn more points. A trophy will be awarded to the top team and there will also be a team participation award. Don't miss out on this exciting month-long event. Call 953-5096.

NMCP Doctor Makes Children's Health Care Easier

By JO2 Duke Richardson

"Kids are wonderful, they are really unique, and that's what I like about my job...working with children."

This is the belief of Cmdr. Mary Watson, a pediatric endocrinologist who provides medical care to children at Naval Medical Center Portsmouth. She believes children have a natural power within themselves to handle some of the worst cards life can deal and still manage to get through it all in stride.

"Children normally don't have secondary issues and agendas or play games when it comes to how they are feeling," said Watson. "For example, if a child is here complaining of a stomachache or a headache, we have to find out what is causing it and why."

Helping families and children be as well and healthy as possible despite coping with chronic diseases such as diabetes is the most satisfying thing about her work said Watson. While providing care for patients, she also strives to educate the patients under her care about the afflictions and ways to handle them as they travel the road to recovery. "I really try to educate the families, children and teenagers on how they can make diabetes virtually invisible in their lives," she said. "That way they can enjoy the same things in their lives their friends do. Kids really can have a high level of wellness if you educate and empower them to (do so)."

One new way, Dr. Watson mentioned, for her pediatric diabetic patients to maintain a high level of wellness when it comes to insulin injections is the use of "painless shots," also known as the Shot Blocker. "A pediatrician located in the midwest developed a little plastic device that takes away the pain of conventional injections," she said. "We got these devices here at the hospital and have been using them...with a great deal of success. This really helps with diabetic patients because how can I as a doctor ask a child to take more shots (of insulin) everyday? That's hard to do when they are already taking (multiple) shots a day. But with this it makes things for them a lot easier since it is painless."

According to Watson, although she is providing medical care to family members, by proxy she is also taking care of the fleet. Taking care of a Sailor's child, explaining the medical situation to them and providing the medical care needed, ultimately puts the service member's mind at ease as they fulfill their command's mission. "It is satisfying to know that when I answer some calls it may be from a Sailor from (a ship) where there is an active duty family member whose child is in my care; and I can explain the situation to them, put their mind at ease and that reassures me that while I am taking care of their children, I am also taking care of the fleet. It is a privilege and a pleasure to do so and I like to think that everything we do here matters out there."

NMCP Salutes Sailor of the Quarter

By JO2 Duke Richardson

Naval Medical Center Portsmouth recently praised the efforts of three of its finest Sailors. The top performing Sailors were named Sailor of the Quarter (SOQ), Jr. Sailor of the Quarter (JSOQ), and Bluejacket of the Quarter (BJOQ) for the first quarter of 2002 during a luncheon held recently at the hospital complex.

Through hard work and dedication,

sailors here," said CMDCM (SW/FMF) David Carroll, NMCP's Command Master Chief. "One of the toughest things we have to do once a quarter is select a winner. It gets harder each time because we have so many top-notch sailors (at this command)."

London, NMCP's newest BJOY, says her leaders play a huge part in her day-to-day activities and credits them for help-



Photos by JO2 Duke Richardson

Left to right: HM1 Patrick Jones, Sailor of the Quarter; HM2 Carla Jones, Jr. Sailor of the Quarter, and HN Chanel London, Bluejacket of the Quarter, were recently honored for their efforts at an award luncheon held on the Naval Medical Center Portsmouth compound.

stellar performers HN Chanel London was named Bluejacket of the Quarter; HM2 Carla Jones received the Jr. Sailor of the Quarter award; and in a surprising twist, her husband, HM1 Patrick Jones won the Sailor of the Quarter distinction. This is HM1 Jones' second trip to the winner's circle. During one of last year's ceremonies, then-HM2 Jones was one of the hospital's Jr. Sailor of the Quarter winners.

According to NMCP Deputy Commander Capt. Matthew Nathan, the award winners and nominees are some of the finest that play an intricate part in the hospital's mission and its many successes. "We are very proud to call you shipmates and are very proud of the accomplishments you have made," he said. "This is not only a recognition or award for the selectees, but it also represents the people that work with you, for you, and over you and the example you set for them. Somewhere down the road, there may be a sailor that you've influenced (to succeed) sitting at one of these (nominee) tables, because they have emulated the role you have displayed."

"We have some really outstanding

ing her reach this milestone. "There's no way I would have gotten here and do what I need to do each day without my (supervisors)," she said. "Thanks to them...teamwork, and working with peers helped me strive to and reach this goal."

The SOY says it feels great to once again be in the winners circle, but getting there was not easy. "It was really tough," said HM1 Jones. "There were some really fine sailors which made the competition hard. But it feels great to win this award."

HM2 Jones, is elated to have been named NMCP's newest Jr. Sailor of the Quarter and is equally happy sharing the spotlight with her husband. "I am honored at being chosen and am happy my husband was chosen as Sailor of the Quarter. It was quite a shock," she said. "It pays to keep striving towards your goals and keep motivated and focused until you reach them."

The first quarter 2002 SOQ, JSOQ, and BJOQ awardees are now in the running for NMCP's top awards, Sailor of the Year, Junior Sailor of the Year, and Bluejacket of the Year. The winners of those awards will be announced next year.

DAPA NEWS

New test makes Ecstasy harder to hide

By HMI Luann Smith

The Navy has become a leader in the war on drugs, and sets an example for corporate America in maintaining a drug free workplace. Yet despite two decades of steadily declining drug use, ecstasy use has gradually increased in the past year and the Navy is committed to reversing this disturbing trend.

Already an extremely effective deterrent to drug use, drug screening through random and consistent urinalysis is stepping up its efforts and improving the ability of Navy drug labs to detect the designer drug. In January, the drug labs improved their abilities to detect ecstasy. A new screening reagent that is three times more sensitive will soon be in all DOD drug screening labs according to a recent NAVADMIN message (319/01). This will expand the window of opportunity to detect ecstasy for another 24 to 48 hours.

With the acknowledgement that this new test may increase the positive urinalysis results, the emphasis must be put on prevention and education. What may be seen as a harmless "happy drug" or "party pill" has been determined to be genuinely dangerous and possibly fatal.

For more information on ecstasy and drug abuse prevention tools, visit the PERS-6 web site at navdweb.spawar.navy.mil and access the link "drugs of abuse."

Child Waiting Center, great help to patients with children

By JO3 Theresa Raymond

Naval Medical Center Portsmouth offers many programs to ensure patients get the best care, and the child waiting center is no exception.

The center, which is open Monday thru Friday, from 7:30 a.m. to 5:30 p.m., gives parents the opportunity to visit their caregiver and being assured that their child is receiving continued guidance.

"We provide a service which benefits the parent. They can leave their children here and take care of their appointment without having to worry about their children being safe or getting in the way," said Shirley Bradford, Program Supervisor for the Child Waiting Center.

The center does more than help the patients. It also helps the doctors get their jobs done in an efficient, timely manner without neglecting the patient's needs.

"The doctors also don't have to worry about the children and can then treat the patients more efficiently," said Bradford.

Although the center has only been open since August 1999, it has grown. According to Bradford, they average caring for 100 children a week, and the number is expected to grow.

"There are plans to make the center a full time daycare. There is no tentative date, but if we do go full time, we will have more staff to accommodate for more children, but the waiting center will still be a part of the daycare," said Bradford.

The waiting center currently has five classrooms of which only three are being used. There are also three outside play patios and many different activities for children, both indoors and out.

