

# NHCP Newsletter

Serving those who serve, we care

Vol. 8, Issue 5

Serving the Naval Hospital Camp Pendleton community

Fall 2001



By **Cmdr. Ted Robinson**  
**Kimberly Prato**

**A**nthrax has become the focus of media and public concern due to recent events. It is critical to keep these events in perspective and look at anthrax as a largely potential threat, not an urgent one. Risk is a relative measure. Vehicle accidents kill ~50,000 every year or 1 of 5000 people. Lightning kills 200+ or about 1 of one million. While being

attacked at home and work is unsettling or even scary, we must keep in mind the risk is very low. Envelopes and packages are a very inefficient mode of distribution if the intent was to make ill or kill large numbers of people. The intent may be just to induce panic, shut down the postal system and distract the FBI and law enforcement from what they really need to be doing.

The symptoms of anthrax look very similar to those of influenza, Chickenpox, common cold, pneumonia, Mononucleosis (mono) and many others. Thus the symptoms are not very specific. The only differentiating factor for many of these diseases is history. The only factor that would lead one to test for anthrax would be a potential history of exposure. Without that, it is very unlikely anyone would have a positive test.

Taking Ciprofloxacin (Cipro) or any antibiotic for 60 days can lead to severe side effects. If antibiotics are needed, doxycycline is as good as Ciprofloxacin. If the anthrax can be cultured and is sensitive to penicillin (99%+), amoxicillin or Penicillin G should be used. If you have a potential anthrax exposure, the risk is worth it. If you do not, it is dangerous.

Your primary care manager (PCM) has evidence-based guidelines and is prepared to discuss an appropriate treatment plan with you. Military and TRICARE physicians will not prescribe "just in case" antibiotics. Naval Hospital Camp Pendleton is committed to provide you and your family members with the highest level

## Surgeon General Visits



See Page Three.

of care.

For Further Information Contact:  
Clinical Epidemiology  
Phone: 725-1567

**Centers for Disease  
Control and Prevention  
Anthrax Information Sites**  
<http://www.cdc.gov/>

The Centers for Disease Control and Prevention (CDC) is recognized as the lead federal agency for protecting the health and safety of people - at home and abroad, providing credible information to enhance health decisions, and promoting health

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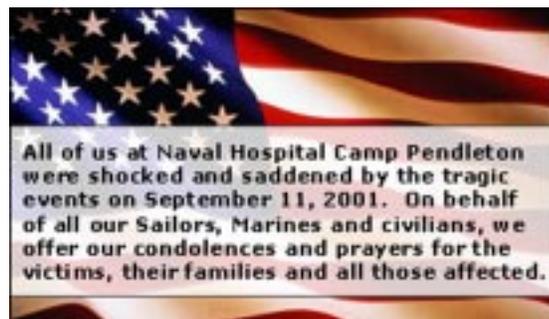
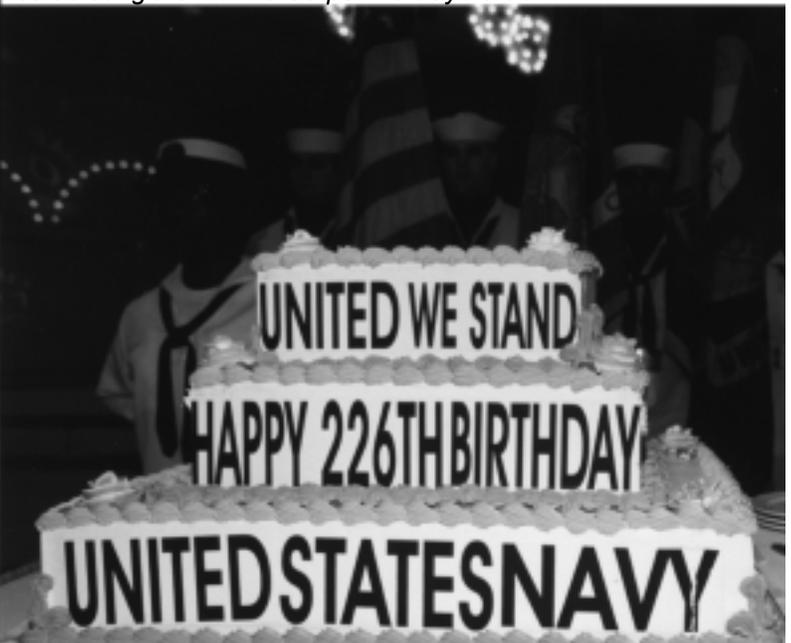


Photo By HM2 Seann F. Farrell



## Navy and Marine Corps Celebrate 226 Years

Left, during this year's Navy Ball a Sailor places salt at the MIA/POW Table symbolizing the tears that are shed for those service members missing in action. Top, Capt. William M. Heroman, Naval Hospital Camp Pendleton's Commanding Officer, gives a piece of cake to Maj. Gen. David F. Bice, Camp Pendleton's Commanding officer, celebrating the Marine Corps Birthday here.



Petty Officer 3rd Class Laura C. Wymer is the youngest Sailor at This year's Navy Ball. Traditionally the Youngest and oldest Sailors receive a piece of cake during the cake cutting ceremony.

### NHCP NEWSLETTER

[www.eNHCP.com](http://www.eNHCP.com)

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Executive Officer  
CAPT M. P. Hogan, NC  
Public Affairs Officer  
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Deputy PAO  
JO1 Robert M. Dylewski



**Maureen P. Hogan**  
**CAPT NC USN**  
**Biography**

**C**aptain Maureen P. Hogan currently serves as the Executive Officer at Naval Hospital Camp Pendleton California. She reported in from the TRICARE Europe Office in Sembach, Germany. There she was recognized for her work with a number of innovative projects to include the Women Infants and Children (WIC) Overseas Program, and the TRICARE Family Member Dental Program in Europe.

CAPT Hogan was born in Buffalo, New York, but spent her formative years in Jacksonville, Florida. Her first assignment was at Naval Hospital Charleston South Carolina. Subsequent duty stations include Naval Hospital Camp LeJeune North Carolina, Naval Medical Clinic Quantico Virginia, Naval Hospital Keflavick Iceland, Naval Regional Medical Center Bethesda Maryland, and Naval Medical Center San Diego. She has had an extensive variety of nursing experiences, to include emergency room nursing, medical-surgical nursing and numerous tours in the branch medical clinics.

Captain Hogan holds a M.S.N in Nursing Administration/Ambulatory Care from Old Dominion University, a B.S.N from Catholic University of America, and a diploma in nursing from Providence School of Nursing. She has co-authored several articles to include *Application of a Prototype for Developing A Tube Gastrostomy Clinical Pathway*, *Actualizing the Vision of Interdisciplinary Team Nursing*, *Strategic Planning*,

*Developing a Foundation, and Tuberculosis Clinical Pathways*. She has received the Defense Meritorious Service Medal, Meritorious Service Medal, Navy Commendation Medal (1 gold star) and Navy Achievement Medal. She is a member of the Academy of Health Care Executives and Sigma Theta Tau.

Captain Hogan is married to Colonel-ret John J. Hogan USMC. They have a daughter Lauren and a step-daughter Kerry. ❁



## **Navy Surgeon General tours Naval Hospital Camp Pendleton**

**V**ice Admiral Michael L. Cowan, Surgeon General of the Navy and Chief, Bureau of Medicine and Surgery visits with Sailors and civilians on Oct. 3.

