



Navy and Marine Corps Medical News



A Public Affairs Publication of the Bureau of Medicine and Surgery

May 18, 2010

MEDNEWS Items of Interest:

May is Mental Health Month

Since 1949, May has been recognized by Congress as Mental Health Month. This month provides a time to underscore the importance of education, awareness, and advocacy of our military members who live with behavioral health related conditions.

Navy and Marine Corps Combat & Operational Stress Conference 2010

- May 18-20, 2010, San Diego, Calif. To register visit:
www.nccosc.navy.mil

Navy Family Summit

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Did You Know...

In 2008, the Bureau of Medicine and Surgery established the Naval Center for Combat & Operational Stress Control to perform key functions in the Navy's line-led Operational Stress Control (OSC) program.

Operational Stress Control and Readiness

**By Cpl. Jacob A. Singsank, 1st
Marine Logistics Group**

**MARINE CORPS BASE CAMP
PENDLETON, Calif.** – A new program is being offered to Marines, by Marines, which equips them with the knowledge to save lives.

Roughly 50 Marines and sailors with units from 1st Marine Logistics Group, 1st Marine Division, 3rd Marine Air Wing and Marine Expeditionary Force Headquarters Group attended the five day Operational Stress Control and Readiness Program, earlier this month at I Marine Expeditionary Force at Marine Corps Base Camp Pendleton.

"The Operational Stress Control and Readiness (OSCAR) Program is being implemented throughout the operating forces to assist commanders in preventing, identifying, and managing combat and opera-

tional stress problems in their Marines and units as early as possible," said Staff Sgt. Domonic R. Tino, master trainer, OSCAR Program, The Basic School, Quantico, Va.

The OSCAR Program trains Marines who work at battalion and squadron levels to provide help to stressed service members through early intervention in garrison.

The Marine Corps understands the seriousness of mental health problems due to deployment, such as Post Traumatic Stress Disorder.

That is why this program exists; to recognize symptoms early and get service members the help they need.

"War changes every Marine," said Gunnery Sgt. Robert J.

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INDIAN OCEAN - Royal Navy Leading Medical Assistant Richard Bastianpulle, left, Hospital Corpsman 3rd Class Adam Delatorre, and Culinary Specialist 1st Class Matthew West, all three assigned to commands on Diego Garcia, give emergency first aid to an injured sailor aboard a foreign vessel, April 22. The sailor was later sent to Branch Health Clinic, Diego Garcia for further treatment. (U.S. Navy photo by Mass Communication Specialist Seaman Christopher S. Johnson/Released)

Surgeon General's Corner: *Mental Health Month*

May is Mental Health Month and it is important that we take a moment to look around and ensure that we have the appropriate mechanisms in place to take care of our people. As we continue to provide quality care for our patients and their families around the world, we must recognize that even the best of us will experience stress while doing our jobs – whether it is in a clinic, on the streets of Port-au-Prince, or on the battlefields of Iraq or Afghanistan.

We all go through stressful times. In small doses, stress may be beneficial for you when it gives you a burst of energy when you need it, but a great deal of stress can take its toll on your body. Preserving the psychological health of service members and their families is one of the great challenges we face today. We see many identifiable stressors ranging from daily hassles to extreme trauma in the course of day to day routines. Just as we prepare our bodies for physical strength through exercise, we can also prepare our minds for emotional stress by building psychological resilience. It is important to recognize signs and symptoms of stress and have the means to address them.

While we act with a sense of urgency to bolster resiliency among our Sailors and Marines, we must also ensure we watch for the signs of occupational stress on our caregivers. They are subject to the same psychological demands of exposure to trauma, loss, fatigue, and inner conflict. This is why our Caregiver Occupational Stress Control programs are so important to building and sustaining the resiliency of our providers.

Our Naval Center For Combat & Operational Stress Control (NCCOSC) is one way we're helping to improve the psychological health of Navy and Marine Corps forces by helping to build and promote resilience; provide service members, combat veterans and their families with educational programs to effectively address combat, operational and daily stress; reduce stigma in seeking mental-health treatments; and facilitate evidence-based research in psychological health, especially in relation to post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI). NCCOSC is developing tools that help leaders and service members respond to signs and symptoms of stress whenever they see them.