In addition to the space, the center has a relatively large staff. There are nine caregivers, one clerk, and one supervisor, who all are Navy certified childcare givers.

Anyone who has an appointment at NMCP qualifies to use the center. Appointments are appropriate, but not required during emergency situations. First time users are asked to bring a copy of the children's shot records, and will be asked to fill out some forms. Validation of parent's appointments is required.

For more information on what to bring, or how to get validation, call the child waiting center at 953-6873.

Hazardous Materials and You

By Art Vogel, NMCP Safety Office

What is considered to be hazardous material (HAZMAT)? Any material that, because of its quantity, concentration, physical, or chemical characteristics, may pose a substantial hazard to human health or the environment when incorrectly used, purposefully or accidentally released. This determination is made by the manufacturer. Subcategories are listed in OSHA's Hazardous Communication Standard (HCS), 29 CFR 1910.1200. Pharmaceutical or drugs are potentially hazardous chemicals, as defined by the HCS, therefore, manufacturers of pharmaceuticals must determine that their product is a hazardous chemical.

What products require a Material Safety Data Sheet (MSDS)? MSDSs are required for all products covered under the HCS. MSDSs are required for all drugs as defined in the Federal Food, Drug and Cosmetic Act except for drugs in solid, final form for direct administration to the patient (i.e., tablets, pills, or capsules). Prepackaged liquid medicines for direct administration by the patient are also exempt. Package inserts, etc. cannot be used in lieu of MSDSs since they do not meet the requirements.

Who's required training? Staff (military or civilian) who may be exposed to HM/HW during the normal performance of their assigned duties. Workers such as office workers or cashiers who encounter HM only in

non-routine, isolated instances are not covered.

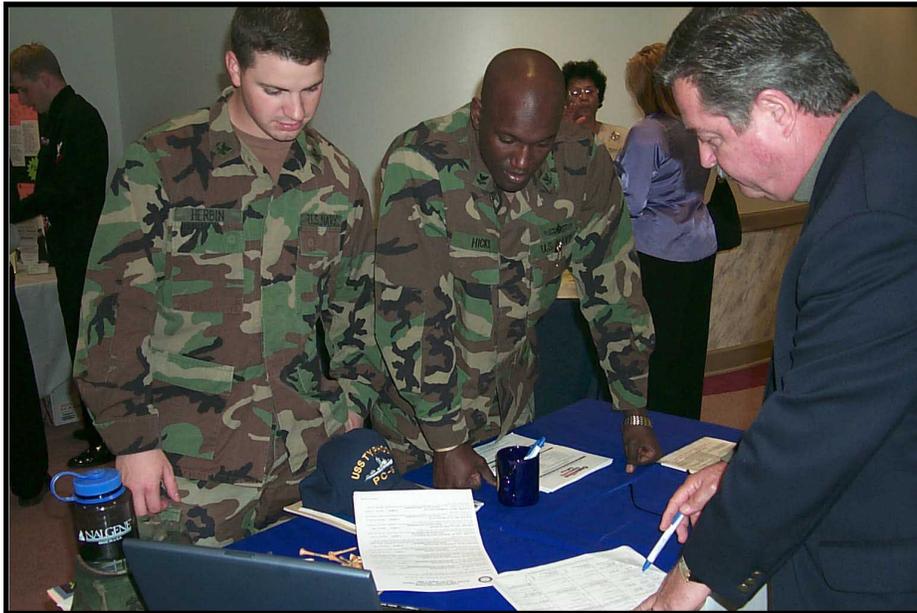
How often is training required? Hazardous Communication Training is required initially upon assignment along with an annual refresher. Document initial training and annual refresher training on the NMCP OSH Training Record and forward a copy to the Safety Office.

What's exempt? OSHA does not require employers to maintain MSDSs for consumer products when they are used in the manner for which they were intended, and when employees' exposures to the product on the job are similar to their exposures when using the product off the job. Articles are items that generally do not pose a physical hazard or health risk to employees. As a rule, OSHA does not require a MSDS for articles containing hazardous materials. However, if the article is altered in such a way that hazardous material can leak out, or cause an employee exposure, then the employer must have a MSDS on file.

Please note that Pharmaceutical items should be separated on the Department/Division Hazardous Material Inventory/Authorized Use List. This is because pharmaceutical items are not approved or disapproved by the Hazardous Material Control Program Manager.

Navy college program distance learning partnership education fair held at NMCP

By Susan Sutter, NMCP Navy College Office



Photos by JO2 Duke Richardson

Naval Medical Center Portsmouth recently held an education fair geared at providing Sailors an opportunity to get in contact with representatives from universities nationwide.

The Chief of Naval Education and Training (CNET) created a program to respond to Sailors' needs for greater access to higher education by developing partnerships with colleges and universities to offer rating-related degrees via distance learning. This program is called the Navy College Program Distance Learning Partnership.

Representatives from the colleges and universities were in town for Hampton Roads area-wide education fairs. On April 12, the institutions set up displays at the Sand Bar Club at Naval Medical Center Portsmouth (NMCP).

Sailors can work with these institutions to complete their associate and/or baccalaureate degree wherever they are stationed. The partnership schools provide degree programs related to each rating maximizing the use of military training and experience to fulfill degree requirements. However, Sailors do not have to pursue a rating-related degree. Participating colleges and universities offer their courses via distance learning using a variety of formats such as CD-ROM, videotape, paper, and the Internet. One of the more popular partnership schools is Coastline Community College (in California) which offers many associate degrees. One degree of interest to the hospital corpsman rating is Health Sciences Technology. They will award up to 40 semester hours of non-traditional college credit toward their associate degree. Sailors need only to complete four classes on line with Coastline to meet their residency requirement. For more information about Coastline Community College, go to their web site at <http://mil.ccc.cccd.edu> or call them toll free at 1-866-422-2645, or Email them at militarycounselor@ccd.edu.

In addition to the partnership institutions, including representatives from the Navy College Office at NMCP, Servicemembers Opportunity College, Navy (SOCNAV), and the Navy College Learning Center (NCLC) from the Norfolk Naval Station, were on hand to answer Sailors' questions. There were "give aways" and refreshments as well.

The following is a list of all of the partnership schools: Central Texas College, City University, Coastline Community College, Dallas County Community College; Embry-Riddle Aeronautical University, Empire State College, Excelsior College, Florida Community College at Jacksonville, Florida State University, Fort Hayes State University, George Washington University, Old Dominion University, Rogers State University, Southern New Hampshire University, Thomas Edison State College, Troy State University, University of Maryland, and Vincennes University.

To find out more about the Navy College Program and the Navy College Program Distance Learning Partnership, contact the Navy College Office at NMCP at 953-7853. The Navy College Office is located in building 272, room 131; telephone 953-7853. You may view the degrees related to your rating by logging on to <http://www.navycollege.navy.mil> and select "Rating Roadmaps and Degree Road Maps." Follow the prompts to select your rate, and you will be provided with a list of partnership schools and the degrees related to your rating.

Office of Plans, Operations and Medical Intelligence working hard since September 11th.

By Lt. Robert Lyon

Plans, Operations and Medical Intelligence is designed to support the fleet with medical personnel, and in the event of emergency, coordinate efforts with federal and local agencies to bring aide to those in need.