The Admiral and Master Chief Petty Officer Mark Weldon, Fleet Master Chief for the Navy Hospital Corps addressed Sailors and civilians in the clinical assembly here, telling of his vision and future role of the U.S. Navy in the aftermath of the events of Sept. 11th.

Vice Admiral Cowan began his Navy career over 30 years ago and was appointed to the title of Surgeon General of the Navy on Aug. 10. ❁

# Department in the Spotlight ... Case Management

## *Public Affairs Office*

The NHCP Case Management (CM) program is customized to fit the organizational structure, mission, vision, established programs and population demographics of the command.

This program is directed towards assisting the patient in achieving an optimal level of health status and function by facilitating and coordinating the timely and most appropriate utilization of health services. Coordination of CM activities is accomplished through the integrated efforts of three social workers and three registered nurses.

The Social Work-Registered Nurse CM Team established Jan 1, is assigned to each primary care manager (PCM) site and inpatient care area such as Internal Medicine, Ortho, Surgery, Urology, Family Practice, branch medical clinics, Non-naval, OB/GYN and Pediatrics. Referrals to the area CM Team are through providers, self-referral, or civilian military treatment facility. The team focuses on limiting the complexity of health care experience for the patient by facilitating communication and collaboration among health care team members, patient/family members and community resources

and bringing active duty personnel back into the military medical system. The areas addressed are:

Discharge planning/Home follow-up (rehab, skilled nursing facility), OB Case Load: Single AD, DD, previous abuse, other special circumstances.

Pediatrics: Long term chronic illness and inpatient admissions are reviewed daily for CM consideration, education of nursing staff, record review greater than 14 visits per year, and referrals to community resources.

CM's interface and facilitate with the multidisciplinary team providing a seamless continuum of care and optimizing healthcare resources and customer satisfaction. Cases run the gamut of onetime referrals to daily, weekly and monthly interfacing with patients at outpatient appointments, telephonic case management, daily bedside visits, or management of active duty in a civilian hospital.

Recently two Medicare eligible patients needed IV antibiotics, which Medicare does not cover. NHCP provided the medication and IV equipment to a local home health agency with a cost savings of \$130,000. Another example of innovative use of a community resource was a transfer of an active duty member from a community hospital to an alternate level of care affecting a cost savings of \$27,000.

An Elders survey was conducted with the FMC, TOC, and IMC on patients 65 years of age and older . It was found that 20% of this patient population with chronic illnesses would benefit from case management.

Currently, CM is the project lead for a project involving the development of a web-based case management database for use throughout Region Nine. This will improve tracking, documentation, and inter/intra facility communication and coordination of health care services. ✿



### ***“Anthrax Information For Patients” Cont. from Page 1.***

***The Anthrax Vaccine Immunization Program (AVIP) web site***

***[http://www.anthrax.osd.mil/HTML\\_interface/default.html](http://www.anthrax.osd.mil/HTML_interface/default.html)***

The Anthrax Vaccine Immunization Program (AVIP) web site is provided as a public service by the Office of the Assistant Secretary of Defense-Public Affairs and the Anthrax Vaccine Immunization Program Agency. ✿

# News Briefs ...

## Naval Hospital Color Guard

The NHCP Color Guard is looking for motivated individuals to become members of the Color Guard. Duties include morning colors and parading of the colors for different types of ceremonies. If you are interested, please contact Petty Officer 2nd Class Janic at 725-1233/1270.

## Security Reminder

DoD Decals must be removed from vehicles prior to selling. The following information is provided to heighten awareness of the potential for attempts to gain unauthorized access to military installations. The information was obtained from the FBI concerning incidents related to vehicles with DoD decals.

Early Sept.: An individual at the Pentagon was approached about selling his car for \$3000. The car had a DoD sticker.

Sept. 8: Middle Eastern males approached an individual to sell her car for \$6000. She was not advertising her car for sale. The car had a DoD sticker.

Sept. 11: Baltimore car with a DoD sticker and Middle Eastern owner missing.

Sept. 22: In Alexandria, VA, a U.S. citizen took their car in for repairs. The Pakistani person working on the car never returned the vehicle. The vehicle had a DoD decal.

This snapshot represents

possible pre-operation acquisition of vehicles to transport a vehicle improvised with explosive devices.

Report any suspicious activity to security.

If you are planning to sell your car, remove your DoD sticker, even if the individual says they are a government employee or another military member.

## Presidential Prayer Team

A newly formed Presidential Prayer Team is enlisting Americans to pray for President Bush, his advisors, the Cabinet, and the USA. The team, funded by a private foundation, looks for 1% of the American population (2.8 million people) to pray.

There is no membership fee. Team members' names will be presented to the President; they'll also receive a window decal and regular email updates on the President's daily needs.

To register your commitment call 1-800-295-1235 or visit: [www.presidentialprayerteam.org](http://www.presidentialprayerteam.org).

## Naval Hospital Accredited for another three

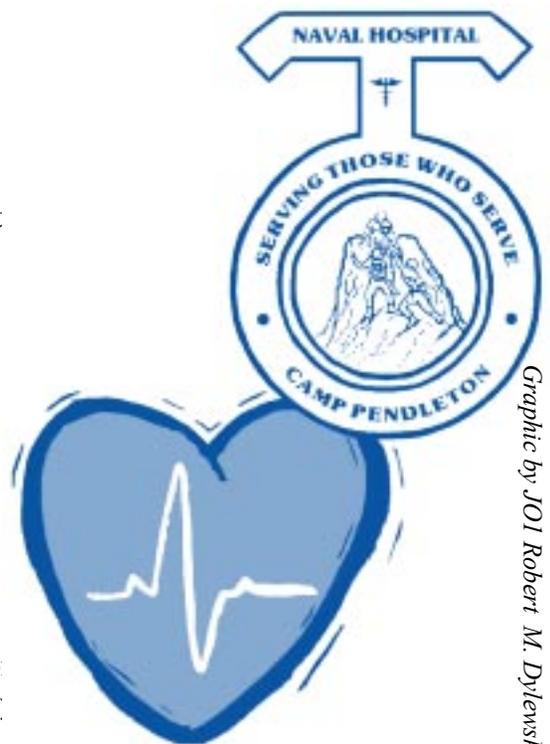
Naval Hospital Camp Pendleton passed its most recent Joint Commission on Accreditation of Healthcare Organizations survey.

The Medical Inspector General inspected the hospital and JCAHO surveyed the hospital in August 2001 and accredited the hospital for another three years.

Both inspections went well for the command and outlying clinics.

