



## Disaster Preparedness Brings Industrial Hygiene to a New Level

By Kimberly Prato  
Public Affairs Officer

The Naval Hospital Camp Pendleton Decon Incident Response Team, (DIRT), recently gave an interactive demonstration to over 10,000 exposition attendees wanting to know the response to a possible chemical, biological attack.

Four decontamination teams were formed as a result of a meeting with NHCP's Commanding Officer, Capt. William Heroman, the Depart-

ment Head of Industrial Hygiene, Lt. Cmdr. Dan Field, and the Disaster Preparedness Team. According to Field, A more positive posture was needed in case of a chemical, biological disaster. Each team consists of eight members, including the team leaders; Lt. Cmdr. Dan Field, Lt. Cmdr. Michael Nace, Lt. j.g. Smith and Lt. Curry. The first Sailors were assigned when the team began in January 2000.

Field's 23 years experience in CBN response comes mostly from his training on Navy submarines. He is continuing his training in nuclear and radiological accidents since being assigned to NHCP.

The American Industrial Hygiene Conference and Expo began in the mid 1930's; the DIRT participated in the most recent event held in San Diego. "This was good because it showed what industrial hygiene can do in regard to a chemical or biological nuclear response," said Field. According to Field, current events are causing a high media interest in these types of demonstrations and were

*DIRT Continues on page Three.*



Photo By: HM2 Sean F. Farrell

*Naval Hospital Camp Pendleton's Decontamination Incident Response Team, (DIRT), demonstrates the mobility of teams who are on call 24 hours a day and can be on station in less than an hour while setting up in about five to 35 minutes.*

## NHCP Newsletter Gets A New Name And A New Look

By Kimberly D. Prato  
Public Affairs Officer

Garrison Health News is replacing the NHCP Newsletter as the new command newsletter for Naval Hospital Camp Pendleton, thanks to a command wide contest held recently.

Commanding Officer, Capt. William Heroman, approved the idea to actively involving Naval

*New Name Continues on page Five.*

## What's Inside

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Breast Cancer Survivors' Rules for the Road, Page 22.

TRICARE Outpatient Clinic Wins Big, Page 23.

# Customer Relations Success Stories and Patient Appreciation Letters



Graphic By JO1 Robert M. Dylewski

## NHCP Staff In Action

By HM2 Julie Andino  
Customer Relations

LCDR Tara Zieber,  
HN Nicholas Ramos:

The basis of most of our Compassion Coin Awards is simple...if it brings a tear to your eye, it's a winner. A letter sent in by a young patient's mother was truly awe-inspiring. The concerned mother brought her sick daughter, who has Down Syndrome, into the Emergency Room. She expected what she calls the "typical" ER treatment. Her daughter had experienced many traumatic visits to the doctor previously and both were dreading whatever was to come. They were taken into the back where Lt.Cmdr. Zieber and HN Ramos

were waiting with smiles. Their patience, compassion, and genuine concern for the patient and the family won them over immediately. Ramos struck up a conversation with the young girl and really personalized her entire visit. Upon discharge, Ramos didn't get away without a big hug and heartfelt thank you. The experience provides a sample of what Navy Medicine is all about.

The mother concluded her letter by stating, "I know that she is expecting to see them again the next time she has to go to the doctor. The hard part will be explaining why that probably won't happen, but, I am happy knowing that the next scared child coming to your ER might be as lucky as we were to run into these two outstanding people."

PN3 Deon Williams:

Williams went well above the

call of duty to help out a former staff member here. An officer was in transition during the period when W-2's were distributed and never received one. The new command informed the individual that they would not be able to retrieve a copy prior to April 15th. The officer contacted the personnel support detachment here, making a desperate attempt to get a W-2 and file their taxes on time. Williams went out of his way to assist in any way possible making sure the appropriate paperwork was mailed out immediately. It's customer service like this that makes Camp Pendleton really shine.

HM2 Justin Huffman:

Huffman, like many staff members here, displayed exceptional customer service skills. In a patient's time of need, he responded in a very courteous and professional manner to get the problem resolved and recover the patient's confidence. Huffman truly embraced the spirit of "getting to yes."

CDR Dennis L. Reeves

Reeves is one of our many exceptional physicians here at the Hospital who on a daily basis greatly impacts the well-being of our valued customers. One of his patients took the time to write an exceptional letter expressing their appreciation for the compassionate and personal care they received from Reeves. Professional and caring health care providers such

*See "Action" on page 18.*

**GARRISON** Health News  
"Health in Garrison. Readiness in Deployment"

NHCP Newsletter submissions should be sent to [NHCP-PublicAffairs@cpn.med.navy.mil](mailto:NHCP-PublicAffairs@cpn.med.navy.mil) or call 725-1271 for information. NHCP Newsletter is an authorized publication of the U.S. Naval Hospital Camp Pendleton, California 92055. The views expressed in this publication are not necessarily those of the Department of the Navy. NHCP Newslet-

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**Commanding Officer**  
CAPT W.M. Heroman, MC

**Executive Officer**  
CAPT M. P. Hogan, NC

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**Deputy PAO**  
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HM2 Sean F. Farrell  
HM3 Hivalia McCre

**Web Development**  
Jerome Alona  
Richard Torres

*DIRT Continued from page 1.*



evident at the conference. “I wanted to show how our profession can interact,” said Field. There were 15 individuals involved in creating and manning the DIRT display.

“We wanted to showcase what we would do if we had to respond in an actual emergency,” said Field. “We used mannequins to show the process and we laid out all the equipment we would normally set up in a DECON set so people could see what it really looks like,” he said.

The stages of the display included a “hot zone,” “warm zone,” and “cool zone.” A potentially contaminated person starts off in the



*Photos By HM2 Sean F. Farrell*

*HM2 Wilfredo F. Delosreyes member of NHCP's Decontamination Incident Response Team (DIRT), explaining to the base commanding general how the portable shower's construction contributes to the team's mobility.*

“hot zone” and moves through different decontamination procedures until they reach the “cool zone.” The team gave question and answer sessions

including three guided tours a day. “For the tours we would dress up and simulate treating a contaminated patient,” said Field. The group already has been requested to participate in next year’s event. The challenge will be getting the people and equipment to Dallas, where the next conference is being held.

“We are definitely on the cutting edge as far as drawing up a DECON set,” said Field. “The equipment has been tested and tried out. Some equipment breaks or doesn’t work as well as others, so we have recommendations on equipment for other commands to use,” he said. “As far as I know, NHCP is the first command in the region and possibly the service to be stood up and fully prepared to go regarding a chemical or biological disaster,” said Field. “We know the county’s capabilities and they know ours, so we are not responding blindly,” he said. Some advice from Field regarding

chemical or biological teams in your area, “Don’t just focus on your base, include your community and your local emergency preparedness committee in your plan.” ❁



*LCDR Dan Field, Head of Industrial Hygiene Department here, discussing decontamination team functions with Major General William G. Bowdon III, Commanding General, Marine Corps Base Camp Pendleton.*

# Improving Access To Care

By JO1 Robert M. Dylewski  
Deputy Public Affairs Officer

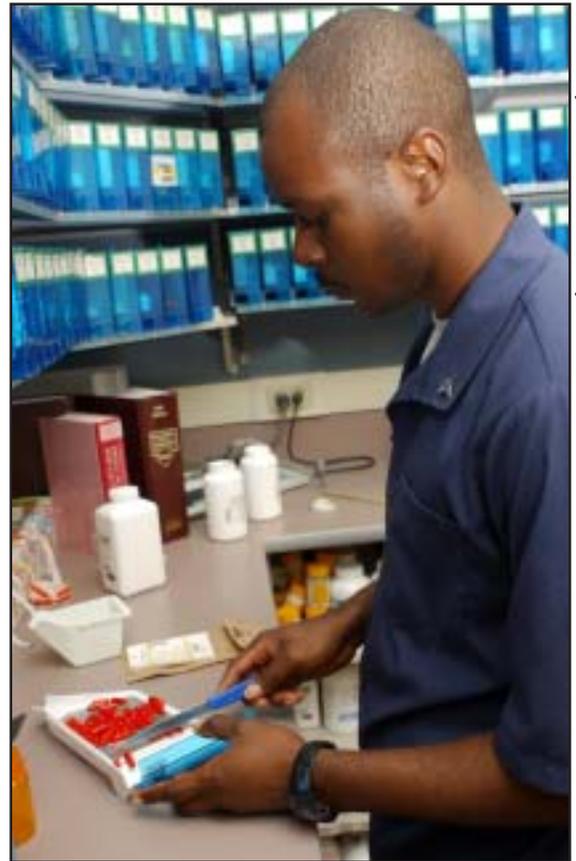
A new automated system, "Audio care," is in place providing better access to care. The new system offers patients an option to speak with a pharmacy technician at their military treatment facility, (MTF), and place web based prescription refills. The system also provides an added feature for patients making appointments by providing an appointment reminder 2 days in advance.

