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Nurse Corps News

Volume 13, Issue 2 March/April 2019

Director's Message: TriService Nursing Research



The theme for this Newsletter is Jointness, so I want to talk to you about a wonderful organization, the TriService Nursing Research Program (TSNRP), and what it has to offer. TSNRP was founded in 1992 with the help of former U.S. Senator Daniel Inouye, who designated funds for nursing-specific research. TSNRP is housed at the Uniformed Services University of the Health Sciences in Bethesda, MD, on the grounds of Walter Reed National Military Medical Center. An Executive comprised of the Nursing Corps Chiefs from each of the three Services and their Deputies governs the Program. An Executive Director leads the Executive Board, and this 3-year position rotates amongst the Services. Currently, Col Jennifer Hatzfeld, USAF, serves as Executive Director. This summer, CAPT Heather King, USN, will assume the role of Executive Director.

So, why should you know about this organization? It is important to Navy Medicine that we have an inquisitive culture in which members raise questions like: Why do we do things the way we do? Is this the best way? How does this relate to what I'll be doing while deployed? Often, we ask the questions but are not sure how to get answers. TSNRP is one resource to assist with finding answers to these questions. The Program provides structure and education, with subject matter experts, to help guide us to the answers. When no answers exist, they do the science to find them.

TSNRP Mission: To facilitate nursing research to optimize the health of military members and their beneficiaries.

Strategic Goals

Develop and strengthen the TriService community of nursing scholars to generate new knowledge in military nursing and translate knowledge into practice.

Provide a TriService infrastructure to enhance military nursing research and advance evidence-based practice (EBP).

Support research and EBP projects on areas relevant to military readiness and military nursing practice.

Encourage TriService collaboration in nursing research and EBP.

What TSNRP Offers

Books, literature, consultants, and other resources to support research and EBP across the globe.



Tina Davidson, RDML, NC

Director, Navy Nurse Corps

Numerous courses, including the TSNRP Dissemination Course, EBP for Leadership Course, EBP Workshops, Writing Workshops, and Grant Camp, to name just a few.

In 2017, TSNRP provided \$7,046,985 in funding for research and EBP projects.

Focused work targeting specific specialties or populations such as Anesthesia, Expeditionary, and Health Informatics.

Importance of TSNRP for the Services

The ability to explore and answer questions unique to military nursing practice is critical to operational success.

Military professionals are best suited to ask the critical questions and do the science to meet mission success.

TSNRP funding is uniquely nursing-centric. TSNRP is able to adjust focus based on military needs.

EBP resources offered by TSNRP are essential to supporting our success.

The collaboration provided by TSNRP makes us stronger.

I have the privilege of speaking at the TSNRP Dissemination Course offered this April/May in San Diego. I am looking forward to seeing all of the research and EBP projects that will be presented. Please take some time to familiarize yourself with this organization and learn more about their courses and workshops at www.usuhs.edu/tsnrp.

Thank you for what you do every day!~

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Jointness: What does it mean to you?





Mary Riggs, RADM, NC

Deputy Director Reserve Component

For over 15 years, we have been at war, working alongside our fellow service members in many environments. We perform Annual Training at a military treatment facility or an outpatient clinic manned by Army, Air Force, or Government Service civilians. We plan exercises with Army, Air Force, and Marines, or are mobilized working with the local medical population. In your civilian day job, you may work alongside counterparts in your local hospitals or clinics who are not familiar with the military and the need for jointness and/or partnerships.

The strength of our Corps is our ability to integrate into any environment. Today, we need to be ready to implement Vice Admiral Faison's priorities.

READINESS

We save lives wherever our forces operate – at and from the sea.

HEALTH

We will provide the best care our nation can offer to Sailors, Marines, and their families to keep them healthy, ready, and on the job.

PARTNERSHIPS

We will expand and strengthen our partnerships to maximize readiness and health.

Are you ready and willing to execute these objectives in a joint environment? This means being clinically ready to fight tonight, not depending on being "trained up" or requiring on-the-job training to do the job you were hired by the Navy to do. With the shift to a more distributed and agile force, you may be one member of a small deployed team, interacting with other Service members or with international forces. Are you ready?

Wherever the future carries you, remember our Navy heritage. Follow our core values of Honor,

Courage, and Commitment and the Navy Nursing Professional Practice Model. Do this regardless of where you are stationed, particularly if it is a joint environment, and you will always shine!

You are a Navy Officer and a Navy Nurse; I am so proud to be your Flag!~

Reserve Component: The Navy
Nurse Corps milSuite site is
meant for you, too! But did you
know there's a milSuite page
built with you in mind? Find
information on Reserve-specific
education opportunities and career management, and meet your
Specialty Leaders.

Click on any of the Naval Reserve icons throughout the News to check it out!





PORTSMOUTH, Va. (March 8, 2019) – Members of the United States Navy Nurse Corps listen to guest speakers while attending the 2nd Annual Reserve Nursing Operational Symposium, March 7th – 10th, at NMC Portsmouth. (Photo by PO2 Jared E. Walker/Released) For the full story, see page 14.





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Senior Nurse Executive, Navy Medicine East



Jamie Wise, CAPT, NC

Senior Nurse Executive, Navy Medicine East

When I joined the Navy almost 30 years ago, I was enticed by the adventure of travel, serving overseas and in austere, deployed environ-Having accomplished my objective and nearing the end of my career, I find it ironic that Navy Medicine is currently headed in a direction that embodies my original reasons for becoming a part of this amazing organization. With renewed focus on supporting the warfighter and a commitment to ensuring a ready medical force, refreshing to transition administration and management of the Military Treatment Facilities (MTF) to the Defense Health Agency and focus on our unique mission. This brings to life our relevance in these dynamic times.

As a member of the transition team and work-stream-4 lead, I've had the fortunate opportunity to be an integral part of shaping the future of Navy Medicine and the organizational construct of the region. As of October 1, 2019, Navy Medicine East (NME) and Navy Medicine West will embark on a new mission to man, train, and equip our

deployable medical platforms while providing command and control support to our transitioning Navy Medicine Readiness and Training Commands (NMRTCs) and Units.

Leading up to this transition, I've been fortunate to take part in some key efforts to align with our readiness mission. Some of the changes as they pertain to nursing include reshaping our total force structure to better align with billet our wartime requirements, transitioning the perioperative school at NH Jacksonville to NMC Portsmouth to enable our Operating Room nurses to receive a more varied and complex clinical experience, transitioning phase II site training for our Family Nurse Practitioner and Psychiatric Mental Health Doctorate of Nursing Practice students from NMC Portsmouth to NMC Camp Lejeune to enhance opportunities for one-toone preceptorships, and aligning nursing billets to trauma centers at Cook County in Chicago and more recently University of Florida Health (Shands) in Jacksonville. This latter effort, geared to enhancing trauma exposure for our corpsmen, will be to improving outcomes and survival rates in a potential future air-sea battle scenario.