## New Pharmacy At Pacific Plaza

A new satellite pharmacy of Naval Hospital Camp Pendleton (NHCP) had a ribbon cutting ceremony on November 19 at 10:00 a.m. at Pacific Plaza. The Pacific Plaza Pharmacy celebrated its grand opening with cake and refreshments. The new pharmacy is opening in part by a response to patients' continued requests to be able to receive prescriptions closer to the front gate. The willingness and support of Marine Corps Base Camp Pendleton has made this endeavor possible. Patients and beneficiaries of NHCP will now be able to receive medications in the same plaza as the commissary, a plus for many active duty families and retirees. ✨



Graphic by JO1 Robert M. Dylewski

# Career Counselor Hotline

By HMC (SW/FMF) Gary P. Henkel, CCC



**HMC (SW/FMF) Gary P. Henkel  
Command Career Counselor**

If you are transferring in 12 months, asking yourself where to go and what to do, then perhaps a “C” school is the answer. Attending “C” school is one of the best options readily available to you. This will allow you to learn a new trade and at the same time enhance your naval career. Successful completion of a “C” school provides you the opportunity to be assigned to a unique duty station and to have a challenging and rewarding job. In addition, a qualified “C” school graduate receives up to \$45,000 in a reenlistment bonus. Here are the hot fill “C” schools that may be of your interest:

- 8406 - Aerospace Medical Technician
- 8407 - Radiation Health Technician
- 8409 - Aviation Physiology Technician
- 8425 - Surface Force Independent Duty Corpsman
- 8427 - FMF Reconnaissance Corpsman
- 8432 - Preventive Medicine Technician
- 8463 - Optician Technician
- 8478 - Advanced Biomedical Technician
- 8482 - Pharmacy Technician
- 8506 - Advanced Laboratory Technician

Applicants must submit application package containing the following information:

- Commanding officer endorsement
- NAVPERS 1306/7 signed by both the member and the commanding officer
- Service Record pages 3,4,5,9
- Three most recent evaluations, at least one must be from your current command. The member cannot have any marks of 2.0 or below and cannot have received a non judicial punishment within the last 36 months.
- Copy of Physical Rediness Training folder, member must have passed two most recent consecutive PRTs and currently be within standards
- At least two letters of recommendation.

For further information, please come and visit us at six North or call 725-1523. Information on “C” schools is also available through the Internet at [www.bupers.navy.mil](http://www.bupers.navy.mil) ☼

## Chaplain's

## Food For Thought



**Lt. Wiliam Middleton, Chaplain  
Pastoral Care Department**

### NHCP Welcomes New Chaplain

Lieutenant Middleton graduated from the University of Chicago in 1992 with a Master of Divinity degree and a Master of Arts from the School of Social Service Administration. After graduation, he worked as a licensed social worker at the University of Chicago Hospitals.

In 1995, Chaplain Middleton transferred from the Army Reserve, where he had served for 14 years, and accepted an active duty commission in the US Navy. After eight weeks at Chaplain's School in Newport, RI, he reported to 1<sup>st</sup> Marine Division, Camp Pendleton, California. Upon reporting, Chaplain Middleton was assigned to 3<sup>rd</sup> Battalion 1<sup>st</sup> Marines as the Battalion Chaplain. He served there for two years, which included a Westpac deployment. Chaplain Middleton finished his time at Division as the Chaplain for 2<sup>nd</sup> Battalion 11<sup>th</sup> Marines.

In 1998, LT Middleton reported to USS Denver (LPD 9) as the ship's chaplain. The time on the Denver was productive and active for the crew. As the solo chaplain assigned to Denver, Lt. Middleton ministered to over 900 Marines and sailors during Westpac 2000. In addition to the traditional chaplain roles of worship leader and counselor, he organized an ambitious PACE education program for over 500 service members onboard. Acting in another chaplain role, Lt. Middleton organized and led six community relations programs on the deployment, in places

from East Timor to Thailand.

In June 2001, Chaplain Middleton reported to Naval Hospital, Camp Pendleton. He assumed responsibility of the 4<sup>th</sup> floor inpatients and the in-house clinics. Chaplain Middleton is excited to join the dynamic team of chaplains, religious program specialists, civilians and volunteers in the Pastoral Care Department of the hospital. The department offers five weekly worship services, volunteer opportunities in the community, and pastoral counseling for staff, families and patients.

During his career, Chaplain Middleton has been awarded the Navy Commendation Medal, the Navy Achievement Medal twice, the Army Reserve Achievement Medal three times, the Outstanding Military Volunteer Service Medal, and the Humanitarian Service Medal. ✪

## MPMD Corner

By HMCS (FMF) Willie L. Seraspe, MPMD



**HMCS (FMF) Willie L. Seraspe  
Head of Military Personnel  
Management Department**

Members with dependents can now be allowed to continue to receive Basic Allowance for Housing, (BAH), based on the old permanent duty station rate. NAVADMIN 230/01 announced this change to the BAH policy. The following criteria must be met to be eligible:

1. The member executed a no-cost or low-cost close proximity move upon Permanent Change of Station (PCS).
2. There was no shipment of household goods authorized.
3. No change in residence was made.
4. The dependents live in a military housing area that is outside the member's old permanent duty station.

SECNAVINST 7220.82 requires personnel to request a BAH waiver via Navy Personnel Command if they wish to draw BAH at the location other than the permanent duty station.

NAVADMIN 258/01 recently announced the Navy's

implementation of the Thrift Savings Plan, (TSP), for Uniformed Service Members. TSP is a Federal Government-sponsored retirement savings and investment plan. The purpose of the TSP is to provide retirement income. As part of the National Defense Authorization Act for Fiscal Year 2001 (Public Law 106-38), a provision extending participation to the uniformed services was legislated. Previously, the TSP was only available to Federal civilian employees. Uniformed service members are currently able to enroll in the TSP during a special open season beginning 09OCT01 through 31JAN02. Personnel enrolling during the initial open season will have contributions deducted from their paychecks in January or February - depending upon when their TSP Election Form is received. Personnel unable to enroll during the initial open season may elect to enroll in either of the two open seasons held each year. Currently the open seasons are May 15 through July 31 and November 15 through January 31. TSP is a voluntary election by the service member and can be accomplished by submitting the Election Form (TSP-U-1) to your local payroll office. For NHCP Officers - remit your form directly to PSD's Officer Records. For NHCP enlisted - remit directly to your respective pay clerks in the main personnel support detachment, (PSD), office. TSP Election forms may be obtained off the program's website or from PSD.

You can find out more about the program by picking up a Thrift Savings Plan booklet from the Crew's Library or visit the TSP Website at <http://www.tsp.gov/>.

Servicemember's Group Life Insurance, (SGLI), Family Coverage Program is a new program that extends term life insurance coverage to spouses and children of uniformed service members at a reasonable cost. This new military benefit provides a way for members to insure their loved ones and add to the overall financial health of their families while at the same providing added peace of mind to service members while they are deployed. Maximum coverage is \$100,000 for a spouse (premiums will depend on the amount of coverage selected and the age of the spouse). Each dependent child is automatically covered in the amount of \$10,000 at no cost to the member. Program implementation is effective as of 1 Nov 01. Service members must be enrolled in SGLI to be eligible for family member coverage. To decline or decrease spousal coverage, a service member must elect in writing not to insure the spouse by completing SGLV 8286A; otherwise, maximum spousal coverage will be automatic. Forms are available at [www.insurance.va.gov](http://www.insurance.va.gov). NAVADMIN 281/01 contains additional information regarding this new program.