Of the 2,618 health care providers stationed and working at Naval Medical Center Portsmouth 1,569 are assigned to deployable platforms, which means they can be called at a moments notice to provide medical support anywhere in the world.

It is the job of the POMI (Plans, Operations and Medical Intelligence) officer to coordinate the deployment of needed medical specialists and ensure that the job left behind is filled with qualified personnel.

Since September, 11th individuals and groups of medical specialists have been sent to places like: Vietnam; Bahrain; Keflavik, Iceland; Okinawa, Japan; Tbilisi, Russia, and numerous other platforms.

Reservists have a large part to play in ensuring that NMCP continues to maintain required staffing during these deployments. "If we have enough warning we can bring in reservists to fill vacant positions," said Young. "Particularly in the summer, we let the Reserve Liaison know when we are going to need a general surgeon or that we need some specialist. They can bring people in for two weeks at a time to help cover and help us maintain our staffing levels," said Young. Last year reservists contributed over 10,000 days of service.

Support to the fleet is a concern with numerous implications. Most large ships require a medical staff to support the medical needs of a ships company. In the event a physician or medical technician is unavailable for regular appointment is it the POMI's job to find a suitable individual until a permanent replacement can be found.

"When a carrier comes out of the yards a general surgeon is not assigned so we have to back-fill two weeks here two weeks there," said Young. We are definitely a stop gap for a lot of billets. Right now there is an OB/GYN doctor gapped billet in Okinawa. We are providing coverage in Okinawa so they can continue providing that service."

While NMCP is fulfilling requests for medical personnel throughout out the fleet the daily needs of the over 230,000 beneficiaries living in Hampton Roads still remain.

"We have been able to maintain services," said Young. "This command has not said no to these requests. Most people don't like me calling, but all have stepped up to the plate to go do the job they have to do and come back. We do all of this while maintaining dependent care, active duty care, keeping our revised financing bill from going up and provide training, and leave time for our staff," explained Young.

Chaplains Corner: Dark Glass

By RPC M. S. Flower

I've been a Religious Program Specialist since May 1980 and have had the privilege of working with some outstanding Navy Chaplains at a variety of commands, including two aircraft carriers.

This is, ironically, my second tour at a Naval Hospital/Medical Center. My initial hospital tour, at Naval Hospital, Newport RI, although personally rewarding and exhausting (I coordinated 400+ weddings at the picturesque Chapel-by-the-Sea), did not alter my initial perception that hospital duty, for the non-hospital types, on average, was not particularly vital. Granted, I was a rather overbearing, 'know-it-all, seasoned Second Class Petty Officer and a newly promoted First Class Petty Officer while in that particular billet. I was like Alice-in-Wonderland, peering into a dark looking glass. I've grown a great deal, professionally and personally since then and can avow to some new and rather diametric opinions of the positions now.

My newfound respect for hospital Chaplains began shortly after my arrival at NMCP following 42 months onboard USS GEORGE WASHINGTON (CVN 73). We had begun our routine staff meeting with the Duty Chaplain report. On this particular occasion, there had been four deaths over the weekend; a mother and her baby, and two interuterine fetal demises. The duty chaplain recounted the details of the deaths and his response to the needs of the staff and families, and I remember sitting there thinking along the lines of "my God".... I had come from a command that had seen its share of crewmate illness, death, and other catastrophes of the heart, but nothing on this scale. To be sure, we celebrate life and successes at the hospital as well. The Labor and Delivery Deck is busy around the clock bringing bundles of joy into the world. Healing and recovery are permanent residents of NMCP, but hospitals are for the most part, inhabited by ill folks, dealing with very serious life and death issues.

I've seen countless instances of chaplains living, day in and day out, their religious vows and commitment to all personnel of the Sea Services, and the U.S. Navy Chaplain Corps vision - "Devoted to God and Country, we unite to deliver innovative, life transforming service throughout and beyond the Sea Services." Our chaplains take their charter and obligation to the Nth degree. One of the chaplains, who himself recently lost his beloved wife to cancer, was assigned as the Oncology Ward chaplain. On a daily basis, he ignored his own emotional suffering and provided caring ministrations to pa-

tients, family, and staff. Another chaplain, suffering from debilitating physical ailments, would routinely walk to the 3rd and 4th floors to pray with patients and family members. At the same time, this chaplain volunteered to handle the bulk of walk-in counseling and assumed greater admin responsibilities due to a staff shortage. Even our present Command Chaplain is not immune to these gestures; he has been known to wheel patients around the hospital to various appointments and intercede on their behalf. Jesus, the Great Physician came to help the sick, the lame, and the lepers...even though he knew how his earthly ministry would end. There are numerous instances of great men and women of faith that wore hair shirts under their clothing to remind them constantly of the suffering the human condition brings. Our chaplains are worthy successors to these saints who continued to help the less fortunate while enduring their own pain..

Finally, it seems, at times, that our chaplains stand in the gap as the best and last hope for those who might fall through the cracks or that don't meet society's image of people of worth. The Reverend Billy Graham said it clearly..."you are a person of worth because God made you". Our chaplains believe this and live it.

One final recommendation; it is clear to me that our current chaplains assigned to NMCP are a religiously pluralistic group that share one major trait in common and that is a strong personal faith lived out through their daily actions. Hospital duty is not for the faint of heart, nor the faint of faith.

It is clear that this may be categorized as an apologetic for hospital ministry. I'm sure there are some who might read this and cling to the mistaken credo that I'd formulated earlier in my career. To answer this charge, I say that hospital duty is secondary only to actual combat ministry in its importance and intensity. It is a ministry tempered not in the cold, blue flame of combat, but the fiery, red-hot flame of personal loss due to death and illness.

NMCP Honors Medical Service Corps Officers

By JO2 Duke Richardson

Two Medical Service Corps (MSC) doctors at Naval Medical Center Portsmouth were recently bestowed illustrious distinctions thanks to their hard work and dedication. Lt. William Kelly, of NMCP's Pharmacy Department, was named MSC of the Year for 2001, and Lt. Cheryl Ringer received the MSC of the Quarter award for the first quarter of 2002.

Kelly not only has the distinction of being the newest MSC of the Year, but he also has the honor of being the first person from the hospital to win that distinction.

The Medical Service Corps board also took time to recognize the accomplishments of another NMCP staff member. Lt. Cmdr. Rachel Haltner, NMCP's Preventive Care and Wellness Service Line Leader received a nomination for the MSC of the Year award. She was cited by the board as "an outstanding contributor to this command's mission."

Competition for the Medical Service Corps of the Quarter Selection Board was very tough and the nominees were proven to be at the forefront of their profession while playing intricate parts to NMCP's success. The nominees were: Lt. Sarah M. Neil of the Adult Medical Care Service Line, Lt. j.g. Linda Dunn, Epidemiology Team Leader, Preventive Medicine Product Line, Preventive Care and Wellness Service Line, and Ens. Charles Banks of NMCP's Laboratory Medicine Service.

Looking for new Ombudsman recruits
Ideal candidates have fleet hospital experience, maturity level to handle work load of Omb duties, previous Omb experience (but training can be provided if the desire is strong to support your Command and sailor's families). Looking for individuals who would also like to serve as an Omb for the different deploying platforms.
Call 953-5831 for more information.



Seaman To Admiral-21



By HMI Peggy Baker, NMCP's Command Career Counselor Office

This program is open to eligible enlisted personnel of all paygrades and ratings.

