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Nurse Corps News

VOLUME 7, ISSUE 4

DECEMBER 19, 2013

Director's Corner

Holiday Greetings, Navy Nurses!

December already, the holiday season is in full swing, 2013 near complete and 2014 fast approaching. It is a time to reflect on the year's activities and a time to anticipate the New Year's opportunities.

I reflect on 2013 with no small amount of pride over the significant role Navy Nurses have played in caring for others. You have worked hard, and with compassion and competency you have touched countless lives. Your direct touch is profound at the bedside, in the clinics, and in the operational setting – touching, holding, healing, cleaning, teaching, and listening. Your indirect touch is important as well for it multiplies as it ripples outward, from the classroom, from oversight and improvement committees, and from key leadership positions, to



name just a few of the many key roles nurses fill. Thank you for the level of excellence you contribute to world-wide mission success each and every day.

Speaking of around the world, I wish time and budget allowed me to journey to meet each and every one of you. Instead, I will visit when possible and look forward to sharing my experiences with you as well as learning from you via our newsletter. I feel our newsletter is one way to develop a deeper understanding of our Military Health System, our Nurse Corps, and the many opportunities available to us to "engage."

In early November I attended the American Red Cross' Nursing Awards Dinner along with other Federal nursing colleagues. I am sure you are familiar with the good works of the American Red Cross, nationally and internationally. Nurses are key contributors throughout the organization and I wish I could share with you each awardee's story. Most memorable, however, was the presentation of the Florence Nightingale Medal to LCDR Deborah Redman, NC, USNR. LCDR Redman was selected for this award for her "exceptional courage and devotion to the wounded, sick, or disabled or to civilian victims of a conflict or disaster."

Several weeks ago, I traveled to Newport, RI, to serve as the guest speaker at the Officer Development School (ODS) graduation. What an honor and an invigorating joy to meet these newly commissioned officers and their families as they launch their Navy careers. The ODS instructors, including LT Derrick Randle and AMC (AW/SW) Edgar Ruiz have done a great job introducing them to the Navy and the concepts of Ship, Shipmate, and Self. The class video they showed surfaced aged memories of learning how to wear the uniform, marching, jumping off a diving platform, and visiting the USS Constitution for the first time in uniform.

(Continued next page)



Director's Corner (Cont)

While in Newport, I had the opportunity to meet with the Navy Health Clinic New England (NHCNE) nursing staff. NHCNE's footprint is extensive in the New England states and the command flourishes with CAPT Tina Davidson as the Commanding Officer. They just completed a very successful Joint Commission and Medical Inspector General Visit during which numerous best practices received accolades.

I am grateful to NHCNE's Senior Nurse Executive, CAPT (sel) Rose Perdue, and LT Natalie Claypool for coordinating my visit, including the meeting with the nursing staff, officers, civilians, and contract staff. Energetic and insightful, they presented great questions on Navy Medicine and the Navy Nurse Corps. The highlight of our meeting was the presentation of a mug with 99 "diamonds" around it to represent the 99 nurse diamonds at NHCNE. Indeed, they are diamonds.

Later this month we will officially launch the updated 2013 Navy Nurse Corps strategic plan. The document reviews our goals, objectives and goal teams. I encourage you to review our strategic plan on the NKO website and to engage in our goal efforts when and where ever possible. I encourage you also to contemplate the alignment of your personal efforts with both our Nurse Corps strategic plan, as well as Navy Medicine's strategic plan. I look forward to monitoring our progress with our teams. I thank the teams in advance for their hard work and efforts on the Nurse Corps behalf. I know participation in these efforts is well "above and beyond" routine their duties and responsibilities.

The Holiday season is a time of reflection and anticipation. For most it is a period of joy and happiness. There are many happy traditions, not the least of which the annual sharing of Nurse Corps pictures. I hope that you are able to relax and enjoy time with family and friends this season. I ask also that you watch out for and remain connected to your shipmates and colleagues. For some, the season can be difficult and I ask each of you to be vigilantly alert to signs of struggle or sadness and offer assistance when necessary. Additionally, please keep our deployed shipmates in your thoughts and prayers as they spend the holidays overseas and in harm's way.

I wish you peace and joy in this special season and fair winds to bring in the New Year.