Military Personnel Management Department continues to provide the staff with information and guidance in the Navy's Quality of Life initiatives, as we support the Navy Medicine's new motto, "Charlie Papa, steaming to assist." ✪

# ACCOLADES



HM2 Aaron Seibert, Navy Achievement Medal  
HM2 Jose Jovellanos, Navy Achievement Medal  
HM3 Brenda Banuelos, Navy Achievement Medal  
HM1 David Jurden, Navy Achievement Medal



Lt. Cmdr. Eileen Fitzgerald, Navy Commendation  
Lt. Teresa Bueche, Navy Commendation



HM3 Mellisa Briscoe, Letter Of Appreciation

# ACCOLADES



HM3 Dempsey Tomblin, Certificate Of Commendation  
HN Jerel Davis, Navy Marine Corps Achievement Medal  
Lt. Christopher Hansen, Navy Commendation



HM1 John Fink, Letter Of Appreciation  
HM3 Vincent Ramos, Junior Sailor Of the Quarter  
HM3 Melissa Ellis, Good conduct  
DT3 Charles Bumbard, Junior Sailor Of the Quarter  
HM1 Trudy Hoiland, Navy Marine Corps Achievement Medal  
HM2 William Janic, Senior Sailor Of the Quarter  
Capt. Maureen Hogan, Meritorious Service Medal  
Lt. Lenora Young, Navy Marine Corps Achievement Medal  
Lt. Susanne Blankenbaker, Navy Marine Corps Achievement  
Joe Gallagher, Letter Of Appreciation

# ACCOLADES



Lt.Cmdr. Billy McCarthy, Navy Marine Corps Achievement Medal  
 HM3Crisann Kennedy, Good Conduct  
 Lt.Cmdr. Lee Fordyce, Navy Commendation  
 HM3 Kathleen Carrel, Certificate Of Commendation  
 Barbara Harvey 25 Years of Government Service  
 Michelle Mitchell Letter Of Appreciation  
 Vicki Miller Letter Of Appreciation



Cmdr. Lori Carlson, Navy Commendation  
 HN Leander Shabazz, Navy Commendatio  
 Lt. Gregory Hohl, Navy Marin Corps Achievment Medal  
 DK1 Michael Blankers, Certificate of Commendation  
 SM1 Servando Trevino, Certificate of Commendation  
 HM3 Norman Delacruz, Certificate of Commendation  
 HN Sandra Lwee, Certificate of Commendation  
 RP3 Delaina Bennett, Good Conduct  
 HM1 Matthew Lubold, Letter Of Appreciation  
 Mel Blankers, Certificate Of Achievement

# Celebrating Diversity WITH



Graphic by JO1 Robert M. Dylewski



HM1 Jesse Saenz helps a young child get a swing at a pinata in hopes of getting to the prizes that await inside. Pinatas are often used in Latin-American festivities.



Photos By HM2 Sean F. Farrell

Capt. Maureen P. Hogan, Naval Hospital's Executive Officer takes a turn at the pinata. HN Kim Dang introduces Vietnamese dishes to Capt. Jane M. Morgan. Every year the command enjoys a day of sights, sounds and food from different cultural backgrounds of hospital staff.

# Welcome Aboard

RPSN Aaron Vanarsdale  
HR Jedediah Frazier  
HN Michael Rodriguez  
HA Matthew Mazur  
HM3 Jeffrey Aichelman  
HM3 Joseph Ocampo  
HM3 Ian Castro  
HN Sergio Gonzalez  
HN Ryan Cason  
HM3 Todd Smith  
HM3 Michael Cuellar  
HM3 John Conyers  
HR Alvaro Gonzalez  
HN Omar Jenkins  
HN Eugene Khimich  
HN Carl Schmahl  
DT2 Ralph Nuno  
DA Ronnie Singleton  
HA Brandi Woodruff  
HA Lorch Toloumu  
DA Shane Hudson  
DA Keith Gerger  
DN Aziz Sulieman  
HA Jennifer Ross  
HN David Lujan  
HA Brian Jewett  
HA John Schmutz  
HN Pecro Arreaga  
HN Abraham Abakpa  
HR Tanner Spanaio  
HA Nichole Bishop  
HA Carlos Ochoa  
HM2 Loren Lagang  
DR Ray Jackson  
HR Charles Smith  
HM3 Susan Lynge  
HA Rachel Valdez  
HR Ryan Eddy  
HN Danell Dumas  
HN Christopher Demetrulias  
HN Carl Collins  
HR Jeannine Cora  
HN Vincent Kucera  
HN Jose Ramirez-sanchez  
HM3 Claudia Castillo  
HN Clifford Gabriel  
HA Cody Jones  
HN Sienna Hollins  
DR Christina Tankersley

HA Shane Page  
HN Tyler Roark  
HN Jason Gordon  
HA Timothy Temple  
HR Cristal Leslie  
HN Romeo Galamgam  
HA Irwin Escarrilla  
HA John Barrington  
HR Alnie Salazar  
HN Jeremias Leonard Milla  
HA Justin Vendola  
HN Robert Schoultz Iii  
HR Jorge Gilperez  
HR Luke Drown  
HR Darren Hoglund  
HA Franklin Phelps  
HN Mickenzie Gibson  
HN Sheila Digregorio  
HN Saul Vazquez  
HN Deontanellie Wheeler  
HA Alfonso Compres  
HN Richard Schultz  
HA Amanda Pollard  
HA Gary Carr  
HR Aric Lee  
HR Yeung Keung  
HN Casey Wheeler  
HN Lucero Villasenor Miranda  
HA Anthony Mesa  
HN Johnny Vasquez  
HR Nathaniel Marquis Jr.  
HR Kenneth Davenport  
GS-5 Leslie Patterson  
GS-9 Teresita Tacliad  
GS-5 Vivian Misa  
GS-4 Andrea Cruz  
WG-2 Melissa Moonblatt  
GS-12 Philip Boehme  
GS-12 Christina Inouye  
GS-9 William Holloway  
GS-6 John Ehrig, Jr.  
GS-5 Denton Hudman  
GS-5 Penny Long  
GS-12 Jean Vehanen  
GS-6 Teresa Salas  
GS-9 Barbara Balwinski  
GS-4 Filomena White  
GS-11 Kaishawn Mcduffie  
WG-2 Ana Rios  
WG-2 Earl Chandler  
HM3 Kathleen Carrell  
HN Katherine Dunaway  
HN Jerry Diemer  
HM3 Shawn West

HN Siv Lim  
HM3 Shane Henry  
DK1 Robert Smith  
MS3 Henry Owens, Jr  
HM2 Jude Rosario  
HN M. Cristina Dereza  
HM2 Julie Yow  
HM2 Bryan Repil  
MA1 Gregory Johnson  
HN Erick Gonzalez-marroquin  
HM3 Alwandus Davis  
HM3 Tamyka Richardson  
HM3 David Moreno  
HM3 Timothy Case  
HM3 Joseph Herrera  
HM3 Michael Bundfson  
HR Christy-anna Pohlmann  
HN Edith Arindunque  
MS1 Jeoffre Jacob  
MS3 Danny Craig  
SH3 Walter Hawkins  
HM3 Johnathan Bradford  
HM1 Leander Shabazz  
HA Crystal Garcia  
HM3 James Rillo  
HM2 James Hendrix  
HM3 Michael Hall  
HMC Chester Minkowski  
MS1 Anthony Brown  
HM3 Keith Eten  
HM1 Nelson Figueroa  
HMC James Vukovich  
SH1 Alonzo Moore  
HN Ramil Rodriguez  
HN Cade Ullerich  
HA Mark Allgyer  
HM3 John Mui  
HM2 Donald Johnson  
MSC Bernardo Gentil  
HM3 Richard Nevarez  
HN Jerween Viola  
HN Anthony Hernandez  
HM3 James Oglesby  
HN Jonathon Bowan  
HN Leanne Groehler  
HM1 Kory Bakley  
HN Pamela Zuasola Gee  
HA Joshua Weed  
Ens. Ray Tajalle  
Lt.Cmdr. Eileen Fitzgerald  
Lt. Erik Bylund  
Lt. Trent Pansze  
Lt.Cmdr. Kimberly Roman  
Lt. Cmdr. Jeffrey Cavendish