STA-21 replaces several previously available commissioning programs including: Enlisted Commissioning Program (ECP), Seaman to Admiral (STA), Broadened Opportunity for Officer Selection and Training (BOOST) and Enlisted applications to the Naval Reserve Officers Training Corps (NROTC) scholarship program.

What is the STA-21 Program?

STA-21 is a commissioning program that provides an excellent opportunity for highly motivated active duty enlisted personnel in the Navy or Naval Reserve including Training and Administration of the Reserves (TAR) or Selected Reserve (SELRES) and Navy Reservists on active duty (except for those on active duty for training (I-ACDUTRA) to complete requirements for a baccalaureate degree and earn a commission in the Unrestricted Line (URL), Nurse Corps (NC), (different from MECP), Supply Corps (SC, or Civil Engineer Corps (CEC). Emphasis for this program will be placed on the identification of those applicants who possess the high academic and leadership potential necessary to become outstanding Naval Officers.

What are the Commissioning Programs available and what training is offered?

STA-21 has three components: (1) Broadened Opportunity for Officer Selection and Training (BOOST), a 3 to 9 month college preparation program located at Naval Education and Training Center (NETC), Newport, RI. A limited number of selected STA-21 participants will be chosen by the Chief of Naval Education and Training (CNET) to attend BOOST, before attending Naval Science Institute (NSI), to improve academic skills if needed. (2) NSI, an eight week NETC Newport course of intensive officer preparation and indoctrination attended by all selectees en route to the university assignment. (3) Full-time, year round study for up to 36 months at a Naval Reserv Officers Training Corps (NROTC) affiliated university.

Do STA-21 participants receive monetary support?

STA-21 students receive full pay and

allowances for their enlisted paygrade and are eligible for advancement while participating in the program. Students also receive an education voucher of up to \$10,000 per year, paid to the university by CNET to supplement cost of tuition, fees, and books. Wow, what a great deal!

What are the eligibility requirements for STA-21?

To be eligible for this program you must: (1) be a citizen of the United States (Non - Waiverable), (2) be recommended by your Commanding Officer, (3) Be serving on active duty in the U.S. Navy or Naval Reserve including Training and Administration of the Reserves (TAR), or Selected Reserve (SELRES), and Navy Reservists on active duty (except for those on active duty for training ACDUTRA), (3) be a High School graduate, or (GED), (4) be able to complete requirements for a baccalaureate degree in 36 months, (5) be able to complete degree requirements and be commissioned prior to 3rd birthday, (6) maintain a cumulative Grade Point Average (GPA) of 2.5 or better on a 4.0 scale, (7) have a certified copy of SAT or ACT Assessment test scores from a test taken on or after July 1999, with a minimum score of 1000 SAT (with minimum scores of 500 math and 500 verbal) or 42 ACT Combined Math/English (not less than 21 Math and 21 English).

You must also meet Physical standards for appointment in the URL, CEC, SC, or Nurse Corps as prescribed in the Manual of Medical Department, and physical fitness standards per OPNAVINST 6110.11F. Have no record of courts-martial convictions, civilian felony convictions, or NJP's within three years preceding 15 July 2001.

When can I put in a request for STA-21 FY 2003?

Packages for this program are due in your Command Career Counselor's Office NLT May 15 2002. The application must be submitted via the applicant's Commanding Officer and reach CNET no later than July 15, subject to change as the program is being updated for the year 2003. There will be a follow-up article on the Application Process and Procedures for STA-21..

New Phone System Comes Online

By JO2 Duke Richardson

A new method makes gaining access to TRICARE a little bit easier for beneficiaries. Humana Military Healthcare Services (HMHS) recently introduced a brand new telephone system for the toll-free TRICARE service number (1-800-931-9501).

Instead of using the conventional touch-tone keypad to enter responses to the automated systems, callers may now use voice commands. When initially set-up, the system had a synonym vocabulary of over 200,000 words programmed into it, giving the system the capability to understand what the caller needs to do and where to route the call. As the need and demands require, the vocabulary of the voice/word recognition system will be expanded to facilitate customers. While the new system was in the planning stages, HMHS tried to make the menu as easy and user-friendly as possible, so that callers would fully understand the options.

As with any new system, it will take time and patience for callers to get used to the new process, but the goal for this system is to simplify the overall process of taking care of your TRICARE needs and ensuring customer satisfaction.

In order to help make the new system successful, quick, and easy, there are some key basic things callers need to know. 1) It is important to listen carefully to the options provided. 2) Speak clearly, distinctly, and loud enough so that the system will effectively recognize the commands you wish to carry out. 3) Use of speakerphones is highly discouraged since background noises may confuse the system, thus making it harder for the customer's call to be effective.

HMHS is happy to introduce this new service to their customers in the TRICARE community. As time goes by, the Humana/TRICARE team has expressed deep commitment in ensuring the new phone system grows and progresses into a tool which will make it easier for TRICARE customers to take care of their health care needs.

The Hospital Corps Birthday Ball Committee is having a yard sale May 4th from 9 a.m. until 2 p.m. in the parking lot of the Verizon Wireless Virginia Beach Amphitheater. All proceeds will go towards the birthday ball. Anyone interested in donating items for the committee to sell please email reoswald@pnh10.med.navy.mil.

Navy Adjusts SRB Award Levels

By NPC Public Affairs

WASHINGTON (NNS) — Experiencing extremely high retention rates, the Navy is adjusting some Selective Reenlistment Bonus (SRB) award levels this fiscal year to stay within budget. The adjustment means two things for Sailors: on one hand, the Navy is retaining more highly skilled Sailors than ever before; and on the other hand, the size of some individual SRBs will be smaller in the future.

SRBs are a retention tool provided by Congress as one of many incentives for Sailors to “Stay Navy.” With continuing high-take rates of SRB by Sailors this year, the Navy projected budgeted funds would run out well before year’s end, requiring a reduction of most SRB award levels to meet year-long needs of the SRB program.

First-term reenlistments are at more than 64 percent, which widely outpaces the Navy’s goal of 57 percent. Mid-career Sailors have reenlisted this year at better than 75 percent, eclipsing the Navy’s goal of 70 percent.

“The Secretary of the Navy and Chief of Naval Operations are enormously proud of the work our Sailors are doing,” said Chief of Naval Personnel Vice Adm. Norb Ryan Jr. “We value their service because we all have a vital role in our mission.

“So many factors are contributing to our reenlistment rates: a strong sense of service, fleet leadership, renewed emphasis on readiness and enhanced pay and compensation initiatives, to name a few. We had to make this adjustment to maintain the vitality of the program.”

SRB award levels were adjusted to ensure undermanned ratings and Navy Enlisted Classifications (NEC) continue to receive appropriate SRBs.

“Once we saw the tremendous number of

Sailors reenlisting for SRB, individual community managers and detailers looked at their unique manning and skill mix,” said head enlisted community manager (ECM) for the Chief of Naval Personnel, Cmdr. Chris Arendt. “They were able to balance their community’s needs and budget requirements to ensure SRB adjustments are fair and equitable across most ratings.”

SRB award levels vary based on rating or NEC a Sailor has earned, and the number of years of service a Sailor has upon reenlistment. These factors combine to make eligibility zones.

Of the total of 589 eligibility zones, 216 — or 36 percent — were not adjusted at all. There were 140 zones with award levels adjusted by a level of 0.5, which affects 24 percent of the total number of zones. Two hundred twenty-two zones, representing 37 percent of the total, had award levels adjusted by a level of 1.0. Other adjustments affect only 2.5 percent of all zones. No zones increased their award levels.

