



# Navy and Marine Corps Medical News



*A Public Affairs Publication of the U.S. Navy Bureau of Medicine and Surgery*

**May 2012**

## **MEDNEWS Items of Interest**

**National Women's Health Week** is May 13-19. For more information visit: <http://www.womenshealth.gov/whw/about/>

**May is Mental Health Awareness Month.** Take a minute to "like" the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) on Facebook. Learn all about DCoE and mental health awareness month at <http://www.dcoe.health.mil>.

**Navy Weeks 2012** - Navy Medicine will be participating in the following 2012 Navy Weeks: Baltimore (June 11-19), Boston (June 29-July 6), Chicago (Aug. 13-20) and Buffalo (Sept. 10-17).

Find us on Facebook. U.S. Navy Bureau of Medicine and Surgery, follow us on Twitter @ NavyMedicine, read our publications on Issuu, check out our photos on Flickr, watch our videos on YouTube and read our blog on Navy Live.

## **Did You Know?**

The Navy Nurse Corps was established by Congress in May of 1908. In October of 1908, the first nurses, later called "The Sacred Twenty," reported for duty at the Naval Medical School Hospital in Washington D.C., which is now home of the Navy Bureau of Medicine and Surgery.

# **BUMED says farewell to 'the Hilltop' in Foggy Bottom**

**By Valerie A. Kremer, U.S. Navy Bureau of Medicine and Surgery Public Affairs**

WASHINGTON-The U.S. Navy Bureau of Medicine and Surgery (BUMED) held its symbolic "change of port" ceremony May 3 here before moving to its new location at the Defense Health Headquarters in Falls Church, Va. next month.

"The U.S. Navy Bureau of Medicine and Surgery is alive and strong," said Vice Adm. Matthew L. Nathan, U.S. Navy surgeon general and chief, BUMED. "It is a culmination of the men and women who serve the Navy Medical Department, whom our Sailors, Marines, and their families are counting on to complete the mission. We are about to shift colors and go to a new home port."

Seventy years ago, BUMED, the central administrative headquarters of the Navy Medical Department, relocated to "the Hilltop" in the Foggy Bottom area here. When BUMED arrived at its current location, the campus had been a base of operations for a variety of U.S. Navy activities for almost 100 years.

During the ceremony, Navy Medicine leadership addressed the change of port, discussed the history of "the Hilltop," and marked the historic moment with a time capsule.

"It is with mixed emotions that we are leaving here," said Rear Adm. Michael H. Mittelman, U.S. Navy deputy surgeon general. "It is also with excitement that will be moving to our new location. This

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*U.S. Navy photo by Josh Wick*

The U.S. Navy Bureau of Medicine and Surgery (BUMED) held its symbolic "change of port" ceremony May 3 at the BUMED headquarters in Washington, D.C. before moving to its new location at the Defense Health Headquarters in Falls Church, Va. next month. Vice Adm. Matthew Nathan addressed the attendees during the ceremony, along with other Navy Medicine leadership.

# Navy surgeon general's view on Navy Medicine in Afghanistan; forward and ready

My focus as your Surgeon General is to ensure that Navy Medicine is supporting our forward deployed forces.

The U.S. Navy's global mission is to be a power projection platform, and we provide expeditionary Force Health Protection for the men and women that makeup that platform.

I recently traveled to Afghanistan to visit our people and medical facilities at Camp Leatherneck, Bastion, Bagram, Kabul, and Kandahar.

I saw what you already know...our shipmates are performing at unparalleled levels of mission success, competency, and professionalism.

I ensure that Navy Medicine is doing this successfully, by seeing and hearing firsthand, along with my top enlisted leader, Force Master Chief Sherman Boss, from the operators and providers in theater. So we traveled into theater, and we did not go alone. U.S. Army Deputy Surgeon General Maj. Gen. Richard Stone, Surgeon General of the U.S. Air Force Lt. Gen. Charles Green, and United Kingdom Surgeon General Vice Adm. Philip Raffaelli joined us, along with their senior enlisted advisors.

In many respects, I saw exactly what I expected to see: Navy Medicine providing world-class expeditionary care and direct support to the warfighter; however I saw some extraordinary efforts that I would like to share with you.

During our visit, we saw the great joint training occurring in the U.K. for the British-US team manning the Bastion Role III facility. In Afghanistan, I toured many of our Role II and Role III combat hospitals including the U.S. Navy-led NATO Role III Multinational Medical Unit in Kandahar. We also visited the Concussion Restoration Care Center (CRCC) at Camp Leatherneck, and the Navy's Mobile Mental Health Care Teams (MCT) that work throughout the country.

