

Nurse Corps News

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Reflections of the Vietnam Conflict: Angels of the Orient

USS Repose, the definition of rest, tranquility, peace of mind, freedom from worry or troubles, was a hospital ship during multiple times of conflict serving military personnel during WWII, Korea and finally Vietnam. As a hospital ship there were many nurses, doctors, and corpsmen aboard. The crew was young and full of energy ready to tackle any problem that the war threw

at them. The successes that the USS Repose experienced are part of her legacy. The crew treated more than 9,000 battle casualties during the Vietnam War and admitted over 24,000 military and civilian patients. The crew performed nearly 8,000 surgical operations and saw over 15,000 consecutive safe helicopter landings. Every one of the patients was memorable and special to the lives touched by the conflict.

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It has been over 41 years since I reported aboard the USS Repose for duty as a young LT in 1966. I volunteered for the Navy right out of college. We had boys over there and I was a nurse and they needed me. I told them I'd stay two more years if

hey'd send me to Vietnam. It doesn't seem like that long ago to me but it must be because often olks will ask me to tell them about it. I served as a Navy Nurse for 20 years and the 366 days board the hospital ship hold some of my favorite memories and certainly some of my favorite eople. It was the best part of my life and the worst at the same time. I wouldn't trade that year or anything I was on board the USS Repose during the Vietnam War and things were very differnt for the Navy Nurse Corps back then. A lot about the Navy Nurse Corps was different then. ake the uniform for instance. We wore the nurse's cap, white starched dresses, and white nyon stockings to go with the white shoes. We wore no earrings and our hair was not too long. I nention the uniform because some of our patients were three bunks up. They often had IVs, and was nothing to climb on up to change the bottle. I mention the uniform also because we were aring for young boys who had been through hell and it was very dirty, smelly and scary there. Vhen they woke up and found themselves in a safe place with clean linens and an American urse in a white uniform, more than one of our patients told us later they thought they had died and gone to heaven. Many of our patients returned to the field. Some died out there. Some came back to us, and some managed to get home. Something very special happens to a soldier, a Marine, a sailor or medical person who goes to war. I can speak only for my time aboard the hospital ship in Vietnam. I touched many lives but mine was touched even more. I have met Vietnam veterans, and we have a bond that is not easy to put into words but it is very strong and very real. Navy nursing has allowed me to experience this. It is a part of me and of who I am.

coast of Vietnam.

CDR Pat Hildebrand, USN, NC (ret)

LT Pat Hildebrand on the deck of the USS Repose in 1966 off the

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New Afghanistan Hospital Opens

The opening ceremony for a new Afghan National Army (ANA) Regional Hospital was held on December 15, 2007. Numerous dignitaries, such as the Minister of Defense, Abdul Raheem Wardak and Brigadier General Gulaqa Nahibi, 205 ANA Corps Commander, were present. Local village elders were also on hand for the ribbon cutting ceremony. After the ribbon was cut by Wardak, Nahibi, and other government officials, a facility tour was provided and showcased the three bed emergency room (ER), eye clinic, dental clinic, and x-ray facility.

This was the last installation of four hospitals that were planned and built to support the ANA. The 50-bed hospital was built by the coalition at a cost of approximately \$5 million. The modern facility is equipped as a trauma center with a helo pad, operating room and post-operative facilities, to reduce the fatality rate for soldiers wounded by fighting in-

surgents in the southern region of Afghanistan. Training for the Afghan staff is done by an 18 person Air Force Embedded Training Team (ETT), led by Colonel Michael Skidmore. His Kandahar Regional Hospital ETT currently mentors the ANA medical staff and teaches them how to use the new, state-of the-art equipment in their facility. Navy medical personnel will also have the opportunity to mentor and train the ANA. The first patients should arrive at the hospital after the Eid holiday. Originally the team was supposed to mentor the medical staff at the hospital, but "The mission changed as soon as our feet hit the ground," said Skidmore. They first had to finish the hospital, which was 450



KANDAHAR, Afghanistan- A soldier from the Afghan National Army stands security watch while preparations are made to formally open a new ANA hospital.

days behind schedule due to issues with the original contractor. However, the hospital preparation gave the ETT a unique opportunity to help the Afghans properly equip a modern hospital. According to Skidmore, "It was wonderful to take something empty and make it an operational hospital."

