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Item of Interest:

The Defense Logistics Agency (DLA) inducted (Ret.) **Capt. Terry R. Irgens, MSC**, into the agency’s Hall of Fame during a ceremony on July 23. Among many of Irgens’ great accomplishments, during the First Gulf War, Irgens led the Medical Material Supply Chain, and into the creation of the Medical Prime Vendor, he implemented the first prime vendor program in the Department of Defense (DoD). Thus, Irgens is known as the “father” of the Medical Prime Vendor. He led the way in engaging in strategic partnerships with the Military Services’ Medical Logistics Offices and the Department of Veterans Affairs (VA). By partnering with the VA, DoD and VA were able to leverage product pricing and expand the efficiencies of the prime vendor concept to the entire federal healthcare system. The success of the DLA is due in large to Irgens’ continued efforts, expertise, leadership, and innovation.

Navy and Marine Corps Medical News

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Team Supports Reconstruction of Afghan Health System

By Navy Lt. Neil Myers, Special to American Forces Press Service

BAGRAM AIRFIELD, Afghanistan – Like most of Afghanistan’s provinces, Konar has historically been unable to meet the medical needs of its 381,000 residents. But the Konar Provincial Reconstruction Team (PRT) is working to meet those needs.

As recently as 2002 and shortly after the departure of the Taliban, Afghanistan has faced some of the worst health statistics ever recorded worldwide, including an infant mortality rate of 16.5 percent and 1,600 maternal deaths for every 100,000 live births. More than 25 percent of Afghan children die before their fifth birthday.

In Konar, nearly 60 percent of the population lacked access to any form of health services. The Konar

PRT is one of 12 U.S.-led partnership organizations working with the Afghan government to rebuild the health care system and improve medical services.

Navy Lt. Gregory Monk, a Konar PRT physician assistant from Naval Hospital Camp Pendleton, Calif., has managed much of that work in the province. His team of corpsmen includes Petty Officer 2nd Class Alexander Tabayoyon from Naval Air Station Fallon, Nev.; Petty Officer 2nd Class Ixchel Mattes from Naval Hospital Bremerton, Wash.; and Seaman Leo Cedeno from Branch Clinic China Lake, Calif.

Monk and his staff work closely with the provincial health director, Dr. Asadullah Fazli, to assist in the implementation of the Basic Pack-

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PACIFIC OCEAN - Lt. Cmdr. Rhonda Bennett, right, assigned to Fleet Surgical Team Nine (FST) 9 aboard the amphibious assault ship USS Bonhomme Richard (BR) (LHD 6) and Australian Navy Seaman Kirrilee Blackburne, assigned to the Australian amphibious ship HMAS Tobruk (LSH 50), examine and diagnose a simulated patient in BR’s medical clinic July 15. . U.S. Navy photo by Mass Communication Specialist 1st Class Mark Rankin

Top Navy Nurse Tours Civilian Health Care Facility

By Chief Mass Communication Specialist Robin Nelson and Ens. Michael Sheehan, Navy Office of Community Outreach Public Affairs

DULUTH, Minn. - The Deputy Director of the Navy Nurse Corps got a first-hand look at the state-of-the-art civilian health care while touring the St. Mary's Duluth Clinic (SMDC) Health System on July 17.

Rear Adm. Karen Flaherty used the opportunity as senior officer for Duluth Navy Week to familiarize herself with the state of civilian medicine.

SMDC occupies approximately five city blocks in downtown Duluth and serves as a leading health care provider for a geographical region that includes northern Minnesota, Wisconsin, North Dakota, and even parts of Michigan.

"This is a world class facility," Flaherty said. "I'm really impressed with how the organization has been able to blend and merge corporate cultures as they have grown. Their advanced technology and integrated systems of care is very similar to what we use in the military."