We were all impressed with the exceptional work that they are doing. The way our in-theater forces are able to jointly operate across the medical spec-

***“Our medical teams in theater are setting the new standard and establishing the best practices in life-saving trauma care...”***

- Vice Adm. Matthew Nathan  
U.S. Navy Surgeon General

trum while maintaining exceptional care for our coalition forces and the lessons learned from these experiences will shape the way we do business in future forums at home as well as abroad. This joint infrastructure will be invaluable as we move forward in the future of military medicine.

Our medical teams in theater are setting the new standard and establishing the best practices in life-saving trauma care, to treat those with the number one battle injury...concussions and severe musculoskeletal injuries. This provides real-time mental and behavioral health as well as conducting well-being screening that identifies combat stressors and promote resiliency.

A testament to our team's efforts can be seen in our return to duty rates for concussed patients. Since Aug. 2010



Vice Adm. Matthew L. Nathan  
U.S. Navy Surgeon General

when the CRCC opened, there has been a 97.89% RTD and patients went back to work within 10.3 days after injury.

That's impressive. You should be proud. I am!

I spoke with many of the senior line leaders of our forces in addition to senior Afghanistan military leaders...to a person they respect and admire the results and collaborative efforts of all involved in these critical medical missions. I want to emphasize this vital collaboration among nations has enabled us to save the lives of not only our Sailors, Marines, Soldiers, and Airman but the lives of our international and host nation partners as well.

I saw the success of your efforts and impressive skills while serving as the Commander of Walter Reed National Military Medical Center. The continuum of combat care - from battlefield to bedside - is a testament to the dedication, commitment, and sheer determination of those who serve along the way, both wounded and those who care for our wounded and ill. You are those that tell death, illness, and pain...“if you want to get to those I care for, you will have to go through me” I have never been more proud to serve with you in Navy Medicine.

To those of you who are serving in theater currently, I had the opportunity to talk with many of you during my time there, and as I said earlier, you carry out your mission 24-7, day-in and day-out, under the most rigorous conditions. I challenge anyone to suit-up in that environment and keep up.

Our people are inspirational. I thank you on behalf of a proud Navy and a grateful nation.



**Navy and Marine Corps  
Medical News**



**Navy Bureau of Medicine and Surgery**

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# Navy surgeon general visits Denver as part of Navy outreach

By U.S. Navy Bureau of Medicine and Surgery Public Affairs

DENVER - The Navy and Marine Corps' top doctor concluded a two-day visit to the Denver area, May 1, as part of a new nationwide outreach program designed to show Americans in cities across the country the investment they have in the U.S. Navy.

Navy Surgeon General Vice Adm. Matthew L. Nathan visited the city as part of the "Navy 50/50" program that is sending 50 top Navy uniformed and civilian leaders to 50 cities across the United States for high-level engagements with corporate executives, civic leaders, government officials, educators, non-profit executive directors, veterans and members of the media.

"The people of Denver have every reason to be proud of their Navy," said Nathan. "We know that when the world dials 9-1-1, it's not to make an appointment. So, we stand ready to answer the call."

Nathan met with a cross section of civic, health and corporate leaders during his stay to thank them for the service of more than 5,700 active and Reserve Sailors from Colorado, and to describe how the Navy's work overseas directly benefits cities across the nation, like Denver.

During his meetings throughout the city, Nathan explained that 70 percent of the world is comprised of water, 80 percent of the world's population lives near water and 90 percent of the world's commerce floats across the water.

"We believe it is important for a world class city like Denver to hear about how the Navy supports your economy," said Nathan. "Even though it is landlocked, Denver relies on the Navy to keep the oceans free and open as more than 50 percent of your goods transit the seas before being transported here."

## FAREWELL

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place will always hold a special place in our hearts. Our ethos will not change, just our location."

Jan Herman, senior historian, Navy Medical Department who is retiring later this year after more than 30 years of service at BUMED, spoke during the ceremony on the history of BUMED and his tie to the land. Since coming to BUMED in 1979, Herman has worked as the historian, curator of the old U.S. Naval Observatory, and until 2009, editor-in-chief of Navy



U.S. Navy photo by Capt. Cappy Surette

Vice Adm. Matthew Nathan, U.S. Navy Surgeon General, is interviewed on Denver's CBS4 morning show as part of a new nationwide outreach program designed to show Americans in cities across the country the investment they have in the U.S. Navy.

Nathan visited several medical facilities in the Denver area to include the University of Colorado's Anschutz Medical Campus, National Jewish Health and Presbyterian/ St. Luke's Medical Center where he met with leadership and staff to share best practices in modern health-care and to discuss expeditionary military medical care, and the Navy's role in humanitarian assistance missions around the world.