Future plans for the facility include adding new ambulances next summer and doubling it's capacity by next fall. Mentoring the staff will also continue. The effort to improve military health care in Afghanistan has benefits for Afghan health care in general. Modern equipment, new techniques and training for medical personnel will spill over in to civilian health care. As the command surgeon for Combined Security Transition Command-Afghanistan, Air Force Colonel John Mitchell put it, "Health and physical security are key to governance and economic development. This hospital brings health and security."

LCDR Steven Parks, NC, USN

Admirals' All Hands VTC

Please join us on Wednesday, 28 May for RADM Bruzek-Kohler and RDML Flaherty's All-Hands VTC to be held at 0930 and 1430 ET. The VTC is scheduled for one hour. Registration deadline is Friday, 09 May. The point of contact for additional information is LCDR Christine Palarca, NC 202-762-3116.

Perioperative Specialty Leader Update

It has been seven months since I took over the role as Perioperative Specialty Leader. Currently, we are in the process of addressing three task work groups that will directly impact perioperative nursing: replacement of the M-I38 field sterilizer, standardization of perioperative nurse core competencies and development of an instruction on analysis of metal fragments removed from DoD personnel. As a perioperative community, we have a unique opportunity to serve our patients during extremely challenging times. Perioperative nurses continue to support operational deployments in support of Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and humanitarian missions. During 2007, more than 50 perioperative nurses deployed to nine operational platforms: Iraq, Afghanistan, EMF Kuwait, USNS MERCY (T-AH19), USNS COMFORT (T-AH20), USS PELILIEU, Djibouti, Joint Task Force Guantanamo Bay Cuba, and Thailand.

The USNS COMFORT (T-AH20) participated in a collaborative joint military and civilian humanitarian mission to Central and South America called Partnership for the Americas 2007. On two occasions, a medical team from the USNS COMFORT joined Operation Smile in a Columbian hospital. The USNS COMFORT provided medical, dental, and surgical care to the indigent population of 12 different countries including Belize, Guatemala, Panama, Nicaragua, El Salvador, Ecuador, Peru, Columbia, Haiti, Trinidad/Tobago, Guyana, and Suriname. The average number of surgical patients treated exceeded 100 per country, which resulted in over 1170 successful surgeries. In addition, hundreds more were pre-screened at various locations at established pre-operative assessment sites. This mission was staffed with five Navy perioperative nurses, one Air Force reserve nurse, one Public Health nurse (for three weeks), and a total of three Project Hope nurses (one at a time).

We continue to provide perioperative nursing (Individual Augmentee) support to the Expeditionary Medical Facility-Kuwait at Camp Arifjan, Kuwait. Expeditionary Medical Facility-Kuwait is a level three hospital providing comprehensive medical care to U.S. and coalition forces in the Kuwait/Qatar theatres, supporting Operations Iraqi/Enduring Freedom. The USNS MERCY (T-AH19) Pacific Partnership 2008 is in the planning phase for their next humanitarian mission. So far, seven perioperative nurses from various commands have been identified for this mission. Additionally the USS Pelilieu-(LHA-5) Pacific Partnership provided medical, dental, and surgical care to indigent populations of five different countries including Philippines, Vietnam, Papua New Guinea, Solomon Islands and the Marshall Islands. The average number of surgical patients treated exceeded 300 surgical patients. The operating room staff consisted of two Navy nurses, one Air Force Nurse and three nurses from non-governmental organizations.

One of our continued goals is to have all eligible perioperative nurses achieve Certified Nurse Operating Room (CNOR) certification. We are currently at 69%. Please encourage everyone to become certified once they are eligible and maintain require number of CEUs for re-certification. This is a testimony to your desire to enhance your career and the perioperative profession. The CNOR certification is a requirement to be eligible for the Perioperative RN-ISP.

Bravo Zulu to the following nurses whose article has been accepted for publication in the AORN *Journal* or whose abstract has been accepted for poster presentation at the AORN 55th Congress in Anaheim, California, March 30-April3, 2008:

- LCDR Kevin Stevenson, Training Officer Main Operating Room, Naval Medical Center San Diego for his publication, "Pursuing Cleanliness in the Field Surgical Environment" in the AORN Journal.
- CDR Linda Troup, Department Head of the Ambulatory Procedures Unit and Senior Nurse Officer of Maxillofacial Surgery at Naval Medical Center San Diego for her publication, "The USNS MERCY Southeast Asia Humanitarian Cruise: The Perioperative Experience" in AORN Journal.
- LCDR Fran Slonski, Naval Hospital 29 Palms for her research project, "A Needs Assessment, Navy Nurse Caring for Detainees," which is in the process for publication.



