

THE JOURNAL

National Naval Medical Center, Bethesda, Maryland

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Command Master Chief Michael L. Stewart

Stewart takes helm as Command Master Chief

By JOSN Kathleen L. Warring
Journal staff writer

Being a command master chief is the best job in the world," stated Master Chief (SS) Hospital Corpsman, Michael L. Stewart.

The National Naval Medical Center's (NNMC) new Command Master Chief (CMC) added, "I'm glad to be able to continue as an advocate for junior enlisted personnel."

Formerly command master chief at Oakland (Calif.) Naval Hospital, Stewart looks forward to meeting challenges here during his fourth tour in that role.

"NNMC is larger than my previous command," he acknowledged. "But my job remains the same, taking care of folks is still the name of

the tune.

"It's an awesome responsibility and an honor to be a command master chief. Often, lower enlisted feel forgotten. It's my job to represent them, to be their spokesperson," he explained.

Stewart entered the command master chief program in 1987 and obtained the command master chief naval enlisted code 9580. Stewart applied for the program because, "I love enlisted personnel and it afforded me the greatest opportunity to do the most I could for a whole command.

"A command master chief has to encourage, train and help junior enlisted shipmates. Being a command master chief also means being a role model for junior sailors."

Stewart feels Navy medicine gets the job done. "It's wonderful to see the positive impact

See STEWART, page 3

Data Services Center moves into new home

By JOSN Kathleen L. Warring
Journal staff writer

The much anticipated opening of the new home of the Naval Medical Data Services Center (NMDSC) (Building 27) at National Naval Medical Center (NNMC) took place April 5.

Guest speakers were the Navy Surgeon General, Vice Admiral James A. Zimble and Rear Admiral Donald F. Hagen, Commander, NNMC.

Prior to introducing Zimble, Hagen remarked, "I'd like to welcome this fine new establishment to our neighborhood."

An NNMC tenant command, NMDSC under Commanding Officer Captain Ronald F. Turco, MSC, USN, previously occupied spaces in Buildings 3, 5 and 11. The new building was called one of the Navy's "finest, most modern facilities" by Turco.

"The dream and goal of 26 years is being realized today," said Turco. "We now have many diverse functions housed under one roof. The building will help enhance our efficiency."

Before introducing Zimble, Hagen remarked, "The staff will continue to provide timely information in this marvelous new facility."

According to Zimble, NMDSC personnel serve an important role in Navy medicine.

"Knowledge is necessary in order to make correct decisions. NMDSC is a resource required by Navy medicine. This new building allows NMDSC personnel to continue serving Navy medicine well," Zimble said. "NMDSC in this new building will continue to provide the level of technology and communication, the entire system needs."

A shore activity, NMDSC, under the Chief, Bureau of Medicine and Surgery, Washington, D.C. is an Echelon III mission-specific command.

Staff meeting scheduled

The annual meeting of the medical staff will be held May 3 in the Amphitheater, Building 10 from 7 to 8 a.m. This meeting is a requirement for certification by the Joint Commission on Accreditation of Health Care organizations. All physicians on staff are required to attend.

Perspectives

By CAPT William Rowley, MC
NNMC Deputy Commander

This article began with a microwave dinner — everything has to start somewhere!

While it was cooking I turned on "The MacNeil-Lehrer Report." A criminal justice expert was pontificating about increasing juvenile crime. She talked about the high murder rate among inner city minority teenagers.

In the past there was usually a reason for a killing - resistance during a robbery, self defense, revenge or something. Now many young people seem to take pleasure out of wanton violence. They dream up a cruel torture and watch another human being suffer and die. The knife and hand gun have been replaced with high tech assault weapons that shoot up everything in sight.

I suppose some of this is to be expected considering our cowboy heritage of violence being the he-

ro's choice. There is also an incredible amount of sensational violence on television and today's movies are even worse.

What struck me is that these young murderers showed no remorse when caught. Taking someone's life had no more significance than killing a cockroach.

Life — including their own -had no value!

Even the drug dealers with their thousand dollars a day incomes and fancy cars had nothing to live for. They knew they would soon be dead or in prison.

I find it hard to comprehend that a part of society has changed so much. For us working in a hospital, life is precious — even sacred. We are caring and compassionate, work long hours, make many personal sacrifices and endure emotional stress; all to alleviate suffering and bring health to our fellow human beings.

There is meaning to our work and we feel good when we leave for the day, knowing that we have accomplished something worth-

while that is appreciated. We are important members of the Navy/Marine Corps 'family' that is given the great responsibility of keeping our country safe and free. What a contrast this is to the valueless life of a young murderer.

A tremendous amount of money is being spent on more law enforcement personnel to crack down on drugs and violence. More courtrooms and prison cells have been built (and soon filled beyond capacity). Gun control is a hot issue. But these things have not made a difference. Statistics show the rate of violence is increasing in spite of these efforts.

There will not be a change until life has meaning for the young people in the inner city.

How do we take a generation of abused and neglected youth and give them opportunities for a meaningful future and a perspective of morality?

America has mobilized its resources and proven itself in the Middle East. Are we willing to make the effort and expend the



CAPT William R. Rowley

resources to fight the more important war at home in the streets of our cities?

It is easier to ignore the problem and pretend it doesn't affect our families or our future. Yet there is something wrong with a country that has by far the highest murder

See PERSPECTIVES, page 9

Letters to the Editor...

Dear Journal Editor,

Regarding the letter of Lieutenant Commander Bianchi in your Apr. 11, 1991, issue:

If anyone is interested in identifying the majority of unauthorized personnel parking in the Patient/Visitors parking area, let them stand on the level 2 skyway beginning at 5:30 any morning.

Observe the number of vehicles entering the parking area and the personnel who are utilizing the walkway for hospital entry. Many are contracted service personnel or hospital staff.

Very few patients arrive for appointments prior to 7:30 a.m. so checking on those parking between 5:30 and 7:30 a.m. would not be out of order.

William R. Winter ATCS USN (Ret)
P.O. Box 62
Kearneysville, W.Va. 25430

Dear Journal Editor:

I have just read "Letters to the Editor" of the Journal dated April 11, 1991 (Vol. 3 No. 14) and would like to comment on a letter that was written regarding the parking conditions at NNMC.

In the letter, Lieutenant Commander Bianchi, complained of inadequate parking facilities and expressed his irritation at not being able to find a parking spot at 8:05 a.m. He went as far as to make a few suggestions to alleviate the problem.

He stated a possible solution would be to "bump out lower ranking people from premium parking areas." I would like to emphasize that all personnel at this command work patient care, whether direct or indirect (not rank/rate specific) and each has a right to park.

Most of us, however, don't wait until the last moment and expect a parking space to be waiting for us. Comments like LCDR Bianchi's lower morale. Indeed rank has privileges, but rights are common to all.

Bianchi also complained about the staff that park in the outpatient garage (although admitting he was looking to park there) and suggested there should be a means to formally report violators. There is, it's called initiative. Take the time to report the person/vehicle to security. After being ticketed most people will think twice about parking in unauthorized areas.

I do agree that there is a shortage of parking available at this complex and LCDR Bianchi did make several good points which should be looked into. Excluding Metro commuters and monitoring parking areas are possible solutions the command should address.

Until that time, however, parking is available to those who take the initiative (and time) to come to work early — if not to organize the work day then to find a parking location.

HM2 Richard Worster

The

Journal

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President's physician compares civilian and military health care

By Lori Drake
Special to The Journal

"The civilian health care delivery system is a good model of how civilian medicine could be set up," said Doctor Burton J. Lee III, personal physician for President Bush as he addressed more than 300 people at the 2nd Annual Joint Forces Health Care luncheon. The luncheon was held at the National Naval Medical Center's Officers' Club April 2.

In his presentation, Lee discussed some of the major differences between civilian medicine, which is a private practice model and military medicine, which he described as basically a health maintenance organization.

