



NMCP Welcomes Home the First Wave

By JO1 Sarah Langdon

Smile, hugs, cheers, balloons and bouquets greeted the 95 Expeditionary Medical Facility Portsmouth medical personnel who arrived home Aug. 10 after a six-month deployment. After a few minor delays, these Sailors – the first group to be relieved — touched down at 5 a.m., arriving safely at the Air Mobility Command (AMC) Terminal at Norfolk Naval Air Station, to the delight of family and friends.

It was a very emotional homecoming and even the media, in attendance to cover the event, were touched. Two reporters were overheard saying that

“Waiting For Mommy”



Photo by JO1 Rebecca A. Perron



Photo by JO1 Rebecca A. Perron

“Tears of Joy”

this was one of the most emotional and heartfelt homecomings they had witnessed.

This part of the EMF Portsmouth unit deployed in February and March, and were followed shortly by the second wave, which returned mid-September. The Naval EMF unit assumed medical operations from the Army’s 801st Combat Support Hospital, which had been deployed to the region since the beginning of Operation Iraqi Freedom.

The doctors, nurses, hospital corpsman and support personnel who returned Aug. 10 were relieved by the 89 personnel who deployed July 23.

“The A det of the EMF, or the U.S. Military Hospital as it is now called, is the main source of all specialty care for the Kuwait area,” explained Capt. Martin Snyder, commanding officer, EMF Portsmouth. “In the six months they were here, they saw over 300 patients, and delivered everything from routine medical care to combat lifesaving surgery.

“In addition they were intimately involved in the transition of the hospital from the fixed Kuwaiti

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EMF Sailor Comes Home to New Baby

By JO1 Sarah R. Langdon, Photos submitted by HM2 John McMurry

Excitement and anticipation were high as the plane bringing the first wave of EMF Portsmouth Sailors home touched down Aug. 10. These 95 medical and support personnel had been gone for six months and were eager to be home. One Sailor had even more reason to get off the plane – along with his wife and 4-year-old son, he had a 4-month-old baby boy, he had yet to hold, waiting at the terminal.



HM2 John McMurry, Respiratory Care Clinic at NMC Portsmouth, became a

father for the second time when his wife Kathy gave birth to Hayden Brown on April 16. He weighed 7 lbs., 7 oz., and was 19 1/2 in. in length. At the time of his son's birth, McMurry was with the rest of his detachment in Kuwait where saw and treated patients requiring respiratory therapy.

"It was tough knowing Kathy was here and I couldn't be," McMurry explained. "That was the worst thing. I felt bad knowing she had a newborn and a 4-year-old and was all alone. I stayed as busy as I could, took on collateral duties and tried to keep every second of time occupied."

Although McMurry was unable to see his son at birth, the EMF and NMC Portsmouth command made sure he was able to take a good look at his new son

via video-teleconferencing.

"It was great," McMurry stated. "The command went to great lengths to set up the conference. Kathy came up to the hospital and we were able to see each other. There was no sound, so we had to type, which took awhile, but it was great.

"It really meant a lot to me to get that kind of support for the command. It was the chiefs who all chipped in and paid for the airtime, and I was so grateful."

As for his first response when he saw his new son, McMurry said he was thrilled.

"He was so beautiful," he exclaimed. He really is a beautiful little baby. When I saw them we all just hugged and cried and then we were like, 'let's get out of here and go home'. That really was a great moment in time."



HM2 John McMurry hugs his family and meets his new son, Hayden, after returning from deployment Aug. 10. Hayden was born April 16 while McMurry was working with EMF Portsmouth in Kuwait.

The Courier

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

Family, Friends Welcome EMF Group Home

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Photo by JO1 Rebecca A. Perron

Friends and family of EMF Portsmouth wait anxiously in the terminal moments before the flight carrying their loved ones lands.

Armed Forces hospital to the prototype Expeditionary Medical unit, featuring the new, state-of-the-art Base X shelters, a digital radiology suite, including C arm fluro and CT scan (two types of imaging devices), a Level III theater lab and two state-of-the-art operating rooms,” Snyder added.

EMF Portsmouth assumed control of the hospital from the Army April 1, and immediately began seeing patients, said Lt. Cmdr. Robert D. Poerschmann, patient administration officer for the detachment.

“We were taking care of soldiers, Marines, Coalition Forces and Coalition contractors,” Poerschmann explained. “We had the right leadership in place and really created it from the ground up. We really had to blend the Navy way and the Army way into the ‘new’ way. We worked very well with the Army.”

According to Snyder, his staff essentially ran two hospitals and transitioned equipment and patients from one to the other “flawlessly, without loss of life or degradation of clinical services.”

“The staff performed wonderfully,” Poerschmann said. “Morale was high, individual initiative was high, and the average Sailor didn’t complain ... they just rolled up their sleeves and got the job done as expected.

“Overall, the first wave worked very well as a

team – you couldn’t have asked for a better mix,” he continued. “Even the patients commented on the care they received. They were really glad the Navy was there, and (indicated) they saw a definite quality of care. It is very gratifying to know they feel they were treated well.”

Snyder agreed, saying the first wave of NMC Portsmouth staff performed admirably during their tour in Kuwait.

“They are to be commended for a job well done,” Snyder said. “They have set the standard for joint medical operations in the theater. Since they departed, the hospital’s reputation has become known in Iraq, and both the British forces and the Italians have sent combat-injured patients to the facility for care — a tribute to EMF Portsmouth’s ability to delivery quality medical care across all boundaries. (This is) customer satisfaction at its best.”

“I think the command would be very proud of the image presented by the first part of the operation,” Poerschmann added. “I think the Navy would be proud, from the top all the way down. We got the job done.”

The personnel rotation continues and another group left Hampton Roads for Kuwait in late August. They are relieving the remainder of the first group, who will come home in September after completing their six-month rotation. ▽



Photo by JO1 Rebecca A. Perron

Many tears, hugs and kisses were shared as EMF Portsmouth staff and their families see each other for the first time in six months.

Arthur Appointed Navy Surgeon General

By Ellen Maurer, Bureau of Medicine and Surgery Public Affairs



Rear Adm. Donald Arthur, the 35th Surgeon General of the Navy, addresses the crowd during the Change of Office ceremony at the Navy Yard Aug. 4.

WASHINGTON - Rear Adm. Donald Arthur became the 35th Surgeon General of the Navy in a Change of Office ceremony hosted at the Navy Yard Aug. 4.

Arthur relieves Vice Adm. Michael L. Cowan, who retired after 33 years of in the Navy. Cowan has served as the leader of Navy Medicine since 2001. Guest speaker at the ceremony included Adm. Vern Clark, Chief of Naval Operations. Clark spoke about the advances made in military medicine to care for today's war fighters and their family members.