Perioperative Specialty Leader Thoughts (Cont)

 CDR Loretta Howerton and LCDR Ann Williams, Department Head Main Operating Room at Naval Hospital Naples Italy for their poster submission, "Streamlining the Ambulatory Procedure Process," to the Association of Perioperative Nurses (AORN).

CDR Anibal Luis Acevedo, NC, USN

Association of Perioperative Registered Nurses (AORN) 55th Annual Congress

The perioperative nursing profession plays a large role in the Navy Nurse Corps . Perioperative nurses are not only needed in everyday activities at a military treatment facility but also in wartime situations and humanitarian efforts. Currently, the Navy's medical officer recruiters are seeking applicants with critical wartime nursing specialties, including perioperative nursing. The Navy offers great incentives and sign on bonuses for those nurses interested in the Nurse Corps.

Recently Navy Recruiting Distinct San Diego and Los Angeles, CA supported the Association of Perioperative Registered Nurses (AORN) 55th Annual Congress, held March 30-April 3, 2008 in Anaheim, California. Over 7000 perioperative professionals supported this event, which is one of the premier perioperative nursing events of the year. The AORN Congress is ranked 142 out of the 200 largest tradeshows in the United States and attracts a variety of prominent, industry leading speakers. AORN's Annual Congress provides a perfect place to introduce people to the Navy Nurse Corps.

Navy nurse recruiter LT Lori Campbell welcomed CDR Lenora Langlais, who provided volunteer support while LT Katie Moerke supported staff from Naval Medical Center San Diego Maternal Child Department. They displayed outstanding support while assisting their local recruiting command on a very short notice. Voluntary assistance came from

across the globe, with a strong presence from both the active duty and reserve Nurse Corps perioperative community. Nurses from Naval Hospital Camp Pendleton, Naval Hospital Cherry Point, Naval Hospital Rota Spain, Naval Hospital Guantanamo Bay Cuba, National Naval Medical Center Bethesda, Naval Medical Center Portsmouth, USNS Comfort, Naval Hospital Twenty Nine Palms, Blythewood, SC, and West Columbia, SC assisted in the recruiting efforts.

LT Lori Campbell, NC, USN



LT Lori Campbell, CAPT Deborah McCain, CDR Anibal Acevedo, LT Katie Moerke, CDR Lenora Langlais.

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OHSU Dallas Support to the Bone Marrow Donor Program

Operational Health Support Unit (OHSU) Dallas Detachment F in conjunction with the C.W. Bill Young Department of Defense (DoD) Marrow Donor Program held a walk-in registration at NAS Joint Reserve Base Fort Worth, Texas in March and April 2008. The C.W. Bill Young Cell Transplantation Program provides support to patients who need a potentially life-saving bone marrow or cord blood transplant (also called a BMT). Increasing the number of unrelated marrow donors and cord blood units on the Registry is one requirement of the C.W. Bill Young Cell Transplantation Program. The program's contractor, the National Marrow Donor Program® (NMDP), works with its centers to increase the number of potential marrow donors and cord blood units. For some patients who have leukemia, lymphoma, sickle cell anemia, or other inherited metabolic or immune system disorders, a marrow or cord blood transplant may be their best chance to live longer, healthier lives. A donor for a marrow or cord blood transplant may be available from a patient's family; however, most patients depend on an unrelated donor.

Voluntary walk-in registrations were held at multiple locations on the base to include commands from the Air Force, Army, Navy and Marine units. Tables were set-up at the entrance of the Navy Operations Support Center (NOSC), Pass & ID and the branch medical clinic. Registry entailed filling out a medical questionnaire to include demographic information, historical deployment experience, and an oral buccal swab. Buccal swabs taken from volunteers contain human leukocyte antigen (HLA) tissue that is tested for preliminary matching. Participates were provided with brochures and guidance on how registry, consent and the donor process (if HLA match) are performed. The registration event resulted in the collection of over 270 completed registry packets during the March drill weekend. The DoD doctrine encourages eligible Tri-Service volunteers between the ages of 18 – 60 to register with (NMDP) to provide medical support in the treatment of casualties during exposure to morrow toxic radiation or chemical agents. Part of the overall NMDP initiative is to improve military contingency operations, homeland security, and to respond to humanitarian efforts. The recruitment of HLA type DoD volunteers, as part of the overall national effort, will also help to expand the Navy medical research program to improve the technology of identifying donors. The C.W. Bill Young DoD Marrow Donor Center is one of the largest in the world providing a registry of more than 400,000 service members world wide. If your reserve unit or military treatment facility is interested in conducting a drive, information may be found on the website; <u>http://bloodcell.transplant.hrsa.gov/DONOR/index.html</u>