Sincerely, RDML Rebecca J. McCormick-Boyle



Questions for the Corps Chief

1) What will be your number one priority for the Nurse Corps during your tour as Director?

My number one priority as the Nurse Corps Director is to position the Nurse Corps in support of the Surgeon General's/ Navy Medicine's Strategic Plan; we must be ready, relevant, and fully aligned.

The Nurse Corps must be ready in number and capability. We must be relevant and value-added to the warfighter, other members of the healthcare team, and those entrusted to our care. We must understand Navy Medicine's Strategic Plan and align our personal and collective efforts in support of it.

There are a number of organizational processes, structures, and initiatives in support of a ready, relevant, and aligned Nurse Corps. These include force management activities such as recruitment, promotion, and duty under instruction as well as career development through nurse internship programs, combat casualty care training, professional specialization, and leadership development. Additionally, we have our Nurse Corps Strategic Plan.

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Questions for the Corps Chief (Cont)

In September 2013, the Active Component and Reserve Component Specialty Leaders and other senior Nurse Corps leaders gathered to review and update the Nurse Corps Strategic Plan. We assessed progress on the goals (Clinical and Professional Excellence, Strategic Communication, Research, Strategic Partnerships, and Workforce) and developed goals for the coming year (Clinical Excellence, Professional Excellence, Strategic Communication, Strategic Partnerships, and Workforce). We concluded that our goals and objectives fully align with Navy Medicine's strategic plan. Going forward, we must continually assess and validate this alignment.

More personally, I plan to emphasize our concept of care and our culture of Nursing Excellence. Caring, compassion, and competency are the hallmarks of Nursing Excellence – the sparks to action and foundation on which all other goal activities rest. Caring, compassion, and competency must be firmly embraced by each individual and energetically demonstrated by the Nurse Corps as a whole.

Nursing care is based on science, but there is also the art of caring. We know it when we see it and also know when we do not. Caring is the practice of serving or assisting another; ideally it comes from the heart with a deep-seated desire or passion to care. The patient is the primary focus of nursing caring, but caring must extend beyond the patient to Shipmates, family, and others. Compassion describes how one cares. Compassion in Nursing Excellence encompasses empathy, understanding, and kindness. Nursing Excellence must emphasize science as well. The science must be constantly nurtured and competency increased through a commitment to lifelong learning and increased knowledge, skills, and abilities.

2) To what would you credit your ability to climb the ladder of success in the Navy?

I believe a variety of factors contribute to my success and the success of others. These include genetic make-up, upbringing, mentorship, and a variety of situational factors. These are blessings I am privileged to have been given. In addition to these "foundational factors," I believe success requires commitment to the organization, active engagement in and support of the mission, life-long learning, and ownership of one's personal and professional goals.

3) What advice would you have for junior Nurse Corps Officers whose long term goals include continued service in the Navy?

As noted in the question pertaining to career success, I believe achievement of one's long term goals requires commitment to the organization, active engagement in and support of the mission, life-long learning, and ownership of one's personal and professional goals. While each of these is important, to a junior Nurse Corps Officer, I would emphasize "ownership of one's personal and professional goals."

Officers occasionally ask "what should I do?" You know, I can't answer that question for anyone but myself. I can describe opportunities, options, and considerations, but I cannot say what another should or should not do. Each individual has the responsibility to think through his or her personal and professional considerations, prioritize those considerations, and then deliberately plan his or her next steps.

I believe self-direction, the development of both short and long term goals, and action plans to achieve them are essential. I believe you must be true to yourself while also soliciting the input from a variety of others (family, mentors and, friends) and allowing for change along the way. Flexibility with assignments and embracing the adage "Bloom where planted" are examples of allowing room for change and unexpected opportunities.

RDML Rebecca J. McCormick-Boyle



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Deputy Director, Reserve Component

Season's Greetings to the Finest Corps in the Navy!

As I begin my tour as your Deputy Director, I just wanted to take a moment to reflect on the joys of the season and be sure that you know that one of my greatest joys is serving alongside you! The Navy Nurse Corps today has some of the finest officers in the history of our Corps and you should be justifiably proud to be counted among them.