"We will do everything we know how to do... to help you fulfill the promise you have made to the sons and daughters of America who wear the uniform - to provide health care, first, effectively and, then,

efficiently," said Clark to Arthur during ceremonial remarks. "We know you are committed to continuing building the foundation of Force Health Protection set in place by [Vice Adm.] Mike Cowan. I have every confidence that you will do an equally superb job."

Arthur comes to the Bureau of Medicine and Surgery from his former position as the Commander of the National Naval Medical Center, Bethesda, Md. He holds both a Doctor of Medicine degree, a Ph.D. in Health Care Management, and a degree in law (J.D.). Arthur joined the Navy in 1974, and is qualified in Flight Surgery and Undersea Medicine, as well as Surface Warfare Medicine, Saturation Diving Medicine and Radiation Health.

"It is a tremendous honor to be to be part of Navy Medicine. I pledge to continue the work that Admiral Cowan has began...so Navy Medicine can continue to respond, whenever and wherever, against all threats - some of which we can not combat with traditional methods. We must be prepared to predict, prevent and treat those things that might still come to us," said Arthur. "We will do it as one Navy Medicine, active and reserve. And, we will do it as one Department of Defense medical unit that is a seamless, integrated Navy, Army and Air Force medical system." ▾

A Message from Navy Surgeon General, Rear Adm. Donald Arthur

Shipmates,

Having assumed duties as your Surgeon General, I want to convey how impressed I am with Navy Medicine's professionalism and commitment to excellence. It is an honor to lead such an impressive organization. Thank you for the privilege!

Navy Medicine exists to support the CNO's and Commandant's vision for the Navy-Marine Corps team. We are entrusted with a tremendous responsibility - the health of our Sailors, Marines, families, and retirees. We provide highly

skilled, operationally agile and combat-ready forces who ensure our Sailors and Marines are physically and mentally ready for the challenges of deployment.

My Vision. Navy Medicine will keep Sailors and Marines fit to fight, will serve as a defensive weapon system protecting the warfighter and deterring threats, will provide flexible medical support in combat overseas and emergency response at home, and will provide incomparable health services economically to all whom we are honored to serve.

My Priorities. To achieve

this vision and provide Force Health Protection for those entrusted to our care, I have five priorities for Navy Medicine - all will be achieved through expert leadership, education, and research:

1. Readiness - aligned and agile. Our most important priority is readiness. To be ready, Navy Medicine must be responsive, agile, and aligned with the operational forces. We must have the right people with the right capabilities continually ready to deploy in support of the Navy-

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Corpsman Saves Choking Woman; States ... 'I Was Just Doing My Job'

By HMI Amy Puffenberger, Leading Petty Officer, Ambulatory Care Surgery

Aug. 2 was a rainy Monday, and HM3(SW) Freddy Mejia and his wife were driving on Granby St. in Norfolk, when they came upon a scene that would test Mejia's hospital corpsman's skill and training.

Traffic had stopped and despite the pouring rain, a small crowd had gathered in the street.

"We saw all of the cars stopped and this woman had gotten out of her car and was near the sidewalk," explained Mejia, who works in the post-anesthesia care unit at Naval Medical Center Portsmouth. "An Army lieutenant colonel was attempting to perform the Heimlich maneuver on her, but the object wasn't coming out."

After several attempts, the woman, later known only as "Renee", was still unable to dislodge the object from her mouth. The Army soldier decided he needed additional help and asked the crowd if there was anyone who could assist.

Out of the crowd came a voice, "I'm a corpsman, I can help!" Mejia, who was on leave at the time, did not hesitate to offer his skills as a corpsman to the stranger. He immediately got the "scoop" from the lieutenant colonel and took charge of the situation.

Mejia quickly introduced himself to the woman, assessed her condition and told her he was there to help.

He determined she wasn't getting any air and began to thrusts



Photo by JO1 Sarah R. Langdon

HMI(SW/AW) C. Wagner pins the Navy Achievement Medal on HM3(SW) Freddy Mejia during an award ceremony Aug. 31 in the Post Anesthesia Care Unit. Mejia received a Navy Achievement Medal for his initiative and willingness to help others after he saved a woman from choking.

force air up and out, dislodging the object in the process.

After three or four attempts, Mejia performed an effective Heimlich maneuver, which forced the object out of the woman's mouth. The relieved woman, still gasping for air, but able to breathe, was placed in the recovery position – lying on her side and covered with a jacket that shielded her from the rain until the ambulance arrived.

While waiting, the woman told the crowd, "Wow, I never choke like that," the crowd responded with laughter and applause. Even the lieutenant colonel gave rave reviews about Mejia's actions.

"No praise is necessary, I just did my job," Mejia said, and quietly went on his way after ensuring the woman was off to the hospital.

To the soldier, however, this was a

big deal. He met Mejia's supervisors and gave them a first-hand account of what he considered a demonstration of confident and selfless dedication to duty. Most importantly, he said, a woman's life was spared because of this well-trained corpsman's ability.

"When I was told the story of what HM3 Mejia had done, I was not at all surprised," said Lt. Justine Gilbert, PACU division officer. "This is only an example of the bravery and the extent of personal character he contributes every day. This corpsmen has been a sustained clinical performer since his first day on board about a year ago. He served with the Marines prior to coming here and he immediately put those skills to work educating his peers. He currently is the senior

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Chaplain's Corner

'The Clinical Pastoral Education Residency Program'

By Lt. Cmdr. Andrew D. Nelko CHC, USN

Naval Medical Center Portsmouth is the first and presently the only site that provides Clinical Pastoral Education (CPE) to Navy chaplains. On Sept. 30, the FY 04 class of the U.S. Navy's Pastoral Care Residency (PCR) Program will graduate seven chaplains who will have completed a full year (4 units) of CPE training. For these mid-career officers, graduation will mark a renewal of their ministries in the light of a new and fresh perspective.

As current administrator and 2002 graduate of this same residency program, I personally found the experience to be intense, yet humbling. The educational approach is intense in its theoretical and relational approach to providing pastoral care and at the same time humbling when accompanied with a "stripping" of one's personal pride and defenses. Often this introspective approach to reach deep within to discover the hidden self exposes inherent strengths and

limitations. By virtue of this experience, humility truly becomes a virtue by which we grow outwardly in our ability to offer quality spiritual and pastoral care by going inside to first understand ourselves.

The significance of Clinical Pastoral Education lies in the fact that the Navy, and specifically Navy Medicine, has a long history of recognizing the importance of spiritual care and support as part of the total care offered to patients and their families. Today, Pastoral Care is an integral facet of every Naval and Veterans Administration (VA), medical center.