Flaherty visited the facility's helicopter air ambulance service, Children's Hospital, Miller-Dwan Burn Center, and CyberKnife Cancer Treatment Center. CyberKnife uses military-style targeting technology to treat cancerous tissue with radiation, accurate to within five millimeters, without making an incision or using anesthesia. Traditional cancer treatments are administered in a new wing of SMDC that offers a panoramic view of Lake Superior and Duluth's historic Canal Park region.

"Their eye towards 'green' construction and using the building's architectural design as part of the therapeutic environment is evident," Flaherty said after seeing the view. "This is something we could utilize when planning and building new facilities for the military."

Randy Shackelton, a flight nurse with the Lifeflight unit, showed Flaherty their air ambulance operation, particularly because Flaherty is a nurse herself.

"It was a pleasure to talk with a nurse of such a high caliber," Shackelton said. "Especially with



DULUTH, Minn. - Rear Adm. Karen Flaherty, deputy director of the Navy Nurse Corps, tours the Lifeflight helicopter ambulance with flight nurse Randy Shackelton at St. Mary's Duluth Clinic Health System. Flaherty is serving as the senior officer for Duluth Navy Week July 7. Duluth Navy Week is one of 22 Navy Weeks planned across the country in 2008. U.S. Navy photo by Chief Mass Communication Specialist Robin Nelson

one who really knows what's going on and what we're about."

"This," Flaherty concluded, "is a place where I would work."

Navy Week is running in the greater Duluth area from July 14-20, and is one of more than 20 such weeks planned throughout the country to bring Navy assets and personnel to middle America.

NMCS D Staff Stands Up for Veterans During Stand Down

By Mass Communication Specialist 2nd Class Alexander Ameen, Naval Medical Center, San Diego Public Affairs

SAN DIEGO - More than 160 staff members from Naval Medical Center San Diego (NMCS D) volunteered their services July 11-13 at Veterans Village of San Diego's 21st annual Stand Down.

Stand Down is a grassroots, community-based intervention program designed to help the nation's estimated 200,000 homeless veterans, according to the organization's Web site.

NMCS D took the lead in providing medical services to the hundreds of veterans who turned out for the event, providing independent duty hospital corpsmen, pharmacy technicians, administrators, and experts in preventive medicine, explained Stand Down medical coordinator Tony Carvajal.

"We start planning about six months in advance for the actual event," said Carvajal. "I will meet with Veterans Village and see what they're looking for in terms of support, and then I'll take that info and start coordinating with the Navy."

Senior Chief Hospital Corpsman (FMF) Emmanuel Evangelista, NMCS D volunteer coordinator, noted this was his first year participating in the Stand Down.

"I was overwhelmed by the response I received to getting volunteers," Evangelista said. "Sailors from all over the city wanted to participate. I was just in awe."

NMCS D staff provided a variety of treatment including dental and vision services. Carvajal explained staff volunteers administered approximately 150 dental exams and performed more than 90 tooth extractions over the course of the weekend.

"You see a lot of guys walking around with cotton in their mouths, but it's usually the only time all year they get to see a dentist," said Carvajal.

More than 300 pairs of specially-designed glasses were given to veterans who received them at no charge.

"The Navy really does a lot. Between dental and vision alone, we really depend on them to help us out each and every year," Carvajal said.

Senior Chief Personnel Specialist (SW/AW) Marco Valido, NMCS D volunteer coordinator, said the Stand Down was an important opportunity for Sailors to participate in public service for the community.

"For me, this kind of work brings a personal satisfaction," Valido said. "I just want to give back to the veterans who sacrificed so much for me. I don't need anything other than that."

Combined Medical Team Cares for Indonesians Aboard Mercy

By Lt. Arwen Chisholm, Pacific Partnership Public Affairs

DILI, Timor-Leste - Indonesian patients boarded USNS Mercy (T-AH 19) "Band-Aid boats" July 22 for the naval hospital ship where they would be treated by members of a combined Pacific Partnership medical team.