In keeping with that sentiment is a reminder that one my main goals for the Corps is establishing and maintaining a culture of collaboration. What that means is developing the ability to think outside yourself and stay focused on the premise that we are all here to serve a greater good. Inherent in that concept is taking care of each other. When one of us fails, we all fail and failure is simply not an option. I will be looking to you to mentor each other, junior and senior alike, and for there to be maximal collaboration between Commands and with our active component counterparts. I am calling on you to share your knowledge, your skills, your experiences, and to help each other reach unprecedented career heights. I am looking



for record high awards, outstanding FITNESS reports, exceptional PRT scores, 100% readiness, promotions, and selection of nurses to serve at the highest levels of Command structure.

As we head into the busy season take a moment to reflect on what you can do specifically to support your fellow Nurse Corps colleagues. Set your own personal goals for excellence and then look to others to help you achieve them. Working together, I know we will be a Corps that is stronger than ever. As your leader, please know you have my full support and I look forward to hearing great things about each and every one of you. You can bet I will celebrating your successes with you! Happy Holidays! Stay safe, healthy, and enjoy the blessings of the season.

Very Respectfully, RDML Tina Alvarado

Deputy Director, Active Component

Dear Nurse Corps Colleagues,

It is hard to believe that it has been four months since my move to the NC "front office." I am forever indebted to RDML McCormick-Boyle for this once in a lifetime opportunity. Our team here at BUMED is getting into a routine and doing well to take care of all of the moving parts that keep the Corps running smoothly. In addition to our FY14 Strategic Planning Meeting in September, we have also selected a few new Specialty Leaders, held several Professional Development Boards, completed the DUINS Board for FY14, and recently selected our Directors of Nursing for the summer of 2014. It has been a busy few months and I am challenged every day in this job, but I am steadfast in my efforts to support all of you.

In October, the entire NC Office was invited to a luncheon with the Washington Metro Area Navy Nurse Corps Association. The membership of this group is an impressive mix of Navy Nurse Corps leaders, clinicians, educators, and officers from previous administrations. They wanted an update on the state of the Corps and really challenged us with their direct and focused questions. It was an enjoyable afternoon and really reminded me of the longevity and pride we have in our Nurse Corps.

In closing, I do want to take this opportunity to wish everyone a Happy Holiday, no matter how you celebrate it or who you spend it with. This is usually a joyous time, but it can also be a time when people are more vulnerable to stress. Please be sure to take care of yourself and your shipmates. Also, remember to keep our deployed nurses and corpsmen in your thoughts while they spend this time away from friends and family. Thank you for everything you do! I look forward to working with each of you in the New Year.

CAPT Annette Beadle

DNS/SNE Selectees for 2014 Announced

It is my distinct pleasure to announce the DNS/SNE Selections for 2014. Historically, becoming a DNS was the pinnacle of a NC Officer's career. Today, we have NC Officers who take diverse career paths to include executive medicine, operational assignments, academia, and research in addition to those who stay within nursing in a more traditional MTF or ambulatory care setting. There are no longer glass ceilings to confine us to one path. Our opportunities are limitless.

Despite being from different backgrounds with different professional and clinical experiences, the nurses on this list have one thing in common: they are incredible clinicians, mentors, and leaders. They have the requisite skills to support and execute the Navy Nurse Corps Strategic Plan while being a vital member of their command's Board of Directors in executing Navy Medicine's Strategic Plan, delivering quality patient care, and supporting the professional development of their staff.

All of us here in the Corps Chief's office want to extend congratulations to the DNS/SNE Selectees for 2014. We look forward to working with each of you in the upcoming months.

Navy Medicine East	CAPT Norman Charboneau (WRNMMCB)
NMC Portsmouth	CAPT Sandra Hearn (NCH Pax River)
NHC Annapolis	CAPT Patrice Bibeau (WRNMMCB)
USNH Guam	CAPT Amy McBride (NMCSD)
NHCL Hawaii	CAPT Catherine MacDonald (USNH Okinawa)
NHCL Charleston	CAPT Elizabeth French (FBCH)
USNH Camp Lejeune	CAPT Donna Stafford (NMCP)
USNH Bremerton	CAPT (sel) Max Cormier (USNH Guam)
NHC Paxtuxet River	CAPT Lisa Morris (NH 29 Palms)

CAPT Annette Beadle, NC, USN Deputy Director, Navy Nurse Corps, Active Component



Reserve Affairs Officer - BUMED

Season's greetings to everyone from the RAO!