"The motto for the Navy is a 'Global Force for Good,'" said Nathan. "We believe very strongly in that. The Navy and Marine Corps can be wherever they are needed nearly overnight bringing either credible combat power to deter aggression, or great compassion in terms of humanitarian assistance or disaster relief."

Nathan also had the opportunity to visit the Denver Broncos training facil-

ity in Englewood, Colo., where he toured the training compound and met with owner Pat Bowlen, Head Coach John Fox, Head Trainer Steve Antonopoulos, and key members of the medical team who were especially interested in the effects and treatment of concussive injuries. Nathan discussed Navy Medicine's work in the traumatic brain injury treatment, advancements in battlefield medicine and opportunities to collaborate in the future to enhance the treatment and care of those suffering from concussions and sports injuries.

"While we have made great strides in learning about the treatment of those suffering from the invisible wounds of war, we have much we can learn and share by listening and learning from others with similar issues," said Nathan.

Medicine, the bimonthly magazine of the Navy Medical Department.

"I am going to miss this place," said Herman. "BUMED will always have a special place in my heart."

June 2012 will see the historic collocation of the U.S. Army, Navy and Air Force medical department headquarters, and the Tricare Management Activity at the former Raytheon Complex, Falls Church, Va.

"When we get to our new location, we will be ever present to defend and support the ideals of our country," said Nathan. "We will be there proving world-class care anywhere anytime."

# Navy surgeon general commemorates Nurse Corps 104th birthday

By Janet Tela, Navy Bureau of Medicine and Surgery Public Affairs

WASHINGTON - The Navy Surgeon General sent a message to the Naval Nurse Corps May 11 in honor of its birthday this Sunday, May 13.

"As the Navy Nurse Corps celebrates its 104th year of service, I extend my sincere thanks and appreciation to all Navy nurses on behalf of Navy Medicine and a grateful nation," said Vice Adm. Matthew L. Nathan, U.S. Navy surgeon general and chief, Bureau of Medicine and Surgery.

The Navy Nurse Corps was established by Congress in May of 1908. In October of 1908, the first nurses, later called "The Sacred Twenty," reported for duty at the Naval Medical School Hospital in Washington D.C., which is now home of the Navy Bureau of Medicine and Surgery.

"Since 1908, the men and women of the Navy Nurse Corps have honorably served in times of peace and war, at home, abroad, and on the front lines," Nathan said. "Today we honor the brilliant achievements, courage, and commitment of Navy nurses who ensure our nation has a medically fit and ready force."

Today, approximately 3,900 active and Reserve Nurse Corps officers serve in the grades of ensign through rear admiral. They care for many patients whose illnesses and injuries are no different from those found in civilian facilities and also care for those in deployment settings with battle injuries.

Navy nurses serve aboard sea-going vessels, pierside, on deployments or humanitarian missions, and at clinics or inpatient facilities. Wherever they are assigned, these nurses find unique



U.S. Navy photo Gary Corpuz

Rear Adm. Elizabeth Niemyer, director, Navy Nurse Corps, and Lt. Jennifer Serpe cut the cake for the Nurse Corps birthday ceremony.

opportunities to exercise their knowledge and skills as they care for their patients and family members.

"Their continued work and dedication have earned them a prominent place in the United States Navy," Nathan said. "To the almost 4,000 active duty and Reservist Nurse Corps personnel, I thank you for your service and for the sacrifice of you and your families. Happy Birthday Nurse Corps!"

## Hospital Corps 'A' School celebrates 1st year in Texas

By Lisa Braun and Lt. Danilo Mendoza

FORT SAM HOUSTON, Texas – Navy hospital corps and Air Force medic instructors gathered at the joint Medical Education and Training Campus (METC) at Joint Base San Antonio, Fort Sam Houston, April 27 to celebrate the one-year anniversary of the Navy and Air Force's entry-level enlisted medical training program.

It was one year ago that Naval Hospital Corps School Great Lakes, Ill., officially relocated to Ft. Sam Houston as part of the 2005 Base Realignment and Closure (BRAC) Commission initiative that established the joint Navy/Air Force Basic Medical Technician Corpsman Program.

"The past year has been the most enlightening, rewarding, challenging and inspiring time of my career," Command Master Chief Shanon Best told the 115 Navy and Air Force instructors attending the ceremony. "I am constantly told by fellow master chiefs in the fleet that I have the best CMC job in Navy Medicine, but I always argue that I have the best one

in the entire Navy."

Best is command master chief of the Navy Medicine Training Support Center (NMTSC), the Navy component command for the sprawling 2-million square-foot joint Medical Education and Training Campus (METC) that now houses nearly all Department of Defense (DoD) enlisted medical education and training programs.