Other than adjusting award levels for skills that have improved in manning level since the last SRB update, all other SRB certification procedures remain the same.

Sailors in skills that will have SRB award levels adjusted or eliminated and who have an SRB reenlistment approval in hand for a reenlistment date after April 30, 2002, must resubmit an SRB request for a reenlistment date prior to May 6, 2002. This will ensure they remain eligible for the higher award level. Changes for all award levels will take effect May 6.

For additional information contact your command career counselor. Also see NAVADMIN 097/02, available online at <http://www.bupers.navy.mil/navadmin/nav02/nav02097.txt>.

TRANSITION ASSISTANCE PROGRAMS TAP & CARIT

By HM2 Lipcomb, Naval Medical Center
Portsmouth’s Command Career Counselors
Office

1. WHAT IS TAP?

TAP is a 4-day class for active duty members who are separating or transferring to the Fleet Reserve at their EAOS. Active duty members will learn about the benefits they are entitled to and, what their responsibilities are in preparation for their transition to the civilian sector.

2. WHO SHOULD ATTEND?

Any member who is planning to separate from the Service or transfer into the fleet reserve should attend TAPS at least one year (ideally, 12-18 months) from their EAOS.

(Also, Leading Petty Officers and career counselors should attend at least one TAP class during their tour to help aid junior troops on various aspects of the military.)

3. HOW DO I ENROLL?

a) Ask your Departmental Career Counselor for a “TAP Request Form” and the schedule for TAP class convening dates.

b) Complete the “TAP Request Form” then submit the form to your Departmental Career Counselor.

c) Your Departmental Career Counselor will either hand-carry or fax the Taps request to the Command Career Counselor’s Office. Upon receipt of your request, the Command Career Counselor’s office will schedule and notify you that your TAPS CLASS MEMORANDUM with the confirmation date and directions for TAPS is ready for pick-up. If the class is full you will be contacted and ask to select another date.

CARIT, Is another program offered by the Navy to aid members with transition from Naval Service to civilian life.

1. WHAT IS CARIT?

Atlantic Fleet Career Information Team is a 3-hour brief governed by OPNAVINST 1900.1D.

2. WHEN IS CARIT OFFERED?

Carit is offered at NMCP every other Wednesday from 9:00 a.m. to 12:00 p.m. (APR 17, May 01, ect)

3. WHAT IS THE DIFFERENCE BETWEEN CARIT AND TAPS?

-CARIT is mandatory for personnel E-1 through O-10, TAP is optional.

-You need TAD orders for TAP, you do not need TAD orders for CARIT.

-TAP is offered at NOB in BLDG U93. CARIT is offered at NMCP, BLDG 272 in the PSD conference room.

-Personnel receive a CARIT Brief in the first 3 hours of TAPS and a lot more. Members do not receive a TAP brief in CARIT.

-Personnel should take TAP 18 months from their EAOS. CARIT brief should be attended 120 days out from EAOS.

Military Appreciation Night at Harbor Park

The Norfolk Tides Baseball Club in conjunction with local military bases will hold it’s Seventh Armed Forces Appreciation Night on Friday, May 24, 2002. The pre-game festivities will include a Navy flyover, the CINCLANTFLT band and military persons of the year throwing out the first pitch of the game. In addition, world famous Zambelli’s Internationale will provide a spectacular fireworks display at the conclusion of the game. This particular event has grown from the first year to what is now a six month planned event. The Navy League, USA Discounters and the Flagship newspaper are sponsors and will provide prizes to win (from portable TV sets to dinners at local restuarants).

Gametime will be at 7:15 p.m., with the military show from approximately 6:30 p.m. to game-time. The gates will open at 6:00 p.m. and we expect close to 12,000 in attendance (capacity).

For more information about group rates for your Directorate, department, or division attending please contact Dave Harrah (Event Coordinator) 622-2222 ext 116 or via internet at dharrah@norfolktides.com.

NMCP Doctors Win In-House Research Competition

By JO2 Duke Richardson and JO3 Theresa Raymond

After months of research, two Naval Medical Center Portsmouth staff members recently came up with new ways to improve patient care. They put these ideas up against the research findings of their colleagues at the 17th Annual Naval Medical Center Portsmouth Research Competition and came out on top.

The top winners from the Category One: Resident and Staff, respectively, move on to the Navy-wide Research Competition scheduled at Naval Medical Center Portsmouth in May.

The winner of the Category One Staff award was Cmdr. Timothy Shope, who won for his research on "Cost of Required Doctors' Visits for Mildly Ill Children Excluded from Navy Child Care."

Doing research on children within the Navy's childcare system has always been an interest of Shope. What he hopes his award-winning research project will ultimately do is enable funding to allow for more nurses to work more hand-in-hand with childcare providers when it comes to providing children with medical care. "What we want to do is for nurses to talk with childcare providers on a daily basis when they identify children that are ill and help them determine whether or not a visit to a doctor is really necessary," said Shope. "What we hope this will lead to is less unnecessary doctor visits and less time parents will have to miss away from work. These are two big-cost items that we have looked at and we believe the cost of paying for more nurses will be more than offset by the savings from less doctor visits and time missed away from work many times over."

He went on to say not only would this benefit NMCP, but that the Navy overall could benefit from this idea. "If this project is funded and successful here, we would love to introduce this to other regions within the DoD, and possibly even to state childcare systems on the civilian side."

Although he enjoys doing research, Shope says it comes nowhere near his fondness of taking care of patients. "I really enjoy patient care and that one-on-one you get from dealing with people," he said. "I would never want to get totally away from it because you could lose touch with reality and the people you give care to. It is also from patient care that good research (ideas) come from."

He also said that sometimes lack of time to give ample time to research and patient care sometimes comes into play but he manages to overcome that obstacle and press on. "Just about everyone that does research wishes they had more time (to give ample time to research and patient care). There was a time during fellowship when most of the time I had went to doing research, but while that was good (for perfecting my researching skills), it definitely felt like I had lost touch with what being a doctor is all about. And that is taking care of patients."



Photo by JO2 Duke Richardson

Cmdr. Tim Shope gives Katherine Thoele a check up during a routine appointment. Shope is a NMCP Research Competition winner that will compete at the Navy-wide competition at the hospital next month.

Lt. Romeo Ignacio of Naval Medical Center Portsmouth's General Surgery's research on "Laparoscopic Appendectomy-What Are the Real Dangers?" landed him a seat in winner's circle as the winner of the Category One Resident award.

The gist of his research put to question the practicality of laparoscopic appendectomies vice the traditional, "cut and pull the appendix out," open appendectomies.

Laparoscopy, in itself, is a term given to a group of operations that are performed with the aid of a camera placed in the abdomen. Also, the laparoscope (used in laparoscopy) allows physicians to perform minimally invasive sur-

gery with just a small incision in the patient's abdomen.

Ignacio says when compared to the older way, there are many benefits to performing laparoscopic appendectomies on patients. "Many believe that laparoscopic surgery is a great thing because there is less pain, you get better faster, and you can return to work sooner," he said. "Even though the equipment used is expensive, if a patient can get out of the hospital quicker and go about their normal lives sooner then maybe the benefits outweigh the costs. For example, if you go to work and during the course of the day get appendicitis, you could be out of work for two weeks using the

Continued on next page

open appendectomy technique. But by using the laparoscopy appendectomy process you can go home sooner after the surgery, and return to work sooner...ultimately saving the hospital and the Navy a lot of money."