As we roll in this new fiscal year, we are lucky to have 7 new Senior Nurse Executives and a new APRN Specialty Leader join the team. Extend a welcome to CAPT Lynn O'Malley (OHSU Portsmouth), CAPT Karen Young (EMF Great Lakes), CAPT Anita Bacher (OHSU Camp Lejeune), CAPT (s) Donald Stafford (EMF Dallas), CAPT Judy Dye (OHSU San Diego), CAPT Jessica Reed (OHSU Bremerton), CAPT AJ Eagleton (OHSU Jacksonville), CAPT Mike Coffel (EMF Bethesda), and the new APRN Specialty Leader CDR Deborah Greubel.

Let us not forget to give thanks to those nurses who served in this position for the last two years: CAPT T Smith, CAPT Jan Manary, CAPT Judy Hansen, CDR Mildred Owings, CAPT Kim Matthews, CAPT Nadyne Krienke, CAPT Lori Karnes, and CAPT Lucy Schallmoser.

This FY 14 will hold many new challenges to work on, including the newly refreshed Strategic Goal Plan for the NC. We are actively working with our AC counterparts on merging one initiative for the Senior Nurses that will enhance their leadership skills and give them the tools to be successful in their position. Know that we are all working for the good of all of the nurses within the Corps. May you all have a joyous holiday!

CAPT Irene K. Weaver, NC, RAO

Policy & Practice: Specialty in the Spotlight

The wonderful profession of Nursing offers the opportunity to become highly specialized in order to work with various patient populations and practice in many clinical and non-clinical settings. Currently 16 Specialty Leaders represent well over 20 specialties across the Navy Nurse Corps. From the bedside to the operating room, from the clinic to the delivery room, Navy Nurses are serving in various specialties and roles in Medical Treatment Facilities, operational settings, and humanitarian missions around the world.

CAPT Kristen Atterbury

The Specialty in the Spotlight is:

Nurse Anesthesia: "The Best and Brightest"

CAPT (sel) Paul Arp, Nurse Anesthesia Specialty Leader

The miracle of anesthesia made pain-free surgery a reality. Nurse anesthetists, the first healthcare providers dedicated to the specialty of anesthesia, have their roots in the 1800s, when nurses first gave anesthesia to wounded soldiers on the battlefields of the Civil War. Today, Certified Registered Nurse Anesthetists (CRNAs) are Licensed Independent Practitioners who enjoy a high degree of autonomy and professional respect. CRNAs provide anesthetics to patients in every practice setting, and for every type of surgery or procedure. In the Navy, CRNAs are an indispensable member of the surgical team and are billeted in all CONUS and OCONUS hospitals where surgeries are performed. Additionally, Navy CRNAs frequently find themselves providing anesthesia support for the operational side. As the sole anesthesia providers for Fleet Surgical Teams, Aircraft Carriers, Individual Augmentee (IA) assignments, and Counter Piracy Operations, functioning in some of the most remote areas of the world, they are truly the epitome of the autonomous Independent Practitioner.

Nurse Corps Officers are selected for anesthesia training through the competitive Nurse Corps Duty Under Instruction program. Navy CRNAs receive their education through the Uniformed Services University's (USU) Graduate School of Nursing. The USU Nurse Anesthesia program is a 36-month course of study leading to a Doctor of Nursing Practice degree and is ranked #5 in the Nation! Navy trained CRNAs are widely recognized as among the "Best and Brightest" across the Nation and are virtually assured well compensated employment in their "Life after Navy." How do you place a value on that quality of education?

So you think you might want to be a Navy CRNA? The first thing you need to do is reach out to a CRNA and let us know about your interest! We will get you into the OR shadowing a CRNA, and line you up with a mentor to help you "navigate the waters" and facilitate the realization of your goal! The successful candidate has competitive GRE scores, a strong academic history particularly in the sciences, a score of B or better in both Biochemistry and Statistics, and have at least one year of critical care experience. Critical care experience is defined by the Council on Accreditation as "on a routine basis, the registered professional nurse manages one or more of the following: invasive hemodynamic monitors (such as pulmonary artery catheter, CVP, arterial), cardiac assist devices; mechanical ventilation; and vasoactive drips." A complete list of prerequisites can be found on the USU website at: http://www.usuhs.mil/gsn/dnpadmissions.html.