Lt. Cmdr. Michael Polizzotto  
Lt. Michelle Snyder  
Lt. Cmdr. Richard Ott  
Lt. Cmdr. Michael Rundell  
Lt. Christopher Hansen  
Capt. William Nash  
Lt. Lori Vanscoy  
Lt. Michelle Arnold  
Lt. John Arnold  
Ens. Lena Stephens  
Lt. Karen Strickland  
Lt. Rebecca Kiser  
Cdr. Robert Brinsko  
Ens. Marlone Paas  
Ens. George Brand Ii  
Lt. Cmdr. Dana Stuart  
Lt.jg. Detrik Harmeyer  
Lt. David Vaught  
Lt. Laura Koniver  
Lt. Cmdr. Cinder Potter  
Lt. Cmdr. John Love  
Lt.Cmdr. Billy Mccarthy  
Lt. Debra Ruyle  
Ens. Malissa Wickershame  
Lt. Sonja Penson  
Lt. Thieuha Hoang  
Lt. Katherine Raymond  
Ens. John Henley  
Lt. Maria Tan  
Cmdr. Tamara Hoover  
Ens. Lonetta Canales  
Lt.Cmdr. Pamela Plotner  
Lt. Cmdr. Michael Akin  
Lt.Cmdr. Renee' Kilmer  
Lt.Cmdr. Paul Bunge  
Capt. Maureen Hogan  
Lt. Samira Meymand  
Lt. Pam Braun  
Lt.Cmdr. Ann Rajewski  
Lt. Chad Betz  
Lt. Andrew Varga  
Lt. Mary Dandurand  
Lt. David Jones  
Lt.Cmdr. Lee Fordyce  
Lt.Cmdr. Nalan Narine  
Ens. Diane Rauth  
Lt. William Land  
Oth. Felicia Kruel  
Oth. Cortleigh Muhls  
Oth. Guadalupe Ignacio  
Oth. Laine Setran  
Oth. Cindy Snyder  
Oth. Latoya Palmer  
Oth. Jennifer Schmidt

Con. Melissa Hunt  
Con. Dorotea Bowman  
Con. Tricia Doughty  
Con. Monique Jones  
Con. Angela Dominquez  
Con. Melissa Wick  
Con. Carmen Castro  
Con. Zarah Magtanong  
Con. Coryn Mayerson  
Con. Gracie Contreras  
Con. Bienvendio Alona Jr.  
Con. Sudha Praba

## Farewell

HN Thomas Balka  
HN Richard Buchan  
HN Gregory Delinois  
HN Shannon Hamby  
HM3 Elmar Oca  
HN Frederick Williams Ii  
HN Aaron Lopez  
HN Aristotle Torres  
HM1 Romulo Borrero  
IT2 Diane Kummings  
Lt. Jeremy Hawker  
Lt.jg. Detrik Harmeyer  
Lt. Mary Sutton  
Lt.jg. Mechele Chau  
HM3 Jeanne Beyerle  
HMC Ferdinand Cosico  
Lt. Cmdr. Todd May  
HR Johnathan Akers  
HA Gabriela Aleman  
HR Lianna Allen  
DA Craig Anderson  
HA David Andiano  
DN Jem Arinduque  
HR Samuel Arroyo Iii  
HA Kenneth Atkinson  
HA Rogelio Ayala  
HA Joseph Barnhill  
HR Kevin Bartolata  
HN Geraldine Bazile  
HR Melissa Boyd  
HA J. L. Bellow  
HR Paul Browne  
HA Don Browning  
HR Joshua Bunker  
HR Ian Byrne  
DA Joy Clever  
DR Alberto Contreas  
HA Kwame Damoahkyeremeh  
HR Luis Deffit  
HN Ludolph Duyssen

HR Keven Garcia  
DR Michael Garcia  
HN Bradley Gates  
HR Ryan Rhys Gosiaco  
HN Argene Hernandez  
HN Joshua Holmes  
DA Scott Jackson  
HR Nadia Jimenez  
HM3 Christopher Johnson  
HA Kevin Johnson  
HN Stephen Johnson  
HA Jeremy Knutson  
HA Josiah Kuleosho  
HR Lisa Kujaswa  
HM2 Patricia Lanas  
HR Jan Lemar  
HA Jonathan Lozada  
HN Travis Lundin  
HR Christopher Lemyre  
HN Kenneth Maddocks  
HN Tonya Mcadams  
DA Amber Mclaughlin  
HA Bobby Meadors  
HA Marcos Medina  
HN Willie Mercado  
HN Lacie Miller  
HR Elias Monarrez  
HN Jr Montemayor  
DN Carlos Morgado  
HR Michael Morrow  
HR Christopher Mullahey  
HR Marco Murillo  
HA Tiya Nadeau  
HR Sophia Navarro  
HN Aaron Nevels  
HA Tuan Nguyen  
HR Shawn Nyman  
HN Vu Pham  
HA Mollie Piper  
HA Edward Price  
HR Sheldon Rafique  
HA Tammy Ramirez  
HA James Reed  
HR Michael Reyes  
HN Stacy Reynolds  
HR Loren Roberts Ii  
HN Olivia Rodriguez  
HA Darnell Sales  
HM2 Bridgette Sandy  
HR Robert Sayers  
HA Brandon Schwartz  
HR Nathaniel Schwartz  
HA Seth Selrelease  
HA Jason Shaffer  
DR Antonio Simmons

HR Sethoeun Sok  
HN Michael Soliven  
HR David Sprouse  
HA Robert Steely  
HN Brett Stennett  
HN Michael Suliti  
DN Donnie Thomason  
HR Destry Thompson  
DA Marcellus Tomlinson  
HM2 R.J. Valdez  
HA James Walker  
HN Rick Ware  
HA Joshua Weistein  
HA Kareen Werbe  
HR Casey Whalin  
HA Charlotte Wright  
HN Christina Young  
HM2 Stuart Dodd  
HR Aaron Sheldrick  
MM2 Randall Youngblood  
DN Makeda Hernandez  
DR Jennifer Harvey  
HM3 Eddie Gonzalez  
HN Carlomagno Mabini  
HN Rawley Dilley  
HN Christopher Santana  
HN Anthony Hernandez  
DA Donell Ellis  
HA William Buchanan  
WG-2 Ralph Nemore  
GS-5 Kenneth Gattis  
WG-2 Terrance Murphy  
GS-4 Deborah Garris  
GS-4 Marjorie Woo  
GS-11 Katherine Carlson  
GS-4 Francesca Griggs  
GS11 Barry Thiersch  
GS-5 Delfin Amio  
GS-5 Abigail Dozier  
GS-4 Alfredo Pecson  
WG-3 Robert Pommier  
MS1 Peter Rojas  
HM3 Nicholas Rose  
HM1 Barbara Roe  
HMCS Ricardo Reed  
HM3 Sylvia Barron