With a newly certified level III trauma center at NMC Camp Lejeune, Navy Medicine is building the infrastructure to support and enduring sustain an trauma capability to serve as an effective training site for our NMRTCs and current/emerging deployable medical platforms. Several of our MTFs have developed partnerships with civilian facilities to enhance the clinical competency and experience of our Navy Nurses. I am confident these efforts will continue to expand and grow.

It's been tremendously a rewarding experience to prep the battle space for our readiness focus as I transition my duties as Regional SNE to CAPT Jeff Johnson this August. Currently the Optimization of the Warfighter transition lead for NME, CAPT Johnson arrived to the Command in July 2018 and has already demonstrated the transformational leadership necessary to take us into the future. While no doubt it will be a future filled with challenges, it is exciting to refocus on the operational readiness/joint capability domain of our Navy Nursing Professional Practice Model and the reason I joined the Navy three decades ago.~

National Nurses' Week is May 6-12, and the Navy Nurse Corps Birthday is May 13!

Don't forget to send your photos celebrating Nurses'
Week and the Nurse Corps Birthday to
<u>usn.ncr.bumedfchva.list.nc-newsletter</u>. When
submitting photos to the NC Newsletter, remember

PAO requirements: All photos need captions which include the subject in the photo, when and where the photo was taken, what the subject is doing in the photo, who took the photo, and whether the photo is released for use by the Command PAO. Please ensure subjects in photos are not wearing badges.







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2nd Annual Nurse Corps Specialty Leader Symposium

Kayla Downs, LTJG, NC

Walter Reed National Military Medical Center

The office of the Navy Nurse Corps hosted the Nurse Corps Specialty Leader Symposium 12-15 February 2019, at the Defense Health Headquarters in Falls Church, VA. Primary and Assistant Specialty Leaders from 16 Nurse Corps Communities, both Active Component and Reserve Component, along with members of the Senior Nurse Corps Leadership Team, came together for orientation, updates, and strategic direction. Also in attendance were eight Nurse Interns to provide administrative and logistical support for the Symposium.

Speakers included VADM Raquel C. Bono, Director, Defense Health Agency (DHA); VADM C. Forrest Faison III, Surgeon General and

Chief, Bureau of Medicine and Surgery; RDML Tina Davidson, Director, Navy Nurse Corps and Commander, Navy Medicine, Education, Training, and Logistics Command; and CAPT Deborah Roy, Deputy Director, Navy Nurse Corps. Topics of discussion included an emphasis on readiness, the significant changes military medicine is experiencing, updates on the DHA transition and establishment of Navy Medicine Readiness and Training Commands, and support of the war fighter.

Specialty Leaders had the opportunity to present challenges and successes within their communities over the year; share best practices and initiatives with colleagues; and network face-to-face. The Specialty Leader role is multi-faceted. They act as subject matter experts, disseminate policy and guidance, make recommendations for accession and performance standards, mentor mem-

bers of their communities, and give input to specialty-specific programs, training, and deployment taskers, among several other functions. The symposium proved to be an invaluable experience for our Leaders.

To echo RDML Davidson, we must be prepared to meet the challenges of a rapidly changing environment, just as we do when navigating the ever-changing advances in healthcare and research. As transformational leaders, we must foster an environment that embraces change, looks towards the horizon, realizes opportunity, and always has the mission at the forefront. Every Navy Nurse Corps Officer, regardless of specialty and background, will play an essential role in this. ~

Perspectives and Lessons Learned from the Nurse Interns

The Specialty Leader Symposium gave the Nurse Interns an up-close look into the many strategic changes currently impacting military medicine, an opportunity to network with senior leaders across the specialties, and the opportunity to gain perspective into what happens at the Nurse Corps executive level. At the conclusion of the symposium, several of the interns shared their thoughts:

"I really enjoyed listening to the strategic and operational briefs from the leaders of Military Medicine and the Nurse Corps. As a staff nurse in a big hospital, it is easy to lose sight of the mission. It was a real reminder of why we are here."

"I especially enjoyed hearing from the Reserve Component (RC) specialty leaders and fellow RC Nurse Interns about their experiences and the opportunities available."



RDML Davidson with Nurse Corps Leadership Interns at the 2nd Annual Specialty Leader Symposium.

"The Specialty Leader Symposium was a tremendous opportunity and I am incredibly grateful for the chance to attend. Thank you to CAPT Hurley and CDR Goggins for providing us mentorship during our internship. It has increased my awareness of the challenges and successes in each specialty, and has given me ideas to bring back to my own command and specialty."

"I found it exciting to hear about the current changes happening across military medicine. I was reminded of the Nurse Corps' primary mission; readiness and supporting the war fighter. We are in uniform to deploy and we train to do so. We must understand the need for change and embrace it. I left the Symposium feeling empowered and motivated to embrace the change that is coming to Navy Medicine."~

Are you interested in serving as a Nurse Intern? If so, speak to your chain of command about this opportunity. The Nurse Corps office requests nominations from Senior Nurse Executives for Nurse Interns to support the Nurse Corps Strategic Planning Meeting, the Specialty Leader Symposium, and the Senior Nurse Executive Orientation. Desired qualities include a desire to gain professional leadership and project management experience, excellent communication skills, creativity, flexibility, and attention to detail. Rank requirement is Ensign to Lieutenant Commander. If you think you have what it takes, talk to your leadership today!





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Specialty Leader Update: Nursing Research (1900D)



Virginia Blackman, CDR, NC

1900D Specialty Leader Wendy Cook, CDR, NC

Assistant Specialty Leader

Greetings! On behalf of the "small but mighty" community of Nursing Research, we are proud to bring you this update.

First, many thanks to CAPT Lisa Braun and CAPT Deidre Smith, who turned over the responsibilities of Specialty Leader for the Active and Reserve Components, respectively. We appreciate your dedication to and leadership of the community of Navy Nurse Scientists. Congratulations to CDR Wendy Cook and CAPT Judy Dye (Assistant Specialty Leader, Active Component and Specialty Leader, Reserve Component, respectively) for your recent selections!

Have you ever wondered about pursuing a PhD or wondered what Navy Nurse Scientists actually do? Have you had questions about what makes a competitive applicant for a PhD? NOW is the time to ask these questions! If you are passionate about providing the highest quality evidence-based care to patients, but often find yourself with questions that no researcher has yet answered, a PhD in Nursing Science, a degree focused on research, may be the next step for you to continue your contributions to Navy Nursing! With

a small community of officers, many nearing retirement, we are optimistic for DUINS opportunities in FY20. With a year to prepare, NOW is the time to make yourself the obvious choice for selection! Work on publishing your current evidencebased practice (EBP) project, or a review on the "state of the science," presenting the search and critical appraisal of relevant research that you completed as a foundational step to an EBP project. To strengthen your academic credentials, take a biostatistics course, or a scientific writing course, at the graduate level if possible. Every course you take is a way to demonstrate your commitment to professional development and will help you to be successful in a rigorous, fast-paced PhD environment. Most importantly, contact a member of the Navy Nurse Researcher (1900D) community! We are eager to help you succeed!