"We can do something to help these people in need," said Lt. Col. Arie Zakaria, an orthopedic surgeon in the Indonesian Navy. "Bottom line, our people and their people are the same. These are our brothers."

Zakaria conducted more than 10 surgeries in cooperation with his American counterparts on board the Mercy.

"We did a dozen surgeries together," said U.S. Navy Cmdr. William Todd, a pediatric orthopedic surgeon. "We did small surgeries to big femur surgeries right on the ship."

According to Todd, having Zakaria on board the Mercy was a

huge asset.

"He brought a wealth of knowledge about Timor and local customs. He was more than a translator, he understood them as both a human being and a surgeon," said Todd.

According to Florintina Da Costa, a surgical patient whose leg was straightened during a femoral ostomey, the treatment she received on the Mercy is different from what she receives in Dili.

Four years ago Da Costa was in a car accident in which her femur was broken. She had two surgeries; however, her leg never fully healed. She had been unable to walk and exert pressure on her leg.

"I could move by myself, but very slowly. I would touch the ground sometimes, but it hurt, really hurt," she said.

In order to straighten Da Costa's leg, plates and screws were inserted into her femur, reducing the bow in the leg and allowing her to put pressure on her leg.

"This was a new system and Dr.

Zakaria adapted quickly," said Todd. "The basic principles of orthopedics were the same."

Since her surgery, Da Costa has become independent, thanks to the use of her crutches, and is now ambulatory for the first time in four years.

"I am very happy I can walk now. I feel good. I am a little scared of walking and falling. I am still not very confident."

According to Da Costa, Zakaria was very nice and he spoke to her in Indonesian, helping to relieve her fears.

The operating room staff said they were sad to see Zakaria leave the mission.

"I can translate words, but I can't translate the emotion and concern," said Todd. "Dr. Zakaria's ability to relate to patients and family was priceless."

Afghanistan continued...

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age of Health Services. The BPHS is an Afghanistan Ministry of Public Health strategy to provide a standardized package of basic health services. The ministry, Dr. Fazli and Aide Medicale International, with input from the PRT, use the BPHS to identify districts with under-served populations and determine the location for new facilities.

Aide Medicale International is an apolitical French humanitarian organization that implements health care networks around the world. The strategy was designed to increase access for people more than two hours' walking distance from to public health ministry facilities. After selecting the locations for the clinics, Monk works with PRT engineers to solicit contract proposals and oversees the quality of construction for the new buildings. Once the building is constructed, AMI acquires the staffing, professional medical training and supplies needed to run the clinics.

With the assistance of the PRT, 15 new health care facilities are being added to the province. Fazli reported that six years ago, the Konar health network consisted of only 12 low-quality clinics. Now, the province has 24 health care facilities -- one provincial hospital, nine comprehensive health clinics and 14 basic health clinics -- and an additional 242 basic health posts.

Assisted by Afghan doctors, the PRT medical team conducted village medical outreaches in the remote re-

gions of Konar where local clinics do not exist. On missions into the local communities, they have treated Afghans for a variety of ailments. According to Monk, worms and other intestinal illnesses were the main ailments afflicting most of the people the team treated.

The community uses the Konar River, which flows through the province, for everything: drinking, cooking, bathing, hygiene, and even recreation. But the river is heavily contaminated with pathogenic bacteria, parasites and viruses. Monk said almost everyone he sees for evaluation complains of stomach pains.

"The stomach pains are commonly caused by worms or other parasites, but chronic conditions, such as reflux disease, are just as common," Mattes explained. "Education on simple acts of washing hands and boiling water before use can prevent a majority of these illnesses."

The regular engagements became less common, thanks to the growing number of clinics and local doctors in the villages.

"It makes you feel good to go out and assist Afghan doctors in remote villages that have zero access to medical treatment," Monk said. "We hope that one day every community has its own clinic, ultimately becoming less reliant on these outreach missions."

(Navy Lt. Neil Myers serves with the Konar Provincial Reconstruction Team.)

