

The Pulse



Vol. 2, No. 26

February 24, 1991

Congressional visit

Senators visit Mercy, dine with crewmembers

by JOI W. David Melancon
Public Affairs Division

When Becky Cory decided to accept the invitation to have dinner with Alaska's Senator Ted Stevens, she didn't care that as the ranking Republican of the Senate's powerful Appropriation's Committee, movers and shakers the world over would kill for the chance to bend his ear about policies and programs. All she wanted was a chance to talk about home.

Cory, a native of Juneau, Alaska, was one of several Mercy crewmembers who dined with members of the Senate during a visit Monday. Unlike many of them, she wasn't concerned with hearing about matters of state or tax deferrals. Her choice of conversational topics was simpler.

"I really just wanted to thank him," she said. "I wanted to get him to pass a message of thanks to the people at Providence Hospital in Anchorage."

Since Cory's name appeared in an Anchorage, Alaska, paper several months ago, the nurses of Providence's Critical Care Unit have been sending her letters of support, photos and packages with audio tapes, food and gifts.

"I also wanted to find out what the people back home thought about us being out here," said the 25-year-old



Sen. Sam Nunn of Georgia discusses Mercy's capabilities with Cmdr. Roland Griffin.

corpsman. "That, and how all of this is affecting the oil industry back home.

"He (Stevens) said there were some protestors, but there was a lot more support," she continued. "He said the people of Alaska were really behind us."

A four-year Navy veteran, Cory is assigned to Mercy's Casualty Receiving Department. She had just reported for duty to Naval Hospital Oakland when she was informed that she would be deploying in support of Operation Desert Shield.

"I had three hours to deploy -- it was 7 p.m., and they told me I had to report no later than 10 (p.m.)," she said with a laugh. "I had just driven cross-country and unpacked my car. I just packed it back up and mailed the keys to my father.

"I really wanted to deploy," she emphasized. "I just wanted to have a little more time to do it in."

After a little more than six months of deployment, Cory is still glad she's here -- she just wants to get on with the job.

"I just don't like the waiting," she said. "I mean, it's terrible to say, but we're bored. We drill and drill and drill -- we're really ready to work."

While having dinner with a U.S. senator wasn't the high point of Cory's deployment, it was a chance to do something different. And it was an indirect link with home -- Stevens took Cory's mother's address, promising to contact her on his return to the States.

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From the Commanding Officer: On the road

I hope you don't mind if I start this column on a personal note. I want to publicly thank our hot-shot orthopedic surgeons, anesthesiologists, OR crew, Lab and X-ray personnel, PACU staff, Physical Therapy guys and Food Service folks for the superb treatment I got as a patient this week. Being on the wrong side of the bed is tough for an old doc, but all of you made it much easier and almost tolerable! I had no doubts that we gave the best medical care in the world, but now I know it for a fact. Thanks.

By the way, even though Ann, our newest aerobics teacher, is taking all the credit for messing up my knee, don't believe her -- I first hurt it 25 years ago, trying to climb out of my playpen. I was just too chicken to have it fixed then.

This has been a pretty rough week for all of us. First, the congressional delegations, then a not-so-hot (too hot?) stop in Bahrain, and finally, continuous, yet seemingly inconclusive, talk about peace plans, followed by all kinds of ultimatums (ultimata for all you Latin jocks). It's stressful, and we've had a hard time, but we need to keep going and get ready for whatever lies ahead. It's definitely time to get back on track.

I won't dwell on what we discussed at Captain's Call, but I will say again that our liberty performance was not what I expect from a crew of our high caliber. Lots of people fell on their swords. I know we were max stressed, but we need to stop and think about how to deal more constructively with future frustrations. We need to dig deep to figure out what went wrong and then move ahead, using the lessons we've learned to make us all better officers and sailors and, most importantly, leaders. To do the job ahead of us, we need to apply what we've learned from our experiences, while putting the past into a proper perspective. We can't forget history, but we can benefit from its sometimes painful lessons.

Speaking of moving ahead, MWR has really moved out getting our new PA system on line. It arrived on board just in time for Country-Western night and will be of real value for next week's Coffee House. Rather than holding the Coffee House in the wardroom and limiting attendance, we'll be able to have it on the mess decks, open to all hands. Good job Lt. Cmdr. Trezza and crew.

The ship's store has also been moving ahead. The staff has done an excellent job getting ball caps, bears,

T-shirts and other Mercy memorabilia. Now that we can mail packages home again, we have something to mail! BZ to Ensign Holland, Cmdr. Griffin and all the other Supply folks.

And finally, the most important moving ahead topic...is the U.S. about to start the big ground war? I honestly don't know. Talk this past week about the Soviet peace plan had a lot of hopes up; unfortunately, it sounds like Iraq is still placing too many conditions on withdrawal for the U.S. to accept the plan. According to news reports, U.S. and allied commanders say, regardless of what happens, their troops are ready, and that U.S. forces have begun making reconnaissance forays across the border into Iraq and Kuwait. At last count, allied forces had destroyed nearly 1,700 Iraqi tanks, 925 armored fighting vehicles and 1,200 artillery pieces plus Saudi forces were holding over 1,500 prisoners of war. About 580 Iraqis are being held in Turkey after voluntarily turning themselves in. DoD briefers say we've destroyed roughly 30 to 40 percent of the Iraqi army's hardware.