Naval Hospital Camp Pendleton, (NHCP), is always focusing on quality customer-focused health care. Audio care does just that. According to Lt.Cmdr.

Rick A. Wenning, head of the Pharmacy Department at NHCP, the option for patients to talk with an individual vice the automated system, allows patients planning a vacation to take care of their prescription refills prior to leaving. Patients with Internet access can now place their refills from the convenience of a home computer.

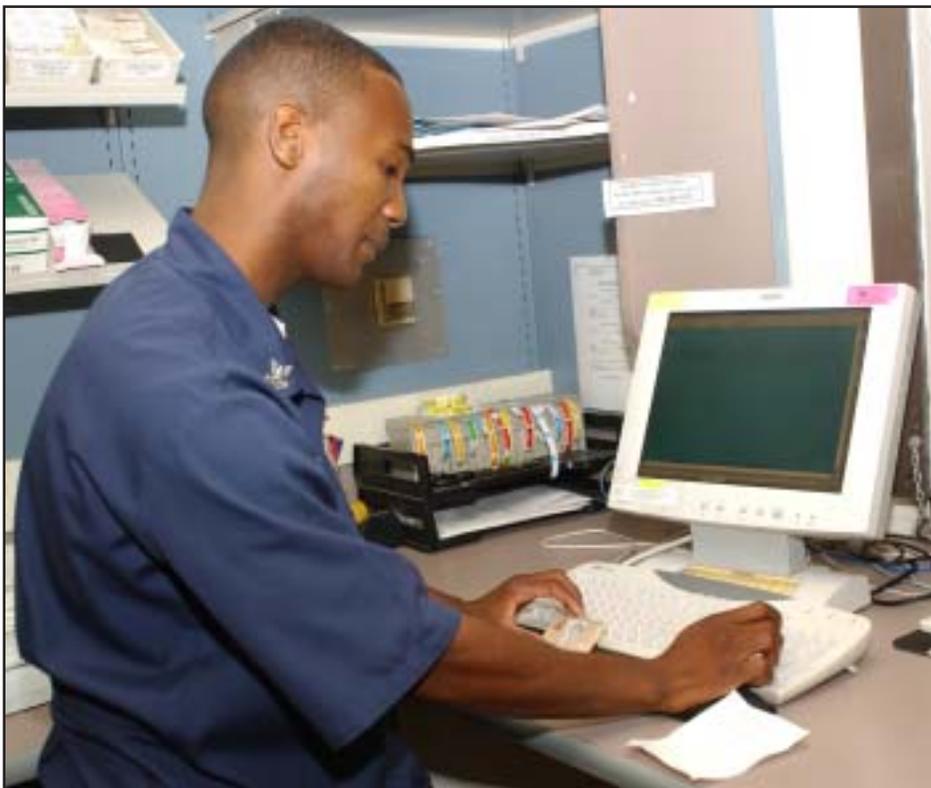
In addition the new system offers a brief welcome preamble and a selection mode from which the caller can choose their MTF. The prescriptions are refilled within two work-days and a seven-day window is provided for pick-up. The automated system provides the caller a day and time their prescription will be available and if the prescription is eligible for refill.

Patients that have made an appointment now receive a call through the new system reminding



Photos By JO1 Robert M. Dylewski

*Pharmacy Technician HN Angervil Adelphin prepares a prescription refill for pickup.*



them of their appointment two days in advance. According to Lt.jg. Jennifer L. Hilton, Assistant Division Officer for the Access to Care Center, the automated system will leave a message unless the individual answers the phone. The individual has to push a button according to the directions to state that they are the responsible party receiving the reminder. "It has decreased the number of calls we get to confirm appointments," said Hilton.

Health care beneficiaries can place prescription refills via the new

*Pharmacy Technician HM2 Mathew Sutton III assists a patient with their prescription pickup.*

system by calling 1-866-286-8249. The new number is toll free and available 24 hours a day. The new web based refill is available at [www.enhcp.com](http://www.enhcp.com) and [www.cpen.med.navy.mil](http://www.cpen.med.navy.mil).

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## Naval Hospital Camp Pendleton Access to Care (Central Appointments) Information for Scheduling and Canceling Appointments:

Call 760-725-4327 and select one of the following options:

- #1- Family Medicine
- #2- Internal Medicine, Optometry, Referrals to speciality clinics
- #3- Pediatrics

A triage nurse is also available for nursing advice and over-the-counter medication orders.

How to expedite your call to the access to care center:

- Have your sponsor's entire social security number available
- Know the reason and/or symptoms associated with the appointment you are requesting.
- Know the patient's primary care clinic/manager
- Have ready a pen, paper, and a calendar to write down the appointment information.

If you need to contact OB/GYN, please call 760-725-6383.

If you need to talk with your primary care manager you can leave a message on one of the following numbers:

- |                    |                 |
|--------------------|-----------------|
| -Family practice   | 760-725-5381/82 |
| -Pediatrics        | 760-725-1453    |
| -Internal medicine | 760-725-1384    |

All pediatric specialties are scheduled by the clinic, call 760-725-1197.

If you have a customer service comment, please call 760-725-1436. ☎

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Note: Base Information: 725-4111  
Hospital Quarter Deck: 725-1288  
TRICARE Info. 1-800-242-6788

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*June R. Weers, an Administrative Assistant in Professional Affairs here, is the winner of the Command's newsletter naming contest. She's pictured with the old name and the new name in graphical form for publication.*

*New Name Continued from page One.*  
Hospital Camp Pendleton staff to name the command newsletter. Out of over 100 potential newsletter names submitted Ms. June Weers' entry won the contest.

The original command newsletter, the Pulse Beat, began in January 1961. It was renamed the NHCP Newsletter in 1991. And after 12 years, thanks to Weers, the newsletter is now called the Garrison Health News.

Born in Oceanside, Calif., Weers came to work at Naval Hospital Camp Pendleton in 1996 as medical clerk for the general surgery clinic. "I worked for two years as a medical clerk and two years as a secretary and then moved up to Professional Affairs, and I've been there two years," she said.

The newsletter-naming contest was held for the

*New Name Continues on page 17.*

# Hormone Replacement Therapy

## What To Do?

By CDR John R. Holman,  
Director of Medical Services

Risks in treating women with estrogen and progestin medication began to outweigh its benefits causing a large medical study to be stopped nearly three years early.

Designed to determine if the combination of the female hormones estrogen and progestin prevented heart disease in healthy, postmenopausal women, the study was stopped by Researchers for the Women's Health Initiative, (WHI), when it became apparent that the risk of developing breast cancer was higher for women taking the

benefits.

Approximately 38 percent of post-menopausal women in the United States use hormone replacement therapy.

Physicians and other health care providers have used the combination of estrogen and progestin for prevention of osteoporosis (thinning of the bone), bone fractures and relief of menopausal symptoms such as "hot flashes". Longer-term use was thought to help prevent heart attacks, certain cancers and memory

"Approximately 38 percent of post-menopausal women in the United States use hormone replacement therapy."

CDR John R. Holman,  
Director of Medical Services

loss. WHI is a very large study of over 16,000 healthy, post-menopausal women age 50 to 79 years who have not had a hysterectomy, designed to determine if heart attacks could be prevented through the use of daily, combination hormone replacement therapy, (HRT).