"In my opinion, the private practice model will gradually disappear because of increasing regulations and rules," said Lee, "and eventually evolve into a system similar to the military model."

Two major problems with civilian medicine are cost and access. "More than 37 million Americans don't have an insurance or financial access to the health care system or they are

drastically under insured," explained Dr. Lee.

"Everything is a trade-off in this system between access and cost," he said. "If you improve access, you raise the cost and if you cut costs back, you generally decrease access."

As an example of the high cost of health care, Lee cited a situation in which a young boy was in a motorcycle accident and within the first six months following the accident, the father has \$250,000 worth of health care bills.

According to the physician, between 75 and 85 percent of the people polled in the United States think the health care delivery system at the present time is optimal. But, in Canada, where they have a national health care system, 90 percent of the people polled think their health care delivery system is the best perk their government gives them.

"We are the only country left of the civilized industrialized societies that does not have a national health care program," Lee said. "Military medicine is a marvelous system that has continually improved over the past 25 years and now stands on the threshold of showing the rest of the country how it can be done," he said.

In addition to his remarks about the health care delivery system, Dr. Lee briefly talked

about his role as White House physician and explained how he got the job. He jokingly told the audience the president and his people comb the United States searching for the best doctor in the country and that is how they found him.

"Actually, that's not the way it works," he said. "I happen to be an old friend of President Bush and that's why I'm here. I'm not sure he even knows that much about my qualifications," he joked.

Doctor Lee's qualifications include a BA from Yale University and an MD from Columbia University College of Physicians and Surgeons. He spent 30 years at the Memorial Sloan-Kettering Cancer Center in New York City treating cancer patients. In 1962, when he was on leave from that institution, he joined the first team of doctors from Dr. Tom Dooley's Medico organization to go into post-Civil War Algeria to run a 1,000-bed hospital for war-wounded refugees and torture victims.

Doctor Lee has developed treatment protocols for Hodgkin's disease and multiple myeloma that have become standard therapy throughout the world and he previously served on the AIDS Commission under President Reagan.

Parade salutes Desert Storm, Comfort personnel

The sixth Bethesda-Chevy Chase Parade, scheduled for Sunday, May 5 is dedicated to the service men and women of Operation Desert Storm, especially those who served on the USNS *Comfort*.

The parade, held rain or shine, begins 1 p.m. at Woodmont Avenue from NIH continuing to the Bethesda Metro Center, atop the

Bethesda Metro stop, at the corner of Wisconsin Avenue and Old Georgetown Road.

The Grand Marshals of this year's parade are Jack Diamond and Mike Moore from radio station MIX 107.3 FM.

The post parade celebration at the Metro Center includes a rag-time orchestra, the Bethesda Acad-

emy of Performing Arts, free pony rides, face painting and a hands-on animal display by Friends of the National Zoo.

Downtown Bethesda will be transformed into Main Street, USA, with marching bands, antique cars, balloons, clowns, mini-cars, color guards and much more.

Free parking is available at all public lots and two hours of free parking is available under the Hyatt Regency with parking ticket validation from the Metro Center Food Court.

For more information, call the Bethesda Urban District Events Line at 301-652-8798.

STEWART, from page 1

Navy medicine has in times of need," he said. "Our performance in Operation Desert Storm was fantastic. The men and women of Navy medicine did an outstanding job aboard both USNS *Comfort* and USNS *Mercy*. My special heroes are the corpsmen who served with the Marines in the desert."

Stewart eagerly anticipates working with the enlisted who are returning here from Operation Desert Storm and the professionals who maintained the high quality of Navy medicine at home. "When I think of what fantastic personnel are assigned to this command, I get excited. We're going to have fun," he said.

Stewart hopes to serve as a positive role model for enlisted personnel here. "I just ask myself, 'Are my actions, on and off duty, actions I want someone else to copy?'" he said.

Stewart believes listening skills will help him successfully fill his role. "Listening and being open to change is an important part of my job,"

he said. "The good Lord gave me two ears and one mouth. I hope I can use them in that proportion."

Stewart hopes to strengthen community spirit at NNMC. "I'd like to begin by strengthening our chief community," he said. "Chiefs have a wealth of knowledge and experience that is invaluable. They're the backbone of the Navy."

"Everyone has an important role to play. I want to demonstrate to NNMC personnel that each person is necessary to our command's success. One individual can make a difference."

In his naval career, Stewart has seen a number of individuals make a difference. A difficult, yet inspiring moment, of his career occurred while he served as CMC at Oakland. In October 1989, an earthquake struck the Bay area, collapsing an overpass on Interstate 880. Stewart served as a liaison between the naval hospital

and the disaster site.

"The freeway was an awful sight," said Stewart. "We had approximately 100 corpsmen who worked for five days as volunteers to recover remains. It wasn't easy, but the corpsmen were there when they were needed."

During his 23-year naval career, Stewart served with Reconnaissance Battalion and 1st Battalion 9th Marines in Vietnam; aboard USS *Nathan Hale* (SSBN 623) where he earned his Submarine Insignia (dolphins); USS *Nautilus* (SSN 571) and USS *Cashmir Pulaski* (SSBN 633). He was promoted to chief petty officer in 1977 and master chief petty officer in 1987.

When not acting as a command master chief, the 41-year old Stewart enjoys golf, woodworking and camping. "They're really fun hobbies," he said. "The great thing about my hobbies is that I can share them with my family. My wife and three daughters are very important to me."

U.S. SAVINGS BONDS

Health & Fitness

“Look Good, Feel Better”

Program addresses beauty and cancer

By Kevin Sforza
Journal editor

An American Cancer Society (ACS) program aimed at restoring confidence to women with cancer has been adopted at the National Naval Medical Center (NNMC).

“Look Good, Feel Better,” boosts the self-esteem and overall well-being of women cancer patients by helping them improve their appearance. This is done using makeup, wigs and skin care products.

Karen Morgret, medical affairs director for the ACS, Silver Spring, Md., said the program began here in January. The society launched the program in Washington, D.C., in 1989 and in Montgomery County in January 1990.

“The program meets bi-monthly at NNMC, alternating between the Oncology Outpatient Clinic and the in-patient ward on 6 West,” she

“This class shows women how to make themselves feel good on the outside.”

said. “A make-up artist and hair stylist volunteer their time showing women how to use cosmetics and wigs effectively during their illness.”

Ms. Morgret explained each woman receives a make-up kit containing light, medium or dark shades, based on skin color. The kits, valued at between \$200-300, are donated to the ACS from national cosmetic firms. Each contains lipsticks, eye liners and other cosmetics.

Cheryl Brooks, a clinical nurse at the National Cancer Institute’s Navy outpatient clinic, said the ACS brought the program to the center’s attention. “Anytime we can provide patients a service it’s helpful,” Ms. Brooks said.

Patients hear of the program through their nurse, said Ms. Mor-

gret. “It’s not unusual to see a marked improvement in attitude towards dealing with their illness following this class,” Ms. Morgret noted. “This class shows women how to make themselves feel good on the outside.”

Brooks agreed with Ms. Morgret’s assessment adding that patients are sometimes reluctant to participate. “In that respect, we try to educate them using other women who have gone through the program,” she explained.

The program’s participants, said Ms. Brooks, thoroughly enjoyed the attention. “To my knowledge, we haven’t had a negative response to the program.”

Mary Sparks, charge nurse on ward 6 West, another NCI-Navy unit, echoed Ms. Brooks’ remarks. “It does a lot for morale. A side benefit is the opportunity for the women to connect with other patients with the same feelings.”

Sparks said those who can’t make the scheduled outpatient session are welcome to attend their sessions, as are other cancer patients in the hospital.

“Between 175-200 women come into the outpatient clinic each month,” said Brooks. “We discuss their treatment and explain how the program can benefit them and recommend attending the class. However, the final decision is theirs.”