LCDR Rhonda Byars, NC, USN

NH Okinawa Clinical Initiatives

Naval Hospital Okinawa initiated a revision to its clinical orientation program and enhanced its collaboration with the local nursing school. The NH Okinawa Clinical Nurse Specialist group recognized the need for standardized clinical core competencies to ensure that all nurses and corpsman, regardless of their specialty, were trained on the basic clinical skills identified by the group for this command. The documentation of the core competencies is also standardized. The standardized core competency program was fully implemented as of 01 January 2008 and training is integrated into Nursing/Corpsman Clinical Orientation.

NH Okinawa is in its fourth year of providing clinical orientation for Hokubu Nursing School, a local three-year degree nursing school. Each year, two-three students are selected for clinical rotations at the facility.



Akiko Sugama and Risa Tobaru (with the tourniquet on) and LT Christine Davies.

This semester was the first time that the students were provided the opportunity to attend clinical orientation and afforded hands on application of the core skills. They were very excited and impressed with this experience.

LCDR Jean Fisak, NC, USN



Nursing Research Seminar at Naval Hospital Bremerton

Naval Hospital Bremerton hosted two days of lectures to encourage nursing research in the local community. Two Navy nurse researchers, CDR Jacqueline Rychnovsky and CDR Angelica Almonte, visited NH Bremerton from Naval

Hospital San Diego on April 23-24 to lead discussions on how local area nurses can take advantage of ongoing research in nursing practices. "We want to get our nurses to really start thinking about their practice and ways we could improve," said CAPT Carol Morones, Naval Hospital Bremerton's Director of Nursing Services. "A lot of time, what we're taught in nursing school is based on tradition and not always based on science," said Rychnovsky. "The current trend is to break the tradition and ask why we're doing it."

This line of thought has lead to a strategy called "evidence based practice," the use of research and shared results to solve nursing challenges rather than falling back on traditions that may not apply to the situation. Rychnovsky and Almonte's lectures included examples of starting evidence based projects as well as overviews of the research process, sharing data, and even how to find topics for research. A workshop at the end of the session allowed the attendees to generate their own research topics that would apply to their own areas.



CDR Jacqueline Rychnovsky and CDR Angelica Almonte.

Naval Hospital Bremerton has already taken steps to begin nursing research with the founding of a journal club in January. The goal of the group is to review published nursing journal articles and critique them for appliction to the nursing practice at NHB. Bringing Rychnovsky and Almonte to the hospital was the next step in introducing the nursing staff to this very small field in Navy nursing. With each having earned a PhD, the researchers are two out 12 nurses assigned to the "Big Three" Naval Hospitals in Portsmouth, San Diego, and Bethesda. When given the opportunity to introduce their work outside of their normal region, the two said they were happy to take their show on the road. "It's impossible to have a nurse researcher at each command," said Rychnovsky. "It's always been our vision to support the region."

To help spread the concept and tools of nursing research, the conference was open not just to NHB staff but to nursing professionals from around the region. Approximately 120 attended and came from nearby military and civilian hospitals such as Harrison, Olympic College, Madigan Army Hospital and the Puget Sound VA system.

Their attendance not only helped spread the practice of nursing research but encouraged camaraderie among the facilities. "We wanted to invite as many professionals as we could," said Morones. "We didn't want to keep all this to ourselves; we wanted to advance our practice." To allow for the most participation in the lecture, the one-day program was duplicated over two days. The information presented on the second day was the same as on the first, but by doing it twice, Rychnovsky and Almonte reached double the audience. With this lecture and the ongoing journal club, the groundwork was laid for exploring evidence based practice.

Morones said she's looking forward to expanding the role of nursing research now that they have the tools to do so. "This is the base level. I wanted to get their interest; I wanted to get them motivated," she said. "The next step would be to do our own research here. I think we could look at doing something here by next year."



Naval Hospital Oak Harbor Career Development Initiatives

The number one strategic goal at Naval Hospital Oak Harbor (NHOH) is to "resource, develop and support staff." In 2007, the teams assigned to this goal initiated several new programs for officers, enlisted and civilian personnel. This article describes three initiatives for officers: Officer Professional Development Training, Officer Career Development Boards and the Junior Officer of Quarter/Year Award. The purpose of Officer Professional Development Training is to provide military training on various topics utilizing expertise from within the command. The target audience is all medical department officers. The one-hour training is held the first Tuesday of every month. Topics include budget management, the role of the Casualty Assistance Calls Officer, enlisted personnel management, brag sheet preparation, the fitness report process, the selection board process, Joint Professional Military Education – Phase I, and operational medicine. NHOH has also hosted speakers from the Bureau of Personnel detailing shop and the Commanding Officer, Naval Air Station Whidbey Island, a former member of the Navy Diversity Directorate. In addition to providing leadership education, the training sessions allow for networking and socializing among officers from different areas of the hospital.