Risks from combination HRT use were small but included an increased risk of invasive breast cancer, heart attacks, stroke and blood clots. The benefits included decreased risk of colorectal cancer, cancer of the uterine lining, osteoporosis, and fractures of the hip and backbone. If 10,000 post-menopausal women took combination HRT for one year, there would be 7 more heart attacks, 8 more invasive breast

cancers, 8 more strokes, and 8 more blood clots to the lungs but 6 fewer colon cancers and 5 fewer hip fractures compared to 10,000 women who did not take HRT.

Even with this small risk, the study did show that the effects of combination HRT add up over time so that the longer a person takes HRT, the higher her risks would be for cancer, heart attack and stroke.

### What should patients do?

The medical staff at Naval Hospital Camp Pendleton recommends all women who have not had a hysterectomy and are taking combination estrogen and progestin post-menopausal hormones talk with their doctor about continuing these medications.

In addition, women should start post-menopausal combination HRT for osteoporosis prevention or severe menopausal symptoms only after a thorough discussion with their doctor regarding the risks, benefits and duration of treatment.

Alternative treatment for osteoporosis prevention and relief of menopausal symptoms should be reviewed. At this time, increased testing for breast cancer, heart disease and stroke is not indicated for women who have had combination post-menopausal HRT.

The study report and editorial can be reviewed in the July 10 issue of JAMA available on line at [jama.ama-assn.org](http://jama.ama-assn.org).

For more information on hormone replacement therapy please discuss these questions with your Primary Care Provider. ❁



Graphic by JO1 Robert M. Dylewski

hormone combination pills and that the overall risks exceeded the

# News Briefs ...

## Interim Leave and TAD Policy

According to Naval Hospital Camp Pendleton Instruction number 1050, liberty will only be allowed within the local area, which is considered to be a 150 mile radius from the base. Anyone traveling greater than 150 miles must have an out-of-bounds chit signed by their director. A valid phone number and address must be included. Members taking leave or TAD must have the ability to report in person to the Command within 24 hours of recall using ground or air transportation. Exceptions to this policy will be considered on a case-by-case basis by the Commanding Officer. This notice will remain in effect until canceled or replaced.

## Holiday Leave Periods 2002

Thanksgiving is from 7 a.m. on November 25, to 7 a.m. on December 4.

Christmas is from 4p.m. on December 11, to 7 a.m. on December 27.

New Year is from 4 p.m. on December 27, to 7a.m. on January 12, 2003.

## Leave Policy

## Reminders and

## Travel Overseas

Any personnel wishing to adjust or cancel a leave request

must inform Military Personnel Management Department, (MPMD), as soon as possible. In accordance with Naval Hospital Camp Pendleton instruction 1050.2M, the white copy (Part 1) of the leave request must be returned the next working day following the completion of leave. Any adjustments or cancellations forwarded to MPMD after the end date of the leave period must be accompanied by a memorandum from the member's department head for a correction to be made.

Due to the current international security condition, personnel traveling overseas must inform MPMD of their travel plans no later than 30 days prior to departure. This is to ensure that all requirements are met and approval is made by cognizant authority prior to departure in accordance with the Department of Defense Foreign Travel Guide (DOD policy 4500.54).

## Pastoral Care Activities

### *Annual Holiday Music Concert*

The holiday seasons are approaching soon and the Pastoral Care department is sponsoring an annual musical concert. This year's holiday concert takes place in the Clinical Assembly on December 5, from noon to 1 p.m. A variety of musical numbers are slated for performance.

### *Annual Holiday Food Drive*

Donate nonperishable food items by dropping them in one of the decorated boxes located throughout the hospital. Cash

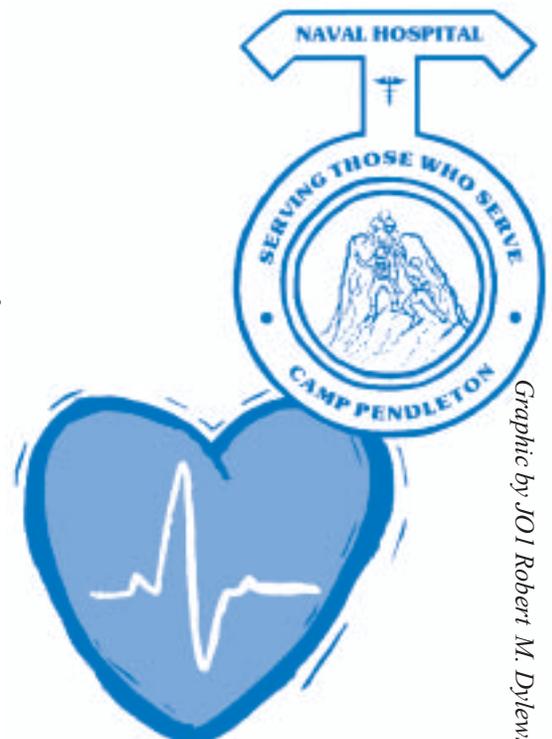
donations may be brought to Pastoral Care Services and receipts can be given for those who need them for income tax deductions.

### *Recycled Items Help Others*

Cell phones are sent out to be reprogrammed and used for a charity organization. They are given to domestic violence victims for instant access to help.

Used eyeglasses are given to a variety of charities for redistribution. The charities give to people in need in many countries like Mexico, the Philippines, Thailand, and Morocco. The prescriptions are screened and the glasses are cleaned and repaired. To date Naval Hospital has donated over 1,500 pairs.

Toner Cartridges, soup labels and box tops are given to Mary Fay Pendleton School (our Adopt-A-School through the Naval Personnel Excellence Program). The school is able to acquire educational equipment when the donated items are redeemed. ❁



Graphic by JO1 Robert M. Dylenski



# Career Counselor Hotline

*HMC (SW/AW) Stephen Murray, a detailer from Bureau of Naval Personnel, works closely with HMCS (SW/AW/FMF) William D. Suyat on assisting Sailors with their orders, making sure they have all the information needed to succeed in a Naval career.*

## **HMCS (SW/AW/FMF) William D. Suyat, Command Career Counselor**

**G**reetings to all. I'm HMCS (SW/AW/FMF) Suyat reporting from 1st Force Service Support Group. I'm proud to assume the responsibility of serving the finest Sailors of Naval Hospital Camp Pendleton. Our office staff are committed to provide our Sailors needed information and get to "Yes".

Our goal is continuously empowering our Sailors with information through our Command Retention Team to assist Sailors in making an informed decision to stay and be a successful Sailor. NAVADMIN 341/01 announces the current Sea/Shore rotation tour length. In an effort to improve retention, sea tour length is being reduced for 87 rates.

NAVADMIN 301/02 provides the general guidance on the location selective reenlistment bonus, (LSRB). The LSRB provides monetary incentive to Sailors reenlisting and accepting orders to a selected location as enumerated in the NAVADMIN to include duty stations in California, Italy, Hawaii,

and Japan.

NAVADMIN 352/02 announces the new Selective Reenlistment Bonus, (SRB), for specific undermanned ratings or critical Navy Enlisted Codes, (NEC). Personnel who have not yet reenlisted or executed an SRB qualifying extension and who would benefit from a higher award level under the current plan must resubmit a SRB reenlistment request to qualify for higher award level.

Our TEAM (Together Everyone Achieves More) works with the command retention team to conduct an effective career decision board for each Sailor 12 months prior to PRD. Let's educate and encourage our Sailors to contact the detailer through the career counselor prior to them receiving a follow-up call on the 12 month message of their PRD/EAOS. Let's foster Sailors to research prospective assignment areas, considering such factors as educational opportunities, traffic, housing, schools and even veterinary services availability.

Pers 407 is continuously looking for outstanding Sailors interested in the Amphibious Reconnaissance HM (8427) "C"

school. The program is under the Selective Training and Reenlistment (STAR) program. The program qualifies you for an SRB of 4.5/4.5/0.5 for zones A/B/C reenlistment incentives entitlements respectively.

The recently held detailers (Pers 407) visit to here was highlighted with over 100 enlisted PCS orders. "C" school applicant acceptance will be published in the next issue. HMCS (SW/AW/FMF) Arrington and HMC (SW/AW) Murray were presented the plaque by Command Master Chief Sanchez for their outstanding support to our CPO and enlisted communities. They were greeted with traditional fair winds and following seas. Arrington will be transferring to Bethesda, Maryland and Murray took orders to USS Shreveport, (LPD-12).