Ann Miller, a free lance make-up artist from Chevy Chase, has been a volunteer for the ACS for one year. At each class, she shows women how to use a 12-step make-up program consisting of various make-up techniques, application and proper cleansing of the face.

“I stress keeping the make-up sanitary and advise patients not to share the make-up. Each container is marked with the shade it contains. Those who want to switch with other women can do so only if the container hasn’t been opened.”

Jan Mauzy, a patient attending last month’s class, found it very informative. “I learned new tech-



Photo by Lauren Lee Salgaller/The Journal

Outpatient Jan Mauzy applies makeup during the “Look Good, Feel Better” program.

niques and the make-up is very natural looking. I think the program is very good.”

Data Processing Technician First Class Beverly Higgins, on medical hold here, found the program to be very helpful. “I don’t normally wear make-up. This has allowed me to figure out the different colors and shades. I find the make-up looks good on me and I may keep it up.”

A side effect of chemotherapy and/or radiation treatment can be

“Anytime we can provide patients a service it’s helpful.”

loss of hair, an adjustment, Ms. Morgret says, which can be very difficult for women. Like the make-up kits, wigs are available free of charge from ACS.

Maureen Selinger, a local hair stylist and volunteer for the past

six months, spoke on wearing and caring for wigs and explained the differences between wigs made from human hair and synthetics. She also showed the effective use of turbans and scarfs.

Some patients, said Ms. Morgret, attend this program before beginning chemotherapy or radiation treatments to learn how to use the various techniques. The society has thought about introducing a similar program for men.

Volunteers attend an ACS training session which lasts two to three hours, Ms. Morgret said. This training includes information on the various cancer treatments and how to work with patients.

The next scheduled sessions are June 3 at the inpatient clinic, June 10 at the outpatient clinic. Patients who wish to attend should call 301-295-4127 (inpatient) or 301-295-0495 (outpatient).

Pharmacy note

Time limitations for presenting prescriptions after the date written are now standard throughout the Navy. Prescriptions for Schedule II controlled substances (narcotics and stimulants)

must be presented within seven days of the date written. The time limitation for other controlled

substances is 30 days and for all other prescriptions 90 days from the date written. Prescriptions for any controlled substance must be written on a separate prescription blank in order to allow pharmacy personnel to comply with the various record keeping requirements for these items.

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Secretary breaks job stereotype

By JOSN Kathleen L. Warring
Journal staff writer

“My job really isn’t that unusual,” said Charlie Manese. “There are male nurses and female physicians, why not male secretaries?”

“Throughout history, men have been secretaries, so it’s not really a new occupation for a man,” said the medical secretary in Prosthodontics at the National Naval Medical Center (NNMC). “People don’t look at gender so much anymore, especially in the medical field where they see life in all its facets.”

Manese began working here in the Employee Relations Office in March 1989, transferring to the Cardiology/Internal Medicine clinics that August. He began his current job in the Prosthodontics clinic last year. He assists the clinic chairman in completing administrative and clerical work and prepares letters and special projects for the Naval Dental School.

The Fairfax, Va., native started in the medical field working nights as an orderly in emergency rooms of local hospitals. He later worked as a psychiatric technician assisting nurses with patient care at the old Alexandria Hospital. Manese began working as a medical secretary at George Washington University (GWU).

“I became a secretary there because I realized I could combine my on the job training in the medical field with clerical skills. At the time, there was more potential for advancement as a secretary than as a medical technician. I just found my niche,” he explained. “It was kind of neat to work at the university because that’s where I was born.”

Manese left GWU to attend nursing school at Northern Virginia Community College in Annandale, VA., but elected to return to the secretarial ranks.

“I enjoy working as a medical secretary,” he said. “The nurses and the doctors really appreciate the help I provide. I concentrate on the paperwork freeing them up for patient care.”

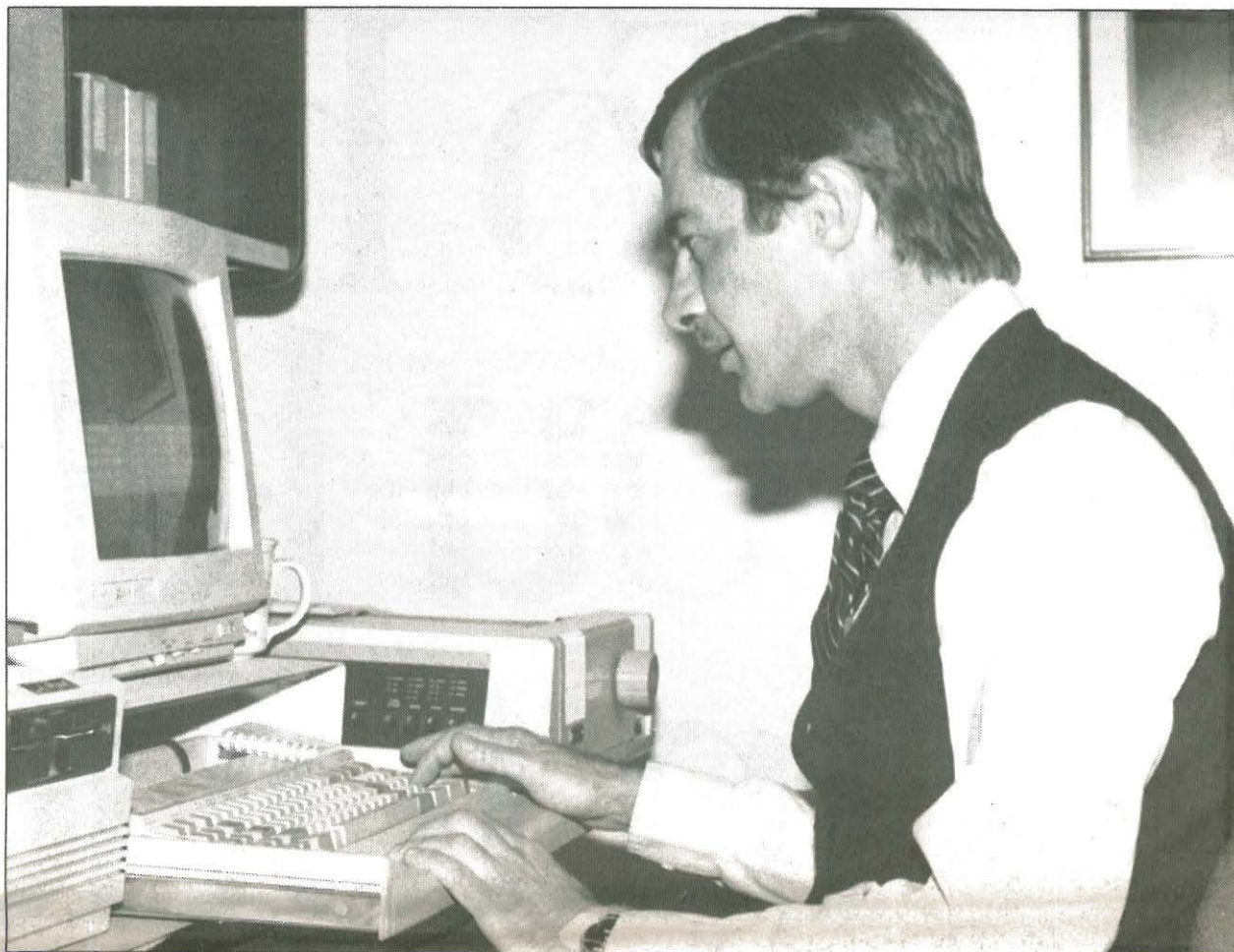


Photo by Lauren Lee Saigaller/The Journal

Charlie Manese, a male secretary, prepares correspondence for the Prosthodontics Department.

His first government secretarial job was in 1987 at the Department of Education headquarters in Washington, D.C. His next position was with the Small Business Administration.

“I wasn’t aware the government ran a medical facility, where I could work as a secretary, until a friend suggested I apply for a position at the employment office here,” he said.