Whatever we're called on to do, keep your chins up. We'll all get through this together.

-- Me.

From the CMC:

by HMCM(SW) R. A. Cooper
Command Master Chief

Within hours of each other, USS Tripoli (LPH-10) and USS Princeton (CG-53) each hit a mine while on patrol in the North Arabian Gulf.

With it's H-46's as spotters, Tripoli was on a mine-sweeping mission at 2 a.m. Feb. 18 when it struck a floating mine in Kuwaiti waters. The mine blew a hole just along the water line. The jolt blew both mine watches over the side -- both were recovered uninjured.

Princeton was farther north and ran into a moored mine field. The explosion damaged a shaft, the rudders and caused some leaks to the hull, but the ship remained operational. Only slight injuries to the crew were reported.

Although the thought of USNS Mercy meeting a mine is frightening, it is a very remote possibility. The level of protection provided for us is, and will continue to be, extraordinary.

Even if we managed to find a mine, the special features of this ship will keep any sustained damage at a minimum.

If and when we head north, we should be in a relatively safe opera-

tional area, away from mines and out of Silkworm missile range. We will move back and forth with the Comfort to maximize the treatment and off-loading of casualties.

Worrying about mines and missiles is perfectly normal and understandable. We have to remember that we are being protected by the best. We can't let fear or apprehension hinder our ability to do our jobs.

The Pulse

The Pulse is the official publication of the Medical Treatment Facility aboard USNS Mercy (T-AH 19). It is intended for shipboard personnel and contains professional information relative to members aboard the ship. Opinions expressed are those of the authors and do not necessarily represent the official position of the Department of the Navy or any other governmental department or agency. Contributions are welcome and will be published as space permits, subject to editing and possible abridgment. The Pulse is a weekly publication, submissions must be received by the editor by Tuesday COB.

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Hostile fire pay, savings plan top list of special benefits given to Desert Storm service people

by Ensign Charles Moore
Disbursing Officer

A lot has happened in the past week. As most of you know, the predominant amount of our time has been spent processing and expediting matters concerning our selected reservists.

To that end, we succeeded in identifying problems, and I am confident this latest crisis will be resolved, as promised, by the March 1 pay cycle.

As of this writing, every reservist on board now has a pay account opened, regardless of reserve center action. All members with direct deposit will receive electronic transfers on March 1, either via the traditional system, or by a personal arrangement between this command and the Defense Finance and Accounting Center.

In other news, you should have seen our notice in the Plan of the Day. We have now reached the status of a full-fledged "Savings and Loan," complete with scandal, high drama and a 10 percent savings plan. Eligibility for the

Desert Storm Savings Plan is basically dependent upon eligibility for Hostile Fire Pay. Therefore, as long as we qualify for HFP, we qualify for the savings plan. You may either deposit cash, or establish an allotment with the disbursing office. The minimum amount for allotment is \$5, and the maximum amount which may draw interest is \$10,000. Interest accrues quarterly. For more information, to start an allotment, or to make an appointment to deposit cash, please visit the office during customer service hours.

Next, all officers should be aware that they have several options with respect to their combat zone tax exclusion, as noted in the POD. If we haven't already by the time this is published, we will make arrangements to allow all officers to make a written statement of their preference for withholding. Again, the major intention is to prevent future liability.

For enlisted members considering reenlistment, now is the time if you will be entitled to an SRB. SRB contracts

signed in a combat zone will be annotated as TAX FREE. This means that no taxes will be deducted for the life of the contract. This could mean big savings for some rates.

Finally, we are in the process of implementing a system called UMIDS, which can dramatically improve the quality of our operation. The implementation process is rather arduous, however. Moreover, we have an incredible volume of business to attend to as a result of Desert Storm programs and reserve issues.

Consequently, we need your cooperation. Please utilize our posted hours of service. Of course, if you are going on emergency leave, or in the midst of some other crisis, we will help you anytime.

Again, constant traffic through the office precludes us from processing documents and doing the bulk of our work, which in turn leads to delays....And, no more pay questions in the P-ways!

The Pay Guys thank you for your support. *Peace*

See the Light

Using chemicals unsafely could be a blinding experience

by HM2 James Knapp
Safety Division

The prospect of being blinded on the job is something no one wants to face. Certain areas of Mercy have been designated as eye hazard areas and have warning signs posted. In these areas certain tasks, such as handling hazardous chemicals, require the wearing of safety goggles or full face shields. Still, accidents can happen, and should a caustic chemical splash into your eye there is help nearby -- the emergency eyewash station.

The emergency eyewash station should be centrally located so that you can get to it within ten seconds with your eyes closed. In a true emergency chances are very high that you will not be able to see where you're going. It's a good idea to make sure you can find the eyewash station by trying it blindfolded. Remember, every second counts when a caustic chemical has splashed into your eye.

Eyewash stations come in several types. On Mercy we have fixed eyewash stations with foot pedals, fixed systems which are attached to faucets that require a pin be pulled out and the faucet be turned on, and 16-gallon, wall-

mounted units which are activated by pulling a cap. It is important that everyone know how to operate the system in their work center.

It is also important to test, operate and flush fixed systems weekly. Wall-mounted units need to be checked monthly for water loss and the water has to be replaced every six months if it has been treated with an antibacterial treatment, once a month if it has not been treated.