The first BMTCP class had 150 Navy and 44 Air Force students. Since that first class one year ago, more than 3,700 Navy and more than 1,000 Air Force students have graduated. BMTCP now has a daily student load of approximately 1,700 students.

BMTCP is a 14-week "A" school. Students participate in 560 hours of didactic and practical skills. They become certified in Basic Life Support, patient assessment, shock and trauma patient management, medication administration, venipuncture, IV insertion, sick-call screening and various other skill-set training.

Hospital Corpsman 1st Class (FMF)

Bradley Dudding, a BMTCP instructor, said the first year at BMTCP has been challenging, but a very good experience.

"Like any new training program, we had to deal with limited space, equipment and classrooms," Dudding said. "I think our greatest success has been developing a culture where both Navy and Air Force customs and traditions can thrive and learn from each other. Instructors and staff have constantly shown the ability to adapt to any situation and overcome obstacles to ensure the mission is completed."

Best agreed, pointing out that combining Hospital Corps School training with the Air Force in a joint environment is producing better corpsmen to care for today's modern warfighters.

"I'm so proud of this school," Best said. "I'm proud of what it stands for and what it has become. Each graduate of this program leaves San Antonio an exceptional military health-care provider. The consolidation of forces has taught our newest corpsmen how to work together to provide the highest level of care."

# Navy Medicine talks TBI with the Tennessee Titans

By Valerie A. Kremer, U.S. Navy  
Bureau of Medicine and Surgery  
Public Affairs

NASHVILLE, Tenn. - A Navy Medicine leader met with the Tennessee Titans at the Titans training facility here to discuss shared initiatives between the Titans and Navy Medicine on the treatment of traumatic brain injury, May 10, as part of Nashville Navy Week.

Rear Adm. Donald Gintzig, deputy chief, medical operations, U.S. Navy Bureau of Medicine and Surgery, met with the top athletic trainer and medical staff and toured the facility during the visit.

"It was a pleasure having Rear Adm. Gintzig visit the Titans as part of Nashville Navy Week," said Brad Brown, Tennessee Titans head athletic trainer. "It has been a great opportunity to open the discussion on what the National Football League and Navy Medicine are doing to prevent and treat traumatic brain injury. It is so important to keep our players and service members safe and to prevent TBI as much as possible."

During the visit, Gintzig and the Titans medical staff discussed concussion management, resiliency training, advancements in virtual reality treatment, and alternate TBI therapy.

"We thank the Titans and the NFL for continuing to highlight the damaging effects of traumatic brain injury on our service members and players," said Gintzig. "It is crucial that we continue these conversations, sharing lessons learned, because there are many similarities, be it on the battlefield or playing field."



U.S. Navy photo by Chief Mass Communication Specialist Joshua Treadwell

Rear Adm. Donald R. Gintzig, deputy chief, medical operations, speaks about concussion recovery and traumatic brain injury advances with Brad Brown, head athletic trainer of the Tennessee Titans, May 10 at the Titans training facility in Nashville, Tenn. This event took place during Nashville Navy Week, one of 15 Navy weeks planned across America for 2012.

During his visit, Gintzig highlighted the care that is being done at the Concussion Restoration Care Center in Camp Leatherneck, Afghanistan as well as the treatment being provided at the National Intrepid Center of Excellence for TBI/PTSD, Bethesda, Md.

As a global force for good, Gintzig also discussed the importance of research and development as a supporting element of

the maritime strategy and its vital role in concussion treatment.

Nashville Navy Week is one of 15 Navy weeks across the country this year. Navy Weeks are designed to show Americans the investment they make in their Navy and increase awareness in cities that do not have a significant Navy presence.



U.S. Marine Corps photo by Cpl. Patricia D. Lockhart

## Expeditionary Medicine

Hospital Corpsman 2nd Class Adam Martin, left, assigned to the 3rd Marine Expeditionary Force Tactical Medical Simulations Center, observes a medical officer from the Vietnamese People's Navy insert a needle into a mannequin during a basic lifesaving course as part of Naval Exchange Activity Vietnam, April 24. The event, held annually since 2010, promotes cooperation and understanding between U.S. and Vietnamese Navy participants.

# Navy Reserve Sailors participate in Alabama Care 2012

By Navy Medicine Support Command Public Affairs

SELMA, Ala. – Nearly 80 enlisted and commissioned U.S. Navy medical professionals are participating in one of Navy Medicine's largest community outreach efforts in the Southeast as part of an Innovative Readiness Training (IRT) mission designed to provide assistance to underserved communities.