Manese enjoys working for the military. “I

like the organization. Anything you need to know can be found in a set of instructions. It’s a very ordered process. I can’t imagine working anywhere else.”

Being a medical secretary gives him the best of both worlds. “I can indirectly help patients as well as help doctors and nurses — and be where the action occurs. I’d like to be exposed to every area of medicine. It’s fascinating.”

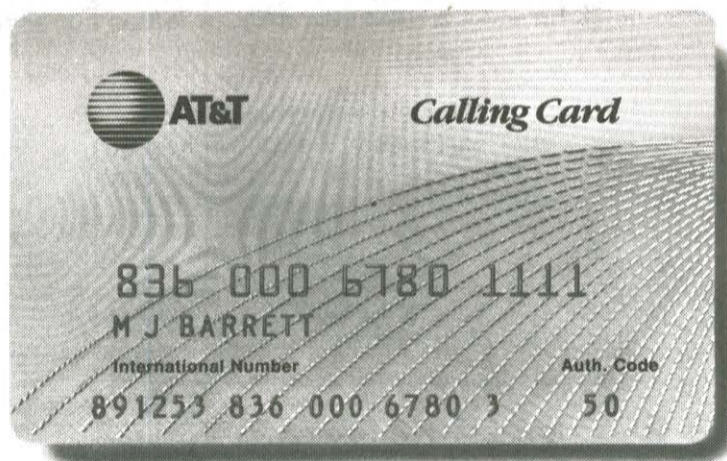


Marine PFC Rebecca Soza displays the boot camp graduation certificate presented her April 4 by (r) MAJ Rhonda LeBrescu, executive officer of the Marine Recruit Training Regiment, Paris Island, S.C., and (l) SGTMAJ D.W. Sommers, Sergeant Major of the Marine Corps. Soza fell ill during the latter portion of boot camp and was awarded her certificate during her stay for treatment at the National Naval Medical Center and the National Institutes of Health.

Photo by HM2 Napoleon Stevens/MedPhoto

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From The Chaplain . . .

By LCDR Wilma Joyce Irvin, CHC,
NNMC Pastoral Care Service

As Operation Desert Storm comes to a close, we learned one very valuable lesson: the Total Force concept of active duty and reserve personnel serving as one unit does work. We passed the test for readiness capabilities with flying colors. On the ship, in the field and at supporting commands, both home and abroad, we worked together to get the job done.

It wasn't an easy task to accomplish. Many of us had to first overcome the anger felt when we realized that our lives were being disrupted on a moment's notice. So much to do and so little time in which to do it.

We had to overcome fear of the unknown that awaited us on foreign shores. We had to overcome suspicions and negative attitudes nurtured by years of "separate but (un)equal" prejudice regarding the worth, functions and preparedness of reserve personnel.

This time women went to war in greater numbers than ever before. We had to overcome anxieties over whether the large number of women deployed, many of whom were mothers, would be a detriment to our fighting strength.

Too soon we were reminded that everyone took the same oath of allegiance - to "be thou faithful unto death" as the captured, dead and wounded included men and women from regular forces and mobilized units alike.

In I Corinthians 12, the apostle, Paul, addressed a similar issue that existed in the first century church. Some felt that speaking in tongues made them better or, at the very least, more spiritual than other believers. His expla-

nation and admonition is worthy of our consideration today:

"The body is a unit, though it is made up of many parts; and though all its parts are many, they form one body. So it is with Christ. For we were all baptized by one Spirit into one body — whether Jews or Greeks, slave or free — and were all given the one Spirit to drink." (vs. 12-13, New International Version)

We have seen, without question, the value of Total Force to Operations Desert Storm. It doesn't matter whether one was stationed overseas or called to serve in the United States.

It took active duty and reserve forces, officers and enlisted, men and women all doing their job as one well trained American military machine to bring the swift victory to the Persian Gulf crisis.

Active duty and reserve personnel were vital to the maintenance of high quality service provided here at Bethesda. We all came forth with gifts of ability, training and experience to promote a common cause.

The motto on our money says it all: "E Pluribus Unum" — From many, One. Unity through diversity is the overriding key to American's strength. Therefore, I offer this contemporary paraphrase of the apostle's words:

"America is a unit, though it is made up of many parts; and though all its parts are many, they form one body. So it is with the Navy. For we were all pledged by the one oath of allegiance into the military — whether officer or enlisted, active duty or reserve, male or female — we were all given the one Constitution to defend."

And that we have done, once again. May we continue to do so whenever called. Bravo Zulu! Amen.

Chapel Service Schedule

Roman Catholic

Weekdays
Noon Main Chapel
4 p.m. 6 West Chapel
Sunday
9 a.m. & Noon Main Chapel

Protestant

Wednesday
Noon 6 West Chapel
Sunday
10:30 a.m. Main Chapel
Noon 6 West Chapel
Thursday
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Jewish

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Clinic aids foreign travelers

By Kevin Sforza
Journal editor

A new clinic at the National Naval Medical Center (NNMC) stands ready to assist individuals making travel plans overseas.

The Traveler's Clinic, located in the Infectious Disease Division, instructs people on preventive medicine while overseas, said Lieutenant Commander Scott Paparello, MC, USN.

"We discuss the types of immunizations needed, how to avoid mosquito bites which could lead to malaria and how to prevent diarrhea. We also tell people if they contract an infection while overseas they should see us upon their return."

Paparello said while clinics such as these are cropping up all over the country, "NNMC is the only formal military clinic in the D.C. area." He

added the clinic helps enhance tropical medicine training for our doctors.

Each person coming into the clinic receives a handout with specific instructions on how to prevent both malaria and diarrhea. In addition, treatment for the latter is given on the sheet. The handout also provides general information such as placing medications with your carry-on luggage, carrying a list of current and past medical conditions and current medications and packing a small medical kit, listing recommended items for inclusion.

The two-month old clinic is open every Tuesday from 9 to 11:30 a.m. Paparello said interested persons need to call the clinic at 301-295-4237 for an appointment. No consultation is necessary. The clinic is available to all persons eligible for military medical care — active duty, active duty reservists, dependents and retirees.



"Stand back, folks! It's writer's cramps!"

FIS

Correction

Commander William Dial was incorrectly identified in a story on page 13 in last week's *Journal*.

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PERSPECTIVES, from page 2

rate in the world.

I think it's time for honesty and courage to face the problem, find the right answers and make the necessary changes, no matter what the cost.

Now for the good news! We are doing something about it at NNMC.

We have two programs to help school children that do make a difference.

Many of our staff volunteer to work with grade school children from Petworth Elementary School in the District as part of the Navy

School Program. Once a week the students are bused to the hospital for tutoring. The volunteers soon discovered these kids were intelligent, but very insecure. Students soon developed the needed confidence to ask questions and try new things.

Part of the time is spent in the hospital learning about vocations and seeing role models in action. They are told, "You can do this to if you stay in school and study." This program has planted the seed and they are hungry to learn because they see opportunities in

their future.

Staff from NNMC and tenant commands have also been volunteering their time to work with older youths from Eleanor Roosevelt High School in Greenbelt, Md., as part of Project SWEEP, an educational excellence program of the Navy. This May the hospital will be formally adopting the school so that we can participate together in many activities.

As an example of the power of this program, one boy with a grade point average of only 0.53 at the end of ninth grade was tutored for

the next three years and will be graduating this spring with a 3.52 grade point average!

The potential is there for us to cultivate.

We need your help! More volunteers are needed now to work with high school students.

If you are interested, please contact Hospital Corpsman First Class Nikilo Jenkins in the Infectious Disease Department or Captain Don Wilson, the director for Administration. A couple hours a week can make a difference and be very rewarding too.