Some misconceptions:

- Only adult critical care is a path to becoming a CRNA. Not true! NICU is an example they are traditionally well prepared and make exceptional CRNAs. Essentially, anyone who can meet the Council on Accreditation's definition of critical care is a potential candidate.
- Only individuals currently in a critical care billet are eligible. Again, not true! Anyone with past critical care experience is eligible to apply.

So, if you think that you might want to become a member of this exceptional community, reach out to a Navy CRNA and your Nurse Corps leadership and let's get you started down the path to one of the most respected and rewarding career paths within the Navy Nurse Corps!

NURSE CORPS NEWS

Reserve Nurse Receives Highest Red Cross Honor

LCDR Deborah Lynn Redman, Nurse Corps, Navy Reserve Expeditionary Medical Facility (EMF) Dallas One, was awarded the prestigious Florence Nightingale Medal – the highest International Red Cross distinction that can be awarded to a nurse — in recognition for her humanitarian work with women and children outside the wire in Afghanistan

LCDR Redman, a Family Nurse Practitioner, is one of five American nurses, and the only American military nurse, among the 32 recipients from 16 countries selected to receive this prestigious award by the International Committee of the Red Cross in Geneva.

The 100-year-old medal was first presented in 1920 to recognize nurses who have distinguished themselves through exceptional courage and devotion to victims of armed conflict or natural disasters during war or peacetime, or for exceptional nursing service in the areas of public health or nursing education. Recipients of the award are selected by a commission comprised of the International Committee of the Red Cross, the International Fed-



eration of the Red Cross and Red Crescent Societies, and the International Council of Nurses.

Since its inception only 1,376 nurses have received this prestigious award. Bravo Zulu, LCDR Redman!

Magazine Honors Nurse with Award



LT Hampton at the awards ceremony with his colleagues from BUMED

LT Dwight Hampton recently made history by being the first U.S. Navy nurse to receive the "Excellence in Nursing Award" presented annually by *Washingtonian Magazine*.

The award honors registered nurses who go beyond the call of duty to enhance the well-being of their patients and their community.

Hampton was honored for his work as the deputy director of the U.S. Navy's Medical Home Port Program Management Office.

William Johnson (Opelousas, LA) Daily World

Navy Nurse Receives Bronze Star

CDR Jean Fisak, Psychiatric Nursing Specialty Leader, was awarded the Bronze Star on 30 October for meritorious service in connection with combat support operations in Afghanistan.

CDR Fisak served as the Officer in Charge of Mobile Care Team 7 in support of U.S. Naval Forces Central Command from December 2012 through August 2013. She currently serves as the Deputy Director of the Naval Center for Combat & Operational Stress Control in San Diego.



FBCH Honored for Supporting Organ Transplants

The Washington Regional Transplant Community (WRTC) awarded the WRTC Leslie Ebert Synergy for Life Award to Fort Belvoir Community Hospital (FBCH), in Fort Belvoir, VA.

The award is designed to celebrate the hard work of area hospitals who have supported organ, eye, and tissue donation, but who do not have a high potential for organ donation. Hospitals receiving this award work to save lives every day, but are not eligible to receive a medal from Health and Human Services for high rates of organ donation.

WRTC is only one of eight recovery agencies (of the 58 in the United States) that have received the U.S. Department of Health and Human Services' Gold Medal of Honor in



recognition of its excellence in providing precious organs for the recipients who so desperately need them.

Leslie Ebert was a young WRTC coordinator who died unexpectedly just short of her 27th birthday. Her professional mission included supporting donor families and providing education to the hospitals with which she had contact. WRTC and her family honor her legacy by providing public and professional education awards highlighting the important, life-saving work of organ, eye, and tissue donation.

The program at FBCH is championed under the nursing directorate with LCDR Craig Cantu as the lead. He attended the WRTC Synergy for Life conference in November to accept the award on behalf of the hospital.