Full Video Urodynamics Suite Makes Naval Hospital A 'Unique' Facility

By Rod Duren and Mass Communications Specialist 1st Class (AW) Russ Tafuri

PENSACOLA, Fla. - Naval Hospital Pensacola has made major leaps recently in order to provide the most up-to-date and least painful, minimally-invasive urologic procedures available today; and is the only medical facility in the area to have a full Video Urodynamics Suite to aid in the diagnosis and treatment of incontinence, pelvic organ and bladder dysfunction.

"We are unique," said Navy Urologist Lt. Cmdr. Timothy Redden, being the "only facility in the immediate area to have a full Video Urodynamics Suite" that helps in the diagnosis and treatment of a wide variety of urologic disorders.

NH Pensacola now offers minimally-invasive advance laparoscopic urologic procedures to treat benign and malignant diseases; and provides the "newest minimally-invasive treatment" for female pelvic floor dysfunction, incontinence and prolapse, said Dr. Redden.

Within the next couple of months, Navy urologists - at civilian partner Baptist Hospital Pensacola - will be performing robot-assisted, minimally-invasive radical prostatectomy in the treatment of prostate cancer, he continued.

The robot-assisted treatment for prostate cancer removes the prostate and lymphatic tissue via several, less



PENSACOLA, Fla. - Lt. Cmdr. Timothy Redden, urologist, performs surgery at Naval Hospital Pensacola. U.S. Navy photo by Mass Communications Specialist 1st (AW) Russ Tafuri

than one-half inch incisions using a DaVinci robotic system from intuitive surgery.

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BHR Helps Certify Tripler Army Medical Center

By Mass Communication Specialist 2nd Class (SW/AW) Jennifer Hudson, USS Bonhomme Richard Public Affairs

AT SEA - USS Bonhomme Richard's (LHD 6)(BHR) medical crew worked in conjunction with the crew of USS O'Kane (DDG 77) for the first time during a U.S. 3rd Fleet mass casualty drill aboard BHR to help certify Tripler Army Medical Center in Oahu, Hawaii July 21.

More than 30 Sailors from BHR's Medical Department and embarked corpsmen tested their skills and capabilities. The drill simulated 75 personnel with injuries including broken bones, burns, compound fractures and sucking chest wounds.

"It is a requirement for every hospital to do a mass casualty exercise every year," said Senior Chief Hospital Corpsman (HM) (SW/AW/FMF) Brad Kowitz, head coordinator for the evolution.

"This is the first time we've done this on this scale using fleet

assets and then transporting them to the hospital. This was a new way for us to test our system and see how well it works, and at the same time help Tripler become certified."

The mass casualty drill aboard BHR simulated 25 injuries sustained from a rigid-hull inflatable boat that overturned in the hangar bay. BHR Sailors were flown out to Tripler Army Medical Center via helicopter.

"I think this evolution went very well, everyone showed a lot of enthusiasm, which made the drill realistic for our motivated medical personnel," said Kowitz.

Fifty Sailors from O'Kane flew out to BHR's medical center with various injuries from a simulated explosion aboard the ship. They were flown to BHR and assessed by BHR's medical team prior to being flown out to Tripler Army Medical Center.

"We saw a variety of injuries, including patients [dead on arrival], post traumatic stress, some arriving in agony and others with severe

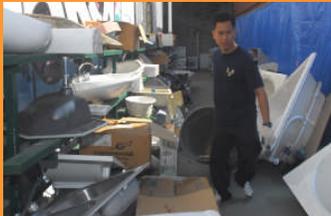
burns," said Chief HM (SW/AW/FMF) Patrick Updegraff.

"The drill tested our [corpsmen's] skills set. All the corpsmen are specialized in a particular area of medicine, but during a mass casualty, everyone gets involved."

For HM 3rd Class Dustin Buller-dick, attached to 3rd Marine Regiment stationed out of Kaneohe Bay Marine Corps Base Hawaii, the learning environment aboard a ship is different from what they normally deal with out in the field.