Alabama Care 2012, scheduled to continue through May 10, is part of the Department of Defense (DoD)-supported IRT effort, an initiative designed to improve military readiness while simultaneously providing quality services to communities throughout America. The project is a multiservice mission comprised of active duty, reserve, and National Guard members from Navy, Army and Air Force components.

Service members worked together to set up field-operated medical facilities in the three medically underserved and economically-depressed communities of Selma, Demopolis and Hayneville. Although the primary focus of military medical professionals participating in the exercise is to conduct deployment and readiness training, U.S. Armed Forces participants provided free medical, dental, pharmaceutical and ophthalmology services to the community, something Navy Medicine Support Command (NMSC) Reserve Component member and Alabama Care 2012 Navy Component Team Lead Cmdr. Patricia McCafferty said represents the fabric of what military medical professionals do around the world.

"Our Navy medical professionals are eager to provide the best care possible," she said. "We are also providing



Photo by Mass Communication Specialist 1st Class (SW) Bruce Cummins

U.S. Air Force Technical Sgt. Sarah Jarnagin (left) from the 178th MDG in Springfield, Ohio, and Hospital Corpsman 1st Class Jennifer Mantanona from Navy Operational Support Command Las Vegas, prepare to perform dental x-rays on a patient May 4 during Alabama Care 2012 in Demopolis, Al. Mantanona and Jarnagin are participating in one of Navy Medicine's largest community outreach efforts in the Southeast as part of an Innovative Readiness Training joint mission designed to provide assistance to underserved communities as well as prepare service members for potential deployments.

education through handouts, videos and posters. Each of the three sites has coordinated with local medical doctors, dentists and pharmacies, which allows the patient to continue to receive care once we depart."

The tri-service medical personnel are providing multiple services that include nursing evaluations, cholesterol screening, blood glucose monitoring and Hemoglobin A1C testing. Dental services include assessments, extractions, fillings and cleanings. Eye exams and spectacle manufacturing are offered, and a phar-

macy is dispensing prescriptions once the patient has been seen and assessed by the medical team.

Alabama Care 2012 marks the first time some of the deploying reservists are exposed to working with other military services, an effort she said will prove invaluable in the future for everyone involved.

"Flexibility and adaptability are key working in a joint environment," she said. "We have become a seamless group and have established friendships that will last a lifetime."



Photo by Mass Communication Specialist 2nd Class Ewa-Marie Ramnarani

## Humanitarian Assistance

The Military Sealift Command hospital ship USNS Mercy (T-AH 19) transits San Diego Harbor as the ship departs for Pacific Partnership 2012, May 3. Pacific Partnership is an annual U.S. Pacific Fleet humanitarian and civic action exercise designed to work with and through host nations to build partnerships and a collective ability to respond to natural disasters.

# Navy develops operational stress control mobile training teams

By Mass Communication Specialist 3rd Class Andrea Perez, Navy Personnel Command Public Affairs

MILLINGTON, Tenn. - Continuing its focus on providing resources for 21st Century Sailors and Marines, the Navy has developed two operational stress control mobile training teams (OSC MTT), officials said May 4.

According to NAVADMIN 150/12, the OSC MTTs will deliver OSC Leader and OSC Front Line Supervisor training to Navy commands. The two teams have been positioned on the East and West Coasts to provide quick responses to requests for training.

"We wanted to expand the availability of our OSC skills training, and the MTTs are the most cost-effective method. This brings the training to the command,"

said Capt. Kurt Scott, Behavioral Health Programs director, Bureau of Naval Personnel. "The most important part of these courses is the frank discussion among attendees. When members of a command talk about what they see as stress-related issues and how course tools could be applied in their commands, OSC becomes more than a concept - it becomes a way of doing day-to-day business."

The six-hour OSC Leader course is designed for unit wardrooms and chief petty officer messes, while the four-hour OSC Front Line Supervisor course focuses on helping E-6 to O-3 deckplate leaders develop skills to recognize and address stress in their Sailors.

The OSC Leader course is an interactive, professionally-facilitated, skills-based course. Leaders learn how to identify stress, build resilience and mitigate

stress before it becomes a stress injury or illness. During the course the command leadership will share their real-world experiences and how they handled stress.

The OSC Front Line Supervisor course provides in-depth training for deckplate supervisors to enhance their ability to recognize and effectively intervene with Sailors suffering from emotional distress caused by life's challenges. The course emphasizes supervisory as much as helping skills.

Commanders, commanding officers, and command master chiefs are encouraged to request training for their wardrooms and messes prior to beginning a deployment work-up period. The MTTs travel and train at no cost to the requesting command.

Procedures for requesting training are in the NAVADMIN.