Officer Career Development Boards (CDB) were established at NHOH in August 2007. The purpose of the CDB program is to provide a forum by which junior officers can benefit from the career advice and experience of senior officers in order to progress as both military officers and healthcare professionals. All junior officers (O-3 and below) are required to have an initial CDB within six months of reporting; other reasons for a CDB include application for redesignation to another corps, submission of resignation from active duty request and failure to select for promotion. Officers due for a CDB complete two documents. The first is the profile sheet, which includes demographic information, training courses completed, and both short-term and long-term goals. The officer may select his/her board members by listing them on the profile sheet. The second is a curriculum vitae, giving many officers their first opportunity to begin developing this important career document. During the CDB there is an informal discussion of the officer's background and career goals. The officer is then asked to step outside while the board members confer and agree on recommendations; the officer is invited to return and receives the recommendations. To date, 17 CDBs have been completed, with overwhelming positive feedback from junior officers as well as board members.

The Junior Officer of the Quarter/Year Award program recognizes personal and professional achievements of junior officers. One year after the program's inception, the selection board recommended that an interview be added to the selection process. Prior to this, the selection board made its decision based solely on the written nomination, even though some selection board members had not worked with the nominees. Under the new process, nominees appear before the selection board in dress uniform, briefly describe their accomplishments during the quarter or year, and answer questions. This allows the board members to meet the nominees and provides junior officers with interview experience. Point of contact for questions on any of these programs is CDR Carolyn McGee. Email address is caro-lyn.mcgee@med.navy.mil

CDR Carolyn McGee, NC, USN

Pennsylvania Persian Gulf Conflict Program

Applications for the State of Pennsylvania's Persian Gulf Conflict Veterans' Benefit Program are now available. The veteran must have served with the U.S. Armed Forces, a reserve component or the Pennsylvania National Guard; served on active duty in the Persian Gulf theater of operations during the period from August 2, 1990 to August 31, 1991, received the Southwest Asia Service Medal; and had been a legal resident of Pennsylvania at the time of active service. Certain surviving relatives are also eligible. The deadline for applying for benefits under this program is August 31, 2015. For detailed instructions on how to apply, visit the <u>Pennsylvania Department of Veterans Affairs</u> website

Bravo Zulu!

Bravo Zulu to CDR Angelia D. Elum-O'Neal, Department Head, Health Promotions and Periodic Health Assessment(PHA) Departments and PHA Provider, BMC Naval Station Norfolk Sewells Point and to Mrs. Peg Smith from BMC Naval Station Norfolk Sewells Point. CDR Elum-O'Neal's poster presentations, "Increasing the Accuracy of Active Duty Enrollments at Branch Medical Clinic Naval Station Norfolk" and "Periodic Health Assessment Process at Branch Medical Clinic Naval Station Norfolk" were competitively selected from over 80 abstracts sub-

missions for display at the Healthcare Innovations Program (HIP) 2008 Military Health System (MHS) Conference Award and Poster Session Exhibit. Also, CDR Elum-O'Neal's two poster presentations were selected for presentation at the 2008 American Academy of Ambulatory Care Nursing (AAACN) Tri Service Military Conference, held April 17-20, 2008 in Chicago, Illinois. CDR Elum-O'Neal and Mrs Smith submitted a poster presentation for the BMC Naval Station Sewells Point Norfolk Tobacco Cessation Program, and it was also accepted for presentation at AAACN Tri Service Military Conference. The Navy and Marine Corps Public Health Center (formally NEHC) extended CDR Elum-O'Neal an invitation to present her BMC Naval Station Norfolk Health Promotions Department current Tobacco Cessation Program at their annual conference in March 2008.