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Transferred to Andrews AFB

Premature newborn

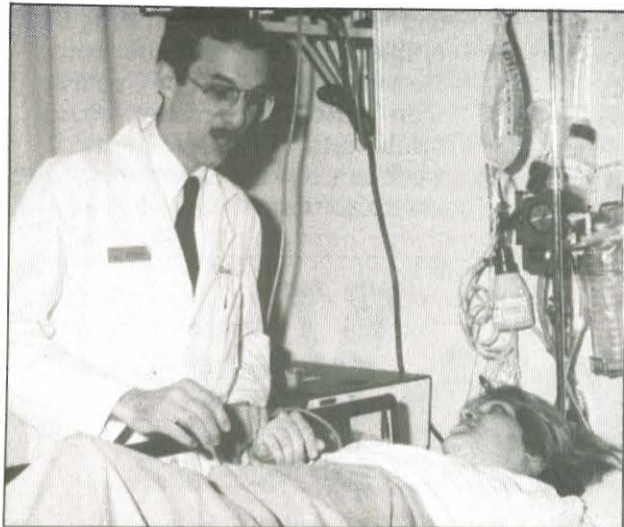


Photo by MedPhoto

LCDR Ronald Thomas, MC, USN discusses the procedure with AE2 Brill.

By Bill Yates
Journal staff writer

A terrible battle raged within tiny Korey Brill even as he was lifted officially into life in the delivery room of the National Naval Medical Center on the morning of April 8.

At 1,404 grams birthweight, or just over three pounds, Korey faced a critical first few days and an even more critical first few hours. Already the recipient of two highly advanced intra-uterine blood transfusions before he was born, Korey needed more help if he was to survive.

Blood antibodies entering his bloodstream through his mother's placenta had for weeks been destroying his own blood, turning the oxygen-carrying red blood cells in his blood into little more than liquid waste products. Early delivery, more than seven weeks prematurely, became a necessity if Korey was to survive.

Born pale from anemia and yellowish from a build-up of bilirubin, a blood breakdown product that is responsible for jaundice and which at high levels can cause brain damage, the infant was rushed to the hospital's intensive care nursery. With bright lights hovering above to help speed the loss of bilirubin, Korey advanced into childhood in a continually warmed plexiglass box.

Aviation Electrician Second Class Pamela Brill said she had an idea about what to expect when she discovered last August she was pregnant with her fourth child.

"My husband and I had just gone through a pretty tough pregnancy," Brill said, "and we knew that the blood problems were supposed to get worse with each child."

According to Brill's physicians, the children's blood problems developed from incompatible blood characteristics shared by the parents that were then passed on to their two children. A few months earlier, son Kasey, Pamela's first child with husband Keith, had been delivered prematurely after Kasey developed complications from producing blood incompatible with blood antibodies he received from his mother.

Routine prenatal testing during Brill's most recent pregnancy alerted the Blood Bank to the special situation, according to Laura Hierony-

mus, supervisor of the Blood Bank's special testing lab.

"We realized there would be a problem as soon as we saw her test results," Hieronymus said, noting that workers in the lab thought they remembered the Brill name.

Pathology resident Lieutenant Commander Ellen Denegris, MC, communicated the lab's findings to the obstetricians in charge of the case, Lieutenant Commander Ronald Thomas, MC, and Lieutenant Richard Leader, MC. With their suspicions confirmed, the physicians began to map out a strategy for helping Brill carry her child for as near to full term as possible.

Blood inventories were examined daily to come up with the proper type believed to be needed by the fetus, according to Lieutenant Commander Randall Slater, MSC. As the demand for specialized blood products of the baby's type would be needed after birth, the Blood Bank began processing for the child.

"Some of what we had would expire and we'd have to replace it," Slater said. "Our special testing staff did a tremendous job screening our inventories."

During Brill's 28th week of pregnancy, test results from her amniotic fluid indicated that the fetus' bilirubin level was rising to near the danger level. High bilirubin is a sign that proper oxygenation of the child may not be occurring because the baby's red-blood cells are being destroyed, Thomas said.

The decision was made to transfuse 25 cubic centimeters (ccs) of highly concentrated blood into the fetus on March 21 in an attempt to stave off premature delivery for as long as possible. "What we are trying to do is essentially buy extra time in the womb for the child," Thomas said before the procedure.

Hematocrit levels in the fetus, which signify the amount of red blood cells present, rose from 18 at the beginning of the procedure to around 32 after its completion. Though not up to the normal level of around 50 for a healthy newborn, the hematocrit results were encouraging enough that Korey's gestation was continued in-utero.

Eleven days later a second 25 cc transfusion took place and again the fetus' hematocrit levels responded, though not as well as previously. Finally on April 8, nearly three weeks after receiving the hospital's first in-utero blood transfusion, Korey William Brill was delivered via repeat cesarean section.

"When he was born, the baby was very vigorous and was breathing on his own," said Leader, obstetric's chief resident. "Part of the problem with premature babies is they lose heat very rapidly, so they have to be kept warm."

Korey's initial days were spent in the hands of many. Cross-matched blood had been prepared for transfusion into the infant. Within two hours of birth, Korey had been stabilized to the point where doctors believed he could survive a transfusion needed to prevent possible brain damage.

On that first day, the miniature newborn received twice his blood volume of specially-prepared blood. As Korey lay on his back, jets of heated air rising from his bed, a team of masked physicians peered down as Korey's blood was withdrawn through a syringe, one test-tube's

worth at a time, then replaced in the same fashion by the same amount of prepared blood.

One syringe-full came out, then one syringe-full went in. Two days later the transfusion team reassembled near Korey's box and the two-hour procedure was repeated. Additionally, tests indicated a third double-volume exchange transfusion was needed on the infant's fourth day of life.

"The things that allow our department to take on some of these high-risk cases are not always apparent," said obstetrician Leader. "If it weren't for the support people — the Blood Bank, the pediatricians, the intensive care nurses — we wouldn't be able to do it."

Leader said pediatricians always are on hand in the Labor and Delivery room during premature births and are on call 24 hours per day. Premature or severely ill infants are moved to the Intensive Care Nursery (ICN) once they are stabilized. Healthy babies are sent to the Well Baby nursery. Both units are just down the hall from mothers' third-floor recovery rooms.

In the middle of April, the oldest patient residing in NNMC's Intensive Care Nursery was 7 months old, with newcomers arriving nearly every day, according to pediatrician Major Rebecca Bent, MC, USA.

"This unit is different from most hospitals because we take care of high-risk patients," said Bent, a neonatal fellow at the Uniformed Services University of the Health Sciences who splits time between NNMC and Walter Reed Army Medical Center (WRAMC) in Silver Spring, Md.

"Here, we take care of complex neonatal problems which usually require the care of a



Thomas, foreground, assisted by LT Richard Leader

, mother, doing fine

number of pediatric sub-specialists, such as cardiologists, surgeons and neurologists," she said within the glass-enclosed spaces of the ICN.

Extensive electronic monitoring systems, which keep track of infants' vital signs, are standard equipment at level three ICN facilities such as NNMC and WRAMC, Bent said. "Many of our patients require around the clock monitoring and care," she said.

Registered Nurse Catherine Shefka spent most of her recent shifts caring for Korey. The ICN relies heavily on a nursing program called primary care, where one or two nurses are assigned primary responsibility for each infant patient. Getting to know the child, as well as the parents, sometimes makes the situation easier, Shefka said.

"First of all, everybody in the nursery gets to know every child," she said. "But for parents, it's kind of a frightening thing to see your child hooked up to all those monitors."

"With primary nursing, if you've built a relationship with the parents, or if you really like a child, you can request to be assigned to that child," said Shefka, who has been at NNMC for nine months.

Shefka was in charge of monitoring, providing medication and assisting with in-clinic assessments and procedures for Korey. "I enjoy the child and I enjoy the mother. We just seemed to hit it off," she said.