On behalf of our department we would like to extend our Congratulations to the recently promoted Petty Officers. May you have a wonderful holiday and a prosperous, peaceful new year. ❄️

## MPMD Corner



## PERSONAL FINANCIAL MANAGEMENT

By HMCS (FMF) Willie L. Seraspe, MPMD

Personal financial management is a key quality of life program and is a top concern of Navy families. The lack of knowledge of basic budgeting skills and undisciplined spending are the major causes of indebtedness. NAVHOSPCAMPENINST 1740.4A was implemented to delineate the responsibilities governing the Command Personal Financial Management Program.

Effective personal financial management training and proactive leadership has been proven effective to significantly reduce the potential for indebtedness of our junior military personnel. If indebtedness exists or persists, the staff member is referred by his or her chain of command to one of the Command Financial Specialists (Senior Chief Seraspe or Chief Reus) at Military Personnel Management Department. Our goal is to provide proactive financial counseling by increasing the service member's knowledge of basic budgeting principles and providing advice on

sound spending practices.

Additionally, we provide referrals to other authorized agencies such as Navy Marine Corps Relief Society, Navy Legal Service Office, and non-profit Consumer Credit Counselor Services. Ultimately, it is the service member's responsibility to ensure that his or her personal finances are handled responsibly.

Financial problems can have a serious negative impact on Navy members and their families. Through the implementation of an effective Personal Financial Management Program, we can prevent its debilitating effect on operational readiness, morale, and retention.

For further information regarding the Navy's policy on the Personal Financial Management Program, you may refer to OPNAVINST 1740.5A. ❁

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## Navy Announces High Year Tenure Policy Revision

*From Chief of Naval Personnel Public Affairs*

The Navy has revised its High Year Tenure (HYT) policy for two pay grades to levels that ensure continued healthy promotion opportunity for rising career-minded Sailors.

The HYT limit for E-4 has been lowered from 12 to 10 years, while the HYT limit for E-6 was lowered from 22 to 20 years. HYT limits for E-5 (20 yrs), E-7 (24 yrs), E-8 (26 yrs), and E-9 (30 yrs) remain unchanged.

Revising HYT limits for E4 and E6 Sailors is estimated to impact approximately 800 first class petty officers and 200 third class

petty officers per year.

“Several years ago we were faced with stalled advancement opportunities and needed to give Sailors more time to advance. Our strategy paid off for 794 Sailors with greater than 19 years of service who were promoted to chief petty officer during the past two advancement cycles,” said Chief of Naval Personnel Vice Adm. Norb Ryan Jr. “Our growth in the Top Six, combined with healthy advancement opportunities today, leads me to believe we are on the right path to developing a more experienced force. Now we need to ensure we maintain the same healthy advancement flow for our up and coming career-minded Sailors.”

No Sailor affected by the new HYT limits will be required to separate or transfer to the Fleet Reserve (FLTRES) prior to Sept. 30, 2003; affected E4s and E6s may extend up to that date. The revision will be carefully phased-in to minimize the impact on Sailors affected by this initiative. For example:

*High Year Tenure Policy Continues on page 19.*



Graphic by JO1 Robert M. Dylenski

# Accolades



# NHCP



Photos By HM2 Sean F. Farrell

HMC Anthony L. Blackwell, Navy Commendation Medal  
LTJG Edmundo Pena, Navy Marine Corps Achievement Medal  
HM1 Eddie Hadley, Navy Marine Corps Achievement Medal  
HM2 Justin Davies, Navy Marine Corps Achievement Medal  
CDR Monte Bible, Certificate of Commendation  
HM1 Michael Roberts, Certificate of Commendation

HM3 Jaime Farior, Certificate of Commendation  
HM3 Loren Lagang, Certificate of Commendation  
LCDR Tara Zieber, Command Coin Award  
HN Nicholas Ramos, Command Coin Award  
HM2 Justin Huffman, Command Coin Award



ENS Beverly Dixon, Navy Marine Corps Achievement Medal  
HM2 Marithess Dalida, Navy Marine Corps Achievement Medal  
HM3 Juan Pena, Navy Marine Corps Achievement Medal  
HM3 Daquiri Tofte, Navy Marine Corps Achievement Medal  
HM3 Zachary Kelley, Navy Marine Corps Achievement Medal  
HM3 Carla Clawson, Navy Marine Corps Achievement Medal  
DK1 Michael Blankers, Certificate of Commendation

HM3 Robert Pagcaliwagon, Certificate of Commendation  
MS Wendy Vanwooten, Certificate of Commendation  
HM3 Dominic Ramirez, Certificate of Commendation  
HM2 Michael Looker, Certificate of Commendation  
HM3 Mary Collins, Certificate of Commendation  
HM2 Karen Lemas, Certificate of Commendation  
HM3 Justin Simien, Good Conduct Medal

# Accolades



# NHCP



LCDR Chunjai Clarkson, Meritorious Service Medal  
LCDR Alan Siewertsen, Navy Commendation Medal  
HM3 James Bowes, Good Conduct Medal

CDR Dennis Reeves, Command Coin Award  
Ana Rios, Command Coin Award  
Lindalee Taylor, Command Coin Award



LT James Landreau, Navy Marine Corps Achievement Medal  
LCDR Regina Mercado, Meritorious Service Medal  
HM3 Kathleen Pierce, Navy Marine Corps Achievement Medal  
HM3 Andrew Luque, Navy Marine Corps Achievement Medal  
HM3 Christopher Rosario, Navy Marine Corps Achievement Medal  
HM3 Kristen Cooker, Good Conduct Medal

# Accolades



# NHCP



Photo By HM2 Sean F. Farrell

LTJG Damian Smith, Navy Marine Corps Achievement Medal  
ENS Ronald Wagner, Navy Marine Corps Achievement Medal  
HM2 Julie Andino, Navy Marine Corps Achievement Medal  
HM3 Dustin Palermo, Navy Marine Corps Achievement Medal  
HM3 Timothy Case, Good Conduct Medal

MAC David Caine, Certificate of Commendation  
SKC Darlington Mgbekwe, Certificate of Commendation  
HM2 Rashon Kyle, Certificate of Commendation  
HM2 Jodi Rabideau, Certificate of Commendation  
PN3 Deon, Command Coin Award



Photo By HM3 Hiddalia McCre

LCDR Samuel Tsang, Meritorious Service Medal  
HM2 Justin Huffman, Navy Marine Corps Achievement Medal  
HM3 Angela Calalo, Navy Marine Corps Achievement Medal  
LTJG Richard Schulz, Certificate of Commendation

HN William Martin, Certificate of Commendation  
HM2 Ferdinand Ajel, Certificate of Commendation  
HM3 John Robbins, Good Conduct Medal  
David Chapman, Command Coin Award



Photo By HN Amethyst White

HM2 Scott Adessa, reenlists for four years on a surf Board by the Beach. He is staying Navy.

Photo By HM3 Haidalia McCre



Photo By HM2 Sean F. Farrell

HM2 Hadley reenlists for six years. He is staying Navy



Photo By HM2 Sean F. Farrell

MS1 Jeffre Jacob, SHCM Arthur Narciso and HMC Marty Manalasta reenlist for two years at the basic enlisted quarters on the same day. They are staying Navy.

HM1 Lazaga reinlists for 2 years. He is staying Navy.