The debate over which is better, the old way or the new way is an ongoing one, says Ignacio. "A lot of people are arguing over this. Generally, it's like the older surgeons that have been around for a while prefer the traditional way of doing this and the young ones love laparoscopic surgery. But I believe our research was well designed enough to answer the question on which way is better."

Though it was a tough grueling competition, and he will have to go it alone for his presentation at the Navy-wide contest, he did not work alone in putting it all together. "I have to give a lot of credit and thanks to everyone in my department because even though it is just going to be me doing the presentations, a lot of people helped me make this research project successful," said Ignacio. "They were the ones who did all the data collecting, work with the patients and perform evaluations and, all I had to do was put all of the information they collected into one neat package. I had a lot of help for which I am thankful."

Research competition winners Navy-wide will converge at Naval Medical Center Portsmouth May 24th at the Internal Medicine Conference Room. For additional information, call 953-5959.

After Hours Detailing assistance now available

HOW: Night Enlisted Detailing
WHEN: Every Wednesday evening (this day picked so we can also call your Detailers in Millington, TN during their night-time hrs)

TIME: 3:00 p.m. to 11:00 p.m.
WHERE: BLDG 2, 4th Floor, Room 430203
PHONE: 953-4104

This is a great opportunity to be proactive in your career, discuss "C" schools, next duty assignments, or commissioning programs and YES you can bring your spouse (we highly encourage it). Working PMs/evening shift ... Come on down!! For those who can't make the "Night Detailing" we offer the same services during regular hours in the CCC office in bldg 272. See your Retention Team Member for more info. Thanks for staying Navy!!

Corpsmen celebrate 104th anniversary

By HMC (FMF) Fred Kasper

In celebration of the 104th anniversary, Hospital Corpsmen pay tribute at the Hospital Corpsman birthday ball to those that gave their utmost in the selfless service of saving lives. The ball is scheduled for June 14th at 6 p.m. at the Renaissance Hotel in Portsmouth, VA.

"Corpsman Up!" It's a cry that has echoed throughout the years. It is the cry of pain, fear, and suffering. In response to this call, a group of men and women have come armed with tools and weapons of compassion. With bandages, medicines, and even with their own lives, they have fought to save the lives of others. Wherever you find Hospital Corpsman, the expression "above and beyond the call of duty," is heard. The sacrifices made by these corpsmen have grown into a legacy for us to follow.

Formed by an act of Congress on June 17, 1898, the first Hospital Corpsmen were expected to perform in a variety of roles on shore, ship, and with the Marines. Corpsmen served with the Marines during the Boxer Rebellion in China in July 1900, and it was there that the first Medal of Honor ever awarded to a hospital corpsman was presented to Hospital Apprentice Robert Stanley.

Hospital Corpsman went on to continue their proud tradition of bravery and commitment to saving lives in WWI, where they earned 684 personal awards, two of which included the Medal of Honor. By many accounts, Hospital Corpsman were the most decorated unit of WWI.

In WWII, corpsmen were at the forefront of virtually every invasion and were involved in every action at sea. On Feb. 22, 1945, on the summit of Mount Suribachi, Iwo Jima, Corpsman John Bradley, along with five Marines proudly participated in the raising of our flag. Of the 15 Sailors awarded the Medal of Honor during WWII, seven were Hospital Corpsman.

The Secretary of the Navy, James Forrestal, bestowed a special "Well Done" com-

mendation on the Hospital Corps in 1945. "...That others might live, your fellow Corpsmen have given their lives; 889 of the killed or mortally wounded...The Hospital Corpsmen saved lives on all the beaches the Marines stormed... You Corpsmen performed foxhole surgery while shell fragments clipped your clothing, shattered the plasma bottles from which you poured new life into the wounded, and sniper's bullets were aimed at the brassards on your arms." No other individual corps, before or since, has been so highly singled out and honored. Lieutenant General Lewis B. "Chesty" Puller, U.S.M.C. gave his tribute to the Hospital Corps when he said "You guys are the Marine's doctors. There's no better in the business than a Navy Corpsman..."

In the years that followed during the Korean War, Vietnam conflict, Beirut, Lebanon, Iran, and Desert Shield/Storm, Hospital Corpsman went on to receive an additional 12 Medals of Honor and countless personal awards.

As the only enlisted corps in the military, Hospital Corpsmen are a special breed with skills that make them invaluable to field operations large and small. Many corpsmen became full-fledged members of Marine grunt squads and reconnaissance teams, filling in for their Marine buddies whenever and wherever needed.

Today Hospital Corpsmen perform a multitude of complex duties and specialized functions. They are required to have broad-based training and versatility neither demanded nor expected of any other enlisted rating in the Navy. In times of peace they are providing quality care for our beneficiaries. In times of war, they are with the Marines on the battlefield, and with our fellow Sailors on all types of ships, submarines, and aircraft. Wherever medical services are required, they are there, willing and prepared to serve "above and beyond the call of duty."

CLEAN THE BASE DAY IS MAY 31ST

IN CONJUNCTION WITH THE HAMPTON ROADS ANNUAL CLEAN THE BAY DAY, NAVAL MEDICAL CENTER PORTSMOUTH WILL HOLD ITS ANNUAL CLEAN THE BASE DAY EVENT CURRENTLY SCHEDULED FOR FRIDAY, MAY 31. THE EVENT WILL COMMENCE AT 2 P.M.

THIS IS SURE TO BE A FUN TIME FOR ALL. FOOD AND REFRESHMENTS WILL BE AVAILABLE TO ALL PARTICIPANTS. ALL NMCP STAFF MEMBERS ARE CORDIALLY INVITED TO PARTICIPATE.

NMCP TO HONOR NAVY NURSE CORPS AND PROVIDE CAREER-ENHANCING INFORMATION

By JO2 Duke Richardson

Naval Medical Center Portsmouth will soon pay tribute to a career that has a legacy of pride and time-honored service, the Navy Nurse Corps. The celebration of the Nurse Corps goes hand-in-hand with the nation's celebration of Nurses' Week, of which this year's theme is "Nurses Caring For America."

During this year's celebration NMCP will highlight the many different facets the Nurse Corps has to offer in terms of opportunities for success, according to Capt. Carlos Torres, NMCP's Director for Nursing Affairs. "One thing we are planning on doing this year is Career Day during which different (aspects) of the Nurse Corps will be presented," he said. "Different tables will be set up with various displays and plenty of information will be available to anyone wishing to learn more about the Nurse Corps...as well as different career options."

Torres went on to say a number of topics scheduled to be presented, though available for anyone interested, are primarily geared for the junior nurses looking for ways to enhance their careers. However, the goal for this year's celebration is to help people in and out of the nurs-

ing community understand the role of the Nurse Corps. "What I would like to see come out of this year's event is for all nurses to become fully aware of all of the career options that are available and gaining an appreciation of the impact they make at the command as well," he said. "That is also true for people who are not nurses to also know more about nursing, as well as (enlisted personnel) who are looking for future avenues to choose in their career. (As a result of this) nursing could be something they decide to do. Overall, this is an opportunity for people to better understand what nurses do."