When it comes to answering the question, "what do Navy Nurse Scientists do?" the answer for all of us is "generate the new knowledge needed to answer questions unique to practice." Navy Nursing research process takes many forms, depending on what the questions are! You may meet Navy Nurse Scientists conducting research with animals to elucidate physiologic mechanisms; interviewing patients, families, and staff to understand processes; or "crunching the 'big data' numbers" available in our many health-related databases. Only a few MTF commands - NMC Portsmouth, NMC San Diego, NMC Camp Lejeune and Walter Reed National Military Medical Center currently have Nurse Scientists assigned and working primarily in research roles. Other Navy Nurse Scientists are assigned at research commands (Naval Medical Research Center, Silver Spring, MD; and Naval Health Research Center, San Diego, CA), and at the Uniformed

Services University of Health Sciences, Bethesda, MD. Navy Nurse Scientists come from many different clinical backgrounds practitioners, anesthetists, informatics, ER/Trauma, oncology, critical care, medical-surgical, psychiatric, women's health, and more! You can find us on milSuite and learn more the ground-breaking. about collaborative work being done by Navy Nurse Scientists!

Sharing what we do as Navy through publication Nurses whether in research, EBP, other scholarly articles or personal reflections on practice – is a lasting way to ensure that your contributions as a Navy Nurse make it into history. Look for the announcement of the RDML Mary Hall and RADM Elizabeth Niemeyer publication awards coming soon! One of the key requirements is that you are identified AS A NAVY NURSE in the publication! Opportunities are available for both peer-reviewed and non-peer reviewed publications, such as letters to the editor, regional newsletters, and more.

Now is also the time to begin preparing your submissions for GRANT FUNDING from the Tri-Service Nursing Research Program (TSNRP)! Grants are available for both research and EBP projects. The best way to move forward is to learn about the opportunities at the TSNRP Website and then contact a member of the Nursing Research community for guidance mentorship on preparing a successful application. Applications for most TSNRP grants are due in October and February each year.

Navy Nursing Research builds the foundation for high quality clinical practice through generation of new knowledge. If you have questions that you think might benefit from a research perspective, please contact a member of our team!~





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Specialty Leader Update: Certified Nurse Midwives (1981)



Protegenie Reed, CDR, NC

1981 Specialty Leader
Catherine Luna, CDR, NC

Assistant Specialty Leader

Wow! I cannot believe how quickly the last 3 years have gone by. Serving as the Specialty Leader for this small and remarkable community has been the highlight of my career and I am grateful to have been afforded the opportunity. As we transition to an operational focus, it is important to remember what we bring to the mission. In 2016, restrictions were lifted on women's roles in the military; women are now serving on all platforms! Today, there are about 18.6% active duty enlisted females and 18.4% active duty female officers serving in the military. This number will likely grow; therefore, as women's health providers, we have to ensure their medical readiness not only at the Military Treatment Facilities (MTFs) but also in the deployed setting. I am confident that our new leaders, CDR Cathy Luna and LCDR Katie Schulz, will successfully lead our community during this transition.

Our community members continue to lead and participate in many women's health and perinatal initiatives under the BUMED Women's Health Clinical Community. This work has paved the way for other clinical

communities in the Navy and the new clinical communities in the Defense Health Agency (DHA). We have continued our initiatives in collaboration with our sister services, with the goals of standardization and patient safety. As the chair of the Perinatal Sub-Community Board, CDR Cathy Luna has helped transition BUMED working groups to DHA working groups. I had the pleasure of leading the RH Immunoglobulin standardization working group this past year. Another innovative initiative is creation of a Centering Pregnancy Tool Kit to assist MTF's to initiate "Centering Pregnancy," an evidence-based group model for prenatal care. Many thanks to Ms. Heidi Walker, the Centering Lead Facilitator for the Department of Defense, for her continued support in helping MTFs implement Centering Pregnancy programs. We now have seven MTFs providing Centering Pregnancy, and three others are in the implementation process. There are also four MTFs offering nitrous oxide for pain relief during labor or perinatal procedures, and two are in the implementation process. LCDR Candace Foura (NH Jacksonville) was recently selected as the Chair of the Family Planning Sub-Community. LCDR Karen Sanchez (Fort Belvoir CH) was selected to represent our com-munity on the BUMED Fe-Force Readiness Sub-Community; this committee will replace the Women's Health Clinical Community.

Three out of nine of our current DUINS DNP students graduate this year (LCDR Ricky McCallister, LCDR Shawn Crowther, and LT Katie Jones), and are demonstrating excellence as future leaders of our community. LCDR Christine Higgins, a DUINS student at Emory University, led a student community discussion group with an emphasis

on aligning scholarly pro-jects to operational readiness and topics involving readiness and vision for the community. LT Katie Jones (Oregon Health & Science University) launched her scholarly project at NH Camp Pendleton titled "Improving Provider Gestational Weight Gain Counseling with Gestational Weight Gain Graphs in a Naval Hospital: A Quality Improvement Project."

LCDR Dean Hawkins (NMC Camp Lejeune) and LCDR Erika Schilling (NH Bremerton) are participating in Pacific Partnership 2019. We are looking forward to hearing about their partnerships, ex-change of information, contributions to the mission, and of course, any babies they help deliver. LCDR Anne Iannitto led the Comprehensive Unit Safety Program at NH Camp Pendleton, and shared best practices with all MTFs during a perinatal monthly tele-con.

I would like to thank RDML Davidson for her support and inspiration, as well as the wonderful leadership team at BUMED: CAPT Roy, CAPT Aune (NMC Portsmouth), CAPT Hurley, and CAPT McGee.

CDR Luna, as the Assistant Specialty Leader, you have made my tenure a rewarding one, thank you for that. To my community, thank you for your support and continued contributions.

You are all so amazing! Let us continue to demonstrate our contributions to readiness and the operational mission. We have to think outside of the box and ask ourselves, "are we ready if called upon tomorrow?" We look forward to seeing you at the national American College of Nurse-Midwives (ACNM) conference in May! There will be an ACNM-affiliate training day with our Army, Air Force, and Government Service counterparts.~





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Specialty Leader Update: Public Health Nursing (1940)



Timothy Whiting, LCDR, NC

1940 Specialty Leader

Tracy Krauss, LCDR, NC Assistant Specialty Leader

What a year for the Public Health Community! Our community has been working around the globe keeping our warfighters ready and supporting National and Defense Security Strategies. As the newest Specialty Leader, I am privileged to be able to articulate our contribution to Navy Medicine's mission, both globally and on the home front. I would also like to take this opportunity to say thank you to CAPT Currie for her leadership over the last 3 years as Specialty Leader, and to congratulate LCDR Tracy Krauss on her selection as the Assistant Specialty Leader for Public Health Nurses.