HM3 Teresa Copeland  
HM3 Ryan Grinstain  
HM3 Abraham Russo  
HN Mark Encinias  
HM1 Kenneth Anglin  
HM3 Shannon Janic  
HM3 Poonam Chitnis  
HM3 James Horne  
HN Elaine Gomez  
HMC Tamben Guzman  
HM3 Patricia Smith  
MS2 Alejo Labrador  
HM1 David Myers  
HM2 Keith Dale Jr.  
HM2 Aaron Seibert  
HM1 Camilo Deguia  
PC1 Earl Chandler  
HN Adan Flores  
HMC David Rae Mickey  
HM3 Michelle Jacobs  
HM2 Ronald Deleon  
HM3 Georgina Carrillo  
HA Michael Asante  
HM3 Ryan Booker  
HM2 Michael Robbins  
HMC Jesus Ledesma  
HM3 Jafari Brown  
HM3 Brenda Banuelos  
HM3 Armando Gonzalez  
DA Christian Anderson  
HM3 Quinton Clement  
HM3 Rachael Young  
HM3 Joseph Clements  
HM1 Eric Weir  
MS2 Virgilio Marasigan  
HA Anthony Murray  
HN Jeremy Meagher  
HM3 Hinson McDaniel  
YN2 Daniel Ayon  
HM3 Tyrone Robinson  
DT3 Archie Jugarap  
SH2 Erickson Abuan  
HMCM Randy Bush  
SK2 Sally Torres  
HMC Ellis Smith  
HM2 David Chapman

# Hail & Farewell

# Farewell

HM1 Walter Goodland  
HMC Robert Nostrand  
HM3 Tomas Rimocal  
HM3 Sari Young  
Hm3 Charlie Farmer  
HM1 Alidda Moore  
HA Albert Vega  
HN Steven Moore  
GM2 Jadey Zaragoza  
HM3 Jeffery Hughes  
HM3 Andrea Stodtmeister  
MS2 Jacinto Ganac  
Lt. Catherine Taylor  
Cmdr. Sudha Praba  
Cmdr. Gregory Cross  
Lt. Cmdr. Ronald Leaver  
Lt. Cmdr. Frederick McDonald  
Cmdr. Jon Lund  
Lt. Scott Segal  
Lt. Joel Ahlgrim  
Lt. Gordon Zubrod  
Cmdr. Barry Brimhall  
Lt. Christopher Herzer  
Lt.jg. Maureen Burczyk  
Lt. Tina Horth  
Lt. Cmdr. Sarah Arnold  
Lt. Angela Parys  
Lt. Christopher Partridge  
Lt. Jennifer Tharp  
Lt. Erik Lundquist  
Lt. Cmdr Lynn Leventis  
Lt. Michael Rudisile  
Lt. Cmdr. Rodney Pray  
Lt. Derrick Hernandez  
DR Joseph Pidkowicz  
Lt. Cmdr. Kent Blade  
Lt. Cmdr. Beverly Pettit  
Lt. Cmdr. Thomas Schermerhorn  
Lt. Steven Lynn  
Lt. Timothy Huber  
Lt. Angela Shimp  
Lt. Stephen Clark  
Lt. James Ellzy  
Lt. Dennis Klein  
Cmdr. Eric Lovell  
Capt. Carl Sainten  
Lt. Nancy Hall  
Lt. Antra Boyd  
Lt. Cmdr. Amy Michalski  
Cmdr. Cynthia Bailey

Lt. Cmdr. Wendell Hatch  
Lt.jg. Alan Huber  
Lt. Alan Ross  
Lt. Adolfo Granados  
Lt. Cmdr. Jeffrey Evans  
Lt. Jamie Bunting  
Lt. Michael Danforth  
Cmdr. Shari Marsh  
OTH Teresa Hanson  
OTH Michael Demack  
OTH Colleen Halpin  
OTH Robert O'dell  
Vol. Michelle Manalastas  
Vol. Shelley Sigmund  
Con. Sarah Dyroff  
Con. Stephanie Teal  
Con. Carmel Rowell  
Con. Aurora Padoan  
Con. Aldo Olvera  
Con. Nieves Herold  
Con. Robyn Enders  
Con. Carol Barnes  
Con. George Avilez  
Con. Juvy Pacaldo

Con. Belen Melliza  
Con. Lucia Szuch  
Con. Angela Gonzalez  
Con. Ruben Ignacio  
Con. Tina Wong  
Con. Tiffany Bentacourt  
Con. Carolina Banaag  
Con. Nasser Farr  
Con. Robert Mcferran  
Con. Jamshid Azari  
Con. Erin Zuni

## Promotions

### October

Ltjg. Philip M. Chorosevic

### November

Lt.jg. Tinsika I. Riggs

Cmdr. Cindy L. Potter

Cmdr. Eric J. Kuncir

### December

Capt. Judith A. Fidellow

Cmdr. Nalan Narine

Lt.cmdr. Richard D. White

Lt.jg. Hunt S. Rikkianisha

### Naval Hospital Camp Pendleton Sailors Of the Quarter

#### Third Quarter Calendar Year 2001

**Junior Sailor of the Quarter** - HM3 Yvonne Marenco - General Surgery Clinic

**Senior Sailor of the Quarter** - RP1 William Hammond - Pastoral Care

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

#### Third Quarter Calendar Year 2001

**Junior Sailor of the Quarter** -HM1 Michael Lewis - BMC Port Hueneme

**Senior Sailor of the Quarter** -HM3 Heath Broderson - BMC 52 Area

# Influenza Vaccination Available

*By Preventive Medicine*

**F**lu season is here again and the Flu Vaccination is your weapon against the virus.

Flu is actually short for influenza and is caused by a virus that infects the respiratory tract. It can be a debilitating disease that usually includes fever and respiratory symptoms such as cough, sore throat, runny or stuffy nose as well as headache, muscle aches and extreme fatigue. According to Lt. Cmdr. Lee A. Fordyce Head of Naval Hospital Camp Pendleton, (NHCP), Preventative Medicine Department. Most people who get the flu will recover completely in one to two weeks but some can develop life threatening medical complications such as pneumonia. Complications can occur at any age; however, the elderly and people with chronic health problems are more likely to develop serious complications after influenza infection than younger, healthier people. Annually, influenza is associated with more than 20,000 deaths nationwide and more than 100,000 hospitalizations.

Historically, the flu virus has caused worldwide epidemics called pandemics. In 1918-19, the "Spanish flu" caused the highest influenza related mortality: approximately 500,000 deaths in the United States with 20 million worldwide. In 1957-58, the "Asian flu" resulted in 70,000 deaths in the United States. Finally, in 1968-69 the infamous "Hong Kong flu" caused 34,000 deaths here in the United States.

Make it a point to get your



*Cmdr. John F. Monroe, Director for Surgical Services, receives his Influenza vaccination just after attending a weekly Executive Steering Committee meeting.*

influenza shot this year. All beneficiaries need to see their clinic or department where they normally receive care to receive their flu vaccination. ✱

## Smallpox Reportable Again

*By Kimberly D. Prato  
Public Affairs Officer*

**I**n the state of California, smallpox has been added to the list of reportable diseases.

According to Cdr. Ted Robinson, clinical epidemiologist at NHCP, "Heightened awareness is our best defense and there is vaccine available through the Center for Disease Control (CDC) if needed."