# Staying Navy



# NHCP

# Welcome

## Aboard

HN Indalsingh Valmiki  
HN Lam Navarro  
HR Nicholas Cowry  
HR Epafara Vattaotolu  
RPSN Tina Marie Deremiah  
HM3 Richard Varner  
HM3 Larry Brown  
HM3 Amor Lumby  
HN Michael Jones  
HA Brian Lynch  
HM1 Adrain Sandoval  
BU3 Rachael Miller  
ET3 Thomas Gruver  
HM2 Jennifer Simmons  
DA Lajuan Johnson  
HR Yeeleng Xiong  
HA Edward Ronquillo  
HR B. Courtland  
HM2 Erich Gumm  
DR Barbara Gossett  
HN Brian Wilson  
GS09 Archie Lee Jr.  
GS12 Basilisa Nava  
GS06 Monica Ward  
GS05 Michelle Gunn  
GS05 Eugenia Dopp  
WG02 Isabel Ayala  
GS04 Magdalena Richardson  
WG02 Donald Dewey  
GS09 Mark Wolford  
GS04 Claire Chapman-Wright  
WG03 Irving Duffy  
GS04 Laura Ward  
HM2 Scott Seeden  
HN Charles Dillard  
HM2 Joshua Sandoval  
MS2 Lorenzo Milledge  
MS3 Evangeline Lagman  
HM3 Guillermina Lorenzoni  
HM3 Sharlean Torgerjon  
HM3 Gabreal Sanchez  
HM3 Lisa Nartker  
HM3 Nathan White  
HM1 Earl Smith  
HM3 Walter Hernandez

HM3 Adrain Luna  
MS2 Eduardo Perry  
DT3 Akouasi Pokuamanfo  
SH2 Ranulfo Jacob  
HM3 Justin Simien  
HM1 Christopher Visperas  
HM2 Gilbert Barron  
HM2 Dominique Covington  
HN Rodolfo Mares  
HN Cory Sanford  
HM3 Seaver Leisinger  
HA Jonathan Vaccaro  
HM3 Ashareen Ritter  
HM3 John Chandar Jr.  
MS3 Real Santiago  
HA Sean Isbell  
HM1 Fredric Balanag  
HN Niah Cortez  
HN Victor Corral  
HN Tawnya Stout  
MS3 Marie Simpson  
HM2 Terry Morocco  
HA Michael Greene  
HM1 Michael Roberts  
HN Daniel Murillo  
HM3 Edgar Tucker Jr.  
HM3 Genevieve Carbonell  
HM2 Michael Looker  
HM3 Vincent Edwards  
HM1 Kimberley Smith  
HM3 Andrea Brasileno  
HN Christopher Brown  
HA Jared Zieris  
HM3 Philippe Manrique  
SH3 Phillips Palomino  
HM3 Ernest Logan  
HM3 Gueillermo Mendez  
HM3 Frederick Peregrino  
MS3 Steven Whitman  
PN3 Deon Williams  
HM2 Glenn Wilson  
HMCM Patrick Melcher  
CMDC Raphael Sanchez  
HM3 Relyea Harris  
HM3 Joseph Billett  
HM3 Jimmie Davis  
HM3 Evan Hale  
ITC Gregory Ridgeway  
HM3 Misty Harland  
HM3 Jeremiah Angle

HM1 Allan Maluto  
HM1 Phillips Confer  
HM2 Katesha Payne  
HM3 James Fivecoat  
HM2 Edward Valdez  
HM3 Jose Robles  
HM3 Michael Best  
HM3 Raymundo Romero  
HN Tyler Linneweber  
HN Brian Alaniz  
HN Roberto Gaona  
HM3 Sabrina Malone  
HN Rachel Jenkins  
HMC Eeron Isip  
HM3 Hilda Valenton  
HM3 Kathleen Pierce  
HM3 Evelyn Escalante  
HM3 Robert Reyes  
HM3 David Toston  
HM1 Kevin Cornish  
CAPT Gerald Damarest  
CDR Brian Pecha  
LT Thieuha Hoang  
LT Stephen Williams  
LT Paul Andre  
LT Karen Bisogno  
LT Patricia Wiese  
LCDR Victoria Perez  
LT Thomas Dernbach  
LTJG Kristine Salang  
LT Mary Stewart  
LTJG Victor Tu  
LT Kathryn Lacher  
CAPT Sone-Seere Wilson  
OTH Maria Mason  
OTH Alma Cabebe  
OTH Carey Rist  
OTH Nancy Lovell  
OTH Kimberly Van Natta  
OTH Janet Strong  
OTH Karen Guenther  
OTH Bonnie Hagerty  
OTH Loren Moreno  
OTH Karen Yuhasz  
OTH J. Millegan  
OTH F. Johnson  
OTH Patricia Lilies  
CON Mikaela Walton  
CON Leanne Kneale

# Farewell

LT Denise Channell  
HMC Pamela Robinson  
LT Jenifer Herrington  
HN Karl Aguilar  
HR Derrick Arjoon  
HA JW Arrow  
HR Christopher Ayangco  
HR Riyadh Badrie  
HN Maurice Bailey  
HR Cassius Bajod  
HR Tacarra Barrett  
HA Eric Barton  
HN James Bealefeld  
HR Justin Bellows  
HA Christina Bermea  
HA Joseph Boyd  
HR Timothy Braddock  
HA Charles Brennan  
HR Fred Brodie  
HR Elliott Burkland  
HA Morgan Burr  
HN Tracy Burris  
HN Felipe Cameroamortegul  
HA Jamie Cardenas  
HR Brad Chapman  
HN Donald Chesscher III  
HR O'Brain Chin  
HN William Cleary  
HR Matthew Coon  
HN Montez Cornelius  
HAAlex Corrales-Barrios  
HA Doris Crosby  
HA Michael Danis  
HA Marco Decastro  
HM3 Jamal Deji  
HA Jacob Aberercombie  
HN Emily Dooley  
HN Eduardo Ebalobo  
HA Eric Eleey  
HA Johnathan Elliott  
HR Siramante Enriquez  
HR Blair Estavillo  
HA Kyle Fields  
HA Sergio Flores  
HR Preston Gage  
HA Raulito Galgana III  
HA Michael Gibboney  
HA Keven Gilkey Jr.  
HR Enrique Gonzalez

HN Robert Gooch  
HA Robin Gullie  
HR Carl Hagemann Jr.  
HA John Hajovsky  
HA Kyle Handford  
HR Jodi Harrold  
HN Corey Hashem  
HR Kurt Hauser  
HR Hulester Holley Jr.  
HN Shawn Howard  
HA Joey Hymer  
HR Jorge Illich  
HR Umair Iqbal  
HA Lori Irwin  
HR Katherine Jarvis  
HR Roxanne Johnson  
HN Curtis Jones  
HA Lloyd Jordan III  
HN Alfonso Juarez  
HN Jaun Paulo Katada  
HR Valeriy Kholmanov  
HR Andrew Klinger  
HA Daniel Korsah  
HN Derek Krause  
HA Nghi Lam  
HR Robert Levonas  
HR Thomas Lloyd  
HR Reginald Louis  
HR Ruben Lovern  
HA Raul Luna  
HN Ruben Madrid  
HA Robert Maldonado  
HR Marc Manual  
HA Reo Maynard III  
HN Vivian McConnell  
HR Argenis Mendoza  
HN Shanyne Miller  
HR George Miller  
HA Adrian Minchala  
HAAaron Mireles  
HA Miguel Moreno  
HA Mark Neil Natiuidad  
HN ulius Obinwanne  
HA Reginald Oden  
HA Sidni Olea  
HA Deanne Page  
HR Patrick Palmer  
HN Kirk Patience  
HR Leonardo Pena  
HA Erzor Peralta

HN Delmar Peters  
HR Courtney Preaster  
HA Nadesh Ramroop  
HN Erwin James Robillos  
HA Jonathan Rodriguez  
HR Michael Rogers  
HR Rich Ruelos  
HR Iridious Ruise II  
HA Brian Russo  
HN Luis Santana  
HN Seth Schlotfeldt  
HA David Shaw  
HR Tabitha Silva  
HR Manley Smith  
HA John Stump  
HN Joshua Swain  
HN Jennifer Stroecker  
HN Jason Tabanan  
HN Billy Tew II  
HA Luis Urbina  
HR Robert Valtierra III  
HR Antonio Vasquez III  
HA Marco Vela  
HA Jai Renan Velasco  
HA Ionan Watson  
HA Andrew Wells  
HA Araborn Wold  
HN Bri-Ann Wright  
HM3 Dwayne Mitchem  
HM1 Benjamin Burton  
HN Kyle York  
HN Michael Rodriguez  
HR Matthew Bauer  
HM3 Edgard Lanuza  
LCDR Beverly Dexter  
MAJ Mary Tran  
HM2 John Denman  
GS05 Shauna Gorman  
GS09 Leonard Placker  
GS11 Deborah Williams  
GS04 Kuz Estremadura  
GS13 Murray Smith  
GS07 Elizabeth McFarland