Operational readiness, transformational leadership, and professional development shape our practice as Navy nurses. Public health nurses (PHN) exemplify these tenets daily. PHNs are an integral part of public health teams across all Military Treatment Facilities (MTFs) and routinely deploy in operational settings and humanitarian missions. PHNs partner with external agencies for disease surveillance, disaster management planning, vector control, and shared health promotion and prevention strategy development. This only touches the surface

of all the hard work and dedication happening every day.

LCDR Krauss coauthored a presentation, "MASSCAL Emergency Preparedness Subject Matter Expert Exchange (SMEE)" that was presented at

AMSUS this year. The presentation showcased training with the El Salvador Military. More recently, she had the opportunity to teach the medical portion of Advanced Urban Operations Course, offered in Bahrain, to an all-female Bahrain Special Forces Unit (see photo above, right).

LCDR Stefanie Nochisaki was the lead for preventive medicine on the Field Health Engagement Team for Southern Partnership Station-2018, conducting mil-tomil SMEE based around the Army Field Sanitation Model. Her team also conducted engagements with three Wavuu communities of the LaGuajira region of Colombia on multiple public health topics. LCDR Amy Zaycek is currently the team lead for planning and execution of the medical line of effort for Pacific Partnership 2019 (PP19) in the Philippines and Timor Leste. LCDR Marie Miller is also supporting the PP19 mission aboard the USNS FALL RIVER (T–EPF 4) in the Philippines, Malaysia, Timor Leste, and Thailand. CDR Molly Cook was the



BAHRAIN. LCDR Krauss with the allfemale Bahrain Special Forces Unit/ Released.

Associate Director for Medical Operations and Planning on PP18, leading the way for the medical line of effort aboard the USNS BRUNS-WICK (T-EPF 6), and is poised to lead the way for medical on PP20.

Last year, I wrapped up PP18 as the Medical Planner on the USNS MERCY (T-AH 19) for Sri Lanka and Malaysia, and currently am serving as the Nurse Planner for the Republic of the Marshall Islands, Federated States of Micronesia, and Vietnam on PP19. I also recently led a 2-day disaster nursing seminar for students and faculty at the College of the Marshall Islands (see photo below). The seminar introduced the concepts of disaster management and the important roles nurses play in every phase of disaster management.

In addition to operational leadership, PHNs are also leading in the MTFs and beyond. **CDR Misty Scheel** is the Director for Public Health (DPH) at USNH Naples.

continued page 8







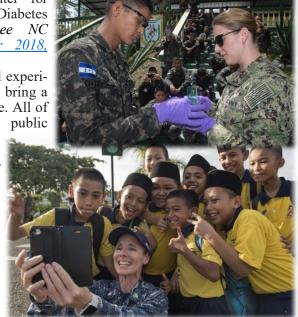
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Specialty Leader Update: Public Health Nursing (1940) (cont')

CDR Wendy Stone is the DPH at NH 29 Palms, CDR Michelle Waara is the Director for Population Health at the Navy and Marine Corps Public Health Center, and CAPT Carolyn Currie is the Director for Training and Professional Development at the Uniformed Services University Center for Global Health Engagement. PHNs continue to innovate in our home commands. LCDR Nochisaki will be presenting on the Medical Home Port Population Health Pilot program at the Nursing TriService Research and Evidence-Based Dissemination Course. Last year, the Health Promotion & Wellness Department at USNH Okinawa was the first program in the DoD to receive full

recognition by the Center for Disease Control as a Diabetes Prevention Program (see NC News September/October 2018, Volume 12/ Issue 5).

Through education and experience, public health nurses bring a unique skill set to the table. All of the 1940s gravitated to public health from one or more of the various Nurse Corps communities. If you are interested joining an amazing community of public health professionals making a global impact, don't hesitate to reach out!~



Pacific Partnership 2019



SANTA RITA, Guam (March 4, 2019) The Military Sealift Command (MSC) expeditionary fast transport ship USNS BRUNSWICK (T-EPF 6) departs Naval Base Guam, passing the MSC expeditionary fast transport ship

the MSC expeditionary fast transport ship USNS FALL RIVER (T-EPF 4) and marking the start of Pacific Partnership 2019. Pacific Partnership, now in its 14th iteration, is the largest annual multinational humanitarian assistance and disaster relief preparedness mission conducted in the Indo-Pacific. Each year, the mission team works collectively with host and partner nations to enhance regional interoperability and disaster response capabilities, increase stability and security in the region, and foster new and enduring friendships in the Indo-Pacific. ~

CHUUK, Federated States of Micronesia (March 31, 2019) Above: LCDR Erika Schilling laughs with a Chuukese girl after teaching a "helping babies breathe" class during Pacific Partnership 2019.

Right: LTJG
Natalie Spritzer
performs a wellness check on a
Chuukese woman
during Pacific
Partnership 2019.
(Both photos by
MC1 Tyrell K.
Morris)







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Specialty Leader Update: Ambulatory Care (690)



Mary Phillips, CDR, NC

69O Specialty Leader
Robert Bailey, LCDR, NC

Assistant Specialty Leader

Good day, Nursing Leaders. By now, you may have received several briefs or presentations about upcoming changes for your specific organization. Ambulatory care nursing is no stranger to change. Nurses in have outpatient settings been thriving in an influx of new requirements, process improvements, and new initiatives for years. Throughout all of these changes, we have remained resilient and adaptive. Our ambulatory care nursing resiliency truly comes from the diversity of our



community. We have nurses from different backgrounds, from critical care to emergency room to medicalsurgical. This diversity of experience elevates our clinical practice as we gain different perspectives when looking to improve our processes. From the new requirements of the National Defense Authorization Act, Defense Health Agency transition. and the move to Joint Commission accreditation, ambulatory care nurses maintain the garrison mission to ensure family and military medical readiness by providing quality and coordinated care to all our patients. Ambulatory care nurses are essential to a Medically Ready Force by manning Marine Centered Medical Homes (MCMH) and Readiness Clinics. We also maintain ourselves as a Ready Medical Force by remaining competent in our operational subspecialty codes.