Cognizant that our warfighters currently serving in OEF/OIF work in areas prone to high stress levels, we've sent mental health specialists to work in operational environments and forward deployed units to provide services where and when they are needed most. Navy Medicine in support of the Marine Corps is sending more mental health teams to the front lines with the goal of better treating an emotionally strained force. Operational Stress Control and Readiness teams - known as OSCAR - will soon be expanded to include the battalion level. This will put mental health support services much closer to combat troops. A Mobile Care Team of Navy Medicine mental health professionals is currently deployed to Afghanistan conducting mental health surveillance, command leadership consultation, and coordi-



**Vice Adm. Adam M. Robinson, Jr.,
U.S. Navy Surgeon General**

nation of mental health care for Sailors throughout the AOR.

Equally important is reducing the stigma surrounding psychological health and operational stress concerns which can be a significant barrier to seeking mental health services. Programs such as Navy Operational Stress Control, Marine Corps Combat Operational Stress Control, FOCUS - Families Overcoming Under Stress, Caregiver Occupational Stress Control - and our suicide prevention programs are in place and maturing to provide support to personnel and their families. These programs are proactively reaching out to our warfighters so they know that there are mental health resources available, and so they feel more comfortable in seeking out those services.

The physical, mental, emotional, and spiritual health and fitness of each individual is critical to maintaining an effective fighting force. We have the ultimate responsibility to ensure the medical readiness of our warfighters and that our medical forces are prepared, trained and deployed with the right capabilities and the right support they need.

No matter where you are serving today, I continue to be impressed by your brilliant service. Be safe, be smart and take care of one another.



**Navy and Marine Corps
Medical News**



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Chairman Tells Service Members It's Okay to Get Help

TRICARE Press Release

FALLS CHURCH, Va. – The Chairman of the Joint Chiefs of Staff wants service members to know it is okay to get help for behavioral health-related conditions. In a new video spotlighting TRICARE's behavioral health care benefits, Adm. Mike Mullen sends a strong message to service members struggling with feelings of stress, anxiety, or depression.

"If you feel as though you or a close family member need help, please don't wait. Tell someone," Mullen said. "Asking for help may very well be the bravest thing you can do."

In the four-minute video at www.tricare.mil/mentalhealth, Mullen urges troops to tell someone in their chain of command if they having difficulties working through

stress from deployments or the demands of military life. These are issues all service members may have at one time or another and, Mullen said, by ignoring them they can hurt not just themselves, but their family, friends and fellow service members.

"The truth is, many people are reluctant to seek counseling because they fear the stigma attached to psychological or emotion problems," Mullen said.

To avoid that, TRICARE's new mental health options allow beneficiaries to seek help in a more private manner. The TRICARE Assistance Program (TRIAP) brings short-term professional counseling assistance straight into the home. Beneficiaries with a computer, Web cam and the associated software can speak "face-to-face" with a licensed counselor over the Internet

at any time of the day or night.

TRIAP is available in the United States to active duty service members, those eligible for the Transition Assistance Management Program (TAMP) and National Guard and Reserve members enrolled in TRICARE Reserve Select. It is also available to their spouses of any age, and to other eligible family members 18 years of age or older.

The video also features Marine Corps Sgt. Josh Hopper, who shares his experiences with seeking help for post-traumatic stress disorder after two deployments to Iraq. Hear more of his story and others at www.realwarriors.net.

Visit www.tricare.mil/mentalhealth to see the Chairman's message and learn about behavioral health care options available through TRICARE.

OSCAR

From Page 1

Gordon, assistant storage chief, Ammunition Company, 1st Supply Battalion, Combat Logistics Regiment 15, 1st MLG. "By asking for help, it makes the Marine stronger and mission ready for overall accomplishment."

According to www.welcomebackveterans.org, untreated PTSD exacts an enormous toll on individuals, families, and society. People with PTSD often do not recognize that they are having problems and generally do not seek treatment on their own.