**Hail &  
Farewell**

GS05 Miriam Johnson  
GS05 Rita Malone  
GS04 James Lowery  
GS04 Gary Hembree  
HM3 Cedrick Brown  
HN Lea Fields  
HM2 John Strough  
HN Laura Pavlicek  
HN Richmond Flores  
RP1 William Hammond  
HM1 Nicanor Reyes  
HM3 Joshua Hood  
HM3 Jonathan Canlas  
HM2 Triet Huynh  
HM3 Zaima Gonzalez  
HMCS Michael Palacios  
HMC Christopher Curtis  
HN Brian Dewolf  
HM1 Kory Bakley  
HM3 Eduardo Gozon  
HM3 Carmen Sanders  
HM3 Julie Story  
HM2 Jose Duque  
HM2 William Young  
HMC Brett Young  
HM3 Sandra Webb  
MS3 Gerald Stone  
PN3 Laura Wymer  
HM1 Wilfredo Panis  
HM3 Sorann Khim  
HM3 Christopher Harman  
HM3 Amy Boisvert  
MA1 Glenn Semer  
HM2 Randahl Benson  
ITCS Norman Trotter  
HM2 Randall Patterson  
HM2 Cynthia Link  
HM3 Tabitha Ruffin  
HN Richard Rideaux  
HM3 Joseph Pelino  
HM3 James Cook  
HM3 Jessamyn Casement  
HM2 Thomas Pierce  
HM1 Marcelino Pine  
HM3 Scott McCormick  
HM2 R Libberton  
HM2 Heather Lenz  
HMC Alan Kinnell  
HM3 Juan Barreto  
HMCM John Cahill

HMC Reynaldo Banasijan  
MS3 John Gould  
HM2 Lee Baker  
HMC D'Juna Hayes-Jones  
HM2 Rosemarie Minaya  
HM1 Benjamin Lim  
HM2 Andrew Dacon  
HMC Gary Henkel  
HN Romeo Buenaventura  
HM2 Joseph Sank  
HM1 Lance Heslep  
HM3 Gilbert Kalaw  
HM1 Decola Zollicoffer  
HM2 Roseann Deloney  
HM1 Nancy Deguia  
HM3 John Guerra  
HM3 Loreto Cruz  
HM3 Sajata Taylor  
HM2 Shannon Black  
HN Michael Huey  
HM3 Daniel Williamson  
HMC Anthony Blackwell  
HN Claborne Scott  
HR Tremain Gordon  
HM2 Sean Rockett  
HM2 Enrique Guzman  
HM2 Mark Valencia  
LTJG Jed Juachon  
CDR Robert Gillis  
LTJG Robert Krejci  
LTJG Natalie Stevens  
LT Raul Carrillo  
LCDR Sylvia Lyon  
LTJG Cristina Refec  
LCDR Robyn Ward  
LTJG Joyce Finnegan  
LTJG Alicia Burke  
LCDR Richard White  
CDR Loren Harter  
LT Rhonda Bennett  
LT Mark Warner  
LCDR Alain Delgado  
LCDR Cheryl Ostrowski  
LCDR James Patterson  
LT Jennifer Tredway  
CDR Eric Kuncir  
LT Felicia Duffy  
LT John Groblewski  
LCDR Jeffrey Cavendish  
LTJG Erika McQuaid

Eda Cortez  
CON Tammy Cox  
OTH Michelle Lacitinola  
OTH Concepcion Arayata  
CON Lark Bonyng  
CON Angela Richwine  
CON Rodello Reynolds  
CON Paul Arquero  
CON Reina Abeyta  
CON Phyllis Allen  
CON Ador Bustamante  
CON Terese Dudarewicz  
CON Cindy Ferris  
CON Bernard Goodhead  
CON Sheila Hendricks  
CON Evelyn Hicks  
CON Hortensia Howard  
CON Judy Jordan  
CON Janet Kriz  
CON Lisa Lutman  
CON Jennifer Martin  
CON Sandra Virnot  
CON Lesley West  
CON Carmen Carlisle  
CON Carmen Castro  
CON Valerie Colburn  
CON Jeanne Taylor  
CON Angela Dominquez  
CON Rudy Quiros  
CON Carol Martin

# Hail & Farewell

## **Naval Hospital Camp Pendleton Sailors Of the Quarter**

**Third Quarter Calendar Year 2002**

**Senior Sailor of the Quarter** - SH2 Ronald C. Umali -Operating Management

**Junior Sailor of the Quarter** -HM3 Dindo C. Deguzman -Family Medicine

## **Hospital Clinics at Camp Pendleton Sailors Of the Quarter**

**Third Quarter Calendar Year 2002**

**Senior Sailor of the Quarter** -HM1 Arturo Jimenez - 52 ABMC

**Junior Sailor of the Quarter** -HM3 James N. Barlow - 52ABMC

## **Naval Hospital Camp Pendleton Sailors Of the Quarter**

**Second Quarter Calendar Year 2002**

**Senior Sailor of the Quarter** - HM2 Norman Delacruz- Urology

**Junior Sailor of the Quarter** -HM3 Genevieve Carbonell- Family Medicine

## **Hospital Clinics at Camp Pendleton Sailors Of the Quarter**

**Second Quarter Calendar Year 2002**

**Senior Sailor of the Quarter** -HM2 James Hendrix - 52 ABMC

**Junior Sailor of the Quarter** -HM3 Lukas Gardner - Point Mugu

### *New Name Continued from page Five.*

period of one month. In that month submissions were taken via the intranet, the hospital staff's web site. "I saw the contest on the Intranet to all staff and I try to make an effort to succeed, if you don't try you can't win. I got the idea because I see the hospital electronic sign in the morning displaying "In-Garrison" on my way into the hospital," she said. Weers takes minutes for the executive staff meetings. "I know the command did not want us to be referred to blue side green side anymore," she said. The command wants things to be in garrison, according to Weers. There was a reference in a meeting made to green side blue side clinics and the chairmen said the clinics will no longer be specified differently, we are now in garrison. When the committees would meet and refer to blue side green side clinics I would put in the minutes, "in garrison" instead of "blue side, green side."

"In-Garrison to me, means the Navy and the Marine corps combined, working together as a team," she said. The Garrison Health News will support staff, active duty beneficiaries and retirees with current health issues. The newsletter is already covering health news.

"I like the way it is designed," she said. When asked what Weers hopes for in the newly named newsletter she had this to say, "Concerns of the different committees could be addressed in the newsletter, new information

such as the advanced directives need to be addressed. Who is being deployed and what is going on in the hospital."

"I know that the hospital supports the Marine Corps side and I didn't want the two services separated," she said. "I thought the title would help bring unity to the Navy, Marine Corps team. I think staff involvement is important when it concerns those working in garrison," she added. ❁



Graphic by JO1 Robert M. Dylawski

# Chaplain's Food For Thought



Photo By HM2 Sean F. Farrell

**Capt. Martin R. Stahl,  
Chaplain Pastoral Care Department**

## New Chaplain Arrives

*By Pastoral Care Department*

Chaplain Martin R. Stahl, CAPT, USNR, a native of Chicago, Illinois, has arrived at NHCP to replace Chaplain Buck, who retired August 16. He comes to us from New Orleans where he served the Commander, Naval Reserve Force, as the Force Chaplain.

His prior duty stations include: Force Chaplain, Navy Region Southwest; Basic Course Officer, Naval Chaplain School, Newport, RI; BUPERS 941, Naval Reserve

He believes that it is every chaplain's responsibility to provide ministry to the whole person—that anyone who is in any kind of need deserves help and prayer.

Management, Washington DC; Staff Chaplain, USS Kitty Hawk (CV 63); Chaplain Recruiter, Navy Recruiting Area 5, Great Lakes, IL; Staff Chaplain, DESRON 35, Pearl Harbor, HI; Command Chaplain, Marine Air Group 24,

Kaneohe Bay, HI; and, Command Chaplain, First Battalion, Third Marines, Kaneohe Bay, HI.

Chaplain Stahl was married to the former Rebecca Heilmann from Sioux City, Iowa, in December 1975. He has four daughters: the oldest two are teachers, the third daughter is studying to be a teacher; and his fourth daughter is a junior in high school. The youngest has made a vow to God that she will not become a teacher.