We reached out to LCDR Dominick Stelly, one of our ambulatory care nurses currently assigned to 3rd Medical Battalion, to give a perspective on how her ambulatory care skills and knowledge helped her in her operational assignment. "With Navy Medicine's shift to operational readiness, I found great value in the ability to work on maintaining a "ready medical force" within MCMH clinics of the III Marine Expeditionary Force. Serving operationally alongside Marines with the objective of being ready to "fight tonight" provides an intimate bridge of understanding Navy Medicine assets on how medicine at the front lines can and will look. Although I currently serve in a Role II (field trauma hospital) billet, I truly believe that my ambulatory care experience provided a great advantage in preparing myself and fellow staff (e.g., Role I or Battalion Aid Station personnel, or other nurses and corpsmen who get tasked out to a mission as the sole medical asset) for varying degrees of primary care issues that may arise (e.g., musculoskeletal, GI, URI, hangnails, etc.). As I understand it, over 85% of injuries that occur down range are actually nonbattle related. Ambulatory care nurses who have the opportunity to serve operationally get to hone those abstract, patient care skills in very austere or non-traditional environments. This in turn maintains the readiness of the force. Additionally, while in garrison, I am able to work intimately within the MCMH clinics and operational medical staff to bridge operational requirements with Navy Medicine expectations of care delivery."

LCDR Stelly is an example of how well ambulatory care nurses adapt to various environments. Her ability to translate her ambulatory care skills and knowledge as well as her core competencies into practice in operational settings is characteristic of Navy nurses.

Ambulatory care nurses lead every day and we are personally thankful to be a part of this community. We want to recognize a few members who continue to help represent us nationally: CAPT Petrovanie, American Nurses Credentialing Center's Nominating Committee; CAPT Brown, Treasur-Tri-Service Special Interest Group; and CDR Savage, Board of Directors, American Academy of Ambulatory Care Nursing. Bravo Zulu to our newest 690 Additional Qualifying Designator (AQD) recipients: LT Rachael Benyovszky of USNH Guam and LT Jerri Echon of USNH Yokosuka.

To gain the 690 AQD, a clinic nurse must have two years of experience in any Medical Home Clinic and national certification in Ambulatory Care Nursing.

We are honored to lead this specialty. If there is anything we can do for you, please do not hesitate to contact us via email, or join us on milSuite.~





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Building Medical Capacity and Promoting Sustainability Abroad

Assanatu Savage, CDR, NC

Director, USN Doctor of Nursing Practice Program, Bremerton, WA

The Graduate School of Nursing at the Uniformed Services University of the Health Sciences (USUHS) "Signature Curriculum" prepares nursing students in three focus areas: 1. Operational readiness in changing environments, 2. Clinical decision-making in the Military Health System, and 3. Global, environmental, cultural, and political context.

In August 2018, CDR Jerrol Wallace, Director and Chair, Nurse Anesthesia Program, and LCDR Kara McDowell, NC, third-year student, Family Nurse Practitioner Program, seized the opportunity to actualize the global, environmental, and cultural focus of the curriculum. They became part of a team of medical experts who delivered a Trauma Nursing Course (TNC) to the Ugandan People's Defence Force (UPDF), as part of the U.S. Department of State-funded African Peacekeeping Rapid Response Partnership (APRRP) program. USUHS's Center for Global Health Engagement manages the medical component of APRRP on behalf of U.S. Africa Command, with an overarching goal of achieving readiness for deployment of United Nations Level 1 and/



or Level 2 medical treatment facilities and associated capabilities.

CDR Wallace and LCDR McDowell trained the UPDF nurses using the Train-the-Trainer model to establish an initial cadre of TNC trainers. which allows for future sustainability. CDR Wallace stated, "This was a unique opportunity to share U.S. military trauma training with our African military partners in Uganda. There was a rich exchange of military customs and deployment experiences on both sides."

LCDR McDowell concurred, stating, "I was both humbled and inspired by the students. I pursued this opportunity to share the knowledge and skills I have received through my education and training in the military with others. The new instructors can now take ownership of this program and continue to

Uganda Peoples' Defence Force Trauma Nursing graduates with CDR Jerrol Wallace (far right back row) and LCDR Kara McDowell (far left back row)/Released.

enrich the education of UPDF nurses through continued training."

The training included assessment, rapid identification, and interventions for life-threatening injuries. The course contributed to development of students' the technical skills, as well as leadership and communication attributes. The instructors found the experience enlightening and gratifying, strengthening relationships and increasing the medical capacity of the UPDF African partner nations. and Engagement in such evolutions shape world health in a positive and meaningful way, enhancing medical readiness interoperability and globally.~







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NATO Role 3 Multi-National Medical Unit, Tango Rotation, Signing Off

Rosanne Hartley, CAPT, NC

Angelina Brannon, LCDR, NC

NATO Role 3, MMU

Twenty-three Navy Nurse Corps officers, one of whom served as the Executive Officer, deployed as members of the Tango rotation to the NATO Role 3 (R3) Multinational Medical Unit on Kandahar Airfield (KAF) from October 2018 -April 2019. All of the nurses were active duty members deployed as Individual Augmentees (IA) from seven CONUS and two OCONUS parent commands in support of Operation Resolute Support/ Freedom's Sentinel. Collectively, they provided patient care to U.S. forces/ contractor/Government Service personnel, international contractors, and the NATO coalition and Afghan forces employed on KAF and throughout southern Afghanistan.

A unique aspect of these IA Nurse Corps officers is the teamwork and joint care they provided, as they cross-trained between trauma and inpatient settings, gaining experience while caring for multiple trauma patients (two to eight at a time), with injuries ranging from gunshot wounds to traumatic amputations. Just 5 days into the deployment, the R3 staff received their first all-hands mass casualty (MASCAL). In the following months, four additional MASCALs occurred, as well as 158 trauma activations. In the Emergency Medicine Department, nurses provided care to 450 emergent medical, surgical, and trauma patients. The perioperative nursing team assisted with 150 surgical procedures, of which 125 were trauma related. In the combined Intensive Care/ Inpatient Unit, the team provided care to 130 patients, accounting for 500 total bed days. The Certified Registered Nurse Anesthetist, one of only three anesthesia providers

deployed to the R3, provided anesthesia care for 45 surgical cases. Meanwhile, the two nurses assigned to the Patient Movement Element Cell coordinated the movement of 312 medically-ill and tactically-wounded patients throughout Afghanistan and out of theater.

This group boasts a notable 82% certification rate (four of which were earned on deployment - LT Kahler, LTJG Robles, LTJG Gonzalez, and LTJG Klingensmith). Three outstanding nurses (LTJG Micklos, LTJG Stewart, and LT Stevens) were selected as Officer Motivators of the Month. The nurses also contributed 1,440 volunteer hours to the USO, chapel, Army Veterinarian Clinic, and base/command beautification projects.