Gordon, 40, from Brooklyn, N.Y. said that the OSCAR Program is a great program because it gives Marines the tools needed to help out one another.

During the week-long class, Marines and sailors trained to receive their team-member and team-trainer certification. Team members work one-on-one with Marines and sailors to help them with stress. If they're unable to resolve the issue, the service members are instructed to escort their stressed comrades to seek help from the chaplain or a medical facility.

During the team trainer portion of the class, OSCAR Program candidates train more in-depth using materials and practical application. Team trainers are authorized to certify qualified service members on being OSCAR Program team members.

Throughout the basic and advanced programs, the service members were taught through classroom instruction, facilitated instructions, role-playing, a leadership panel and practice sessions covering general OSCAR knowledge.

"The OSCAR Program's key to success is the small unit leadership," said Tino, 32, from New Britain,

Conn. "If Marines grasp it, the institution thrives." The course is setup to be instructed at all times to qualify candidates on being OSCAR Program team members whether the service members are preparing for deployment or have just returned from one. The master trainers made it a priority on the importance of identifying and providing help to stressed service member as soon as detected. If the stress on service members is ignored, they could have a mental break down causing injury to themselves or others.

"It's okay to have problems and talk about them before they escalate," said Tino. "The course is setup so we don't make the same mistakes as our forefathers."



CAMP PENDLETON, Calif.—Service members with 1st Marine Logistics Group participated in the five-day Operational Stress Control and Readiness Program, May 3 – 7 at Marine Corps Base Camp Pendleton. The course is designed to help Marine and sailors identify and help fellow service members with stress. (Photo by Cpl. Jacob A. Singsank, 1st Marine Logistics Group/ released)

Navy Wounded Service Members To Compete in Warrior Games

By MC3 Jake Berenguer, NMCSA Public Affairs

SAN DIEGO - Wounded, ill, and injured service members assigned to Naval Medical Center San Diego (NMCSA) will participate in the inaugural joint-service Warrior Games, May 10-14 at the U.S. Olympic Training Center, Colorado Springs, Colo.

One Sailor, two Marines, and seven Soldiers assigned to NMCSA's wounded warrior service member units will compete among 200 athletes from each military branch of service. The participants will compete in shooting, shot put, swimming, sitting volleyball, wheelchair basketball, cycling, track and field, discus, archery, and 'Ultimate Warrior' events. The Ultimate Warrior is a pentathlon in which the contestants compete in five different track and field events to find the most talented athlete.

Navy Petty Officer 1st Class Jim D. Castaneda, Marines Lance Cpl. Michael D. Pride and Pfc. Jesse J. Schag, and Soldiers Sgt. 1st Class Jacque Keeslar, Sgt. Daniel Biskey, Spc. Rashaun McDowell, Spc. Michael Ortiz, Spc. Uriel Urias, Spc. Ernesto Oroscoabar and Spc. Kyle Vojtas, will compete for the winning spot in their respective events.

The Warrior games, hosted by the U.S. Olympic Committee's (USOC) Paralympics Military program, provides an opportunity for wounded, ill, and injured service



COLORADO SPRINGS, Colo. – Sgt. Daniel Biskey, of the Balboa Warrior Athlete Program, located at the Naval Medical Center San Diego, packs up his bow and arrows after a morning practice session May 11 at the Olympic Training Center. (Photo by Master Sgt. Douglas Sample/ Released)

members to participate in competitive sports against members of other branches of service. Participants will challenge themselves mentally and physically to overcome upper body injuries, lower body injuries, spinal cord

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A Stress Catch-22: Missing the Signs and Managing Stress

By CAPT Paul S. Hammer, MC, USN, Director, Naval Center for Combat & Operational Stress Control

Herein lies a dilemma about stress and psychological health: Individuals impaired by stress usually do not recognize it. They have missed the signs, the behavioral cues that have put them at risk for stress injuries or illnesses. In today's Navy, where the operational environment exposes Sailors and commands to many unforeseen challenges and stresses, this is a serious health issue and a mission-readiness issue.