NH Camp Pendleton's Main OR Recognized

CNOR certification is considered to be the gold standard for perioperative nurses. Certification serves to validate their highly specialized skills and demonstrate their competency. Worldwide, there are more than 34,000 CNOR certified registered nurses.

Accredited by the National Commission for Certifying Agencies (NCCA) and the Board for Specialty Nursing Certification (ABSNC), the Competency & Credentialing Institute's "CNOR Strong" program serves to recognize teams of CNOR certified nurses who have mastered the standards of perioperative practice, further advance a culture of professionalism, and promote improved patient outcomes. At least 50% of eligible perioperative nursing staff must be CNOR certified and a recognition program must be in place for a facility to be designated as CNOR Strong.

The Main Operating Room of Naval Hospital Camp Pendleton has become the first military treatment facility to achieve this national distinction. LT Joshua Wymer assembled the package, which highlighted facility's adherence to the highest standards of perioperative practice and the professional dedication of the staff.

With this recognition, NH Camp Pendleton has distinguished itself for upholding the high standard of Navy perioperative nursing and has established a precedent for others to follow. As CNOR certification is already a benchmark as the recognized credential for perioperative nursing, leveraging the high number of certified nurses, both active duty and civilian, across the Navy's commands to achieve CNOR Strong recognition could significantly increase awareness of the quality perioperative Navy nurses provide to our service members and their families.

For more information on the CNOR Strong program and application process, please visit <u>http://www.cc-institute.org/cnor/cnor</u>_<u>-strong</u>.

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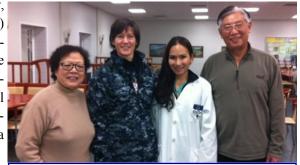
Making a Multicultural Difference

Enjoy this wonderful article which highlights CAPT Wesely, Deputy Director for Navy Personnel, Naval Expeditionary Medical Unit (NEMU) 14, and LT Connie Chu, one of our Nurse Corps officers stationed at the NEMU in Germany. Thank you, CAPT Wesely, for sharing this story of our nurses displaying RDML McCormick-Boyle's ethos of Caring, Compassion, and Competency, with the addition of Communication, which led to a positive impact on patient outcomes.

- CAPT Irene K. Weaver, NC, RAO, BUMED

Last spring, 70-year old Lucy, a non-English speaking dependent mother, was a patient being seen at Landstuhl Regional Medical Center (LRMC) for cataract surgery. This procedure is normally a routine, low-risk procedure; however, potential complications increase dramatically when the patient does not speak the same language as the surgeon. Lucy was scheduled for general anesthesia because she wouldn't be able to follow verbal instructions to move her eyes during the procedure. However, an opportunity existed to assist with Lucy's language barrier; LT Connie Chu, a NEMU CRNA, was fluent in Mandarin.

Schedules were rearranged to ensure that LT Chu was available to translate and Lucy avoided a potentially complicated surgery, enjoyed a shorter re-



8 months after initial surgery: (L to R) Lucy, CAPT Wesely, LT Chu, YuLin (Lucy's husband)

covery, and experienced much less stress because of the thoughtful actions of two NC officers. CAPT Wesely and LT Chu enjoyed dinner at the Fisher House with Lucy and her family that evening and were able to coordinate LT Chu's assistance with Lucy's second cataract surgery several months later. Lunch with the family the week of Thanksgiving confirmed that Lucy is doing well with her "new" eyes and remains full of gratitude for the thoughtfulness of NEMU nurses.

The NEMU provides critical medical and administrative skills in support of Overseas Contingency Operations at Landstuhl Regional Medical Center, a Tri-Service staffed Army tertiary care. Level I trauma center and the largest American medical facility outside the US. An integrated team of active and reserve physicians, nurses, administrators, and corpsmen provide world-class civilian and military medical expertise to all OEF/OND casualties leaving CENTCOM and over 215,000 beneficiaries in EUCOM, CENTCOM, and AFRICOM.

A New Newsletter for a New Year!

Greetings, Nurse Corps! Your Nurse Corps Newsletter will take on a new look in 2014. We will transition to a monthly edition, using a more concise format to allow quicker review and access to the information you want.