Some of the designated eye hazard areas on Mercy are the lab, X-Ray, O2N2, the laundry and any place anything remotely considered an eye hazard is in use. It's a wise idea to wear eye protection and to make sure you know where the nearest emergency eyewash station is.

Check the material safety data sheet for required eye protection whenever you use any chemical. The MSDS should be located where you have the chemical. Check in at the safety office if you don't have the MSDS available.

Don't take chances with your eyesight! Supervisors should ensure subordinates know what risks are involved, and have been trained to use the eyewash station nearest them. Eyesight is too precious a gift to throw away because of stupidity and ignorance.

Think smart -- think safety!

Pride, Perseverance, Potential

Culture enriched by Afro-American contributions

by Ensign Charles Moore
Disbursing Officer

Historians have long recognized that culture, meaning the arts, provides a window into the soul of a civilization. Beginning with the first functional societies on earth, Africans developed high art in many forms. African art has permeated and influenced the culture of every corner of the world. Consequently, through mediums such as the performing arts, architecture, literature, painting, sculpture and music, African Americans have given immortality to their unique struggles and triumphs within our society. This week, I will try to highlight, in broad strokes, the development and influence of Afro-American culture upon the American scene, as part of our observance of Black History Month.

Early African-Americans

Most African-Americans trace their genealogy to ancestors in a region of West Africa dubbed the "Gold Coast" by early Europeans. This area, extending from what is now Sierra Leone, through Guinea, Ghana, and into Nigeria, later gained a more dubious title -- the Slave Coast. It was there many of our ancestors were captured, and were forced to make the "middle passage" to America. Those who survived, and estimates say more than 10 million did not, brought their traditions with them. The slave trade lasted for more than 200 years, and in that time enough Africans to populate both England and France were forcibly transferred to the west.

Reverence dictated the rituals and arts of most West African kingdoms. The Assante, who inhabit what is now Ghana, were representative. Assantes observed elaborate rituals to worship ancestors, and pay homage to deities and royalty.

Their ceremonies usually centered upon dance. Polyrhythmic drumbeats infused energy into the rituals, which often involved elaborate costumes and masks. In fact, the masks are today

highly valued for their artistic composition.

African Art

Sculpture represents another aspect of African art. Figures sculpted from wood were most often done in abstract. One example of the influence of African Art on western culture is its reflection in modern art. Around the turn of the century, a group of vanguard French artists became entranced with the abstraction in African sculpture, masks and pottery. Pablo Picasso was perhaps the most well known of the group of young Frenchmen who became known as 'les fauves' or 'wild beasts.' Picasso's breakthrough painting, "Les Femmes d'Alger (O. J. R. M.)," incorporates directly many of the styles of African Art, such as striations, and oblong, mask-like facial structures. With this painting, Picasso ushered in Cubism and completed the transition in Western painting from the impressionist to the modern.

In America, Africans created totally new forms of expression, such as the Spiritual. These "sorrow songs" sang of the oppression of the middle passage and bondage. They adapted African rhythm to Judeo-Christian lyrics, and forever chronicle a time of suffering and longing for redemption.

Literature offered another form of expression. Most African societies relied upon griots, or storytellers, to chronicle and recite their histories. Thus, integration into the Western world also meant transition into a written, rather than oral tradition. Gustavus Vassa, an 18th-century freed slave, was among the first to master the written form.

Early Afro-American writers, such as Frederick Douglass concentrated their efforts predominately upon the abolition of slavery. However, others such as Alexander Dumas (a Frenchman of African descent) and Sojourner Truth wrote fiction. Dumas is the author of the classics "The Count of Monte Cristo," "The Three Musketeers" and "The Man in the Iron Mask."

In the twentieth century, Afro-American authors continued to utilize their talents to expose the injustice of American society. W.E.B. Dubois' "The Souls of Black Folk" remains poignant today. During the Harlem Renaissance of the 1920s, the poet Langston Hughes came into prominence with his "Montage of a Dream Deferred." Also, music and prose became linked with the advent of the "Jazz Age."

Artists

Jazz music is a spontaneous expression, and its chords strike the essence of Black America. Its influences include African beats and New Orleans melodies, and its spread closely follows the field-to-factory migration of its people. Great jazz artists include Louis Armstrong, Duke Ellington, John Coltrane, Thelonious Monk, Miles Davis, Dizzie Gillespie, Art Tatum, Charles Mingus, Charlie Parker and many others. Writers like Hughes, Ralph Ellison, James Baldwin and Toni Morrison, all point to jazz and its improvisation as inspiration for their work.

Afro-Americans have also taken to the stage, with classics like "A Raisin in the Sun." Paul Robeson gained fame as Othello, and Marian Anderson was our first true operatic diva. Today, film maker Spike Lee, the Alvin Ailey Dance company, the Dance Theater of Harlem, Jazzman Winton Marsalis, actor Denzel Washington and author Toni Morrison continue our artistic traditions.