In 2008, the Bureau of Medicine and Surgery established the Naval Center for Combat & Operational Stress Control to perform key functions in the Navy's line-led Operational Stress Control (OSC) program. At the heart of the Center's work are medically relevant programs and strategies to prevent stress injuries and illnesses through increasing stress awareness and building resilience.

Any discussion of stress has to

start with a very basic fact: Performing under difficult situations *always* causes stress reactions in an individual. This short-term stress is often good because it leads to quick, clear thinking and heightened energy. It's a normal and expected response and it usually diminishes as a situation subsides.

An individual's ability to manage this everyday stress builds resilience, that psychological hardiness that maintains our mental health and well-being. Resilience prepares us for stress and helps us recover from the adversity, trauma and tragedy that life sends our way. It is the *unmanaged* stress—and notably the accumulation of unmanaged stress—that becomes harmful, often leading to psychological and physical illnesses.

To effectively manage stress, an individual must recognize the reactions brought on by it. Until recent years, we did not have a common language to do this. That changed with the advent of the Navy's medically validated Stress Continuum, which gave us a stan-

dard—and very simple—framework for identifying stress reactions.

This continuum's four color-coded zones list specific stress responses, including wellness and adaptive coping (the green "Ready" zone), mild and reversible distress (yellow "Reacting" zone), more severe and persistent distress (orange "Injured" zone) and medical disorders arising from stress and unhealed stress injuries (red "Ill" zone).

The continuum has become the cornerstone of stress resilience training and a guide to alert us when interventions are needed. It emphasizes the shared responsibility of individual Sailors, their leaders and their families to mitigate stress reactions so they do not become stress injuries.

As we mark "May's" significance as Stress Awareness Month, I encourage all Sailors to use the Stress Continuum for themselves and their shipmates. It provides an important first step to teach us that while we may not be able to control a stressful situation, we can control our reactions to that situation.

Navy Medicine "LEED"s the Way in Going Green at Lejeune

By Lt. Holly Lee, Bureau of Medicine and Surgery,
Communications Directorate



One of Navy Medicine's military construction projects currently underway is the design for Naval Hospital Camp Lejeune which consists of a 109,000 square foot addition and upgrade renovation to the emergency room department. The goal for this project is to achieve Leadership in Energy and Environmental Design (LEED) Silver, the 3rd highest that can be achieved. (Released)

On April 22nd, the 40th anniversary of Earth Day, many reflected on the efforts made over the years to minimize the negative impact to the environment. Navy Medicine has been a part of that effort in many ways. One of their specific contributions has been the focus on improving the design strategy and execution of military construction projects throughout the enterprise.

Since 2007, Navy Medicine military construction projects have been focused on meeting Leadership in Energy and Environmental Design (LEED) certification mandates. In 2009, Naval Facilities Engineering Command (NAVFAC) began to include LEED standards in their contract templates as part of the implementation of ECB2009-02 (the policy for registering projects with the U.S. Green Building Council (USGBC) for LEED certification). Developed by the USGBC, LEED is an internationally recognized green building certification system, providing third-party verification that a building or community was designed and built using strategies focused on improving energy savings, water efficiency, CO₂ emissions reduction, improved indoor environmental quality, and stewardship of resources and

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injuries, traumatic brain injuries, and post-traumatic stress, in pursuit of victory.

Staff Sgt. Troy Treadway, a squad leader at the NMCSD Army Warrior Transition Unit coordinated training. He ensured his Soldiers had the equipment they needed and kept them focused and motivated to be competitive in the Warrior Games.

"I see them in physical therapy and in the gym, and I know they are going to be fierce competitors. I am extremely proud of my guys that are attending the games," said Treadway. "I know they are going to enjoy being there and competing. They are well prepared and NMCSD has provided them with great resources to get them ready."

Vojtas is competing in the 50-meter backstroke and the 150-meter freestyle swimming events.

"My wife Kelli is a swimmer, and she has been coaching me and pushing me pretty hard to get me ready. We started training quite a while ago, so when we found out about the games, she and I kicked the intensity of our training up. I admit that I am nervous, but I know that my wife and my chain [of command] are supporting me," said Vojtas.