## Service members use art to relieve PTSD symptoms

By Cpl. Andrew D. Johnston, 2nd Marine Division

MARINE CORPS BASE CAMP LEJEUNE, N.C. - Not all fights in the Marine Corps are fought on the frontline; some are only skin deep. According to a 2008 study from the Center for Military Health Policy Research, 14.8 percent of Iraq and Afghanistan veterans return home with combat related post-traumatic stress disorder.

Naval Hospital Camp Lejeune, N.C., is using the Art Therapy Program, which started in 2009, to help advance its mental health rehabilitation program and combat PTSD. Gala Elliott, an art therapist with Naval Hospital Camp Lejeune, Directorate of Mental Health, said when she arrived at the clinic, the therapy was still a pilot program. Now, weekly attendance is nearly 10 times larger, thanks to positive feedback and noticeable improvements in participants' PTSD symptoms.

"Art therapy is for people dealing with PTSD, traumatic brain injury, anxiety and depression," said Elliott. "Really, anybody who wants to use a non-verbal approach for processing their combat injuries, either physical or psychological, will benefit from it."

During the group sessions, participants use a variety of art supplies, including paints, clay, markers, charcoal and images for collages, to express their thoughts, feelings and memories.

Lance Cpl. Mark Reinhold, an infantryman with 2nd Battalion, 8th Marine Regiment, 2nd Marine Division, was a little skeptical when his doctor referred him to art therapy as part of his PTSD treatment. Once he got involved and noticed the changes, however, he was sold.

"Really what happened with me, and what I see happen with a lot of other people, is it's an escape from your everyday, sit-down-and-talk counseling session," said Reinhold. "It's a way to really figure out how you're feeling without having someone digging at you. You figure it out for yourself without having to verbalize it. You figure it out for yourself without someone telling you."



U.S. Marine Corps photo by Cpl. Andrew D. Johnston

A mask, painted by a Marine who attends art therapy to relieve post-traumatic stress disorder symptoms, is displayed at an art expo May 3. The expo provided a way to raise awareness about PTSD and the benefits of art therapy.

Using art as a form of expression can subconsciously bring up underlying issues individuals don't realize are there, Elliott explained. Once the issues are identified, they are easier to resolve, she said.

"It brings up things that are repressed - the thoughts and feelings that are lying underneath your consciousness," said Elliott. "Then you put it on paper through art and, once you take a step back to reflect on the art, you'll see that it's showing you a part of yourself that you might not even know is there."

One of Elliott's groups held an art expo May 3 to help raise awareness about PTSD and the benefits of art therapy. For Reinhold this was well out of his comfort zone, but thanks to the

# Undersea warriors, undersea medicine: The future force

## From Office of Naval Research

ARLINGTON, Va.—U.S. Navy divers take on dangerous tasks every day—and starting this week, they will be part of a multinational effort near Estonia to help clear the Baltic Sea of underwater mines left over from as long ago as the First and Second World Wars.

“Open Spirit” will be among the biggest naval exercises in the Baltic Sea this year, where more than 150,000 naval mines were planted during the two world wars. It’s all part of a day’s work for U.S. Navy divers, who in addition to hazardous missions face natural perils like oxygen toxicity and decompression sickness every day.

A video, released May 15, highlights how Office of Naval Research (ONR) scientists are working with medical experts to protect America’s undersea warriors. A link to the video can be viewed at: <http://youtu.be/1TqYx5-HBEc>.

The field is called Undersea Medicine—and it is designated a National

Naval Responsibility by the Chief of Naval Research. Viewers can get an inside look at this remarkable world of the deep in “Protecting Navy Divers: The Undersea Medicine Solution”—a look at the groundbreaking work being done by the divers beneath the waves, and the scientists improving their ability to perform missions.

“There is no such thing as a pure 100 percent safe dive,” said Cmdr. Matthew Swiergosz, a program manager with ONR. “Navy divers take on jobs that are extraordinarily dangerous, and they do them with a poise and professionalism that would inspire every American who could see it.”

Continued domination of the undersea domain, officials say, is a vital component of national security.

“The Earth is mostly water,” said Swiergosz. “Most people live within a handful of miles of our oceans, seas, rivers. So any military force that’s supposed to provide national security must have underwater capabilities.”

The new video offers viewers unique insights into the hazards that await divers every time they splash into the water—and the progress being made to lessen the dangers.

Around the globe, ONR scientists continue the fight, making historic advances against natural perils in the deep. In addition to ongoing diving operations like Open Spirit with allied nations, a new joint research effort specifically in diving medicine was just announced between the U.S. Navy and the Vietnam People’s Navy.