Finally, any attempt to fully describe the breadth of African and Afro-American culture would encompass countless volumes. What I really want to do is spark ones interest. It permeates our entire society. Rock music, for example, has its origins in the Mississippi Delta Blues practiced by such legends as Howlin' Wolf and John Lee Hooker. In fact, Elvis Presley's "Hound Dog" was first recorded by a blues artist in the 1930s. Art is a huge piece of our history, and it is what makes us, as a people, immortal. Peace

Counting calories with "healthy" common sense

by Lt. N.A.B. Dickey
Food Service Division

Some people will do just about anything to lose weight. They do not want to make the effort to change poor eating habits, to give up favorite foods, to count calories or fat, or to study nutrition. So instead they fall for the promise of a "quick - easy - weight - loss - while - you - eat - all - your - favorite - foods - diet" and do not realize they may lose their good health.

The calories in food we consume are used by our body to function properly. If extra calories are taken in and not spent on the body's proper functioning and other physical activities, the calories are stored in the liver and muscle as glycogen. This glycogen can be quickly withdrawn when needed. If there are too many calories being consumed, no matter if they come from carbohydrates, protein or fat, the extra calories will be converted to fat and stored in the adipose tissue. Fat calories become body fat more easily than carbohydrate or protein calories, so fat intake should be no more than 30 percent of your total intake of calories. If calories are not supplied to meet the needs of the body,

than fat that was stored in the adipose tissue is metabolized for energy. Exercise helps you to lose weight as it can burn up those extra calories stored in your adipose tissue.

In judging a weight reduction program, body composition should be monitored rather than weight loss in pounds. One pound of weight is equal to two cups of water and because the body is about two-thirds water, a loss of water weight can show up as weight loss.

But you want to lose fat, not water, on a reducing diet and a safe attainable fat loss is two to three pounds a week. A change in the percent of body weight in adipose tissues is the goal of a valid reducing diet. Remember muscle weighs more than fat and therefore you could lose inches before you lose weight.

The most proven way to lose weight is to reduce calories to a moderate level (no less than 1,200 for women and 1,500 for men), exercise 3 to 5 times a week within your target heart range for 30 to 60 minutes and change some of the habits or behaviors that made you overweight.

There are no shortcuts, but you can still lose weight, enjoy yourself, and not give up all your favorite foods. Just keep your intake to a moderate level and exercise.

**Food
for
Thought**

Line standing a novel exercise aboard Mercy

by Lt. Shari Marsh
Nursing Department

This past week has really been something else aboard the "Wild Thing." Unique forms of exercise have been exhibited by many of the crew. The dominant exercise most recently has been "LINE STANDING."

Now some may say standing in line is not really exercise but I would certainly like to argue the point. LINE STANDING can be done anywhere on this ship. There are many variations of LINE STANDING, some types requiring more endurance than others. Plus, proper attire is the UNIFORM OF THE DAY!

The most prevalent type is required for meals. Beginners in this new sport can accomplish this exercise with relative ease because the side-stepping "Mercy Shuffle" is simple and easy to learn. It's not a tricky step and requires movement in only one direction. An added advantage or incentive is that food is used as a reward. Simply Pavlovian!

A quick cross-over step from the "CHOW HALL Mercy Shuffle" will put you into the Intermediate Level of LINE STANDING for the Mercy Mall. I might add, it's the only mall in town so you can't miss it! At the Intermediate Level an advanced move of the Mercy Shuffle is the WALL LEAN, accomplished by leaning left or right depending on which direction the best rumors are coming from. The grand finale of the Intermediate Level Mercy Shuffle occurs when you are finally allowed to pay for the privilege of LINE STANDING at the cash register. You then begin your arduous trudge, carrying a ton of stuff, to your berthing or work area.

Advanced Level LINE STANDING is synonymous with "Liberty Call" and requires cerebral agility. First you must logically deduce (or maybe illogically) the site of the Liberty Quarterdeck.

Second you must keep this secret to yourself to assure that you'll be in the "SACRED FIFTY" to either get on the first bus or liberty boat. Third you should bring something to read be-

cause this LINE STANDING takes a minimum of two hours and no one can listen to that many rumors.

The Expert Level of LINE STANDING requires physiological as well as cerebral training -- the GRAND PRIX PHONE HOME line. The physiological part is "bladder training" because you wouldn't want to lose your place in line because of a weak or full bladder and Tandem LINE STANDING is discouraged unless you are willing to bear the sneers and jeers of angry shipmates who think you are "cutting the line" when you return from the pause that refreshes!

The cerebral part is trying to remember the phone numbers, your phone credit card number, the prioritization of your loved ones and what you absolutely, positively have to say in those very precious five minutes.

I have it on good authority:

**FLAT FEET ARE GROUNDS
FOR A MEDICAL BOARD!**

So, keep standing...
LET THOSE ARCHES FALL!

Craving, Control, Continued

Identifying the signs of addictive behavior

by Cmdr. Deborah Wear
Psychiatric Division

I was planning to write my usual meandering observations of life on Mercy, but for several reasons I'll be serious for a change. Don't worry, this is only a temporary digression. More than a few shipmates have requested both information and insights on alcohol use.

I'll try to answer some questions and provide at least a starting point for some reflection. Whatever our individual gripes are with being out here, this experience does provide us with a unique opportunity to look inward, and honestly assess our strengths and weaknesses. If we choose, we can then make some changes in our lives. Rather than focus only on alcohol use, please think of the following in terms of any chemical substance or negative behavior.

First, to answer a simple question: What constitutes an alcohol problem? Again, you may substitute nicotine, drugs, caffeine, or any dysfunctional behavior (overeating, gambling, promiscuity, etc.) for "alcohol."