He is a member of the Lutheran Church-Missouri Synod, but insists that he is a chaplain to all sea service personnel and their family members, regardless of their faith background. He believes that it is every chaplain's responsibility to provide ministry to the whole person—that anyone who is in any kind of need deserves help and prayer. He comes to us with a strong background in personal and family counseling. His commitment is to ensure that every patient and every staff member at NHCP be seen and known by at least one of the Pastoral Care staff. ❁

*“Action” Continued from page Two.*  
as Reeves make Naval Hospital Camp Pendleton truly worthy of the title as the top Military Medical Treatment Facility in providing superior Customer Service.

**HMC Thomas Barry:**

During one of Barry's evenings on the Quarterdeck, standing duty as the Command Duty Officer, he truly went above and beyond the call of duty. A situation arose involving a patient on the labor deck who was experiencing complications during labor due to being insulin dependant. Any of the more-than-qualified doctors on the ward could have handled the situation if it were not for an existing language barrier. The patient only spoke Japanese. Her husband had not arrived at the hospital yet and an interpreter on the base could not be found.

Barry intervened and possibly saved the patients life along with the unborn child. He called the AT&T language service operator and after explaining the current situation, the operator waived the charges (approximately \$183) and provided a Japanese interpreter for the patient. Doctors retrieved time sensitive information from the patient and the completion of necessary consent forms with the help of the interpreter. The husband arrived after the situation was resolved. If not for Barry's dedication to our valued customers, the outcome for this family may have turned out differently. ❁

## High Year Tenure Policy Continued from page 9.

- E4s who reach the old 12-year HYT limit prior to Sept. 30, 2003 must separate when they achieve 12 years of total active duty naval service.
- E4s who reach the new 10-year HYT limit by Sept. 30, 2003 must separate by Sept. 30, 2003.
- E6s who reach the old 22-year HYT limit prior to Sept. 30, 2003 must transfer to the FLTRES when they achieve 22 years of total active duty naval service.
- E6s who reach the new 20-year HYT limit by Sept. 30, 2003 must transfer to the FLTRES by Sept. 30, 2003.
- All previously approved HYT waivers for E4s and E6s will be honored.

Affected personnel are authorized to compete for advancement in fiscal year 2003: E6s may take the January 2003 CPO exam and E4s may take the September 2002 and March 2003 advancement exams.

Master Chief Petty Officer of the Navy (SS/AW) Terry D. Scott explained the reasoning behind this decision, saying "I know there's a perception among our career Sailors in the fleet that advancement opportunities may be dropping off for those with 10 to 14 years of service. "However, Sailors in this critical period of their service need to know there is a strong chance to move up into more senior leadership roles. Adjusting High Year Tenure limits will help preserve opportunity," Scott said. "We must be able to continue to offer steady upward mobility and advancement opportunity to all Sailors."

Sailors impacted by the reduced HYT limits and under orders or with an upcoming projected rotation date should contact their rating detailer.

Sailors in critical pay grades, undermanned ratings, or holding specific Navy Enlisted Classification Codes (NECs) should submit HYT waiver requests through their chain of command. The approval process takes into consideration several factors including: end strength, community manning (advancement

"Our leadership has asked us to prepare for the long run as we fight the war on terrorism," Ryan said. "Adjusting High Year Tenure gates ensures our operational forces are manned to fight and win and the Sailors involved in the fight have a solid opportunity to advance."

opportunity and rate readiness), specialty training, scope and billet priority, and quality of life considerations.

"While the waiver process remains an option, another aspect of this policy revision is ensuring fairness by tightening up on all HYT waiver approvals," said Ryan. "We need to preserve future promotion opportunity by enforcing this policy across all pay grades."

Waivers are reviewed by Navy Personnel Command detailers and enlisted community

managers (ECM) for all Sailors. Additionally, the MCPON and head ECM review all cases involving Chief Petty Officers. "Our leadership has asked us to prepare for the long run as we fight the war on terrorism," Ryan said. "Adjusting High Year Tenure gates ensures our operational forces are manned to fight and win and the Sailors involved in the fight have a solid opportunity to advance."

For more information on the revised High Year Tenure Policy refer to NAVADMIN 208/02 at [www.persnet.navy.mil/navadmin/nav02/nav02208.txt](http://www.persnet.navy.mil/navadmin/nav02/nav02208.txt), and see your command career counselor. ☼



# Guide Dogs For The Blind

By Cmdr. Katherine R. Noeller,  
Head of Podiatry Clinic, NHCP

Despite the many advances in healthcare, there are still lots of reasons people lose their eyesight. The loss of sight affects many people, young and old. Although most blind people are not 100% sightless, this inability to see adequately often leads to a near hermit-like lifestyle. In some cases

family, friends and co-workers are able to assist in their mobility. In other cases the assistance of a Seeing Eye dog may be beneficial.

Guide Dogs of the Desert in Palm Springs provide Seeing Eye dogs to many blind people. These dogs are usually Golden Retrievers or Labrador retrievers. Sometimes Standard Poodles are chosen for those who are allergic to dogs, as the poodle's hair and dander is different. The school breeds their own guide dogs, which has dramatically increased their success rate in the past years.

The first 18 months of the puppy's life is spent in a "foster

of the puppy raisers is socialization of the animal. The more exposure and experience the puppies have to different stimuli, the more focused they will be when they return to the school for their final six to eight months of formal guide dog training. Basic obedience training is also expected in these first 18 months.

Summer is nearly two-years-old and has qualified as a "breeder." She will not become an official seeing eye dog but, rather, will be bred to provide future puppies for training. Star is just starting out. She is five-months-old and still very energetic. During July of 2003 she will return to Guide Dogs of the Desert to complete her training, meet her new owner, and set out in the "real world" to assist someone with her own sight.

The training program is always looking for additional puppy raisers and volunteers. If you think this might become your next hobby, check out their web site at [www.guidedogsofthedesert.com](http://www.guidedogsofthedesert.com).



Photo By: HM2 Sean F. Farrell

*Nicholas O'hara is a therapy dog at Naval Hospital Camp Pendleton and like the guide dogs for the blind, he assists.*

home." These families are known as "puppy raisers." Here at Naval Hospital Camp Pendleton, one of the volunteers is Cmdr. Katherine Noeller from Podiatry. She and her staff are often seen throughout the hospital with either Summer or Star, both guide dog goldens. The primary job

# Breast Cancer Survivors' Rules for the Road

By Lt. James West, Chaplain,  
Pastoral Care Department

Imagine September 11th happening to you, but without television coverage and it is only happening to you. Something similar to that occurs when the doctor looks at you with that compassionate look which says, "I don't know how to tell you this, but the results of the tests are that you have cancer." Everything else that is said goes unheard.

Almost a quarter of a million women hear that word each year in the U. S. Their world changes instantly.

Naval Hospital Camp Pendleton's Breast Health Clinic gets the word out that cancer is not the final word. Every October the clinic makes sure the stories of breast cancer survivors are told. In their own words, the survivors tell the story of shock, depression, struggle, victory and the necessary losses that lead to a richer, deeper and more rewarding life than any could have originally imagine happening.

The hospital began this year's Breast Cancer Awareness Month with a panel discussion. Shirley Carpenter, a registered nurse here at Naval Hospital Camp Pendleton, (NHCP), organized the event with the support of Candace Archambault. Dorothy Reigel, Lt.Col. Yvonne Devine, United States Marine Corps, Dorothy Foster, Cmdr. Tamara Hoover, Medical

*Maureen Mayssonnet, at the Annual Breast Health Care for Life Fashion Show. She is a returning participant to the annual event, which draws attention to issues of breast health and in particular, the early detection of breast cancer. "The bottom line for me was just don't be afraid of the unknown - just do what you need to do," Mayssonnet said.*

Corps, United States Navy along with Ann Severy and Kelly McCleary all shared their stories of survival. Their stories describe the stormy emotions from disbelief, denial and despair to joy, acceptance, hope and the deep belief that faith will see them through.

"My body may quit on me, but I intend to live fully!" said Devine. She has used the time since her diagnosis in January 2001, to reassess her life. She's been a Marine Officer for 23 years, and realizes that fighting and beating cancer may mean some changes. For example, she is learning to adapt her physical fitness program to accommodate the restrictions of

her surgery and reconstruction. Maintaining her balance with the positive attitude of a Marine, she has joined the choir and is learning to play the piano. She focuses on what she can do. Last August she got married. Her new husband stood by her even before they were married.