Along with patients and their families, chaplains provide invaluable pastoral care and support to staff members. Part of that support includes teaching about spirituality, ethical issues, values, grief and other subjects where the chaplain has special expertise. Another aspect of that support involves participation as inter-

disciplinary team members on Ethics Committees, at Patient Care Conferences and in other appropriate forums.

This dynamic program features a rich variety of clinical rotations consistent with the goals of CPE and the needs of the military. These opportunities not only include clinical rotations at the Naval Medical Center, such as psychiatry, but also at the Substance Abuse and Rehabilitation Program (SARP) and at the Chaplains Religious Enrichment Development Operation (CREDO). In the long term, the Navy uses the Pastoral Care Residency Program to prepare chaplains for follow-on assignments requiring the skills honed from these varying clinical environments.

Since 1984, a hallmark of the PCR program has been the unique resource sharing agreement between Hampton Veteran's

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Hospital Corpsman Awarded Navy Cross

By Raymond L. Applewhite, Naval Hospital Camp Lejeune Public Affairs and PHI(AW) Eric Schwab, Navy News Service

NORTH CAROLINA (NNS) — Secretary of the Navy Gordon R. England presented the Navy Cross to Hospitalman Luis E. Fonseca Jr. in a ceremony held at Naval Hospital Camp Lejeune, N.C., Aug. 11.

Fonseca, a 23-year-old corpsman, was awarded the Navy Cross for his actions in support of Operation Iraqi Freedom on March 23, 2003, while serving with Amphibious Assault Vehicle Platoon, Company C, 1st Battalion, 2nd Marines, Task Force Tarawa, II Marine Expeditionary Force.

The Navy Cross, the U.S. Navy's second highest decoration, is awarded for extraordinary heroism while engaged in an action against an enemy of the United States. The act must be performed in the presence of great danger or at great personal risk.

During his Company's assault and seizure of the Saddam Canal Bridge, five Marines were wounded when their amphibious assault vehicle was struck by a rocket-propelled grenade. Fonseca, in the face of small arms, machine gun and intense rocket-propelled grenade fire, evacuated the Marines from the burning vehicle and established a casualty collection unit inside his own medical evacuation vehicle. There, he stabilized

two Marines with lower limb amputations and administered morphine.

After his vehicle was rendered immobile by enemy fire and again, under intense gunfire, Fonseca organized litter teams and directed the movement of four of the Marines, while personally carrying one wounded Marine over open ground to another vehicle.

"I feel privileged to be here to recognize Hospitalman Fonseca for his extraordinary valor and courage," England said. "Corpsmen have a long tradition of service to the United States Marine Corps. You make all of us proud, and let me personally thank you for going above and beyond the call of duty. On behalf of the President of the United States and all of America, I thank you."

Fonseca's colleagues, who were also in attendance, expressed their pride in his actions.

"He is a very motivated corpsman and deserving of this award," said Hospital Corpsman 2nd Class (FMF) Erin Asidao. "I was overjoyed when I heard. I think many corpsmen go unrecognized. I think it's good for the Navy and good for the Hospital Corps."

"I was doing my job," said Fonseca. "I wish I could have done more." ▾



Secretary of the Navy Gordon R. England presents the Navy Cross to Hospitalman Apprentice Luis E. Fonseca, Jr., for heroism during the battle of An Nasiriyah, Iraq, in March 2003. Under attack and without concern for his own safety, Hospitalman Apprentice Fonseca braved small arms, machine gun and intense rocket-propelled grenade fire to evacuate wounded Marines from a burning amphibious assault vehicle.

He stabilized two casualties with lower limb amputations with tourniquets and administered morphine, while organizing the evacuation of four wounded Marines, again exposing himself to enemy fire to treat wounded Marines along an offensive perimeter. His timely and effective care saved the lives of numerous casualties.

Photo and Cutline by HM2 Wayne Nelms

Ceremony Marks Opening of New EMF BASE X Hospital

By JO1 Daniel A. Bristol

EMF Portsmouth, KUWAIT—Navy Expeditionary Medical Facility Portsmouth marked the official opening of the new U.S. Military Hospital, Kuwait with a ribbon cutting ceremony 9 a.m. Aug. 3. The ceremony, which was at the “China Beach” location of the hospital, brought an end to much hard work and preparation. EMF personnel are now making history as the first unit to use this type of set up in a field environment.

“Welcome to Camp Arifjan,” said Cmdr. David Price, master of ceremonies, “as we celebrate the dedication of the U.S. Military Hospital, Kuwait.”

The BASE X style hospital, which is based on supporting the hospital’s mission, replaced the older temper-style tents, which depended primarily on the number of beds needed. With the old style, the number of beds needed determined the overall set up of the unit, and each unit with the same bed capacity looked the same. With this prototype unit, each one looks differently, because it is primarily dependent on the hospital’s mission.

“This hospital represents the best of technology,” said Army Brig. Gen. Michael Walter, commander, 8th Medical Brigade. “It was built because of the value our country places on the care of our soldiers. And, I would tell the Navy leadership that not only is it a first rate hospital, but its Sailors,



Maj Gen Kenneth Herbst, deputy surgeon general, addresses the crowd at the BASE X dedication ceremony.

from the commander to the doctors, nurses and people in the pharmacy lab and their trade, and to the corpsmen, are the best our country produces.”

“This is a very important occasion,” said Army Maj. Gen. Kenneth Herbst, deputy surgeon general and guest speaker at the ceremony. “It represents an important transition, a transition in the care of our service men and service women. The most important thing that I believe anyone does in the military is take care of those who are injured on the battlefield.

“It’s only been in the last 140 years that military medicine has made a change,” said Herbst. “It was our Civil War which brought so much grief to our country, and changed the face of military

medicine. Never before had there been evacuation systems. Never before had there been far forward field hospitals. And since that day, military medicine has changed, and our great nation has led that thrust to bring about change, so that soldiers receive the best of care the farthest forward that has ever occurred, and you all are a part of that.”

The BASE X unit is built to be more mobile than the other style. When it comes to Navy Medicine in the field, that mobility is the key. Navy medical personnel can go wherever they are needed, so the ability to take down, move and set up the hospital with relative ease is a necessity.

“The future for you is that not only have you fielded the largest Naval Expeditionary Medical Facility,” said Herbst, “but you’re taking care of Soldiers, you’re taking care of Marines, you’re taking care of Sailors and you’re taking care of all those who need care. It’s a great honor for me to be here to say thanks, thanks for what you’ve done already and for what you’ll do in the future.”