Marines, Pride and Shag assigned to Wounded Warrior Battalion West (WWBn-W) competed alongside 11 other WWBn-W Marines for two of the 50 positions available for the All-Marine Team at the Warrior Games.

"The fact that they overcame their respective physical injuries is an achievement in and of itself, but that achievement is truly recognized when the wounded warrior not only is physically able to perform in an



COLORADO SPRINGS, Colo. - Bureau of Medicine and Surgery Force Master Chief Laura Martinez and other fans cheer for the Navy sitting volleyball team during their first preliminary game against Army at the inaugural Warrior Games at the U.S. Olympic Training Center in Colorado Springs, Colo., May 11. Martinez is extremely proud of the Navy team, "They are doing a great job and showing true spirit." (Photo by Petty Officer 1st Class Richard Brunson/ Released)

athletic event of his or her choice, but is actually competitive," said Lt. Col. Keith M. Fuller, officer in charge of Marine WWBn-W. "I am so proud of how it has boosted their confidence and morale and how they are a positive example for other wounded warriors that will come after them."

The Warrior Games will be an annual event to celebrate the achievement and abilities of wounded, ill, and injured service members while building camaraderie and raising awareness for adaptive sports. It also provides the opportunity for service members to qualify for the U.S. Paralympics.

Navy Medicine Takes a Look Back at Mission in Haiti

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

BETHESDA, Md. - Navy Medicine, along with personnel from key military commands, non-governmental organizations (NGOs), and interagency partners, came together May 5-6 for an after action review conference to capture lessons learned from Navy Medicine's support for Operation Unified Response.

The conference was held at the National Naval Medical Center/Uniformed Services University.

"This is the first time Navy Medicine has ever conducted an after action review of this magnitude," said Cmdr. Brad Hartgerink, Emergency Preparedness and Contingency Support for the Bureau of Medicine and Surgery.

During the two-day event, both military and civilian personnel gathered, prioritized, and identified key lessons from Operation Unified Response, the United States military's response to the 2010 Haiti earthquake. Actionable items on the tactical, operational, and strategic levels were developed that will become tools for future

humanitarian assistance/ disaster relief missions.

"While we did well overall, future success in correcting some of our deficiencies will be determined by our collaboration efforts with the fleet and our inter-agency and NGO partners," said Hartgerink.

Participants included representatives from the Department of State, U.S. Agency for International Development (USAID), and U.S. Foreign Disaster Assistance, as well as, participants from a variety of NGOs including the Red Cross, Operation Smile, Johns Hopkins, Project Hope, Orthopaedic Trauma Association and the University of Michigan. Also in attendance were many of the USNS Comfort and USN Bataan's medical personnel and crew.

"Medical operation success is very dependent on to what was happening on land by a host of other facilities and the ability to get situational awareness so we can get the right patients, out at the right time, and then back," said Dr. Harold Timboe, Project HOPE's chief medical officer. "So the freedom to maneuver and the freedom to communicate is

important on that aspect of mission success."

Lessons learned and the actionable items found by working groups during the conference were presented to a flag panel on the last day of the event.

"If you take this mission as an exam, we scored about a 95 percent," said Rear Adm. Thomas Cullison, deputy Navy surgeon general during the panel. "We did well and that had a lot to do with leadership - both military and civilian - that made this mission happen."

Medical operations during Operation Unified Response and the disaster in Haiti were one part of the Navy's Humanitarian Assistance/Disaster Response mission. The Department of the Navy has become increasingly involved with other U.S. government agencies and NGOs since it adopted the "Cooperative Strategy for 21st Century Seapower" in 2007 that elevated stability missions to the same priority as combat operations and committed itself to working more closely with its civilian partners.

Sailor of the Year

Congratulations to HM1 Brewer!!!