Korey spent of his first four days in an oxygen hood that provided him with an air mixture containing 70 percent oxygen, Bent said. Because he was so small, the child then



Photo by Lauren Lee Salgaller/The Journal

AE2 Pamela Brill looks at her newborn son, Korey.

was placed in a fully enclosed and heated isolet. Bright overhead lights triggered chemical reactions within his skin that allowed for the processing of some of his excess bilirubin, she said.

The third transfusion was a tough one, Bent said. "It's a long process that takes a couple of hours. Your fingers get sore from manipulating the syringe and it takes a lot of concentration," she said.

One of the products in the transfused blood was plasma rich in albumin, according to Slater. Albumin, which is abundant in healthy blood, chemically binds to bilirubin to neutralize its toxicity and speed its removal from the system, he said.

"The exchange removed mom's antibodies and the incompatible red blood cells produced by the infant's body and replaced them with healthy compatible cells," said Slater, deputy director of the Blood Bank.

The third transfusion was the infant's last. By removing and replacing approximately two-thirds of the child's blood twice in each of three exchange transfusions, the multi-departmental team had succeeded in eliminating the dangers of the bilirubin, which could now be adequately processed by the infant's liver.

Also, the red-blood cell count was approaching normal, so Korey was slated for transfer to the level two facility at Andrews Air Force Base, closer to the Brill's home.

"I couldn't have asked for better care than

what I got here," Pamela Brill said April 17, the day before she and her son were discharged. "The doctors and the nurses were so informative and it didn't bother them when I would call five times a day."

"All of this just blows me away. We expected Korey to be really sick for a long time. We're ecstatic," she said.

Brill said her older children, Matthew, 8, and Cassie, 6, were told that the new baby might come with some problems similar to brother Kasey's one year before. "I just told them there might be a problem with their brother being sick. They said they understood," the beaming new mother said.

"But now we're being discharged. We're all just tickled pink," she said.

The third transfusion was in the past and Korey had rebounded nicely. He was now just another premature infant, if ever that could be, who spent his days plugged into monitoring machines through spaghetti-thin wires. On occasion, people Korey did not know would interrupt his sleep to poke and probe, maybe turn him over, maybe provide a little intravenous nourishment.

Then, on the infant's tenth day in the ICN, a pair of hands that were to become the most familiar hands of his life lifted Korey to her breast. Though Korey gave no outwardly visible reaction to the difference of that grasp, it is true that at that moment, somewhere in some other hospital, another baby boy was being born just so his mother could hold him in her arms.



MC, USN, prepares to begin fetal blood transfusion.

News Currents

Dental Tech ball

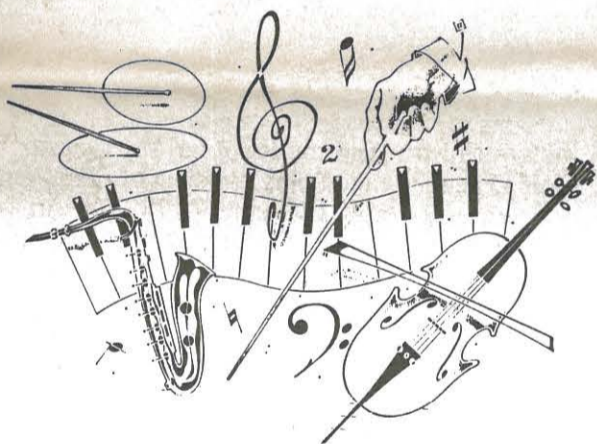
Tickets are now on sale for the Dental Technician Ball. The ball will be Saturday, April 27. Tickets cost \$11 for E-6 and below and \$13 for E-7 and above and civilians. For more information contact Dental Technician First Class David Wood 301-295-0357.

Big band dancing

Big band dancing is back in Bethesda for the fifth season. Witness the transformation of Bethesda from bustling business district to outdoor ballroom.

Each Friday, from 6 to 9 p.m., starting May 3 and continuing through September, well known 17-piece orchestras play all the big band greats, a little jazz, a little funk and a lot of fun.

Dancing is free and three hours free parking is available under the Hyatt hotel with a ticket validation from the Food Court. For information, call 301-652-4988.



DoD open house

Andrews Air Force Base will host the annual Department of Defense Joint Services Open House Friday and Saturday, May 10 and 11, beginning at 8 a.m. each day.

The open house is an opportunity to view a display of U.S. Army, Navy, Air Force, Marine and Coast Guard aircraft, support equipment and specialized aviation transportation.

This year's theme, "Eternal Vigilance...The Price of Freedom," is a fitting one for the many men and women who served in Operation Desert Storm.

Limited reserved seating is available for those who, because of age, or handicap, might not be able to stand for long periods of time. We will have approximately 200 chairs available, so we strongly suggest your group consider bringing chairs.

Buses with handicapped or senior citizen signs will be allowed to drop off people at the seating area until 11 a.m. only.

"Monday Night Master's Program"

George Washington University, through the Division of Continuing Education, presents an information session on Monday, May 13 in classroom B, Building 1 at the National Naval Medical Command. The session details an option for working professionals interested in earning a master's degree in Higher Education Administration.

The "Monday Night Master's Program" allows students to attend two courses per semester, while committing only one night per week to the program. This arrangement permits students to obtain their master's degree in six

semesters (two years). Both classes are held consecutively from 5 to 10 p.m. each week.

To reserve a place call George Washington University's Division of Continuing Education at 202-994-7020.



College financing/scholarships

Scholarships, awards and other financial help available for sons, daughters and spouses of active duty, retired and disabled, deceased or honorably discharged military members are now outlined in a pamphlet from Navy Military Personnel Command.

The scholarship pamphlet for family members of Navy, Marine Corps and Coast Guard for fiscal year 1991 also lists who is eligible for a particular organization's scholarship and application procedures. Copies are available at Navy Campus offices or by writing: Navy Military Personnel Command, NMPC-602, Washington, D.C. 20370-5000.

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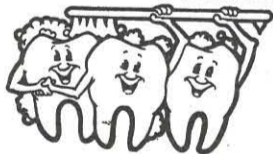
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American Heart Association

MWR notes

For information on the following events call 301-295-0030/31/32 unless otherwise noted.

Disney passes

The Walt Disney Company is offering complimentary one-day admission tickets to visit the Magic Kingdom at the Walt Disney World Resort in Orlando, Fla. Tickets will be distributed by Naval Training Center Orlando to active duty military members and active duty reservists only.

Men's softball begins



The NNMC Men's Softball League will begin play May 6, with games scheduled for Monday, Tuesday, Thursday and Friday each week through July. Games start at 5, 6 and 7 p.m. Spectators are welcomed and encouraged.

NNMC SCUBA classes

Recreation Services will offer SCUBA diving classes beginning May 8. The cost of the classroom and pool instruction is \$92, with open water certification dives offered for \$135. Space is limited. For more information call Bryan Jackson.

Co-ed softball meeting

The final organizational meeting for the Co-ed Softball League will be held May 1 in the gym at 4:30 p.m. Each team must send a representative.

MWR party offers something for everyone

All National Naval Medical Center and tenant command active duty, reservists on active duty, DoD civilians and dependents are invited to the Morale, Welfare and Recreation salute to Desert Storm personnel May 4.

The day-long festivities begin with a picnic at the pavilion behind Uniformed Services University of the Health Sciences from 11 a.m. to 5 p.m.

Available there will be kiddie rides, a dunk tank, volleyball, "Redskinettes" autographs, clowns, face painting and dance music.

The Chief Petty Officers Association needs volunteers for the dunk tank. If interested, call Senior Chief Hospital Corpsman Jay Carrier at 301-295-0418.