"We do this on the Marine Corps side, but you are usually working by yourself whereas here, everyone is using and sharing their different knowledge skill-sets and working together as a team which is incredible," he said. "I'm just grateful to be a part of this evolution; it's a great learning experience."

Like most drills, according to Kowitz, there are lessons learned and there is always room for improvement.



SAN DIEGO, Calif. - Senior Chief Hospital Corpsman Erwin Velasco, assigned to Commander, Naval Air Forces, organizes and cleans donated appliances and hardware during a community relations project at ReStore, the San Diego Habitat For Humanity International home improvement outlet store July 23. The home-improvement outlet is open to the public and uses donated building materials to fund operations and new home construction. *U.S. Navy photo by Mass Communication Specialist 2nd Class Matthew J. Kuhlman*

Officials Seek Enlisted Med Community's Input for Web Portal

By Donna Miles, American Forces Press Service

WASHINGTON - The Defense Department is looking for input from the enlisted medical community as it sets up a new Web portal that will enable medics and corpsmen to share lessons learned and suggest ways to improve patient care.

The portal will provide a forum for the estimated 80,000 enlisted medical professionals to exchange insights as they share experience and expertise, Dr. Michael E. Kilpatrick, director of strategic communications for the Military Health System, said today during an interview with the Pentagon Channel and American Forces Press Service.

The site will serve enlisted active-duty and reserve-component members of the Army, Navy, Air Force, and Coast Guard. Navy corpsmen serve the Marine Corps.

"This portal is going to be an effort led by the military medical enlisted population for the military medical enlisted population," Kilpatrick said. "It is really going to be an opportunity for this community to talk among themselves ... [about] what really works and how we can continue to improve the care for the patients we are here to serve."

The emphasis will be on improving both patient care and the efficiency of the health care system, he said. "We want not only to increase efficiency, we want to increase quality."

Input from enlisted medical professionals is key to

balancing these seemingly competing agendas, "because they are the ones doing the hands-on work," he said.

Kilpatrick said he sees the new portal as a way for medics and corpsmen to suggest everything from how to get patients through the X-ray process faster to how to speed up the way pharmacy technicians fill prescriptions. The site also could provide the venue for medics to suggest better ways of loading a severely injured patient onto a helicopter, along with other lessons learned through operational, on-the-ground experience.

Enlisted medical professionals also will be able to comment on the training they received - what proved valuable and where it needs to be beefed up, Kilpatrick said.

But first, the Defense Department wants to hear what enlisted medical professionals would like in the new site.

"We want them to be the architects," Kilpatrick said. "What are the features and design elements they want in there?"

A short online survey will be available starting July 24 at www.health.mil will give service members an opportunity to weigh in with their thoughts. "This is their opportunity to shape something brand new," Kilpatrick said.

Health Affairs officials will compile input received as they start building the new portal in mid-August. The new site is expected to be online before Oct. 1, and it will be password-protected to serve the enlisted military medical community, Kilpatrick said.

Urodynamics Suite continued...

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Navy Urologists, Kevin Mahaffey and Redden, will be performing the

surgeries for Department of Defense-eligible patients at Baptist Hospital.

This "new beginning" for NH Pensacola Urology, and the co-venture between the Veterans Administration and Defense Department with the soon-to-open 'Joint Ambulatory Care Center' (JACC), will "allow the Navy Medicine facility to treat VA-eligible veterans as well as active duty and retired DoD members and their families," said Redden.

The joint venture will eliminate the need for some VA patients to

have to travel long distances for treatment.

The minimally invasive surgeries allow for shorter hospital stays, shorter recovery, less pain and a return to work sooner than traditional open surgery, the urologist continued.

Patients who have been deferred to the TRICARE network and are interested in these new procedures, should inquire with the Urology Department at 505-6266 before going elsewhere for treatment when they may well be able to have it done at NH Pensacola.



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