“Recognition is due to the Fleet Hospital Support Office in Williamsburg, Va.,” said Capt. Martin Snyder, commanding officer EMF Portsmouth, “who on short notice designed, packed, shipped and insisted on the set up of the Navy’s first fully modular hospital.

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Red Cross 'Volunteens' Graduate after Summer of Service

By JO1 Sarah Langdon



Photo by JO1 Rebecca A. Perron

Every year high school students offer their time, free of charge, to the patients and staff at Naval Medical Center Portsmouth by volunteering to be a Red Cross "Volunteen". This summer, 16 of these volunteers came out to work in such places as the Emergency Department, nursing wards, Ear Nose and Throat clinic, Refractive Surgery and administrative offices. They spent their days moving gurneys, wheeling patients, filing records and assisting in areas of customer service.

In all, they completed more than 926 hours of work at NMC Portsmouth. Following the completion of their summer service, a graduation ceremony was held Aug. 12 in the Internal Medicine conference room. Certificates were awarded based on how many years the teenagers have volunteered in this program. †

American Red Cross Volunteers and Program Participants: From left – Sue Parker, ARC, Connie Williams, ARC, Guadalupe Nisperon, NFCU, Sylvia Pakradoonie, Station Chair NMCP ARC and Cmdr. Angela Alsberry, Critical Care.



Photo by Barbara Sarthou

Summer Volunteen Program 2004

Name	Area	Yrs in Prog.
Douglas Dyer	Pediatric Clinic	4
Britney Hill	Physical Therapy	3
Sarah Barrientos	Endocrinology	2
Teneisha Faulks	Labor & Delivery	2
Vanessa Pfeiffer	OB/GYN Clinic	2
David Widener	Admissions Office	2
Ashley Barnes	Main OR	1
Anne Bartels	Pediatric Neurology	1
Michael Duffy	ENT Clinic	1
James Hosack	Graphics	1
Mary Magdycz	ENT Clinic	1
Janelle Nunez	Legal	1
Shereen Sarthou	Main OR	1
Robert Shelburne	Main OR	1
Morgan Smith	Pediatric Ward 4B	1
Sean Whiting	Refractive Surgery	1



Photo by JO1 Rebecca A. Perron

Britney Hill, pictured second from the left, stands with, from left, Connie Williams, Sylvia Pakradoonie, and Capt. Jeanette Lynch, after receiving a watch in honor of her three years of service as a Red Cross Volunteen.

NMCP Says ‘Safety Comes First!’

Story by JO1 Sarah R. Langdon, all Photos by JO1 Rebecca A. Perron

Naval Medical Center Portsmouth designated Tuesday, Aug. 3, as “Command Safety Day”. This year’s theme, Safety First — On and Off Duty, offered staff the chance to demonstrate, educate and inform passersby on the many ways safety is paramount in all aspects of life. In all, 30 clinics and offices throughout the command provided bright and thought-provoking displays on a variety of safety topics such as drug/pill awareness, driving safety and fire hazards.

“We wanted to bring awareness of safety issues,” said Art Vogel, command safety manager. “We left it up to the individual to decide what (topic) they would pick for on or off-duty safety. I am very impressed with their work and the command’s support of their efforts.”

The command gave out awards to the top participants in three categories — Best Overall, won by Emergency Department; Most Creative — awarded to Urology; and two Honorable Mentions awarded to the Pharmacy Department and Staff Education and Training.

Many people came out to visit the booths including Rear Admiral Thomas K. Burkhard, NMC Portsmouth commanding officer, who said he liked the medicine/pill comparison display by HM2 Tammy L. Coale, Pharmacy.

“(The display) was very simple, but really drove home a point,” Burkhard was overheard commenting.

Coale’s display allowed for visitors to choose a piece of candy from the table and compare it to unlabeled pill medication samples on a white board. The demonstration showed the similarities between medications and common candies. Coale felt her display covered an important topic, especially for

households with small children.

Another creative display was ‘Street Smarts’. HM2 Virginia Robles, Command Education and Training, said she researched her topic for a week and

put the display together over the weekend. Robles displayed facts and statistics on the dangers that exist while we go about our everyday lives.

“I know a lot of people pay attention to traffic safety, including drinking and driving, as well as personal safety,” Robles explained. “But, I’ve heard a lot of stories about people getting hurt while just walking (around) — like getting assaulted or raped. So, I looked up Virginia statistics to help put this display together.”

In all, 30 workspaces throughout the hospital contributed displays to the event, ensuring Command Safety Day was a resounding success. ▽



Two of the Command Safety Day’s visitors were these Crash Test Dummies who dropped by from the Virginia Department of Health.



HMI(FMF/SW) Jerry T. Hess, Emergency Planning Department, enticed the public to stop by his booth on Emergency Planning with the help of his friend, a puppet bearing an uncanny resemblance to his operator.

NMCP Recognizes Safety Day's Top Competitors

all Photos by JO1 Rebecca A. Perron



Best Overall Emergency Department "Home Safety"

*From left to right:
Lt.j.g. Charla Benedetto, Capt.
Roberto Quiñones, DFA, and
HM2 Damaris Figueroa*



*In all, 30 workcenters participated
in Command Safety Day, giving
passersby varied tips and informa-
tion on many safety issues.*



Honorable Mention Staff Education and Training "Street Smarts"

*HM2 Virginia Robles, Capt.
Roberto Quiñones, DFA*



Most Creative Urology Department "Summer Sports"

*HM2 Chad Hagedorn, HM3 Melissa
Godzik, Capt. Roberto Quiñones,
DFA*



*Doug Murray, Safety Department, shows Rear
Adm. Thomas K. Burkhard, NMCP commander, a
gas mask featured at the Respiratory Protection
display, while Capt. Roberto Quiñones, DFA, and
Lt. Cmdr. Cynthia Judy, admiral's aide, look on.*



Honorable Mention Pharmacy Department "Pill Identification"

*HM2 Tammy Coale talks to a
mother and daughter about the
similarities between certain
medications and some varieties
of candy.*

Congratulations

Senior and Junior Nurses of the Quarter

3rd Quarter, 2004

Story and Photo by JO1 Sarah R. Langdon

Parton Named Senior Nurse of the Quarter



Four times a year the Navy Nurse Corps at Naval Medical Center Portsmouth chooses two nurses, one junior and one senior, to represent the nurse corps and the Nurse of the Quarter for that time frame.

Lt. Brian Parton, Main OR, received the award for Senior Nurse of the Quarter, Third Quarter, 2004 at Naval Medical Center Portsmouth.

Parton is the charge nurse for the Main OR. He also works part time in the ER at Chesapeake

General Hospital.