More Orioles tickets

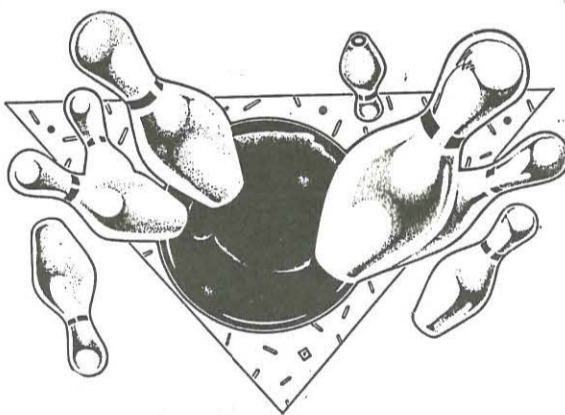
Recreation Services has more Baltimore Orioles baseball tickets to be given on a first-come, first-serve basis for all active duty, reservists on active duty and their families. Tickets are available for the May 1, 15-16, 27 and 29 games. All games start at 7:30 p.m. Stop by the Recreation Services office, Building 23 between 9:30 a.m. and 6:30 p.m.

Intramural golf league

Spots are up for grabs on the NNMC entry in the South Mid-Atlantic Regional Intramural Golf League. League play consists of open team and senior (over 40 by Sept. 30, 1991) team play. An "A" and a "B" team, each consisting of four golfers, are allowed in each division. Anyone interested in participating should call Paul Jones at (301) 295-0031.

Regional bowling tournament

NNMC's Edward L. Clauss Bowling Center will be the site of the 1991 South Mid-Atlantic Navy Sports Conference Bowling Tournament scheduled for May 13-17. All active duty Navy personnel from the region are eligible to register. For more information or to register, call tournament director Dave Page at 301-295-2060.



New pool hours

Beginning May 11 the Recreations Services pool will be open on weekends. The pool hours will be Monday-Friday — 11 a.m. to 8 p.m., weekends — 11 a.m. to 4 p.m. The pool will be closed on holidays. Daily usage fees are: Active duty, 75 cents, dependents/retirees, \$1.50, NNMC DoD civilians, \$1.75 and guests, \$2.

Military golf tourney

Active duty personnel interested in participating in the 28th annual Southeast Military Invitational Golf Tournament at the Naval Air Station, Jacksonville, Fla., may pick up entry forms at the gym. The tourney will be held May 7-10. For more information, call Paul Jones



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Sports trivia:

Question: What are the two oldest baseball stadiums in the country, both of which opened on April 20, 1912?

Last week's answer: In Miami in 1934, Primo Carnera (270) beat Tommy Lougran (184) in the heavyweight championship fight with the largest weight difference.



**·MAY·
NATIONAL
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AND
SPORTS MONTH**

Sweepstakes drawings for active duty and active duty reservists will be held during the day. Prizes include tickets to the Baltimore Aquarium and K-B movies theaters, weekend getaways at the Hyatt and Ramada and two round trip tickets on American Airlines.

The good times continue into the night at the Enlisted Club, with food and beverages available from 8 p.m. to 2 a.m. Entertainment starts at 9 p.m. with a live band performing. For those with show biz aspirations, a Karaoke sing-along sound system will allow you to belt out your favorite tunes.

Volunteers are needed for all activities. Anyone interested should contact Patti Pedisich at (301) 295-0031.

Employment Opportunities

CIVILIAN JOB OPPORTUNITIES

The NNMC Civilian Personnel Office is located on the ground floor of Building 10. Office hours are 7:30 a.m. to 5 p.m., Monday through Friday. For more information on these positions, updated weekly by CPO, call 301-295-6801 or 301-295-6804.

Vacancy Number	Area of Consideration	Series/Grade	Position Title	Location	Closing Date	Point of Contact	Phone
Naval Medical Data Services Center							
91-36 (JF)		4 GS-669-7/9/11	Medical Records Librarian	Bethesda, Md.	Until Filled	J. Francis	295-6804
90-86 (LH)		4 GS-332-3/4	Computer Clerk	Bethesda, Md.	Open**	L. Stewart	295-6801
91-83 (JF)		4 GS-332-4/5/6/7	Computer Operator	Bethesda, Md.	Until Filled	J. Francis	295-6804
90-206 (JF)		4 GS-334-7/9/11/12	Computer Specialist	Bethesda, Md.	Open**	J. Francis	295-6801
91-88 (JF)		4 GS-334-11/12	Computer System Analyst	Bethesda, Md.	Open**	J. Francis	295-6804
Bureau of Medicine and Surgery							
91-35 (JF)		4 GS-343-9/11/12	Management Analyst	Wash., D.C.	Until Filled	J. Francis	295-6804
90-195 (LS)	4,7	GS-318-4/5/6	*Secretary (T)	All activities	Open**	L. Stewart	295-6901
90-133 (LH)		4 GS-332-2/3/4	*Clerk/Typist	All activities	Open**	L. Stewart	295-6801
90-101 (LS)		4 GS-204-3/4/5	Military Pers. Clerk (T)	Wash., D.C.	5/6/91	L. Stewart	295-6901
90-100 (LS)		4 GS-204-4/5/6	Military Pers. Tech. (T)	Wash., D.C.	5/6/91	L. Stewart	295-6801
Naval School of Health Sciences							
90-244 (LS)		4 GS-2/3/4	*Clerical Support Position (T/NT)	D.C., Va., Md.	Open	L. Stewart	295-6801
91-39 (JF)		4 GS-1020-5/7/9	Medical Illustrator	Bethesda, Md.	Until Filled	L. Hasty	295-6801
91-164A(LH)		4 GS-1071-5/7	AV Prod. Spec.	Bethesda, Md.	Until Filled	L. Hasty	295-6801
91-267A(LH)		4 GS-1071-7/9	AV Prod. Spec.	Bethesda, Md.	Until Filled	L. Hasty	295-6801
Naval Medical Research Institute							
90-229 (JF)		9 GS-0018-12	Safety & Occ. Health Mgr.	Bethesda, Md.	Until Filled	J. Francis	295-6804
90-258 (JF)		4 GS-404-6/7/9	Bio. Lab Technician	Bethesda, Md.	Until Filled	J. Francis	295-6804
91-107 (JF)		4 GS-404-7/9	Bio Lab Tech.	Bethesda, Md.	Until Filled	J. Francis	295-6804
90-106 (JF)		4 GS-403-9/11	Microbiologist	Bethesda, Md.	5/6/91	J. Francis	295-6804
Health Sciences Education and Training Command							
91-19 (LS)		4 GS-540-4/5	Voucher Examiner (T)	Bethesda, Md.	Until Filled	L. Stewart	295-6801
National Naval Medical Center							
91-41 (LF)	4,6,7	GS-018-9/11	Safety & Occ. Health Spec.	Bethesda, Md.	Until Filled	L. Fetsko	295-6804
91-86 (LW)	7	GM-180-15	Clinical Psychologist	Bethesda, Md.	4/30/91	L. Washington	295-6804
90-230 (LS)		4 GS-305-4	File Clerk	Bethesda, Md.	Until Filled	L. Stewart	295-6801
90-195 (LS)		7 GS-318-4/5/6	*Secretary (T)	All activities	Open**	L. Stewart	295-6801
91-103 (PR)		4 GS-318-6/7	*Secretary	Bethesda, Md.	4/26/91	P. Robinson	295-6801
91-08 (LS)		4 GS-322-4	Clerk-Typist (PT)	Bethesda, Md.	Until Filled	L. Stewart	295-6801
91-88 (LF)		7 GM-235-13	Sup. Empl. Devel. Spec.	Bethesda, Md.	4/30/91	L. Fetsko	295-6804
91-93 (LF)		4 GS-203-4/5/6	Pers. Staffing Asst. (T)	Bethesda, Md.	4/30/91	L. Fetsko	295-6804
90-133 (LS)		4 GS-322-2/3/4	*Clerk-Typist	All activities	Open**	L. Stewart	295-6801
90-250 (LS)		7 GS-322-4/5/6	Computer Operator	Bethesda, Md.	Open	L. Stewart	295-6801
91-111 (LF)		4 GS-343-11/12	Management Analyst	Bethesda, Md.	Until Filled	L. Fetsko	295-6804
90-242 (LS)		7 GS-385-5	Teletypist	Bethesda, Md.	Until Filled	L. Stewart	295-6801
91-96 (LH)		4 GM-510-13	Supvy. Accountant	Bethesda, Md.	4/26/91	L. Hasty	295-6801
91-62 (PR)	4,9,11,12	GS-610-11	*Clinical Nurse	Bethesda, Md.	Open**	P. Robinson	295-6801
91-87 (PR)	4,9,11,12	GS-610-11	*Nurse Specialist (Dental)	Bethesda, Md.	Open**	P. Robinson	295-6801
91-63 (PR)	4,9,11,12	GS-610-11/12	*Nurse Specialist	Bethesda, Md.	Open**	P. Robinson	295-6801
91-64 (PR)	4,9,11,12	GS-620-4/5/6	*Practical Nurse	Bethesda, Md.	Open**	P. Robinson	295-6801
91-112 (PR)	4,9,11,12	GS-620-6	*Practical Nurse	Bethesda, Md.	4/25/91	P. Robinson	295-6801
91-109 (LH)		4 GS-640-5	Health Tech.	Bethesda, Md.	Open**	L. Hasty	295-6801
90-104 (PR)		4 GS-645-8	Medical Tech.	Bethesda, Md.	4/26/91	P. Robinson	295-6801
90-261 (AW)	9,11,12,13	GS-648-8/9	*Therapeutic Radiologic Technologist	Bethesda, Md.	Until Filled**	A.L. Wright	295-6801
90-207 (LS)		4 GS-679-4/5	Medical Clerk (Typing/Nontyping)	Bethesda, Md.	Open**	L. Stewart	295-6801
90-196 (LS)	4,5,10,12	GS-675-4/5	*Medical Records Technician	Bethesda, Md.	Open	L. Stewart	295-6801
91-76 (AW)		4 WG-4204-8/9/10	Pipefitter	Bethesda, Md.	4/26/91	A. Wright	295-6801
91-80 (AW)		4 WG-5352-8/9/10	Industrial Equip. Mech.	Bethesda, Md.	4/26/91	A. Wright	295-6801
91-92 (LS)		7 GS-2005-5/6	Supply Tech. (T)	Bethesda, Md.	5/3/91	L. Stewart	295-6801
91-102 (LS)		7 GS-2005-6	Supply Tech (T)	Bethesda, Md.	5/6/91	L. Stewart	295-6801
91-105 (PR)		4 WG-6907-4/5/6	Materials Handlers (MVO)	Bethesda, Md.	4/26/91	P. Robinson	295-6801