“What has been great about ONR is the ability to have the vision to see years into the future,” said Dr. Michael Qin, an ONR-supported research scientist who is featured in the video.

A Navy diver puts it even more succinctly.

“Without undersea medicine, we would still be in the stone age when it comes to underwater operations,” said Chief Warrant Officer 3 and diver John Theriot.

## NMCSD debuts bioskills training center

By Mass Communication Specialist 3rd Class Jessica Tounzen, Naval Medical Center San Diego Public Affairs

SAN DIEGO - Naval Medical Center San Diego (NMCSD) unveiled a major upgrade to one of its training facilities during a grand opening ceremony April 23.

The hospital’s 450-square-foot Surgical Training Lab had been in use since 1998. Over the years, the space became inadequate due to increased use by the hospital’s residency programs, staff and pre-deployment training programs, and it was determined that more room was needed.

Now boasting 2,100 square feet of useable space, the Surgical Training Lab is now the new Bioskills Training Center (BTC).

The new \$5 million facility can accommodate up to 40 medical personnel and 10-12 supplementary personnel at eight full cadaver stations or 16 partial specimen stations.

The mission of the BTC is to support NMCSD’s mission of operational readiness, patient care, and staff and resident medical education. BTC provides courses to teach advanced surgical skills, enhance and hone existing skills, provide opportunities for patient-specific procedure development, and provides a venue for introduction of new technology, new procedures, and innovative development by Navy researchers.

In 2007, Rebecca Eveland, head, surgical training laboratories and BTC facility, along with her NMCSD colleagues began brainstorming ideas for a new training space. A grant was received and serious planning efforts commenced in 2009.

“That was when we requisitioned several spaces adjacent to the Surgical Training Lab: a storeroom, a room with two freezers, Pathology’s HIV lab, and a small NCIS office. It’s an expansion and complete renovation of the original Surgical Training



U.S. Navy photo by Mass Communication Specialist 1st Class Anastasia Puscian

Commander, Naval Medical Center San Diego (NMCSD), Rear Adm. C. Forrest Faison III, Deputy Commander, Capt. Mark Kobelja and NMCSD Orthopedic Surgeon Matthew Provencher cut the ribbon to the new Bioskills Training Center during the grand opening ceremony as Head, BTC Rebecca Eveland, and Orthopedic Department Head, Capt. Dana Covey look on (as shown from left to right).

Lab,” said Eveland.

Setting the BTC apart from other training facilities is the fact that it is qualified as both ‘macro’ and ‘micro’—meaning it can accommodate both larger and smaller specimens and is well-suited for nearly any type of surgical training—the only such training facility of its kind throughout the Department of Defense.

## NAMRU-3 builds infectious disease surveillance capacity in Iraq

### From Naval Medical Research Unit 3

Earlier this year, the U.S. Naval Medical Research Unit No. 3 (NAMRU-3) in Cairo, Egypt, and the Department of State sent a three-person team to Erbil, Iraq, to build an infectious disease surveillance capability.

The team conducted a monitoring and evaluation assessment at Rizgary Teaching Hospital, which is the Surveillance for Severe Respiratory Illness Program (SARI) sentinel surveillance site in Erbil.

“The meetings focused on the surveillance procedures and system that will be implemented and the data management readiness processes,” said Shaun Truelove, NAMRU-3 epidemiologist. “An overview was presented to the entire hospital physician staff. In a country where it is continually challenging to work, this trip was a big success and will initiate the SARI program in Iraq, something we have been working towards for several years now.”

On visits to the Erbil Central Public Health Lab (CPHL), Central Veterinary Lab, and Rizgary Hospital lab, the team evaluated laboratory standards and testing practices. Team members inventoried and installed equipment and discussed current progress and future collaboration.

Collaborators from Rizgary, the Kurdistan Ministry of Health, and Erbil CPHL successfully finalized details and responsibilities for initiating the SARI surveillance program in Erbil and integrating it in the Eastern Mediterranean Acute Respiratory Infection Surveil-



At the Erbil Central Veterinary Lab, Erbil, Iraq, (CVL): Ellen Manning, U.S. State Department (left) and Dr. Elham Potrose, CVL director (center) review the data management readiness process.

lance Network.

Lt. Cmdr. Brent House, head of NAMRU-3's Global Disease Detection and Response Program, was happy to report that, “Upon completion of this trip, SARI is 100 percent ready to begin in Erbil.”

The other member of the team was Ellen Manning, U.S. Department of State Iraqi Scientist Engagement Program project coordinator.

The mission of NAMRU-3 is to study, monitor and detect emerging and re-emerging disease threats of military and public health importance and to develop mitigation strategies against the threats in partnership with host nations and international and U.S. agencies in the Central Command, European Command and Africa Command areas of responsibility.