Parton didn't plan to become a Navy nurse when he joined the military in 1987. He instead set his sights on the highly technical field of nuclear mechanics and enlisted as a "nuke". Parton took

submarine duty and worked as a nuclear mechanic during the Cold War on the *USS Key West (SSN 722)* and *USS Charlotte (SSN 766)*, the latter of which he was a "plank owner" – a member of the original crew. He served more than 10 years as a nuke when he decided to switch paths to the medical field.

"At the time, I didn't even know they had Navy nurses. I was coming up for chief and I realized that it would be easier to become an officer than to advance, so I put in a package to become an officer. When I found out they had a nursing program, I realized that was something I would like to do, so I

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Stewart Named Junior Nurse of the Quarter

Story and Photo by JO1 Sarah R. Langdon

Lt.j.g. Kathryn Stewart loves her job. She spends approximately 44 hours a week holding, helping and caring for newborn babies who arrived into the world a little bit too soon. Stewart works in the Neonatal Intensive Care Unit at Naval Medical Center Portsmouth and is the Junior Nurse of the Quarter for the Third Quarter, 2004.

"I love working with patient's families and feeling as if I'm making a difference," said Stewart. "It's nice to take care of the moms –

especially when the dad is deployed. I like making sure they are getting what they need ... plus, I get to feed babies all day long."

Stewart participated in the ROTC program at Villanova University, graduating in May 2001. NMCP is her first command.

"I think you get great opportunities through the military," Stewart said. "My dad was in the Coast Guard – I'm a military brat, and I know you get opportunities in the military you don't get in the

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Unit Colors Raised, U.S. Military Hospital Brought to Life

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To the staff of the Kuwaiti Armed Forces Hospital (KAFH), we will be forever indebted to your three years of hospitality. During this time, approximately 3,000 coalition forces received state-of-the-art medical care in a joint effort between our countries. Your medical support and friendships re-developed and reinforced (the concept) that medicine knows no international boundaries.

“On a personal note, I must commend my staff,” said Snyder. “You endured countless hours on the road between Camp Doha, the KAFH and Arifjan, spread out, running two hospitals designed and also clear in the plan to merge one facility into another, transfer equipment and patients and did so

seamlessly without loss of life, equipment or degradation of



Photo by JO1 Daniel A. Bristol

The color guard stands ready to “Raise the Unit Colors” when given the order. This event is similar to “bringing a ship to life” for the first time.

medical services to the AOR (area of responsibility). You truly are the First and Finest deployed.”

Snyder stated tradition by noting if a ship were being brought to life, this part of the ceremony would be where the radar would be spinning and the crew would run up the gangway, but since the hospital is running and the crew is already working, a different technique was used.

“Senior Chief, raise the unit colors,” ordered Snyder.

“Aye, Aye Sir,” acknowledged HMCS Tony Polanco, EMF’s command senior enlisted leader. “Raise the unit colors.”

“Aye, Aye Senior Chief,” answered CE2 Jamie Williams and CS2 Timothy Thornton. And with that, the unit colors

were raised and the U.S. Military Hospital, Kuwait officially opened for business. †

Mejia Awarded NAM for Saving Choking Woman

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corpsmen for PACU, and serves as the ultimate role model for his peers. He is destined for a very bright future and I feel very proud to have worked with him.”

Mejia said he was glad he was able to step in and help this woman out.

“I was feeling pretty good (after the incident) because that’s the first time something like that has ever happened to me and I was able to do what I needed to do,” he said. “I bet a lot of people are scared and that keeps them from doing the same thing. I think all you can do (in a situation like that) is just do it.

“Before the ambulance came, the lady gave me a hug and thanked me. I told her, ‘that’s what I do for a living, I was just doing my job.’”

In the PACU, Mejia is responsible for recovering patients from anesthesia. He and the corpsman he works with ensure patients have no breathing problems and

maintain an adequate airway after they’ve had surgery. †



Photo by JO1 Sarah R. Langdon

HM3(SW) Freddy Mejia stands proudly with his co-workers after receiving the Navy Achievement Medal. From Left: HMC(SW) Wallace Baxter, HM1(SW/FMF) Amy Puffenberger and HM1(SW/AW) C. Wagner.

Oakleaf Club Plays Santa, Fulfills NMCP Wish Lists

Story and Photos by JO1 Sarah R. Langdon



Lt. Cmdr. Paula Chamberlain, Neonatal Intensive Care Unit, accepted a check of \$300 for the NICU. The NICU plans to use the money for the NICU Reunion Sept. 11.

The Oakleaf Club at Naval Medical Center Portsmouth distributed \$2,914.62 worth of supplies to departments around the command Aug. 9 as part of its Benevolence Donation Gifts fund. Rear Adm. Thomas K. Burkhard, commander, NMCP, and Mrs. Susan Burkhard attended.

Every year the Oakleaf Club offers departments the opportunity to formulate a wish list of items that fall outside of the typical supplies purchased with official funds. These supplies range from colorful character stickers for the pediatric clinics, to movies and books for the mental health ward. All are items that can be hard to get without donations.

The supplies purchased through these funds are known as Benevolence Donation Gifts, and enhance the care NMCP staff provide to their patients.

Continued on Next Page

Benevolence Donation Gifts

Orthopedic Department	Family Practice	Substance Abuse Center
Microwave	Immunization – Oceana	Horseshoe and Bocce Set
20 in. TV	Kids’ Picnic Table	Charcoal Grill
Blood Bank	Children’s Chairs	4H Internal Medicine
DVDs	Sleep Lab	Books
Biopsychosocial	12 Wooden Hangers	Outpatient Cognitive
Camera	2 Double Quilts	Intervention Program
Dry Erase Markers	Labor and Delivery	Boombbox
Dry Erase Set	Birthing Ball	Coffee Pot
Playing Cards	PICU	Books
Bent scissors	10 VHS Movies	Music
Craft Kit	Ambulatory Surgery	Navy Marine Corps
4 K/L (Lactation Rooms)	5-Disc CD Player	Relief Society
2 Rockers	Children’s Rug	\$250
2 Lamps	NICU	Red Cross
2 Tables	Measuring Spoons	\$250
2 Clocks	Shredder	NICU Graduation
PACU	Newborn Care Clinic	\$300
250 Stickers	Rocker	Pediatric Hematology/
Rheumatology	Poster and Brochures	Oncology Christmas
13 in. TV/VCR	Coat Tree	Party
OB/GYN Waiting Room	Pediatric Ward	\$250
Activity Cube	Movies	Seaside Smockers
Table and Chair Set	Little Kids Mini Bubble	of Tidewater
	Tumblers	(Bereavement Gowns)
	Character Band-Aids	\$100
	Radio/CD Player	
	CDs for Children	
	Disney Bubble Blowing	
	Machine	

The Oakleaf Club purchased many items for the Benevolence Donation Gifts. Many of these items, such as rocking chairs for new moms and brightly colored band-aids for pediatric patients, can make the time spent NMCP easier on both patient and provider.