Vice Adm. Dirk J. Debbink and Force Master Chief Ronney A. Wright welcomed the five Navy Reserve 2009 Sailor of the Year (RSOY) Finalists to Washington, DC to celebrate their accomplishments and select the RSOY, May 6. During the RSOY luncheon and award presentation, Debbink announced that HM1 Shalanda Brewer of Navy Expeditionary Medical Unit-10 was chosen as the winner from the highly competitive group of outstanding Sailors. Congratulations to her and the rest of the finalists! (Courtesy photo/ released)



Got News? If you'd like to submit an article or have an idea for one, contact MEDNEWS at 202-762-3160, fax 202-762-1705 or Valerie.Kremer@med.navy.mil.

Navy Corpsmen Keep Marjah Marines in the Fight

By Cpl. Skyler Tooker, Regimental Combat Team-7, 1st Marine Division Public Affairs

MARJAH, Afghanistan— For corpsmen with 3rd Battalion, 6th Marine Regiment, a slow day is a good day.

With a slower work pace since Operation Moshtarak commenced in mid-February, the corpsmen finally have time to catch their breath, throwing their feet up in their new lounge comprised of sandbags. They have earned a little downtime.

It was a busy two months for the corpsmen with 3/6, when the Marines and corpsmen arrived in Marjah, treating the wounded throughout their area of operations.

Seaman Anderson Hernandez, a corpsman with 3/6, and other corpsmen found themselves in harm's way to accomplish their mission of treating the Marines. The corpsmen, at times, even treat the enemy for battle wounds.

"HN Hernandez is as close to a Marine as you can get," said Staff Sgt. Joseph Wright, platoon sergeant for 2nd Platoon, Kilo Company, 3/6. "On numerous occasions he has run under machine-gun fire to aid Marines and our Afghan allies. He is a vital part of the platoon and the Marines respect him. We wouldn't want to go anywhere without corpsmen. It is their guidance and their hand that actually keeps us alive when bad things do happen."

The corpsmen have not been as busy lately, now that the Marines have maintained a strong presence in Marjah.

"Things dramatically slowed down since the clearing phase of Marjah, to the point of we went from sitting by the radio listening for medical evacuation on a daily basis to now, maybe one every other day," said Chief Petty Officer Christopher Silva, 30, the leading chief petty officer for the 3/6 battalion aid station. "We follow the medical evacuations from the line companies and the line corpsmen all the way up to the battalion. A lot of it is just sick calls, so things have slowed down, but not for the corpsmen. Now they are handling things such as medical schooling, new orders and thing of that nature."



MARJA, Afghanistan - Many corpsmen including Seaman Anderson Hernandez, with Kilo Company, 3rd Battalion, 6th Marine Regiment, have put their medical training to the test as soon as 3/6 arrived in Marjah in February. Hernandez, 21, is from Boston. (Photo by Cpl. Skyler Tooker, Regimental Combat Team-7, 1st Marine Division Public Affairs/ Released)

The corpsmen ensure all the Marines stay as healthy as possible, and now that the workflow has slowed, the corpsmen have a little time to take care of themselves.

"The corpsmen are coming back up to the battalion, going to the career counselor, getting orders, doing projects around the camp and improving the BAS," said Silva, from Chatsworth, Calif. "We go from being extremely slow, to within minutes, people injured by the Taliban coming into our BAS. Things get hectic pretty quick, but not on a daily basis."

The corpsmen stay vigilant, remembering the mindset of their initial days of fighting in Marjah.

"Usually right before a mission or patrol I am saying to myself, 'I hope no one gets hurt today, I hope no one gets hurt today,'" said Hernandez, 21, from Boston. "The most satisfying thing about this job is to know that you are helping them, and that they can count on you."

GREEN

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sensitivity to their impacts.

"This close liaison with NAVFAC assures all future MILCON for Navy Medicine will strive for LEED Silver and perhaps even higher in the years to come," said Rear Adm. Richard Vinci, Deputy Chief, Installations and Logistics.

One of Navy Medicine's military construction projects currently underway is the design for Naval Hospital Camp Lejeune which consists of a 109,000 square foot addition and upgrade renovation to the emergency room department. The goal for this project is to achieve LEED Silver, the 3rd highest

that can be achieved.