According to Torres, thanks to the demand for nurses and the number of quality programs available, there is a great chance for success within the nursing community. "No matter where you go in the medical field, nurses are going to be needed," he said. "There are a lot more opportunities now than ever before, more avenues that are open to nurses...particularly for military nurses. They have the opportunity to travel and do a lot of things private sector nurses normally wouldn't have the chance to do, plus continue to move up in the organization."

"We also have programs such as Full Time Duty Under Instruction where you could go to school and earn your Master's Degree or Ph.D.," continued Torres. "People in this program go to school, get their regular pay and get subsidized for their education...and they're still moving up in the Navy, they're not 'losing their spot' within the organization. They are adding to their talents as they continue to get educated and move forward. So I believe that anyone interested in becoming a nurse will not be disappointed. I think as people become more exposed to what is going on with Nurses' Week, the more people will get a better idea of what we do in nursing."

Established in May of 1908, the Navy Nurse Corps has a 94-year history of tradition and service to Navy medicine. This long and distinguished history will be celebrated during a cake cutting ceremony on May 3rd in the Charette Health Care Center, and at the Navy Nurse Corps Ball May 4th at the Renaissance Hotel in Portsmouth. Rear Adm. Nancy Lescavage, Director of the Navy Nurse Corps, will be the featured guest speaker.

NMCP offers classes to help reduce the risk of hypertension

JO3 Theresa Raymond

Naval Medical Center Portsmouth's Health Promotion teaches patients ways to reduce their risk of getting high blood pressure and control cholesterol through several classes given both at the hospital, and the branch clinics.

Hypertension, better known as high blood pressure, is when the systolic blood pressure (the "top" number of your blood pressure measurement) is consistently higher than 140, or the diastolic blood pressure (the "bottom" number of your blood pressure measurement) is consistently over 90.

The systolic and diastolic blood pressure numbers measure how much pressure is generated when the heart beats and how much pressure is in the vessels when the heart is at rest.

"Dieting and exercising can decrease a persons chances of getting hypertension. Low sodium diets help reduce the risk in people who may have family members with the disease," said Maggie Malson, Wellness Product Line Team Leader and hypertension and cholesterol class instructor.

Hypertension can be controlled and, in some cases, prevented, which is why Malson feels everyone should attend the classes.

The classes aren't just for people who have been diagnosed, they are also for people with more than one risk factor. Most people don't even realize they were at risk until they have been diagnosed," said Malson.

Cholesterol is a soft, waxy substance that is present in all parts of the body including the nervous system, skin, muscle, liver, intestines, and heart. It is made by the body and obtained from animal products in the diet. When levels are high, the risk for coronary heart disease increases

"Cholesterol comes mostly from a persons eating habits, which means they should change their diets and exercise," said Malson.

Hypertension or high cholesterol levels cannot completely be prevented. Changing a person's lifestyle is one way to prevent and control the diseases.

Here is a list of the hypertension classes held at NMCP and it's branch medical clinics in the area, and where and when they will be offered:

Hypertension classes will be held at NMCP, April 16th from 0930-1030. The classes will teach patients how to reduce their risk for hypertension and basic lifestyle changes. The hour-long class will be held once a month for the next three months depending on participation. Call 953-5097 for more information and to register.

BMC Dam Neck holds a 90-minute class on tips and strategies for controlling high blood pressure. This hypertension management class teaches patients about the illness, and ways to control it. The class is open to active duty, DoD civilians, retirees, and beneficiaries. Call Tricare

at 1-800-931-9501 for or 314-7132 for more information and to register.

-BMC Boone offers a hypertension control class to active duty, retirees and beneficiaries. The class, which takes place the first Tuesday of every month, offers information about hypertension and blood pressure screenings. The class is open to active duty, retirees, and beneficiaries. Call 314-7380 or 314-7407 to schedule an appointment.

-BMC Oceana teaches a one and a half-hour group class lifestyle changes that may help manage their blood pressure. The class also discusses anti-hypertensive medications, sodium restriction, diet, and exercise and stress management. The informative class is offered to active duty, retirees and beneficiaries. Call Tricare at 1-800-931-9501 or 314-7084 for more information and to register.

-BMC Yorktown offers blood pressure screening and hypertension education daily. The individual blood pressure screening and counseling help patients understand their situation in a more intimate environment. Call 314-6124 or 314-6109 for more information and to register.

-NMCP offers blood pressure screening to active duty, beneficiaries and civilian staff daily as a walk-in service. Call 953-5097 for more information. 931-9501 for 314-7132 for more information and to register.

Now's the time to keep your cool

By JO2 Duke Richardson

This is the time of the year that is the busiest for your body. With warmer, more humid temperatures the body will be working harder than normal to keep cool. This is especially true when performing strenuous activities such as heavy exercise routines or hard, physical labor.

The additional stress placed on the body during these times can lead to heat cramps, heatstroke, or heat exhaustion. Of the three conditions, heat cramps and heat exhaustion are normally temporary, but heatstroke is a medical condition that requires quick life-saving action from a professional.

Heat cramps are painful muscle spasms that occur either during or hours after an activity done in a hot environment. The arms, legs and abdomen are normally the first parts to be affected, but any muscle can be targeted. People who sweat profusely and drink a lot of water but fail to replace body salt are the ones who become afflicted with heat cramps. A low salt balance in the muscles can also cause cramps.

The best way to get relief from heat cramps is to apply pressure on the cramped muscles or by massaging them until they relax. You may also give the victim a half a glass of water mixed with a teaspoon of salt every 15 minutes for an hour if he/she has no other medical condition. But, victims with other medical conditions should see a doctor right away.

Heat exhaustion is a condition which occurs when more salt and fluids are lost during heavy sweating than are taken into the body. The victim is usually pale and clammy, and other symptoms, such as heavy sweating, dizziness, weakness, nausea, rapid breathing, a fast but weak pulse, headache or fainting, may be present. But, there is a chance that the body temperature may stay fairly normal, and symptoms are usually reversible if treated promptly.

A person who has been stricken with heat exhaustion should lie in a cool, but not cold place, with their feet elevated eight to 12 inches and clothing loosened. Any heavy articles of clothing they may be wearing should be removed. Apply cool, wet cloths to the victim and proceed to fan them. If the heat exhaustion victim is not vomiting, have them sip cool water containing a teaspoon of salt. If desired, you can add fruit juice to make the taste more appealing. If the victim vomits or faints, get the person medical attention immediately.

If not recognized or treated appropriately, heat exhaustion can lead to heatstroke, the most serious of the heat-related injuries discussed here.

When heatstroke occurs, the body has lost the ability to keep itself cool. The body's heat-regulating system breaks down under stress, and the ability to sweat ceases. The victim may have skin that is hot, dry and red or spotted and also has a high body temperature of 105 degrees or higher.

There is also a great chance that the victim may experience confusion, fainting or convulsions with very little warning. If not treated, the high body temperature can lead to death. The first thing to do in this situation, obviously, is to get the victim cooled off quickly. While another person is seeking medical attention, spray or immerse the victim in cold, but not icy, water. Cool, wet cloths can also be used to massage the victim's feet, hands and torso. Be sure to check and keep a record of the victim's temperature every five minutes. Continue the cooling down process on the victim until the temperature drops and stays below 102 degrees. But nonetheless, keep the victim cool by using a fan or air conditioner until medical assistance arrives on the scene. Once the victim has received emergency medical treatment, contact a doctor for follow-up care.