As this deployment comes to an end, the Navy Nurse Corps team will depart with newly developed skills, lifelong friends, and unforgettable experiences.~



David E. Jones, CAPT, MSC Commanding Officer Steven J. Parks, CAPT, NC Executive Officer Rosanne I. Hartley, CAPT, NC Director of Nursing Services

Navy Nurse Corps KAF NATO Role 3 Staff

Anesthesia: LT Erin L. Gagliano

EMD: LCDR Angelina D. Brannon, LCDR Susanne M. Pickman, LT Amanda R. George, LT Emma V. Hershey, LT Philomena T. Kahler, LTJG Ronald J. Micklos

ICU: LCDR Caryn A. Womble, LT Welle A. Huening, LT Laila C. Schless, LT Greta C. Stevens, LTJG Stephanie M. Cushen, LTJG Cassandra Gonzalez, LTJG Scott D. Klingensmith, LTJG Carlos A. Robles, LTJG Allison M. Steiner

MOR: LCDR Francisco J. Rodriguez-Sosa, LT Paul D. Owens, LTJG Tamaran D. Stewart

PME: LT Bernadette Garcia, LT Wade A. Miller

NATO Role 3 "Best Care Anywhere"







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Navy Medicine Europe Engages in Vigorous Warrior 2019

Josh VanZant, LT, NC

USNH Naples, Italy

Twelve Navy Medicine Europe (NAVMEDEUR) medical professionals were able to practice dynamic force employment in this year's Vigorous Warrior exercise in Cincu, Romania. Vigorous Warrior is a biannual NATO event and the largest medical exercise in the world. From April 1-12, 2019, over 2500 military and civilian participants from 39 partner nations came together to care for over 1500 simulated casualties. Deborah **Woods-Chattman** (USNH Sigonella, Italy) and LT Josh VanZant served as Nurse Corps participants for the exercise.

The NAVMEDEUR team served as an augmentation team that was primarily based out of a multinational Role 3 hospital. The hospital was commanded by the Romanian Army and augmented by Bulgarian, Dutch,

Italian personnel, and the NAVMEDEUR teams. A key objective of this year's exercise was improving interoperability amongst nations.

The NAVMEDEUR team was credited for leading the way in accomplishing this objective. They toured numerous facilities before becoming one of the first units to wholly integrate with a Swedish Role 2 unit (1ST MEDCOY). Many members also contributed to resuscitation cases in the Norwegian Role I



facility and gained experience providing enroute care. The exercise was a valuable experience and would be beneficial to continue.~



Above: LT Josh VanZant and HM3 Bernard Malvosin (USNH Sigonella, Italy) transfer a patient to the CT scanner during Vigorous Warrior 2019. Photo by NATO Centre of Excellence for Military Medicine.

Left: LT Deborah Woods-Chattman receives a patient to the Role 3 Intensive Care Unit during Vigorous Warrior 2019. Photo by LT Josh VanZant.

Navy Nurses attend European-African Military Nursing Exchange

Patricia Butler, LCDR, NC USNH Naples, Italy

The 6th Annual European-African Military Nursing Exchange was held in Ramstein, Germany, April 1-4, 2019. This year's event focused on "Military Medicine, Readiness, and Global Health—Nurses Meeting the Challenge." Delegates from 17 nations, including the United States, Slovakia, Poland, Uganda, Tanzania, Greece, Norway, and Sierra Leone,



participated in the 3-day event. The exchange included multiple podium and poster presentations, as well as an entire day devoted to an intense simulation and training evolution designed to enhance joint medical readiness. Three U.S. Navy Nurse Corps Officers attended the exchange: **CAPT Heather King** (NMC San Diego), LCDR Patricia Butler (USNH Naples), and LT Latimer (USNH Naples). **Emily** This was a unique opportunity to establish connections and discuss challenges shared and lessons learned in providing nursing care in austere environments.~

Left: Brig. Gen. Shanna Woyak, NC, USAF, presents CAPT King with a Certificate of Appreciation for her presentation "Ship Based Global Health Engagement Missions: Lessons Learned from the Pacific." Photo by LCDR Patricia Butler/Released.



Above: LT Latimer, a Clinical Nurse Specialist in the Emergency Department at USNH Naples, shared her team's project, "Implementing an Event-Based Approach to Training Simulation Program to Improve Response to High-Acuity/Low-volume Events: An EBP Approach" (co-Author CDR Corey Gustafson, MC, USN, DO). Photo by LCDR Patricia Butler/Released.





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Expeditionary Medical Facility Integration into Joint Exercise at PACBLITZ19

Sharon House, CAPT, NC

OIC, NEMTI

The Naval Expeditionary Medical Training Institute (NEMTI) on Camp Pendleton, CA, hosted Expeditionary Medical Facility (EMF) integration into joint exercise Pacific Blitz 2019 (PacBlitz19) 11-23 March 2019.

A military exercise is the employment of military resources in training for military operations, either exploring the effects of warfare or testing strategies without actual combat. This also serves the purpose of ensuring the combat readiness of garrisoned or deployable forces prior to deployment from a home base.

PacBlitz19 involved thousands of Sailors, Marines, and Soldiers to test the DoD's response to a major conflict in the Pacific. One of the key objectives of the exercise was establishing the EMF to provide various capabilities across several expeditionary stakeholders, to include I Marine Expeditionary Force (I MEF), 3rd Fleet (C3F), and Navy



Naval Expeditionary Medical Training Institute,
Camp Pendleton, California.

Patient Movement. Seabees assist with movement of incoming casualty. Pictured left to right: LS2 Charenni Carrillo, BU2
(SW) Tuan Tran, BU3 (SCW) Rosner.

Expeditionary Combat Command (NECC).

This was the first-ever incorporation of an EMF into a joint exercise supporting major combat operations. Doctors, nurses, hospital corpsmen, Seabees, and numerous support staff from NMC San Diego, NH Camp Pendleton, NECC Pacific, and Construction Battalion Maintenance Unit 303 established the EMF, providing theater hospitalization to the I MEF and C3F Commanders.

This evolution tested the ability of a major medical unit's capability to plan, communicate, and conduct operations over great distances. The exercise took place at sea and at Naval Base Ventura County, Marine Corps Base Camp Pendleton, and Tripler Army Medical Center.

Navy Nurse Corps officers participating in the exercise included CAPT Paul Allen, EMF Alpha (Camp Pendleton) Executive Officer and LCDR Kender Surin.~



Naval Expeditionary Medical Training Institute,
Camp Pendleton, California.

Initial care and assessment of a blast injury patient. Pictured left to right: HMC (SW/SW/IW) Cortez Brown, HM2 (FMF)
Cesar Martinez, HM2 (AW) Matthew Hegquist, HM3 (FMF)
Stephen Williams, HM3 (FMF) Nathan Lilly.







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2nd Annual Navy Reserve Nurse Corps Operational Nursing Symposium

PO2 Jared E. Walker

Navy Public Affairs Support Element East—Reserves

Members of the U.S. Navy Reserve Nurse Corps took part in the 2^{nd} Annual Navy Reserve Nurse Corps Operational Nursing Symposium, March 7-10, at NMC Portsmouth.

The 4-day event had seven different commands from the Navy Reserve in attendance. Some of the topics discussed included military medical research, pre- and post-deployment issues, officer development, readiness, legal issues, and simulation training.