CAPT Jaime Carroll, LT White and RDML Matthew L. Nathan

- Bravo Zulu to LT Jermaine White who was recently selected as Naval Medical Center Portsmouth's Junior NC
 Officer of the Year. LT White currently works in the PACU and will be detaching for DUINS in the Navy Nurse
 Corps Anesthesia Program.
- Bravo Zulu to LCDR Ken Dubrowski for his selection as the Senior Nurse of the Year at Naval Medical Center Portsmouth. LCDR Dubrowski is currently stationed at Naval Hospital Pensacola.
- Bravo Zulu to the following 19 Nurse Corps Officers and newest members of the CRNA community. After a rigorous 30 months of instruction the NNCAP Class of 2008 has a 100% pass rate. The newly graduated Certified Registered Nurse Anesthetists received a Master of Science degree and are eagerly looking forward to applying their finely honed skills at their new commands! Please congratulate them and welcome them to the adventure that is Navy Nurse Anesthesia! Congratulations to: LCDR Jasen Christensen, LCDR Robert Sanders, LT Joseph Andrade, LT Eric Bopp, LT John Daniels, LT Jose Estrada Jr., LT Andrew Forrest, LT Ralph Gargiulo, LT Herman Jenkins, LT Jeremy Kilday, LT Jason Litchfield, LT Christian Pronk, LT Christine Maclan, LT Ronald McGuire, LT Eliot Spencer, LT James Spradling, LT Lena Stephens LT Jerrol Wallace and LT Alicia Weissgerber.
- Bravo Zulu to LT Jerrol Wallacethe, LT Alicia Weissgerber, and LT Herman Jenkins. These Navy Nurse Corps Anesthesia Program students from San Diego were published in the Spring 2008 International Student Journal of Nurse Anesthesia: LT Jerrol Wallace for "One Lung Anesthesia Utilizing a Double-Lumen Tube," LT Alicia Weissgerber for "Negative Pressure Pulmonary Edema after Laryngospasm," and LT Herman Jenkins for "Fluid Resuscitation in a Multiple Trauma Case."



Karen A. Rieder Research/Federal Nursing Poster Session

The TriService Nursing Research Program (TSNRP) and the Federal Nursing Service are the joint sponsors of the Karen A. Rieder Research /Federal Nursing Poster Session. Initiated by the Navy Nurse Corps in honor of its first Navy nurse researcher, the Karen A. Rieder poster session was sponsored by the Navy Nurse Corps for first 17 years. Over time, the poster session evolved to include all three military services and was later combined with the federal nursing poster session at AMSUS.

Registered nurses in the U.S. Army, Navy, Air Force, National Guard, Public Health Service, Department of Veterans Affairs, and the American Red Cross are invited to submit abstracts. Karen Rieder Research posters are dedicated to sharing professional nursing research findings. The Federal Nursing Section focuses on sharing professional nursing knowledge and improving the delivery of health care services. Suggested topics include: Joint Medical Training, Health Promotion, Rehabilitation/Combat Casualties, Innovative Clinical Practice Issues, Medical Readiness, Treatment of PTSD, Joint Operational Exercises, Pre-Deployment Issues, Family/Community/Reintegration, Joint Service Initiatives, Post Deployment Issues, and Multidisciplinary Approach to Care. The 2008 Karen A. Rieder Nursing Research/Federal Nursing Poster Session will be held on Monday, 10 November 2008 in conjunction with the 114th Annual Meeting of AMSUS in San Antonio, Texas, November 9-14, 2008. Submission deadline is June 30, 2008 and the POC is Maria Burcroff (e-mail: mburcroff@usuhs.mil). Please refer to http://131.158.7.207/cgi-bin/tsnrp/announcements.cgi

CAPT Michael Shannon, NC, USN

Navy Nurse Corps Centennial Birthday Events Announcements

The 100th Nurse Corps anniversary gala is a joint venture between Naval Medical Center San Diego, NH Camp Pendleton and NH 29 Palms. Our guest speaker is RADM Bruzek-Kohler. There will be a slide show to showcase the history of the NC and the Southern California nurses. Cake cutting ceremony is on May 13 with mayoral proclamation. The POC for tickets is LCDR Cynthia French. <u>Cynthia.french@med.navy.mil</u>

Naval Hospital Bremerton is planning its Navy Nurse Corps 100th Birthday Ball on Saturday May 17 at 5pm at the Kitsap Conference Center, Puget Sound Ballroom. Uniform is semi formal attire, service dress white optional. To RSVP, please call 360-475-4274.

Naval Medical Center Portsmouth is planning the 100th Anniversary Gala for May 10 at the Renaissance Hotel in Portsmouth, Virginia. Service Dress White Uniforms for 0-3 and below and Mess Dress for 0-4 and above. POC is LCDR Sondra Santana, phone 757-953-8752.