Dorothy Foster, an organist at Edson Range Chapel, staff member in Patient Administration and volunteer organist and vocalist, spoke of her experiences of living free of cancer since 1993. She talked about her husband surviving cancer. Foster believes personal faith sustains her. Christian hymns frame her experience: "Ain't God Time to Die" and "He's



Photo By HMM3 Hiddalia McCree

Never Failed Me Yet”.

Hoover is grateful for each day. “Everyday is a gift, that’s why it’s called the present,” She said. Hoover related her experience of feeling trapped, overwhelmed and not being able to do it all. Surviving cancer is teaching her to let go of the things that she used to believe defined herself and exchanging that for activities that promote well being and are directed to her purpose in life. Twenty-one months ago a staff member gave her an opportunity of a lifetime by offering a chance to adopt a child.

Severy, former Public Affairs Officer at NHCP, began this new way of life in 1991. “It’s not what happens to us that matters. It’s what we do about what happens to us that matters. Happiness is an inside job. Right now be as happy as you can be,” she said. Relating the experience of a false positive diagnosis, she spoke of reentering the deep well of depression. When it turned out that she was still cancer free she realized that the depression was a waste of energy. For her, life is an on going journey.

McCleary could not overemphasize the importance of early detection. “Regardless of your family history, get your mammography,” she said. McCleary received her diagnosis in January of this year followed by surgery in February.

Reigel, our young at heart octogenarian, expressed her appreciation for all the care received at the hospital. Widowed in 1997 after 54 years of marriage, a year later she was diagnosed with breast cancer. Her first words after receiving diagnosis were directed to her husband. In a prayerful moment, words of reassurance came, “Don’t panic.” Four years later she remains a voice of calm reassurance to those who know and love her. She’s a great-grandmother, second award.



Photo By HM3 Hidalia McCre

HM2 Brian W. Thompson escorts Dorothy Reigel at the Annual Breast Health Care for Life Fashion Show.

These breast cancer survivors’ stories speak of how to live life to the fullest regardless of any medical condition. For further reading, the panelists recommend: *The Breast Book* by Susan Love. ❀

# TRICARE Outpatient Clinic Wins Big

By HM2 (FMF) Jason Piniol  
Headquarters, Branch Medical  
Clinics

“We will be the preferred source and partner for health solutions.” That is the vision that Naval Hospital Camp Pendleton, Commanding Officer, Capt. William Heroman has given to us. This month that vision has become reality for our very own TRICARE Outpatient Clinic, (T.O.C.). The T.O.C., located in Oceanside, is the proud recipient of San Diego’s “Best Of” Award, being voted as one of the best clinics in San

Diego.

During the months of May and June, the city of San Diego got the chance to nominate and vote on 240 different categories ranging from restaurants to health care facilities in the San Diego area, on [www.bestof.com](http://www.bestof.com), a community-based web site that allows San Diegans the chance to choose and view who the best of the best is, along with contact information and special offers for that particular business. In San Diego alone, 660,473 consumer votes were gathered. Over 80,000 businesses were on the initial survey, with only 6,344 businesses earning the title of “Best Of” in their respective category. In the Medical Clinic category, 36 clinics made the cut, earning the right to be called “THE BEST”. The T.O.C. at Balboa also won the award

freeway in Oceanside. Open since April 1, 1999, the T.O.C. provides services ranging from a Family Practice Clinic to mammography, as well as providing laboratory and pharmacy capabilities. Seeing an average of 110 patients a day, both active-duty dependents and retirees, the TOC functions seven days a week making access to health care even easier. Jim Lajoie, project manager for the T.O.C., says that excellent service, being in a geographically convenient location, and the ability to be seen, in most cases the same day that an appointment is made are some of the advantages that puts the TOC above the rest. Dedication to excellent patient care shows that the Tricare Outpatient Clinic- Oceanside is “a preferred source and partner for health care solutions.”✿

The Tricare Outpatient Clinic is located on El Camino Real off the 78



Photo By JO1 Robert M. Dylowski

The Command Ombudsman, Loren A. Moreno is pictured left next to LCDR Susan E. Bellon, the command’s Staff Judge Advocate, during a recent family readiness brief.

## NHCP Ombudsman Family Readiness Brief

Naval Hospital Camp Pendleton’s Ombudsman, Loren A. Moreno, conducted a Command Family Readiness Brief pulling together most of the resources available to family members. Moreno said she plans to offer the event annually. “I just want to let every one know that I’m here to help,” she said. The brief provided an extensive variety of information - everything from Ameri-

can Red Cross, local community support representatives and more. The Ombudsman is a valuable resource for family members in finding solutions to the many unique problems that can occur. Though not a social worker or a counselor, the ombudsman is able to help families navigate through channels and direct them to available support and assistance. You can contact The Command Ombudsman by e-mail [lamoreno@cpn.med.navy.mil](mailto:lamoreno@cpn.med.navy.mil) or by pager: (760) 370-1971.✿

# Knowledge is Power: Spot Illegal Drug Use

By HMC (FMF) Matthew Lubold, DAPA

**M**ethamphetamine, or “Meth” as it is more commonly called, is a powerful stimulant that affects the central nervous system. It can be smoked, injected, snorted or ingested, and ranges in color from white or yellow to dark brown. It is most commonly distributed in powdered form resembling sugar or in a rock form called “ice” or “crank.” Street names include chalk, crystal, glass, sketch, speed, west coast, yellow bam, go-fast, etc.

Meth use is widely associated with the so-called designer drugs Ecstasy, GHB, Ketamine, etc. Users are initially attracted to the drug because of its euphoric effects and its billing as a “safe” drug. Meth produces an intense rush almost instantly when snorted or injected, and a rush in five minutes when ingested orally. The intense high results from the release of high levels of dopamine into the section of the brain that controls feelings of pleasure.

The effects of Meth can last up to 12 hours marked by a sudden crash and the user falling into deep sleep. Side effects of Meth include convulsions, high body temperature, cardiac arrhythmia, stomach cramps and uncontrolled shaking. Long-term abuse may result in

addiction, violent behavior, anxiety, insomnia, paranoia, mood swings, hallucinations, and delusions. As with many drugs, the user quickly develops a tolerance and will require larger amounts to achieve the desired effects. Users are often

“I urge everyone to talk to the people you love, especially your children, about drugs and their effects.”

HMC (FMF) Matthew Lubold, NHCP Drug and Alcohol Program Advisor

characterized by poor hygiene, a gaunt, pale complexion, and may have sores on their body from scratching at “crank bugs.” Crank bugs are a common delusion that bugs are crawling under their skin. Long-term use also damages the dopamine producing cells of the brain, making it difficult for users to feel any pleasure without the drug.

Due to its popularity and widespread availability, Meth has

increased in price over the last eight years. In 1995, a pound cost from \$3,000 to \$20,000. In 1997, an ounce cost from \$400 to \$2,800; and a gram ranged from \$37 to \$200. Persons convicted of trafficking this schedule II drug, face five to 20 years and up to \$10 million in fines—depending on the circumstances of the crime. The majority of Meth is supplied from West Coast and Mexican drug organizations based in Tijuana, San Diego County and Riverside County. It is created in clandestine, mobile labs using pseudoephedrine, lye, engine cleaner, and household cleaning products. The cooking process also creates a toxic waste, which is often dumped into storm drains or into shallow pits next to the drug labs. Labs can be found in hotels, storage facilities, mobile homes and RV’s.

I urge everyone to talk to the people you love, especially your children, about drugs and their effects.

If you need more information, please contact the Command Drug and Alcohol Program Adviser at 725-1470. Additional information is available at [www.whitehousedrugpolicy.gov](http://www.whitehousedrugpolicy.gov).



Photo By LT Nicolette A. Leflore

**H**N Terry Wagner and HA Keohi Laikupu from 21 Area Branch Medical Clinic took first place in the Marine Corps Base Camp Pendleton Micro-reality Radio Control Racing Series preliminaries last July and second place in the base finals last October winning a trophy, medals and a cash prize from MCCS for use by their sponsoring clinic.