Bicycle racks, vegetation on a portion of the roof of the new addition, automatic lighting controls to turn off lights during non-business hours and the reduction of water usage for landscaping by utilizing low maintenance landscaping are amongst some of the major LEED design features at Naval Hospital Camp Lejeune that can be seen by all. What many may not be able to see is that the design features also focuses on optimizing energy savings by 26% by tying into the existing central plant, the use of partially recycled building materials and at least 75% of non-hazardous construction waste/debris must be recycled or salvaged.

The design also requires at least 40% of the building materials be extracted, harvested, recovered and/or manufactured within 500 miles of the site, the use of low volatile organic compound (VOC) adhesives, sealants, paints and coatings and all carpets must meet the requirements of the Carpet and Rug Institute's "Green Label Plus Program."

These are just a few of the numerous design features being used to achieve the 33 points required for LEED Silver certification at Naval Hospital Camp Lejeune. Navy Medicine's overarching goal is to achieve at least 37 total points; setting the bar for many future successes.

Sailor Reflects on Deployment: Health Care in Afghanistan

Lt. Jessica Woody, MSC, USN,
Bureau of Medicine and Surgery

The thought of "War" was never tempting, but the chance to see the world and be able to say "I was there" intrigued me. When the deployment tasking came up, I volunteered to go. I wanted to see something of Navy Medicine outside of the acronyms and numbers that embody the fiscal department.

I was stationed with the British Army at the Camp Bastion Role 3 Hospital in Helmand Province, Afghanistan. As the only American Health Care Administrator for the U.S. medical contingent at the hospital, it was my job to track all American patients that were admitted for treatment. This meant establishing and maintaining contacts with multi-service and multi-national units throughout Helmand, Farah, and Kandahar Provinces.

By early July, the combat tempo had increased significantly. Major traumas were coming through our door multiple times a day. The U.S. medical team was still adjusting to working under a British hierarchy and medical system. There were variances in how to practice in everything from the name of drugs, professional responsibilities, and blood banking. One night around midnight, the second of two traumatic, high, bilateral amputations that day was on the operating room table when his need for blood was larger than our stock. Everyone whose name was on the British certified donor list was called in to give. The British policy stated that only those who have had their blood tested from one of their labs in England could donate which left our available pool very small. At one in the morning, over 30 Marines from nearby Camp Leatherneck arrived to donate for

HELMAND PROVINCE,
Afghanistan, Camp
Bastion Role 3 - Lt.
Jessica Woody, MSC
deployed to Afghanistan
as the only Health Care
Administrator for the
U.S. contingent at Camp
Bastion Role 3 hospital.
(Photo by Lt. Jessica
Woody/ released)



the anonymous Marine that they heard was on the table. Unfortunately, because of the hospital's policy, they were turned away. But they did not leave, not as long as there was still the possibility that they may be able to help. Hours later, just as dawn was breaking, I went out to deliver the news that their comrade was finally stable;

"The work I did was appreciated and necessary which kept me going through the frustrating setbacks."

-Lt. Jessica Woody, MSC

their veins would not be needed that day.

What we all witnessed that night was only a taste of the powerful devotion that the Marines have for their common man. While we were never able to sway the British policy on screened donors, we were finally able to add the Marines to

the certified list. The pool of available donors grew to the delight of everyone at the hospital.

When I reflect back on my deployment, even on nights previously described, I can honestly say that the positives definitely outweigh the negatives. Your priorities shift when you are deployed. My family and friends back home thought I was living at a summer camp in hell. But, the tents, 140 degree heat, and British cooking were heaven compared to the life that many of the soldiers and marines experienced and continue to experience in the forward operating bases (FOBs). I was overworked and never had enough sleep. But the work I did was appreciated and necessary which kept me going through the frustrating setbacks and the hurdles. During my time there I saw horrific injuries and it was my job to be the bearer of bad news to unit commanders. But no matter how long my days or how much I missed my loved ones, the amazing people I met and befriended during my deployment made those months of separation easier.

Would you like to share your deployment story with MEDNEWS?

Contact Lt. Holly Lee at
202-762-3773 or holly.lee@med.navy.mil

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