PCR Promotes Personal, Professional Growth

Continued from Page 6

Administration Medical Center and the Naval Medical Center Portsmouth. It is through this agreement that the high standard of clinical pastoral education continues to be maintained and accredited.

Clinical pastoral education is consistent with, and an appropriate implementation of, the mission of the sponsoring hospitals. Both call for the provision of high quality pastoral care, which is a hallmark of CPE. The Naval Medical Center, as a teaching hospital, is tasked to prepare medical and non-medical personnel to meet worldwide operational commitments and to conduct basic and advanced education programs for professional development.

PCR students function in a mission setting that encourages and facilitates personal and professional growth. Creativity and ingenuity are encouraged in the multi-disciplinary clinical environment. In short, the physical facilities, available staff and local subject matter experts, diverse clinical training opportunities, and organizational support combine to provide an excellent CPE training environment.

As we celebrate the successful completion of this milestone in the lives of our graduating Pastoral Care Residency chaplains let us give thanks and offer our sincere congratulations to the following chaplains pictured in the enclosed photo: LCDR Roger L. Bouma, LCDR Paschal L. Dawson, LCDR John A. Galle, LCDR Karl A. Lindblad, LCDR Ernest W. Worman, LT Juan Q. Cometa and Capt. (Canadian Forces) Robert A. Lauder. †

Operation Doula Care

– Providing Personal Care and Emotional Support for Military Families

Operation Doula Care was formed in response to the events of Sept. 11. A birth doula is a woman who has been specifically trained to provide physical, emotional and informational support to a pregnant woman before, during and after the birth of her baby. A doula's role is non-medical. After 9/11, Doulas all over the U.S. came together to form the "Doula Reserve". Their mission is to provide birth doula support, free of charge, to the pregnant wives of U.S. military men who have been called up, deployed, injured or killed as a direct result of any military actions relating to the war on terrorism. More information on whether you or someone you know qualify for this unique service can be found at www.operationdoulacare.org.

Oakleaf Club Helps Clinics Provide Top Patient Care

Continued from Previous Page

This year 23 clinics and organizations received some or all of the items on their wish lists.

"We plan to use the money we received toward the NICU Reunion, Sept. 11," said Lt.Cmdr. Paula Chamberlain. Chamberlain accepted a check for \$300 on behalf of the Neonatal Intensive Care Unit. "The money will go to the purchase of t-shirts and food for the kids who come to the reunion. This is our seventh reunion and it's for all the children who graduated from the NICU.

"The (Oakleaf Club) gave the Post-Partum Ward a beautiful glider for the breast-feeding rooms. They also received a lamp and a clock so the new mothers can stay comfortable while they are feeding their babies. They (Oakleaf Club) really worked with us. It's pretty great." †

Rear Adm. Thomas K. Burkhard, commander, NMCP, thanks JoAnn Moran, Oakleaf Club, for the specialty supplies.



Energy Conservation Corner

As cooler weather lurks around the corner, it is time to start thinking about energy conservation and your heating needs.

The human body gives off heat – about 390 BTUs an hour for a man, 330 for a woman. Dressing wisely can help you maintain natural heat in the winter, rather than turning up the thermostat. It is important to wear closely woven fabrics and dress in layers as they add at least a half degree of warmth.

Prime energy-savers include turning the thermostat down at night when you are sleeping; during the day when the house is empty and only utilizing the heat or air conditioner in the morning and evening.

By installing a programmable thermostat, you can eliminate fooling around with the setting three or four times a day. This device is installed easily.

It does make a difference where your thermostat is located

in your home. One located too near a heat or cold source, or on an outside wall, can give you unnecessary problems.

It pays to have your furnace and central air conditioner tuned up each year before the heating or cooling season. Although this is a job for a professional, you can take some measures to increase this efficiency.

Carefully examine all of the ducts and flues and seal any leaks with duct tape. Leaks usually occur at a bend in the duct. Replace filters regularly on furnaces and air-conditioning units. Keep heating/cooling registers cleaned and free from blockage.

Fireplace flues allow warm air to drift out of your home. Plug these effectively by installing a commercially available insulating fireplace baffle (damper).

Turning down the hot water heater to a temperature of 110 degrees will supply you with adequate hot water without wasting energy.

Do not overwork your utilities.

Insulating hot and cold water pipes as well as heating/cooling ducts can prevent sweating on hot days and freezing on cold days.

MYTH: Heat rises.

REALITY: Warm air rises, but heat may move in any direction. Heat is transferred from one place to another by means of conduction, convection and

radiation. Convection is the way heat circulates through liquids and gases. Warm air rises, because it is lighter than cold air.

Space heaters frequently cause overloading of our electrical systems. They are also wasteful of our energy dollars – we can light thirteen 10'x10' offices with the amount of electricity consumed by a single space heater!

Personal space heaters are not authorized at Naval Medical Center Portsmouth without prior approval from the Facilities Management Department.

Existing space heaters must have a green space heater permit issued by FMD. 🟢

Energy Conservation Quiz

1. How much energy is saved by producing cans from recycled aluminum rather than from raw materials?

- A) 25%
- B) 50%
- C) 75%
- D) 90%

2. These electric devices consume more than half of the nation's electricity:

- A) Refrigerators
- B) Electric motors
- C) Lights
- D) TVs

3. How much of the energy typically is lost during conversion and transmission before electricity gets to your house or office?

- A) 1/4
- B) 1/3
- C) 1/2
- D) 2/3

Please see page 19 for answers



Arthur Outlines Plans for Navy Medicine

Continued from Page 4

Marine Corps team. The Global War on Terrorism has challenged us to broaden our view of readiness. Our MTFs must be prepared to respond to any contingency, to provide expert care to casualties returning from theatre, and be ready to support the Nation's needs in collaboration with the National Disaster Medical System.

2. Quality, Economical Health Services. Navy Medicine will continue to provide the finest, cost-effective health services in the world to America's heroes and their families - those who currently serve, those who have served, and the family members who support them.

3. One Navy Medicine - Active, Reserve and Civilian. Navy Medicine is one team. We must seamlessly integrate the talents and strengths of our entire workforce to accomplish our mission of force health protection.

4. Shaping Tomorrow's Force. Our human capital strategy must provide the right force to accomplish our mission. This means refining and shaping our force by recruiting, training and retaining the right mix of health professionals.