Smallpox is a disease most people think has been banished to history. Spoken of as one of the greatest triumphs of public health, international efforts led to the

declaration of smallpox eradication by the World Health Assembly in May 1980. According to the Los Angeles County Dept. of Health Services Public Health Letter, the last naturally acquired case of smallpox in the world occurred in Somalia in 1977. For research purposes, smallpox virus stocks are kept in two secure locations: the CDC and the Russian Federation's State Research Centre of Virology and Biotechnology. However, information gained after the Gulf War and collapse of the Soviet Union raised suspicions of the existence of undisclosed reserves.

Although the chance of smallpox becoming a threat itself again is very low, the disease is being reinstated to reportable disease lists nationwide to reacquaint or notify medical practitioners to its clinical appearance and treatment. Immediate reporting will help ward off spread of the disease if it is reintroduced to the population by terrorist actions. ✱



# New field for active duty Sailor offers opportunity at NHCP

*Submitted By  
Maternal Infant Services Department*

Sailors can now be a part of a group of board certified lactation consultants on active duty at Naval Hospital Camp Pendleton .

Lt.j.g. Dawn Galvez recently passed the annual board certification examination offered by the International Board of Lactation Consultant Examiners (IBCLE) and is listed with the National and International Registries as a Registered Lactation Consultant. An IBCLC is identified as a member of the health care team possessing specialized skills and knowledge in lactation management and is qualified to provide skilled technical breastfeeding assistance to mothers and babies experiencing breastfeeding problems. She is one of only a handful of board certified lactation consultants on active duty.

Candidates for the international exam meet stringent eligibility requirements that demonstrate proficiency and understanding of practical skills, clinical judgment, current research knowledge and fulfillment of a significant number of continuing education credits directly related to lactation.

A mother that breastfeeds can save \$1400 per year in artificial baby milk (formula), is more likely to bond closely with her child, passes on immunities to her child and recovers more quickly from the weight normally gained in pregnancy. Her likelihood of contracting premenopausal breast cancer or osteoporosis over her lifetime is reduced. Studies show that breastfed babies have fewer visits to health care providers through age 17. The incidence of otitis media, juvenile diabetes, and other illnesses is reduced, not just during the breastfeeding period but also throughout childhood.

Our hospital has a high breastfeeding rate. Of mothers choosing to breastfeed at delivery, 90% leave the hospital breastfeeding and 80% are still breastfeeding at their six-week checkup. This is probably because there are three board certified lactation consultants, including Felicia Beck, RN, and Lea Barton, LVN, that work with moms and babies.

The Labor and Delivery and Nursery staff attempts to have every breastfed baby nurse within the first hour of birth. We also have a breastfeeding room on 7 North for our staff and patients to use to pump or nurse their baby in privacy if they wish. A breastfeeding class is offered twice a month by Maternal Infant Services. All patients and staff are welcome to attend on the 2nd and 4th Tuesday of the month.

Lt.j.g. Galvez has been assigned to Maternal Infant Services for the last 24 months and will be transferring to Naval Hospital Guam in December 2001, where she hopes to start a lactation program. She urges all to educate themselves and support breastfeeding for the first year of life as suggested by the American Academy of Pediatrics.

Breastfeeding is the easiest way to save money on formula while promoting good health to our Sailors, Marines and their families. For more information on breastfeeding or on lactation consulting, please call 725-1654 or 715-6383.✿



Graphics by JO1 Robert M. Dylewski

# Military Health System Optimization

*R.A. Nelson  
Vice Admiral, Medical Corps, USN  
Surgeon General of the Navy*

We are going through times of change in the health care arena. Just as health care has become a front-page issue in the private sector, it has also reached center stage in the military. As the result of military downsizing and base closure, TRICARE was established to help our beneficiaries meet their health care needs. The Military Health System (MHS) Optimization Plan was recently developed with an overall goal of improving the health of our patients while bringing more of them back to the Military Treatment Facilities (MTFs) for their care. The plan provides a strategy to efficiently and effectively use our personnel and facilities to provide comprehensive health services to our beneficiaries, with a focus on prevention and wellness.

Optimization is based upon the pillar of operational readiness as our central mission and primary focus. Recognizing the unique needs of our Sailors and Marines assigned to deployable platforms, a special effort is being dedicated to meeting the needs of this population. Active duty service member enrollment and the implementation of optimization strategies is expected to improve access to MTFs, claims processing, and communication from the MTF back to the unit provider. Fleet and Marine Corps liaison offices will be a key interface between the operational elements and the shore medical department activities.

Health care depends heavily on the relationship between the patient and the provider. Under the Optimization Plan, individual primary care managers (PCMs) will assume responsibility for a panel of beneficiaries. Assigning PCMs by name will improve access and continuity of care, increase patient satisfaction and loyalty, and reduce

lost work time. PCMs can then use their training to maintain the health of their patients and coordinate all needed services or interventions. To support this relationship, the PCM must have adequate facilities, support staff, and information systems. For example, a family physician working with one exam room and two clinical support staff may be able to effectively care for a panel of 750 patients. If provided with the industry standard of two exam rooms and 3.5 support personnel, that same provider can assume responsibility for a much larger panel.

This ability to increase patient care at the MTF will result in the recapture of purchased care from the private sector. This will decrease overall health care costs due to the lower cost per case in the direct care system and more efficient spreading of the MTFs' fixed costs over the larger number of enrolled beneficiaries. The cost of the additional support staff should be recouped via the higher patient throughput.

A basic part of the Optimization Plan includes the use of readiness required military personnel to deliver peacetime health care. Uniformed personnel are assigned to MTFs with a simultaneous assignment to an operational platform. This system determines the number and mix of primary care and specialty providers at each location. The next step under the Optimization Plan is to apply an enrollment capacity model to determine how many beneficiaries the MTF can support under existing and optimized conditions. MTF commanders can then develop local plans to adjust staff to improve the effectiveness of the assigned providers, and

to perform minor construction or reallocate space for streamlined patient flow. The principles of population health and demand management will then be employed to shift our health service culture to one that supports prevention and early intervention and enables access to the most appropriate level of service 24 hours a day, Seven days a week.

Along with their support staffs, PCMs will be recognized for keeping their panels of patients healthy and productive. Realizing that in some locations patient demand may exceed normal expectations, this plan offers system strategies to deal with such situations. Telephone and



Graphics by JO1 Robert M. Dylenski

**"Military Health System Optimization" Cont. on Page 18.**

# Naval Hospital Gets “Wings Of Hope” Painting

By Kimberly D. Prato  
Public Affairs Officer

A painting of a Navy Corpsman coming to the aid of a Marine marked this year’s National Prisoner of War/Missing In Action Service of Remembrance here, Sept. 21.



“Wings of Hope” currently hangs in the core hospital quarter-deck by the waiting area on the first floor, for anyone who wishes to view the painting.

Local artist Todd Krasovetz painted “Wings of Hope” which was commissioned for the annual service and presented by the First Class Petty Officer’s Association to the command.

“I did a detailed sketch drawing of ‘Wings of Hope’ and presented it to the Commanding Officer, then I had members of the First Class Petty Officers Association do a mock war scene of one corpsman pulling a Marine to safety, said Krasovetz. “I shot the enactment with a 35mm camera and provided different angles and layouts. We went through a board meeting on which image to select and produce to a final project,” he said.

The painting took from June through Sept. 3<sup>rd</sup> to produce, according to Krasovetz. It is 100% original oil on canvas, a realist style of artwork and is 4 1/2 by 6 feet in dimensions. It depicts a corpsman carrying a Marine

to safety and a red smoke landing flare can be seen in the background with a helicopter arriving in the distance.