A problem is present if use of a substance or certain behavior has caused a problem in your life. Period. Simple, eh? Now for those of you who

are still with me and not afraid to look at yourself honestly for a bit, here is one way to assess yourself or help a friend.

The Three C's

1. **Craving** -- Is there a strong urge for a substance (or behavior)? This urge can be either occasional or frequent. If anyone doesn't understand this, just ask any of the smokers on board or remember your desire for a good cup of morning coffee.

2. Have you lost **Control** of either: **Amount** -- You plan to have just two drinks, but get royally schnockerred instead.

Behavior -- You behave in an abnormal manner because of the substance.

Circumstance -- You choose/chose to use the substance (or engage in the behavior) in an inappropriate place/time/situation.

3. And lastly, have you **Continued** to use the substance (or engage in the activity) in spite of evidence that there is a negative effect on any of the following:

Family -- Do you have marital problems, arguments, missed outings, etc., that can be related to the substance/behavior?

Friends -- Have friends expressed concern to you about your behavior (or should they) or have your friends

changed to include those who also have a problem?

Finances -- Have you spent money you could not afford on the substance or activity?

Legal -- Have you had brushes with the law: DUIs, fights or military NJPs?

Spiritual -- Have you experienced a sense of loss of personal spirituality or meaning in your life?

Self-esteem -- When honest with yourself, have you had a sense of guilt or self-reproach about your behavior?

Medical -- Have you had medical problems related to substance use or addictive behavior?

Psychological -- Have you experienced depression, anxiety or similar symptoms related to use/behavior?

Occupational -- Have you been late to work or seen a decrease in performance? The old wives' tale is often true -- the jobsite is the last to usually manifest the negative effects of the substance use or behavior.

If the answer to any of the above is yes, you may want to consider making some changes in your life or at least giving more than a cursory thought to the problem area. For more information you may call Sick Call at 7358. The DAPA can give you information on alcohol abuse, and a smoking-cessation class will be started on board.

Unexpected events bring forth untapped courage

by Cmdr. Richard Mattie
Chaplain

Several months ago I came across a paperback book entitled "Night" by Elie Wiesel. It's one of those books you cannot put down until you have read it cover to cover. It captures your interest and complete attention. Wiesel writes of his several years as a Jewish prisoner in a Nazi concentration camp during World War II.

Of the many terrible experiences, he tells of Juliek, a young Polish boy who survived this most horrifying ordeal because he concealed his one most precious possession, a violin.

During one of the experiences Wiesel writes, "I was thinking of this when I heard the sound of a violin in the dark shed, where the dead were heaped on the living. What madman could be playing the violin here at the brink of his own grave?"

It must have been Juliek...

He played a fragment from Beethoven's Concerto. I had never heard sounds so pure, in such a silence.

He was playing his life. The whole of his life was gliding in the strings. His last hopes -- his cherished past, his extinguished future. He played as he would never play again.

When I awoke in the daylight, I could see Juliek, opposite me, slumped over dead. Near him lay his violin, smashed, trampled, a strange overwhelming little corpse."

There are many interpretations we can give to this story. This is my interpretation.

I imagine there were those victims so overcome by despair they could no longer bear or tolerate anything good or beautiful.

Each day, like young Juliek, we too are living amid an unexpected event of life. It is expressed and played out in our many involvements on Mercy. Hopefully each one of us can be a positive influence for good.

Feature

Corpsman receives first purple heart of Gulf war

by JO2 Mike Dean
Fleet Hospital Five

EASTERN SAUDI ARABIA -- HM3 Clarence Dean Conner's grandfather would be proud.

The field medical corpsman attached to the 1st Marine Division, which has been in the Saudi desert since Aug. 9, 1990, became the first American to be awarded the Purple Heart during Operation Desert Storm.

Maj. Keith Kelly, executive officer of Conner's battalion, presented the award to Conner Jan. 28 on Ward 12 of Fleet Hospital Five in front of a small group of patients and hospital staff members including Navy Capt. Richard A. Mayo, MC, commanding officer, Fleet Hospital Five.

While being raised by his grandparents, Clarence and Florence Sanders in Hemet, California, a small community 20 miles west of Palm Springs, Conner listened to Grandpa occasionally reminisce about the days when he managed a bomb production plant in San Bernadino during World War II.

And, although Sanders never served in the United States armed services, he urged his grandson to give it a try.

"He told me he thought it would be nice if I joined some kind of service, just to see what it was like," the blonde-haired, blue-eyed namesake says.

"If I didn't like it, then I could go to college afterward. If I did like it, then I could go to college while I was in and then get my commission and go through it that way."

Conner heeded his grandfather's advice several months after his namesake suddenly passed away. During the early months of his senior year in the Benning High School's class of 1987, Conner decided to postpone his college education despite acceptances into several California universities, and enlisted in the Navy as a hospital corpsman.

"After he died I thought maybe it would be a good idea just to see what it was like," the six-foot sailor says. "He wanted me to, so I thought it was a good idea."

Three-and-a-half years later Conner arrived at the Navy's Fleet Hospital Five, as the United States' first official ground force casualty.

Early in the morning of Jan. 17, Conner and seven others of his unit arrived at a location where they were to set up communications for a Marine battalion in an abandoned building near the Saudi-Kuwaiti border. Conner was one of four personnel providing security.