5. Joint Medical Capabilities. Navy Medicine will continue to collaborate with our counterparts in the other Services to ensure optimal Department of Defense mission achievement. We will be fully integrated with local, State, and Federal agencies to respond to homeland security threats. The Military Health System plays a critical role in national security and we will be trained, fully integrated with our colleagues, and absolutely ready to respond.

Our Nation is at war against threats that demand our best

efforts and innovative leadership. Our Nation has accepted a 'new normal' since the terror attacks of 2001. Navy Medicine must be ready whenever and wherever we are called upon to serve - aboard ship, on foreign soil, and here at home.

The priorities outlined here will guide our efforts and, in coming weeks, I will provide additional guidance on them. I am confident in your support and dedication to this honorable calling. I encourage your continued best efforts as we work to provide Force Health Protection for the Navy and Marine Corps in the era of the war on terrorism. ♣

*- Vice Admiral DonArthur, MC, USN
Surgeon General of the Navy*

Urology to Conduct Bi-Annual Prostate Tests

The Naval Medical Center Portsmouth Urology Clinic will conduct its bi-annual prostate cancer screening Sept. 20-22.

Prostate cancer affects 16 percent of the male population. Three percent of those who get prostate cancer die from the disease. According to the Centers for Disease Control, prostate cancer is made up of abnormal cells that divide and create unnecessary cells. These cells create a mass of tissue known as a tumor. If these cells spread to other parts of the body, they can multiply and cause death.

Prostate screenings involve checking for early stages of the disease through digital rectal examination (DRE) or prostate specific antigen (PSA). Prostate screenings are recommended annually beginning at age 50 although they may be recommended earlier for some ethnic groups and for those men that have a brother or father with prostate cancer.

The prostate screening at NMCP is conducted in a two-part examination process, with the PSA as the initial screening. To

ensure a timely result, the PSA, should be conducted no later than Sept. 10. TRICARE beneficiaries interested in scheduling the screening should contact the Urology clinic at 953-2342 for the initial appointment or for more information.

Prostate Cancer Risk

Age	Risk
45	1 in 2,500
50	1 in 476
55	1 in 120
60	1 in 43
65	1 in 21
70	1 in 16
75	1 in 9

NMCP Recognizes SNOQ JNOQ Loves Job, NICU

Continued from Page 12

put in a package for MECP (Medical Enlisted Commissioning Program),” Parton said.

Parton received his nursing degree from Hampton University and headed to NMCP for his first duty station in April 1998. On New Year’s Eve, 2001, Parton headed to Guantanamo Bay, Cuba, for a two-year tour at U.S. Naval Hospital, GITMO. Parton left Cuba to attend an operating room school for three months. Parton returned to NMCP in March 2003 where he worked as the charge nurse for OBGYN, the Main OR and is currently on the heart/vascular surgery team for NMCP’s Cardiac Care Center.

“I love my job,” Parton said. “It’s incredible to see and be a part of so many people working together for the good of one patient. There’s no competition – it’s the ultimate definition of teamwork.”

As for his Nurse of the Quarter award, Parton was very pleased.

“I’m very proud,” he said. “It’s good to represent the OR with something like this. I really love my job and the people I work with, so I’m pretty happy about it.”

Parton wants to stay in the area and is planning to apply for a master’s degree. He and his wife Lisa, have three children – son Christopher, 15; daughter Taylor, 12; and another daughter, 25-month-old Randi. ▽

civilian world. There’s more variety and you’re not stuck in just one field.”

Since she joined NMCP staff, Stewart has worked in pediatrics the whole time. She has orders to Camp Lejeune for 2005, and is hoping to continue in Pediatrics there.

“I love Peds,” she said. “I would like to do pediatrics in Camp Lejeune, but if they need me to work somewhere else, than I’ll be happy to do that too.”

As for her Junior Nurse of the Quarter award, Stewart was very pleased.

“It’s very exciting and such an honor,” Stewart replied when asked about the award. “It’s really nice to be recognized for the stuff that you every day – the things that are just part of your job.”

This junior officer also has some advice for other new nurses and hospital corpsman.

“Be flexible,” Stewart advises. “If you’re open-minded you might find that one niche that you really enjoy. You have to be open to new opportunities.”

Stewart is entering a master’s program so she can become neo-natal and pediatric nurse practitioner. She is married to Michael Stewart, a lab technician at Children’s Hospital of the King’s Daughters (CHKD). ▽

Navy Medicine Wants You!

– to help design a new logo –

Navy Medicine? Naval Medicine? What’s the difference?

That’s what the powers that be want you to tell them. Now that the decision has been made that we will once again be known as Navy Medicine, we need a new logo.



That’s where you come in. BUMED wants your ideas on how to graphically represent the concept of Navy Medicine, incorporating our relationship with the Marine Corps and our defense homeland mission.

Please send graphic artwork and written ideas to Mr. Jan Herman, BUMED Historian, at JKHerman@us.med.navy.mil by Sept. 17.

47 NMCP O-3s Promoted to Lieutenant Commander

Lt. James Callan	Lt. Craig Randall	Lt. Brett Laggan, DC
Lt. Mary Currier	Lt. Andrew Sellers	Lt. John McLaughlin, DC
Lt. Alta Deroo	Lt. William Warner	Lt. Shannon Muehe, NC
Lt. Harlan Dorey	Lt. Chad Zehms	Lt. Kristy Newton, NC
Lt. Brian Feldman	Lt. Rebecca Baczuk, MC	Lt. Maria Norbeck, NC
Lt. Tammy Hill	Lt. Joel Bealer, MSC	Lt. Sheila Oleary, NC
Lt. Tuan Hoang	Lt. Jonathan Cotton, NC	Lt. Sherri Piel, MC
Lt. David Johnson	Lt. Tina Cox, NC	Lt. Amanda Rhodes, MC
Lt. Michael Juliano	Lt. Lisa Davis, MC	Lt. Jeanette Roseberry, MSC
Lt. Michael Little	Lt. Gary Deen, NC	Lt. Arthur Schueler, MC
Lt. Robert Meyer	Lt. Benjamin Fischer, MC	Lt. Cary Schultz, NC
Lt. Daniel Moloney	Lt. Kevin French, MC	Lt. Nikhil Shah, MSC
Lt. Kevin O'Meara	Lt. Lenny Futerman, DC	Lt. Carol Smith, NC
Lt. James Palma	Lt. Stephanie Higgins, NC	Lt. Robert Sumter, NC
Lt. Andrew Pelczar	Lt. Jennifer Humphrey, MC	Lt. Gerardo Tuero, MSC
Lt. Girard Poirier	Lt. Bradley Karovic, MSC	Lt. William Walters, NC
Lt. Kevin Policky	Lt. David Labrie, MSC	Lt. Cynthia Wilson, NC

Come One, Come All!