Krasovetz resides in Oceanside and his brother is a corpsman assigned to Naval Hospital Camp Pendleton.

“Producing ‘Wings of Hope’ had a very special meaning for me even before Sept. 11<sup>th</sup>,” said Krasovetz. “The corpsman used as a model in the art was my brother and after Sept. 11<sup>th</sup> the art began to take on a whole new meaning and a whole new life,” he said.

According to Krasovetz, as he sat in the audience, listening to a speech by Capt. William Heroman, Commanding Officer, Naval Hospital Camp Pendleton. He began to reflect on the life changing experiences the Department of the Navy and “Wings of Hope” had given him. He noticed that several veterans were pointing at the artwork and talking. It was at that point Krasovetz realized why he was here and why he is an artist. Soon after, the POW veterans stopped talking among themselves and began to weep.

“The learning experience, relationships and people I have met while producing “Wings of Hope” has changed my life forever,” he said. “I want to thank the Naval Hospital and the staff for being a part of this organization and the U.S. Navy and its men and women who serve dedicate their lives so I can actually produce this piece of work,” he said.

Krasovetz plans on making more military type works in the future. He isn’t sure if he’ll continue with the angel wings but he plans on a type of continuity that includes a guardian angel. ✿



## “Military Health System Optimization” Cont. from Page 17.

internet access to providers, the ability to obtain advice after hours, extended clinic hours, and more open access to appointments will reduce overall utilization while improving both patient and provider satisfaction.

These are the key components of MHS Optimization. The next generation of TRICARE contracts will be refined to facilitate Optimization and recapture of workload by the MTFs. Information system capabilities have been redesigned to support a fully automated patient record, enrollment portability, streamlined claims processing, pharmacy improvements, effective workload accounting, and equitable resource allocation. In addition, I am working with the senior leadership here at BUMED to address corporate obstacles to Optimization, including the elimination of non-value added administrative requirements.

I am committed to achieving Optimization as quickly as possible. Information and policy guidance has been issued and can be found on the web at <http://bumed.med.navy.mil/optimization/>. In addition, a kick-off MHS Optimization Conference was held in March and a follow-up meeting will take place 20-22 June. Optimization Champions have been identified for each MTF and major fleet concentration area to develop implementation plans that meet local needs. An outside consultant is assisting with implementation in TRICARE Region 11.

The MHS Optimization Plan is getting underway and I don’t want anyone left behind. As we implement the strategies of Optimization we will ensure the best use of DoD resources while delivering quality care and services. Our future depends on it. ✿

# NHCP POW/MIA Remembrance

By JO1 Robert M. Dylewski  
Deputy Public Affairs Officer

A prominent former prisoner of war said here Sept. 21 on National POW/MIA Recognition Day that the list of Americans missing in action swelled by thousands on Sept. 11.

Echoing President George W. Bush's assertion that the United States was victimized by an act of war when terrorists struck at three East Coast locations, retired Navy Capt. John C. Enschede said victims of the worst terrorism in U.S. history deserve to be counted among those lost in more conventional wars.

"I find it tragically ironic that, in addition to the almost 2,000 MIAs still unaccounted for from the Vietnam War, this year our nation must now add the names of over 5,000 more MIAs from this latest war in which we are now engaged," Enschede said during Naval Hospital Camp Pendleton's 11th annual ceremony remembering POWs/MIAs. Enschede, currently the military liaison for the San Diego Padres Baseball Club and a POW from Aug. 25, 1972, to March 29, 1973, in Hanoi, North Vietnam, was guest speaker at the ceremony.

"Yes, war was declared against us by fanatical terrorists on Tuesday, September 11, 2001. And, make no mistake about it — it was an act of war," he said.

"However, these most recent MIAs are located upon our own soil, not in some far distant land. The victims of this new battlefield



Petty Officer 1st Class Kyle Norris, President of the First Class Petty Officers Association, assists the Commanding Officer unveiling the "Wings Of Hope" painting at the annual Prisoner Of War and Missing in Action remembrance ceremony.

are heroes just as much as those who served, died or are missing from any other war we have ever fought. And, just as the search for the missing proceeds in New York and Washington D.C., the search also continues halfway around the world for other MIAs."

Each year, the third Friday in September is set aside as National POW/MIA Recognition Day. The hospital's chaplain's office has always held its ceremony that day.

Eleven years ago, the First Class Petty Officers Association (FCPOA) at NHCP established the memorial at the hospital with a single tree in remembrance.

Today, the site has grown, thanks to more than a decade of work by the hospital's FCPOA representatives. Today, there's a sculpture, plaque, bench and a POW/MIA flagpole. The hospital's FCPOA donated a painting that renders a hospital corpsman in action assisting a Marine. The memorial testifies to the dedication

of the Sailors, Marines, soldiers and airmen who made great sacrifices for our country. ✪



Petty Officer 1st Class William Hammond bows his head in prayer during a moment of silence.



*Petty Officer 1st Class John Fink instructs Petty Officer 3rd Class Tania Cook how to properly hold a rifle.*

# FCPOA Military Honor Detail

*By JO1 Robert M. Dylewski  
Deputy Public Affairs Officer*

The terrorist attacks made on the United States September 11th reinforced the importance of remembering those who made the sacrifice for our Nation.

Sailors at Naval Hospital Camp Pendleton, (NHCP), pay their respects throughout the year, by volunteering for NHCP’s First Class Petty Officers Association, (FCPOA), Military Honors Detail.

Every fifth Monday of the month, averaging four visits a year, volunteers form-up and make an hour and a half trek to Riverside National Cemetery in Riverside California where roughly 30,000 veterans are buried. The detail renders honors for an average of six funerals a day. According to Petty

Officer First Class John P. Fink, Leading Petty Officer for the General Surgery Clinic and Surgical Procedures, roughly 25 teams from Active military, reserve and civilian organizations render honors for veterans and still 15 to 20 veterans on average receive interment without honors. The detail performs honors for veteran cremations, casket burials and memorial services.

“Remembering those who made the sacrifices for our country is important,” said Fink. “We help the families of those veterans by providing final respects and offering closure,” he continued.

After one of the funerals, Fink spoke with one of the family members of a retired Navy chief who had served for 23 years of his life, during which, he served on board the USS Langley (CV1) the first carrier and the USS Arizona (BB39) during the years prior to the attack on Pearl Harbor in 1941. “Talking to that chief’s family member enforced the importance of providing honors. It allows me a chance to show that they are not forgotten,” Fink said.

One hospital corpsmen

volunteered because Sailors had rendered honors for her grandfather’s funeral and she wanted to return the favor. According to Fink, some Sailors are apprehensive of volunteering at first because of the fact that these are fellow service members who have passed away. “Once the volunteers participate, they walk away with a better sense of worth and they are even more willing to return,” Fink said.

Fink is looking for volunteers to create two dedicated teams that would alternate monthly and help other teams render honors for those veterans that aren’t receiving honors. Volunteers that can play the bugle are also needed.

Any service member wishing to volunteer can contact HM1 (FMF) Fink at 725-1368 or e-mail him at [jpink@cpen.med.navy.mil](mailto:jpink@cpen.med.navy.mil). ✪



*Volunteers for the NHCP Military Honors Detail fold the National Ensign over a veteran’s coffin during one of the funerals.*