This year's event provided nurses with information on "what it's like down range," said Michael Anthony Mitchell, a nurse educator for the simulation center at NMCP and a retired Navy Lieutenant Commander with 31 years of military service. According to Mitchell, force readiness was a major part of the nursing symposium.

"Right now, the conflicts people think about are on the ground, but we are in the Navy and are a force that operates from the sea. The Marine Corps realizes that and it's time to go back to the sea. Any nurse can end up on a destroyer and not just a

carrier or amphibious ship due to this," said Mitchell.

RADM Mary Riggs, Deputy Assistant Director, Research and Development and Chief Nursing Officer at the Defense Health Agency, and Deputy Director, Reserve Component, Nurse Corps, also attended the event. She spoke about the challenges the Nurse Corps may face in a changing world.

"Across the Navy, we are enhancing our capabilities, including hardware, science, innovation, training, and above all, readiness," said RADM Riggs. "It's important the Nurse Corps remain ready to save lives in the next fight." RADM Riggs also discussed the importance of professional development in the Nurse Corps.

"Remember, even though we're a part of the Nurse Corps, we are Naval officers first. That's why focusing on your military professional development is so important."

Also in attendance at the symposium was Master Chief David Schwartz, Command Master Chief



PORTSMOUTH, Va. (March 8, 2019) – Command Master Chief David Schwartz, command master chief for Operational Support Health Unit Portsmouth Headquarters Detachment, gives a presentation to members of the Navy Nurse Corps about deployment preparation. (Photo by PO2 Jared E. Walker/Released)

for Operational Support Health Unit Portsmouth Headquarters Detachment, who emphasized the importance of training Hospital Corpsmen as a top priority.

"In today's Navy the requirements are changing. That is why it is just as important to send our [Hospital] Corpsmen in the reserves to 'C-school.' By doing so, we are keeping them trained and ready to go because they will be needed," said Schwartz.~

LT Jamie Bass, a navy nurse with 2nd Medical Battalion, 2nd Marine Logistics Group, dons a flight helmet during the culminating exercise of a Special Operations Forces Austere Care Course at Camp Lejeune, North Carolina, March 21, 2019. Sailors of 2nd Med. Bn. trained in emergency



and enroute medical care with U.S. Army, Air Force, and Marine Corps forces to improve standards of care during medical casualty evacuations (U.S. Marine Corps photos by Lance Cpl. Scott Jenkins).







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Nursing Specialty Conferences: Renewed Passion and Improved Practice

David Frey, LT, NC

Nicholas Rodriguez, LT, NC NMC San Diego

Nursing specialty conferences offer a place where specialty nurses come together to share unique experiences and immerse themselves in the passion of the profession. Specialty conferences also provide a unique opportunity to network with members of the community, and learn about new innovations and the latest evidence-based practices from subject matter experts.

Having just returned from the American Psychiatric Nurses Association Clinical Psychopharmacology Institute West, LT Rodriguez and I would like to offer some tips for making the most out of a nursing specialty conference:

* Walk into the conference with a goal to take something back to your staff and patients, or share what you learned with your community.

*Introduce yourself to your civilian counterparts. Seek to understand their roles, challenges, and successes, and share information about your experience as a Navy nurse working in the specialty. Even career Navy nurses will eventually transfer to the "1st Civilian Division," and it will not hurt to have made some connections in your specialty.

* If you are struggling with a specific skill set or a certain sub-set of

patients, look for breakout sessions that address the topic and seek opportunities to discuss the latest evidence with subject matter experts.

* There are often vendor exhibits at conferences where new technology and equipment innovations are showcased. Take advantage of the opportunity to visit the vendors. However, be careful to avoid communicating in a way that would result in an unauthorized commitment

* If possible, attend with someone from your unit, or at least your command. It's more fun and engaging when you can discuss how topics are applicable to your specific facility.

* Dress in layers and bring a jacket/ sweater -- some conference rooms are extremely cold.

* Bring a pen and take notes. Be aware that some continuing education credits are awarded only given after you pass a quiz during the evaluation.

Many specialties have more than one supporting organization, so feel free to reach out to the leaders in your community when seeking out the best and most applicable educational events. If you want to experience a higher quality and satisfaction of work that extends beyond the bedside, surround yourself with professionals who think big and possess an insatiable appetite for improvement by attending a nursing specialty conference!~

Conferences are exciting events that allow us to refresh and recharge. If you're interested in attending a national conference, you may need BUMED approval in addition to command funding and support. Check with your chain of command and Specialty Leader for more information. Remember that many professional organizations offer highly professional local conferences, typically through regional chapters. Local conferences provide a high quality educational experience – often at a much lower fee and without the added time and cost of travel. Check with your Specialty Leader, or research local educational offerings from your professional organization's website!

Upcoming Conferences!

1900 – American Organization of Nurse Executives Convention has passed (April), but the Emerging Nurse Leader Institute is June 10-12, Omaha, NE. www.aone.org

1900D – International Association of Clinical Research Nurses 11th Annual Conference October 21-23, Philadelphia, PA. www.iacrn.org

1903 – Professional Nurse Educators Group Annual Conference October 3-6, Cleveland, OH.

1910 – Academy of Medical-Surgical Nurses 28th Annual Convention

September 26-29, Chicago, IL. www.amsn.org 1920 – Association of Women's Health, Obstetric, and Neonatal Nurses Convention June 8-12, Atlanta, GA. www.awhonnconvention.org

1922 – Society of Pediatric Nurses Annual Conference passed in April. If you are feeling bold, the 30th International Conference on Pediatric Nursing and Healthcare will be held August 19-20 in Zurich, Switzerland and will have speakers from Europe, U.S.A, Canada and Japan. https://pediatric.nursingconference.com

1930 – American Psychiatric Nurses Association Annual 33rd Annual Conference October 2-5, New Orleans, LA. www.apna.org

1940 – Association of Public Health Nurses Annual Conference passed in April, but the Association of Community Health Nursing Educators Annual Institute will be held May 30 – June 1, Phoenix, AZ. www.achne.org

1945 – Emergency Nurses Association Annual Conference

September 29 - October 2, Austin, TX. www.ena.org

1950 – Association for Perioperative Registered Nurses conference has already passed this year but there is an OR Excellence Conference, October 3-5, New Orleans, LA. www.orexcellence.com

1960 – American Association of Critical Care Nurses National Teaching Institute and Critical Care Exposition. May 19-23, Orlando, FL.

vww.aacn.org

1964 – Academy of Neonatal Nursing 19th National Neonatal Nurses Conference. September 12-14, Orlando, FL. www.academyonline.org

1972/D – American Association of Nurse Anesthetists Annual Congress

August 9-13, Chicago, IL. www.aana.com

1973/1974/1976 – In addition to their respective nursing specialty conferences, the American Association of Nurse Practitioners Conference (multispecialty) will be held June 18 – 23, Indianapolis, IN. www.aanp.org

1981 – American College of Nurse Midwives 64th Annual Meeting and Exhibition. May 18-22, Washington, D.C. <u>www.midwife.org</u>

3130 – National Society of Certified Healthcare Business Consultants Annual Meeting. June 12-14, St. Louis, MO. www.nschbc.org

3150 – The Association for Nursing Professional Development conference was in April but there is the National League for Nursing Education Summit September 26-28, National Harbor, MD. www.nln.org

68L AQD – The American Nursing Informatics Association conference was in April this year (Next year's will be May 7-9 in Chicago). There are smaller chapter conferences that occur throughout the year. www.ania.org



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Bravo Zulu!