"All morning long we had been seeing artillery coming over. We couldn't see exactly where they were landing. We could just feel the vibrations from them exploding and they were quite a way away from us," the corpsman says.

Around 3 p.m. Conner's unit started a "three-man up, one-man go to sleep" watch. The team leader chose Conner to be the first person to take a nap and the 21-year-old laid down outside of the team's multi-purpose, multi-wheeled vehicle (humvee) to sleep on the ground in the prone position with his flak jacket over his head.

"About 25 minutes later, I heard a whistle, like something

was falling, then a whole bunch of explosions in a row," he says. "It all happened so fast."

Conner pushed himself up off the ground, and saw a line of explosions off to the right behind him.

"When the last one hit, I saw a flash to my right and felt something hit me in the back and I was knocked to the ground," Conner says.

He had been hit by a piece of shrapnel which tore a three-inch hole in his trapezoid muscle and severed a nerve in his right shoulder.

"I got back up and saw people running out of the building trying to get out so nothing would hit them," Conner says. "So I grabbed my weapon and my gas mask, got into the vehicle and we took off driving in a zig-zag formation so nothing else would hit us in a line."

Members of another unit, which had been tasked with manning a bunker 500 meters behind the building, motioned Conner's team to join them.

"As we drove over there, I could feel something burning in the top of my shoulder," the corpsman says. "I knew I was hit by something. I just didn't know if it was still in there or if maybe it came out. I wasn't really sure."

The excitement and quickness of the entire incident helped Conner remain calm, he says.

"It hurt, but it didn't hurt to the point where I was going to get nuts and start thinking crazy thoughts," Conner explains.

"After we got back to our bunker, I started feeling more pain then."

Since the piece of shrapnel in Conner's wound was so deep, a medic from the other unit could only clean the wound, apply a pressure dressing and "get comm," or communications, with a Medevac unit in the rear to get Conner evacuated. The medic also administered morphine to relieve Conner's pain.

Delayed by dangerous flying conditions, a helicopter arrived two-and-a-half hours later to take Conner to a medical facility with a Marine Surgical Support Team. By 8 p.m. Navy doctors had surgically removed the chunk of shrapnel from the corpsman's shoulder.

Around 1 a.m. on Jan. 18, soon after Conner woke in the facility's intensive care unit, incoming Iraqi artillery exploded about 100 meters away from the Surgical Support Team's location. For two hours, patients and staff members crowded into the medical facility's operating room until it was determined safe to resume a normal combat routine.

"I felt kind of bad for cheeing out, for leaving the team," Conner says. "They said, Don't worry. You got hurt. If anyone else got hurt, they'd be doing the same thing. If you can't stay up there and do the mission, they've got to get a replacement."

But, for Conner, it is the pride Clarence Sanders would have had for his grandson that makes the 21-year-old sailor the happiest.

"I think he'd be ecstatic right now," he says. "I know he's watching over me right now with a big grin on his face. I'm glad he is. I think about him 24 hours a day. Even though he's gone, I always think about him."

Reservist? Third Wavers? What are we supposed to call them?

by Lt. Cmdr. Goldie Brown
Nursing Department

More than a month's time has passed since our arrival aboard USNS Mercy. We survived the jet/barge lag, the 68-step accommodation ladder, full-cream milk and Jo-Jo's exercise classes -- now we are ready to do the job for which we were summoned. Our active-duty counterparts seem reluctant to address our group as reservists and/or third wavers. Much to my amazement, our "group" started this confusion. All aboard before us are just not sure about our health care skills and capabilities. After all, we have come to work alongside them, not to enroll in corps school, nursing school or medical school. Our skills are sharp and need only be perfected. Besides, there's no time for anything else.

Cmdr. Ernest Ghent has provided this interesting figure: 23 percent of the MTF staff are reservists. Capt. Paul Barry describes us as "a distinct subset of our Mercy team." Our skills and expertise are needed for the functioning of the now complete "team" aboard this floating medical treatment facility. Within our group are medical and surgical physicians, dentists, anesthesiologists and nurse anesthetists. We can work professionally and efficiently in the operating room, PACU, intensive care unit and in all categories of care delivered on the wards: The enlisted personnel are practicing associate degree nurses; paramedics; OR, pharmacy, laboratory, dental and X-ray technicians; and morticians. (I know, because I was the training officer for the Houston bunch.) Our speech has a twang and/or drawl but our skills are of the highest caliber. (Did anyone get the address of the lawyer?)

With the assistance of Cmdr. Kim Hamelberg, and after researching the instructions, SECNAVINST 1001.35 in particular, the following information is to clarify the different categories of Naval reservists. First are the Ready Reserves, which are organized in units or as individuals. These reservists are liable for orders to active duty to augment the active forces in time of war or national emergency. This group consists of the Selected Reserves (SELRES) and the Individual Ready Reserve (IRR).

The Individual Ready Reserve (IRR) is a manpower pool of trained individuals, who have previously served in the active forces or in the Selected Reserve. They are recalled annually to screen their health status and health

care skills and credentials. Because this group is in an active status, they are liable for involuntary orders to active duty in accordance with Title 10, United States Code, section 673.