This will serve several purposes:

- More timely. Increasing the newsletter frequency and availability of articles and announcements allows for timely an-• nouncements for upcoming training, video conferences, and deadlines for applying to programs.
- Broaden the scope. By transitioning to a format with links to web-based articles, announcements, and photos, we are able to present a broader picture of Navy Nursing around the world and allow for greater participation and more photos of the great work you and your colleagues do.
- New features. We will introduce several new features, including a Hail & Farewell section with retirement announcements, Spotlight on Commands, and communications directly from Nurse Corps leadership, community leaders, and detailers.
- Reduced strain on e-mail servers and your inbox. Transitioning to the new format will result in smaller files cluttering up your inbox by keeping articles, photos, and announcements securely stored on-line and accessible by a hyperlink.

Other changes to make the Newsletter more user-friendly, efficient, and effective are in the works. Stay tuned and we will keep you informed as we roll out these new features.

Thank you and, from all of us in the newsletter staff, we wish you and yours a safe and happy holiday season.

LT Nicholas Perez, LT Eric Banker, and LT Edward Spiezio-Runyon





Certifications

- LCDR Vavadee Belko at Naval Hospital Rota passed her Ambulatory Care (RN-BC) certification exam.
- LT Lorelei Hughes at Naval Hospital Rota passed her Inpatient Obstetrics (RNC-OB) and International Board Certified Lactation Consultant (IBCLC) certification exams.
- LT Megan Moody at Naval Hospital Rota passed her Ambulatory Care (RN-BC) certification exam.
- LT Amy Aparicio at Naval Hospital Rota passed her Low Risk Neonatal Nursing (RNC-LRN) certification exam.
- LT Erin Curtis at Naval Health Clinic Charleston passed her Ambulatory Care (RN-BC) certification exam.
- LT Meghann Marez at Naval Hospital Guam passed her Emergency Nurse (CEN) certification exam.
- LT Damien Hebert at Naval Hospital Guam passed his Critical Care Registered Nurse (CCRN) certification exam.
- LT Alexandria Ross at Naval Hospital Guam passed her International Board Certified Lactation Consultant (IBCLC) certification exam.
- LT Igenea Williams at Naval Hospital Guam passed her Inpatient Obstetrics (RNC-OB) certification exam.
- LT Kristin Auker at Naval Hospital Pensacola passed her Med-Surg (CMSRN) certification exam.
- LT Edward Cavanaugh at Naval Hospital Pensacola passed his Perioperative (CNOR) certification exam.
- LTJG Charles Moore at Naval Hospital Pensacola passed his Critical Care Registered Nurse (CCRN) and Peripherally Inserted Central Catheter (PICC RN) certification exams.
- LTJG Dannemarch Atis at Naval Hospital Pensacola passed her Med-Surg (CMSRN) certification exam.
- ENS Johnathan Fox at Naval Hospital Pensacola passed his Certified Post Anesthesia Nurse (CPAN) certification exam.

Education (Non-DUINS)

- CDR Angela Stanley at BUMED earned her Doctor of Nursing Practice (DNP) degree from Medical University of South Carolina.
- LCDR Jane Abanes at Naval Health Clinic Hawaii earned her Doctor of Nursing Practice (DNP) from Vanderbilt University.
- CDR Joseph A. Gomez at Naval Hospital Pensacola earned his Executive Master in Business Administration (EMBA) from the Naval Post Graduate School.

Publications

• CDR Wendy Stone, LCDR Stacy Nilsen, and LT Stephanie Burleson at Naval Hospital Twentynine Palms. Nilsen, S. L., Stone, W. L., Burleson, S. L. (2013). Identifying Medical-Surgical Nursing Staff Perceptions of the Drug-Abusing Patient. *Journal of Addictions Nursing*. 24(3). 168-172.

Nurse Corps News Staff

Design/Layout:

LT Nicholas Perez Nicholas.Perez@med.navv.mil

LT Eric Banker Eric.Banker@med.navy.mil



Want to write a news article for Nurse Corps News? Submit your article via your chain of command to: LT Edward Spiezio-Runyon Editor, Nurse Corps News Edward L.Spiezio-Runyon.mil@health.mil