Certifications

- LT Kara Ballas, NMC San Diego, earned her CNOR certification.
- **LTJG Danielle Cogburn**, WRNMMC, obtained her certification as a Certified Medical-Surgical Registered Nurse (CMRSN).
- LTJG Rocquelle Dishaw, WRNMMC, earned her certification as a CMSRN.
- **LT Jessica Hann**, USNH Yokosuka, obtained her Nurse Executive Board Certified (NE-BC) certification.
- **LTJG Kathryn Hrezo**, NH Jacksonville, obtained her Critical Care Registered Nurse (CCRN) certification.
- **LT Nina Jackson**, NMC Portsmouth, obtained her NE-BC and her Ambulatory Nursing Certification.
- LTJG Scott Klingensmith, NH Camp Pendleton, obtained his CCRN certification while deployed to the NATO Role 3 in Kandahar, Afghanistan.
- LT Tiffany Licthenwalner, NMC San Diego, obtained her CNOR certification.
- LT Eric Makovsky, NMC San Diego, earned his board certification as a Pediatric Acute Care Clinical Nurse Specialist.
- LCDR Desirae Pierce, DUINS student at Duke University, obtained her Neonatal Nurse Practitioner Board Certification.
- LT Nicholas Rodriguez, NMC San Diego, obtained his Psychiatric-Mental Health Nurse certification.
- LT Melissa Quinones, NMC Camp Lejeune, obtained her certification in Emergency Nursing (CEN).
- LT Renee J. Mimbela, NMC San Diego, earned her certification as a CMSRN.
- LT Stacy Bourne, USNH Guam, earned her certification as a CCRN.
- LTJG Laura Krieg, USNH Guantanamo Bay, earned her certification as a CMSRN.
- **ENS Robert Whitelaw**, NMC San Diego, earned his certification as a CMSRN.

- **LT Shannon Dougherty**, NMC San Diego, obtained her Ambulatory Nursing Certification.
- LTJG Jenn Cahill, NMC Portsmouth, obtained her CNOR.
- LT Nicole M Barthelme, USNH Okinawa, obtained her certification in Psychiatric Mental Health Nursing.
- LT Tracy Linette Dean, NHC Oak Harbor, obtained her certification as an Inpatient Obstetric Nurse.
- LCDR Melissa Slack, NH Camp Pendleton, earned her certification as a CMSRN.
- LTJG Melissa Campbell, NMC San Diego, earned her certification as a CMSRN.
- LT Alexandra Andrakakos, NMC San Diego, earned her CEN.
- LT Liezl I. Dagum, NH Jacksonville, earned her certification as a CCRN.
- LT Andrea Tondre, USNH Yokosuka, obtained her Pediatric Nursing Certification.
- **ENS Emily Kinley**, NMCSD, obtained her Pediatric Nursing Certification.
- LT Ruth E. McLane, NHCNE Newport, RI, obtained her Ambulatory Care Certification.
- LT Tiffany Lau, USNH Okinawa, obtained her bulatory Care Certification.
- LTJG Abby Hohmeier, NH Beaufort, earned her certification as a CMSRN.
- LT Annette Fernandez, NMC Portsmouth, earned her certification as a CMSRN.
- LT Timothy Dye, NH Jacksonville, earned certification as both a CMSRN and CEN.

Earn a certification or a non-DUINS degree? Selected for an award or honor? Congratulations!

For mention in our BZ section, submit your announcement through your chain of command, then to your Nurse Corps News team using the envelope hyperlink found on each page in the lower right-hand corner, or <u>find us on milSuite!</u>





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Bravo Zulu!



Education

LT Ingrid Knight, NH Beaufort, earned her Master's in Public Health from Liberty University in Dec 2018.

Congratulations to the following Uniformed Services
University of Health Sciences DUINS graduates who
achieved their certifications!
Family Nurse Practitioners (FNP),
American Association of Nurse Practitioners:
CDR Amy Ziezulewicz, DNP, FNP-C
LCDR Crystal Aandahl, DNP, FNP-C
LCDR Kayla Horton, DNP, FNP-C
LCDR Kara McDowell, DNP, FNP-C
LT Jimmie Riffle, DNP, FNP-C

Psychiatric/Mental Health Nurse Practitioner (PMHNP), American Nurses Credentialing Center: LCDR Colby O'Quin, DNP, PMHNP-BC

Recognition

LT Tony Rohner, USS JOHN C. STENNIS (CVN 74), earned his Surface Warfare Medical Department Officer warfare designation while deployed underway as Ship's Nurse.

Four NH Jacksonville nurses have been selected for The Great 100 Nurses of Northeast Florida's "Great 100" award. The award recognizes nurses who have demonstrated outstanding contributions to the patients and families for whom they care, the profession as a whole, and the community in which they live. NH Jacksonville's selectees will be recognized at an event on May 11: LCDR Chad Moore, Nurse Anesthetist Training Program Site Director; LCDR Dagoberto Salinas, Adult-Gerontology Clinical Nurse Specialist; LT Andra Wilke, Maternal-Infant Unit Department Head; and Patricia Gill, Urology Clinic Manager.

Congratulations to **CAPT Andrea Petrovanie** for being selected for the American Nurses Credentialing Center's 2019 Certified Nurse Award. This year's winners demonstrate the value and impact specialty certification has on nursing practice and patient outcomes. They demonstrate, through certification, they can provide superior care to their patients and become even greater assets to the healthcare organizations at which they work.



Andrea Petrovanie MSN, RN-BC Ambulatory Care Nursing

Captain Andrea Petrovanie, board certified for more than 20 years and a Wagner College graduate, is the Senior Nurse Officer, Directorate for Branch Clinics, Naval Medical Center San Diego. She joined the Navy in 1991 and is a member of the Nominating Committee of the American Academy of Ambulatory Care Nursing.



LCDR Joanna Johnson gets pinned by her mother, Shirley Russell, during her promotion ceremony on Feb. 15. Johnson joined the Navy Nurse Corps in 2003 and Russell retired from the Navy Nurse Corps in 2011. "The fact that she held on to it for me, yes they are actually hers," Johnson said. "It means a lot because you never know how far you're going to come, and when you think about it, it's pretty special."