Join the Junior Enlisted Association as they host a talent show held Sept. 30 at 5 p.m. in Bldg. 215.

All talents, ages and groups are welcome -- this includes DoD civilians. Auditions will be held Sept. 27 from 11 a.m. to 1 p.m., or Sept. 28 from 4:30 p.m. to 5:30 p.m.

Cash prizes will be awarded for 1st, 2nd and 3rd place winners.

Please call RP2 Saffawuya -- 953-5550, HM3 Clark - 953-2830, HM3 Henegar-- 953-4770, or HN JeanCharles 953-9420 for more information.

Hope to see you there!

Energy Quiz Answers from Page 16

1. D) 90% - Producing cans from recycled aluminum rather than from raw materials consumes 90 percent less energy and generates 95 percent less air pollution.
2. B) Electric motors.
3. D) 2/3 - Typically two-thirds of the primary energy is lost during the conversion and transmission process. Therefore, every kilowatt-hour you save actually saves three times that amount of primary energy.

MRI Units to Receive Upgrades

The MRI units at Naval Medical Center Portsmouth are getting upgraded this month. These extensive upgrades, worth nearly \$1million each, will extend the operating life of the units, and provide faster and higher quality scans.

In order to support the work required to upgrade the machines, the following actions will be taken:

NMCP is requesting/authorizing the vendor to work overtime and weekends to get the job done in 10 days vice 14.

Since we operate our MRI's at maximal capacity (24 hours a day, Monday through Friday and from 7 a.m. to 11 p.m. on weekends), our other operating MRI will not be able to absorb the 400 displaced patients per upgrade. NMCP plans on categorizing the MRI requests and deferring the less complicated, less expensive exams to the network.

Our MRI schedulers will ask patients scheduling exams marked as "routine" if they wouldn't mind voluntarily waiting beyond 30 days in order to have their exam performed at NMCP. The second MRI upgrade will occur in late September, and the same procedures will occur then.

Installation and training began Aug. 16. ▾

Bravo Zulu!!!

Bronze Star Medal

Cmdr. Mark A. Fontana

Meritorious Service Medal

Capt. Deborah B. Gray
Cmdr. Debra C. Gardner
HMCM Jon S. Lorenz

Joint Service Commendation Medal

Cmdr. Norma G. Jones

Navy Commendation Medal

Capt. Ramon E. Baez
Capt. Anthony S. Panettiere
Cmdr. David Pedraza
Cmdr. Wade W. Wilde
Lt. Cmdr. Sean P. Barbabella
Lt. Cmdr. Roger L. Bouma
Lt. Cmdr. Terence M. Grogan
Lt. Cmdr. Ronny L. Jackson
Lt. Cmdr. Michael J. Matteucci
Lt. Cmdr. Cheryl L. Mauzy
Lt. Cmdr. Julie C. McNally
Lt. Cmdr. Michael L. Shepard
Lt. Sean P. Convoy
Lt. Brian L. Feldman
Lt. Leah Y. Geislinger
Lt. Gaelyn E. Scuderi
HMCM David A. Boutilier
HMCS Daniel R. Bunkers
HMC(SW/FMF) Wendell M. Jordan
HMC(FMF) Leslie A. Mola

Joint Service Achievement Medal

HM1(SW/AW) Kimberly M. Bliefernich

Navy Achievement Medal

Lt. Cmdr. William A. Beckman
Lt. Cmdr. Norman G. Concha
Lt. Cmdr. Christopher T. Lester

Navy Achievement Medal (con't)

Lt. Cmdr. Gregory A. Ouellette
Lt. Cmdr. Karen M. Somers
Lt. Tara B. High
Lt. Bradley J. Karovic
Lt. Robert G. Marietta
Lt. Antonio Mauro
Lt. Bernard C. McDonald
Lt. Antonio M. Moscatelli
Lt. Thomas A. Pluim, II
Lt. Cmdr. David R. Schuck
Lt. Kenneth R. Shook
Lt. Cmdr. Steven M. Wechsler
Lt. j.g. Adam J. Breitwieser
Lt. j.g. Laura L. Jensen
Lt. j.g. Maria G. Mathis
GSCS(SW/AW) Lewis F. Kim
SK1 Shannon O. Armstrong
IT1 Samantha L. Fogan
HMC(SW) Rodney R. Granlund
CE1 Sheldon D. Ickes
SK2(SW) Guadalupe Beltran
CS2(SW) Gabriel R. Caldwell
HM2(FMF) William E. Dalton
HM2 Jose F. Ferrand
HM2 Francesca Harris
HM2 Sean D. Holder
HM2 Devin C. Reed
HM2 Jennifer R. Rutland
HM2 Mauricio A. Salazar III
HM2(SW) Paul J. Weise
HM3 Linda P. MacPartland
HM3 Gabriel Mendoza
HM3 Olufemi O. Ogungbe
HM3 Diana S. Waller
HN Lynsay J. Grimes
HN Rebecca A. Lopez
HN Victor I. Marks
HN Robert L. Marsh

Naval Civilian Meritorious Service Medal

Barbara R. Gabriele, CIV

Navy Unit Commendation

HM3(SW) Roger D. Phibbs, Jr.

Military Outstanding Volunteer Medal

HM1(AW) Lamar Bethel
HM1 Tina M. Spain

Letter of Commendation

Lt. Cmdr. Angela P. Jackson
Ens. Denetra M. Hampton
HM1 Mark D. Dominado
HM1 Kelly D. Goldsby
HM1(SW) Gary D. McFadden
HM1 Ernesto H. Moseley
HM2 Nancy G. Helfrich
HM2 Brad E. Hicks
HM2 Kimberly R. Gales
HM3 Brian M. Grimes
HM3 Emma D. Herrera
HM3 Diana S. Waller
HM3 Michele A. Young
HN Christopher W. Bacomé
HN Jonathan O. Bowman
HN John R. Dawson
HN Michael T. Lucero
HN Dina L. Malits
HN Kenneth W. Phillips
HN Melissa L. Pomeroy
HN David L. Young
Cheryl L. Black, CIV
Sindhu R. Nayak, CIV
Alexandra G. Pollard, CIV
Ronald A. Pritchard, CIV
Robert Storer, CIV

Letter of Appreciation

Capt. Kelvin Sumlin
Cmdr. Josephine Brumit
Cmdr. Denise Johnson
Cmdr. Laurie Williamson
Lt. Cmdr. Terry Anderson

Gold Star Award

Management Information
Department