## ART

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therapy, he said it helped him deal with his PTSD symptoms.

“I had really bad anxiety problems, but after doing this kind of treatment, I’ve definitely seen improvements,” said Reinhold. “I mean, hell, I’m here doing this expo and, normally, I can’t be around crowds of people. It’s helping me cope with these types of issues, and I’m meeting new people.”

Elliot believes one reason art therapy has the kind of effect it does on PTSD patients is recent evidence shows creative thinking and activities can have a kind of healing effect on the brain.

“The more and more research science is doing shows creative experiences, such as art, stimulates certain parts of the brain that can help in recovering from traumatic events, either physical or psychological,” said Elliot. “So to have someone who couldn’t find the words to verbalize their emotions and memories finally have an outlet through art, it can be a heavy weight lifted off their conscience.”

All of the therapy is completely confidential and available to anyone with a referral from their primary care physician or medical officer. Individual sessions can be arranged, and group sessions are offered weekly. According to Reinhold, “If you’re battling PTSD, you won’t be disappointed!”

## Got News?

If you’d like to submit an article or have an idea for one, contact MEDNEWS at 202-762-3160 or Valerie.Kremer@med.navy.mil



## A visit to the Navy Entomology Center of Excellence

By Adm. John C. Harvey, Jr., USN  
Commander, U.S. Fleet Forces  
Command

I had the opportunity to visit the Navy Entomology Center of Excellence (NECE) in Jacksonville, Florida. NECE is a command under the Navy and Marine Corps Public Health Center (located in Portsmouth, Va) that provides technical services and expert training in reducing the risk of diseases transmitted by insects and other arthropods.

Now, insect repellent is not typically the first thought that comes to mind when we think about Force readiness, but it is indeed a very important part of protecting our Sailors and Service members who are deployed around the world. Infectious diseases, such as malaria, are not a new challenge for us. Malaria caused more casualties among U.S. Service members in the South Pacific during World War II than the enemy. In 2003 we had to evacuate 43 Marines from Liberia due to malaria (a significant impact to readiness) and we recently lost one of our Seabees who contracted the disease while deployed to Liberia. While we've certainly made significant progress over the years discovering new practices that improve our ability to prevent those diseases, transmission can be deadly and thus remains a very serious concern for our deployed Sailors and Service members.

Highlights of my visit include an overview of the reference insect collection used to educate our deploying IAs and Sailors on specific insect threats; the testing and evaluation shop where I had the opportunity to see (and use!) the equipment our Sailors use for pest control; the laboratory and the small wind-tunnel used for aerosol tests (among other things); and the NECE insectary which contains some very "interesting" bugs, including the Madagascar Hissing Cockroach.

Given my role as the Executive Agent for Individual Augmentees (IAs), I was particularly interested in learning about how we are preparing our Sailors to



*Courtesy photo*

Adm. John C. Harvey, Jr., U.S. Fleet Forces Command, watches as Cmdr. Eric Hoffman, Navy Entomology Center of Excellence officer in charge, handles a Madagascar Hissing Cockroach.

deploy to regions of the world endemic for malaria and other tropical diseases. In addition to learning more about the various protective measures we employ today (e.g., advanced methods for treating uniforms with repellent, bed nets, and applying and using DEET) I learned that our Entomologists deploy all over the world right alongside our other Sailors to provide the expertise necessary to help our Forces adapt to and operate in austere conditions. In fact, our Entomologists have supported combat operations in Afghanistan and Iraq; Humanitarian Assistance operations such as CONTINUING PROMISE and PACIFIC PARTNERSHIP; Disaster Relief operations such as Unified Assistance in the Philippines, Indonesia and East Timor (to minimize the risk of vector-borne disease to U.S. personnel); and currently support our President's Malaria Initiative.

I was further impressed to learn that when our Sailors were confronted with shortages of fuel for the insecticide sprayers being used in Afghanistan and Iraq,

our NECE Sailors, in search of an innovative solution, located a small business that had designed a unique backpack sprayer powered by compressed air. NECE worked with the company to customize the design to meet our operational needs, thoroughly test and rapidly field the much-needed device to our Sailors. Having the proper insecticide support in theater has a significant impact on our readiness (remember the 43 Marines I mentioned above). Innovative solutions, such as the compressed air backpack sprayer, do not always have to come with an expensive price tag and long acquisition cycle.

My visit to NECE was very useful and I was very impressed by the knowledge and professionalism of our NECE Sailors. And although our entomology mission may not be well-known throughout the Navy, this small group of dedicated Sailors has a very big mission that has a global impact for our Navy.

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