SECNAVINST 1001.35 describes SELRES as units or individuals designated by their respective corps (medical, dental, engineering, etc.) and approved by the Joint Chiefs of Staff as so essential to initial wartime missions that they have priority over all other reserves. The SELRES are subject to involuntary recall at various periods and extensions of time in case of war or national emergency. (Some of us didn't read the fine print on our contracts!) They are required to drill 16 hours a month and two weeks a year. Hamelberg has identified yet another subgroup within the SELRES -- incentive programs designed to attract and retain health care personnel in the Reserves. Their acronyms are "PRIMUS," "IMA" and "REFLEX."

Physician reserves in medical university settings (PRIMUS) are ready reservists who are associated with a medical school, i.e., Baylor or the University of Texas. Nurses and enlisted operating room technicians are also entitled to this option. Each month they submit continuing medical education credits (CME) on an hour-for-hour basis to substitute for required drill time. The Individual Mobilization Augmentee (IMA) is a physician who is trained but not associated with a medical school. He or she participates in training activities on a part-time basis in preparation for mobilization. Only eight hours of CMEs are required. The REFLEX group of reservists submit up to eight hours of CME credits per month, with a second eight hours of actual drill time. They must also complete active duty for training (AT).

The final group are the retired reservists. These individuals have been determined eligible for retirement with the possibility of involuntary recall to active duty.

The real difference between active duty and reserve personnel is seen in compensation and wages. Reservist are paid three times more than their active duty counterparts. (Believe that and you have just purchased swamp land in Bug Tussle, Texas!)

In closing, I hope these distinctions help to differentiate the various categories of reservists. When I'm called a reservist my chest sticks out and my head is held high. I wear the title with honor and pride. It's a title that says I'm a professional, and I'm well-trained in my field. Don't mention waves, I've visited sick call twice already!

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Stevens, along with Senators Sam Nunn of Georgia and Daniel Inouye of Hawaii, toured Mercy on one leg of an official trip throughout Desert Storm's entire area of operation.

While onboard Mercy, the readiness of Navy medical personnel and

facilities was the main focus of the Senate leaders' visit.

"Senator Inouye had read an article about complaints in the treatment capability of medical units in the theater -- outdated equipment, a lack of necessary items. He voiced concerns about this," explained Capt. Paul Barry, commanding officer of Mercy's

MTF. "As the tour progressed, I think he realized the article he read didn't apply to the Mercy. He realized that we have state-of-the-art equipment and capabilities, and that our people are the very best.

"I think they left knowing they were definitely getting their money's worth out of the hospital ships," he said.

The Rumor Mill

An Epistle from the Edge of Insanity

Welcome back to the Rumor Mill after my self-imposed, extended hiatus from "The Pulse." Mainly I was just too depressed and bored to keep writing. In fact, I was chairman of the bored, often filling my days with ironing my socks and flossing my roommates teeth just to while away the empty hours. Thankfully, with a little prodding, mainly from my irritated, gum-bleeding roommates, I've decided to provide an update of the ships' latest rumors and half-truths. Besides, ever since the sea lawyer escaped our ship, "The Pulse" seems to have lost some of it's bawdy edge. Let's begin:

- Firstly, apparently Cmdr. D. Barrett never made it back to the States. He remained in theater, and opened up a small practice in Bahrain which specializes in high fees for assisting U.S. reservists suing the Navy for their extended activation in the Gulf. All interested parties can write to Dan Barrett, Land-Lawyer, in Manama, Bahrain.

- Our latest ship's motto is: "No Sex, No Booze, No News!"

- "Screw Kuwait, Let's go home" T-shirts have again sold out from the ship's store. More are on back order.

- Due to the tremendous surge in workouts and gym crowding, workouts will be limited to one per month. Don't fret, however, local fitness experts happily suggest a simple, 38-hour workout should suffice to remain physically fit.

- New reservist who was an ex-con relates three advantages that prison contains over Mercy life -- more daily news, better gym facilities and more frequent sex.

- Need some spare cash? Steel Beach cabana boys are now being recruited. All interested, see Capt. Littman on "the beach" -- Sunday 0800.

- Newly scheduled lecture this week entitled, "What not to say to visiting dignitaries" will be given by an unnamed officer. All borderlines and truly outspoken individuals are welcome to attend.

- SITE T.V. and the Department of Neurosurgery are proud to rebroadcast their bedmaking video entitled "How to Make a Lower Bunk Without Fracturing Your Skull" next Thursday evening.

- GOOD NEWS! As a solution to the shortage of working urinals, step ladders have been purchased for selected sinks in male berthing.

- It is true Mercy's amphibious assault team will have to pay for their special lobster dinner if they remain here much longer.

- Mercy will not be decommissioned after the war to become an international floating aerobic fitness center.

From the True/False Files:

- False: Ensign Holland has ordered steroids to sell in the ship's store.

- True: Ensign Holland will obtain new gym equipment prior to arrival of the 47th wave of personnel.

- With the recent sales success of the "Mercy Teddy Bears," new, more authentic models have been ordered. They'll come complete with MOPP gear, miniature gas masks and alcohol-scented canteens. Orders are now being accepted at the ship's store.

To conclude, I've compiled some helpful guidelines to assist new crew members with recent difficulties.

* Here are some tips for the successful five minute phone call home:

- (1) Discuss nothing topical, informative or relevant.
- (2) Avoid personal issues.
- (3) Avoid business or legal issues.
- (4) Speak extra softly so your significant other thinks it was just a dream that you actually called.