Although it is natural to get all psyched up and rarin' to go once the sun starts shining and the temperature starts heating up. While this is not necessarily a bad thing, common sense and cautionary measures must rule out. Some steps you can take to greatly minimize your chances of getting one of the heat-related disorders mentioned here are:

- 1) Wear loose, cotton clothing
- 2) Drink plenty of fluids except alcohol and carbonated drinks. They can lead to cramps and may possibly dehydrate you.
- 3) Do not exercise or engage in strenuous activities on very hot days.
- 4) Avoid heavy meals and hot foods because they add heat to your body.

Don't expect to do any more than half of the activities you normally would when you first experience a hot environment. Slowly increase your activities day-by-day until you once again reach your normal capabilities. This will normally take anywhere from three to six weeks for the body to fully adjust to the environment.

The ones to really watch out for during the warmer months are babies and old people since they are especially at risk to suffer from a heat-related disorder or to suffer physical problems from excessive heat. Check on them frequently during a heat wave and watch out for yourselves as well during the coming months.

Celebrate Asian-Pacific Heritage Month

By JO2 Jodi Durie

Celebrate Asian Pacific Heritage Month with the command heritage committee during the month of May. The committee has arranged various activities to encourage awareness and education of Asian Pacific culture. Chinese, Korean, Japanese, Philippine and Polynesian cultures will be highlighted adhering to the theme for 2002 "Unity and Freedom."

Today, in the Navy alone, there are more than 23,000 Asian/Pacific Americans many of whom have made considerable contributions to the military. One Navy member of Asian/Pacific heritage has been awarded the Congressional Medal of Honor. FN2 Telesforo Trinidad received this prestigious award in 1915 for extraordinary heroism aboard the USS San Diego. There have been three flag officers of Asian/Pacific American heritage: Vice Adm. Robert Kihune USN (Ret.), Rear Adm. Ming Chang USN (Ret.) and Rear Adm. Gordon P. Chung-Hoon USN (Ret.). Capt. Tem Bugarin USN (Ret.) became the first Filipino American to command a surface line ship, the USS Saginaw, in 1985.

On May 7, 2001 President George Bush proclaimed May as Asian Pacific Heritage Month to honor the accomplishments of Asian and Pacific Americans and to recognize their many contributions to our nation.

May 1, at Naval Medical Center Portsmouth begins our celebration of Asian Pacific Heritage Month honoring those who have fought before us and those who we serve with today and in the future.

Asian-Pacific Heritage Month Events

MAY 1 - Cake cutting ceremony and kick off.

MAY 8 - Chinese food sampling, and performance

MAY 15- Korean/Japanese food sampling and performance.

MAY 22- A taste of the Philippines (food sampling) and performance.

MAY 29- Polynesian food sampling, with Hawaiian performance.

All events will take place at 1100 in front of the auditorium Bldg. 215.

May Galley Menu

May 1,15,29

Lunch

Beef vegetable soup
Grilled chicken strips
Beef Yakasoba
Rice, Broccoli, Corn
Dinner rolls
Banana cake
Apple crisp

Dinner

Tropical porkchops
Lemon baked fish
Mashed potatoes
Steamed rice
Brown gravy
Asparagus
Carrots
Sweet potato pie
Brownies

May 6,20

Lunch

Split pea soup
Chicken fiesta
Vegetable lasagna
Peas, Cauliflower
Garlic bread
Chocolate cake
Peach pie

Dinner

Cream of mushroom
Ham w/pineapple
Herb baked fish
Sweet potatoes
Succotash
Butterscotch brownies
Apple crisp

May 11,25

Lunch

Chicken noodle soup
Baked meatloaf
BBQ Chicken
Scalloped potatoes
Broccoli/Asparagus
Blackeye peas
Coconut cream pie

Dinner

Pork chops mexicana
Pizza
Mashed potatoes
Spanish rice
Cauliflower
Pumpkin pie

May 2,16,30

Lunch

Cream of potato
Baked Turkey
Chili macaroni
Mashed potatoes, gravy
Succotash
Corn bread dressing
Coconut cream pie

Dinner

Corn chowder
Mambo pork loin
chicken & italian pasta
Oven brown potatoes
Rice pilaf
Carrots
Cauliflower
Italian bread
Orange cake

May 7,21

Lunch

Beef noodle soup
Roast turkey w/ gravy
Beef stew
Mashed potatoes
Broccoli, Squash
Lemon cake
Sweet potato pie

Dinner

Chicken noodle soup
BBQ Chicken
Roast beef, gravy
Au gratin potatoes
Steamed rice
Corn on the cob
Cocunut cream pie

May 12,26

Lunch

Bean soup
Roast turkey w/gravy
Swedish meatballs
Cornbread dressing
Squash/Carrots
Dinner rolls
Cherry pie

Dinner

Turkey rice soup
Roast beef
Chicken Vega
Mashed potatoes
Green peas
Peach Pie/cookies

May 3,17,31

Lunch

Clam chowder
Spaghetti w/meat sauce
Baked stuffed fish
Macaroni and cheese
Green beans
Dinner rolls
Chocolate chip cookies

Dinner

Pasta primavera
Baked meatloaf
Mashed potatoes
Steam rice
Gravy
Broccoli, Corn
Dinner rolls
Butterscotch brownies
Lemon cake

May 8,22

Lunch

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

Dinner

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

May 13,27

Lunch

Chicken soup
Chicken
Steamed Rice
Stewed Tomatoes
Dinner rolls
Peach crisp
Chocolate chip cookies

Dinner

Braised beef strips
Baked fish
Macaroni and cheese
Rice pilaf
Carrots/ Spinach
Pound cake

May 4,18,

Lunch

Cream of broccoli
Pot roast
Vegetable lasagna
Parsley potatoes
Asparagus,Cauliflower
Brown gravy
Blueberry pie

Dinner

Onion soup
Lemon baked fish
Braised beef tips w/
gravy sweet potato/
black bean/corn
Spinach, Beets
Dinner rolls
Cherry pie
Vanilla pudding

May 9,23

Lunch

Knickerbocker soup
Grilled chicken strips
Sweet and sour pork
Fried rice
Mixed veggies
Pound cake
Bluebery pie

Dinner

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

May 14

Lunch

Minestrone soup
Baked chicken
Mashed potato/gravy
Spaghetti
Cauliflower
Turnip greens
Pineapple cake

Dinner

Mushroom soup
Salisbury steak
Pork loin
Potatoes or rice
Green beans
Frosted brownies

May 5,19

Lunch

Chicken rice soup
Lemon turkey pasta
Swiss steak w/ gravy
Rice
Carrots
Dinner rolls
Cherry pie

Dinner

Clam chowder
Roast beef w/ gravy
Chicken pot pie
Oven brown potatoes
Egg noodles
Corn
Green beans
Dinner rolls
Pumkin pie

May 10,24

Lunch

Clam chowder
Swiss steak w/ gravy
Vegetable curry
Stemed rice
Mashed potatoes
Carrots
Apple crisp

Dinner

Beef vegetable soup
Pot roast w/ gravy
Lemon baked fish
Macaroni and cheese
Parisienne potatoes
Green beans
Florida lemon cake

May 28

Lunch

Mushroom soup
Salisbury steak
Pork loin
Potatoes or rice
Green beans
Frosted brownies

Dinner

Minestrone soup
Baked chicken
Mashed potato/gravy
Spaghetti
Cauliflower
Turnip greens
Pineapple cake