(5) Don't drink heavily while on the endless phone line, otherwise you may actually forget who you wanted to call in the first place.

* Identifying behavior patterns that probably indicate you've had too much to drink.

(1) You suffer disabling vertigo and sea-sickness even though the ship is still docked.

(2) Your new chukka boots are actually your old vomit-laden Corframs.

(3) You feel you are running the ramps faster than you ever have, and yet you haven't even left your room yet.

(4) Finally, you wisely decide that the best way to remove your pants is to take them off over your head.

If you recognize any of the above problems, please obtain some counseling.

* Finally, here is the most recently updated list of the ship's multi-divisional police units:

- (1) electrical police
- (2) moustache/grooming police
- (3) shower police
- (4) sex police
- (5) coffee cup police
- (6) walkman police
- (7) trash police
- (8) flash photography police
- (9) counter-clockwise jogging police
- (10) Latest addition: visiting dignitary decorum police.

Thank God we are so well-protected on Mercy during our war effort. I hope you enjoyed this update. Please try to maintain your sanity and sense of humor. Let's cut to the chase so we can go home.

*With Warm Personal Regards,
Nick (still clean and sober) Hyde*



Mercy Messages

Click your boondockers three times and say "There's no place like home..."

"Jim Stritzel from Sharon Stritzel. Hi Jim, we just want you to know that we are getting your mail slowly. Please take care of yourself and keep your spirits up. Keep writing because we all love your letters. Love, Sharon."

"Ann Saucette to BM2 Lawrence Saucette in laboratory. Hi, everything is fine at home and we all love you."

"Sandra Taylor to Robert L. Taylor. Tress and I love you very much. Everything is fine at home. Write when you can."

"Lt. Shirley Coates - hurry up and come home. I'm getting tired of babysitting Norman. We miss you. Love, Jennifer Kite-Jerry and all the kids."

"Alden Brandenburg from Joan. Hi Dad. I hope you're OK and I really miss you, and I want you to be home real soon. I love you, Dad."

"Connie Clark to Aaron Childers, Internal Medicine Division. Hi, this is grandmother. I'm sure you are safe."

"Sheryl Messier for Glen Messier. Happy 7th anniversary. Hope all is well. Keep your chin up. Love Sheryl."

"Danny Fennec from Brenda Porter and nephew Robbie. Happy Valentine's Day. We love you very much. Your mother is doing fine and we're all well. Brenda found a job with Special Services. We love you, Dan."

"Pat and Joanne Gloeb to Lt. Mary Gloeb, Nursing Services. We left this message on February 16, 1991. Hi Mary. We're just fine. Scott and grandma, too. Got your last letter dated Jan. 28, 91 postmarked. Keep 'em coming. Lots of prayers for all. Love, mom and dad. Call soon, please."

"Michael Moore from Genia Moore. I love you. I hope you had a happy Valentine's Day. I hope to receive some mail soon. Love from Kaila."

"Lt. j.g. Julie White Nurses Corps. Dearest Julie, you are always in our hearts and our thoughts. Love ya, Mom and Dad."

"Robert Thomas, Deck Department. I made it home safe to USA. Talked to your sister Sissy. Your brother and your mom are all fine. Your father is still the same. Going to visit them Feb. 19. Miss you. Love, Minnie Baker."

"Lt. Pamela E. Crane, this is your mother. I hope you answered Janet's letter. She needs to have some questions answered. Hope you're well. Hang in there. Love mom."

"Deanny Anders from Brandy Scolka. Hi, what's going on? We miss you a lot. Come home soon."

"Linda Diaz to Chief Steward Diaz. MSC sent your relief Feb. 8, 1991. Please let me know when you will be home. It is now the 18th of February. We are all waiting to hear from you."

"Susan Hable to Lt. Cmdr. Mark Hable, Nursing Services. Happy birthday, Mark. Happy number 40! Hope we spend many more together. Love Susan."

HEY ALL YOU ACTIVE DUTY PERSONNEL! DO YOU HAVE NO TIME TO WRITE? THEN JUST FILL IN THE BOXES, AND LET YOUR LOVED ONES KNOW YOU CARE!

DEAR MOM
 DAD
 GRANDPARENTS
 SUGAR WAMPURS

I AM NOT IN THE FIELD
 ON A BIG WHITE SHIP WITH RED CROSSES
 SOMEWHERE IN THE GULF
 CLASSIFIED
 DOING WELL

MISS YOU
 THE DOG
 BURGER KING
 SHELLEY'S SIN HAVEN
 CENSORED

LIFE OUT HERE IS BORING
 THE PITS
 CHAOTIC
 FUBAR
 ALL OF THE ABOVE

I'M SENDING THIS TO LET YOU KNOW I AM WELL
 I MISS YOU
 I LOVE YOU
 I'M IN HELL

I WILL BE HOME SOON
 AS SOON AS I GET THERE
 I DON'T KNOW, THEY NEVER TELL ME ANYTHING

PLEASE WRITE
 SEND MONEY
 SEND COOKIES
 SEND HELP

YOUR FRIEND
 SINGLE-BUNNY
 HUSBAND
 WIFE
 SON
 DAUGHTER

SIGN LAST, FIRST, M.I.

MORNING QUARTERS

DID WE HAVE A WEE BIT OF FUN ON LIB?

MY HEAD