* Special salary rates **Referral list may be issued at anytime.

- (1) Activity-wide (command).
- (2) Activities serviced by CPO.
- (3) All appointable employees of naval activities in the Washington, D.C. area.
- (4) All appointable employees of the Department of Defense activities in the Washington, D.C. area.
- (5) All appointable federal employees in the Washington, D.C. area.
- (6) All appointable employees of the Department of the Navy worldwide.
- (7) All appointable employees of the Department of Defense worldwide.

- (8) All appointable employees of the Department of Defense activities, Philadelphia Region (Del., D.C., Md., Va., Pa., W.Va., N.J., and N.C.).
- (9) All appointable federal employees throughout the federal service. - nationwide.
- (10) Applicants with a Notice of Results/Rating are also being accepted.
- (11) Non-status applications are being accepted.
- (12) Reinstatement eligibles.
- (13) All applicants under special employment program.

Code: (T) Typing (PT) Part Time (FPL) Full Performance Level

Linen

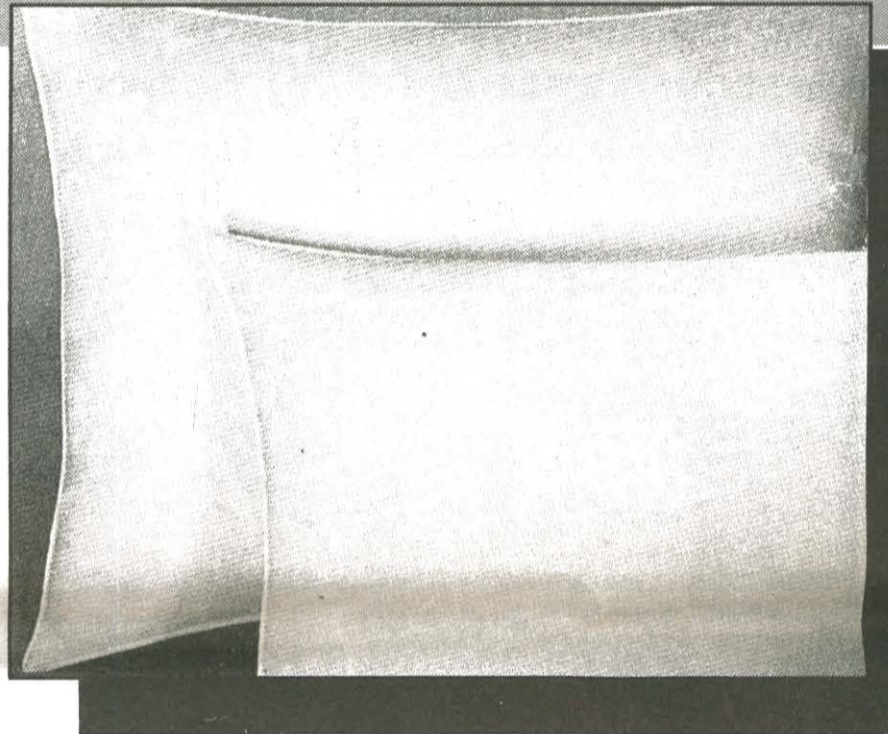
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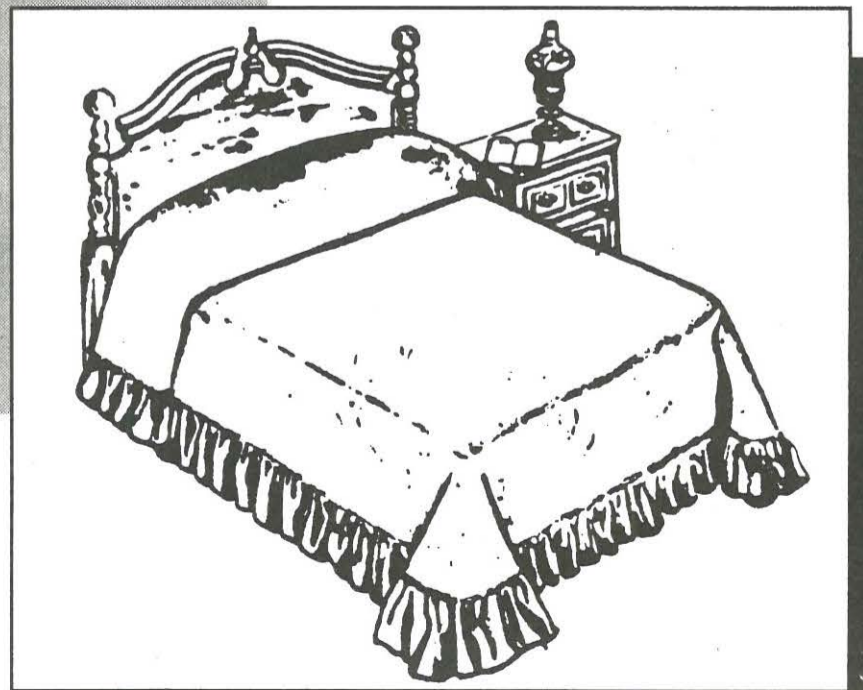
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CPO scholarship available

The Bethesda Complex Chief Petty Officer (CPO) Association has opened applications for its annual award of a \$500 scholarship for the 1991-92 school year.

The award of the CPO Scholarship will be based upon a combination of scholastic achievement and financial need, and may be used at the college or university of the recipient's choice.

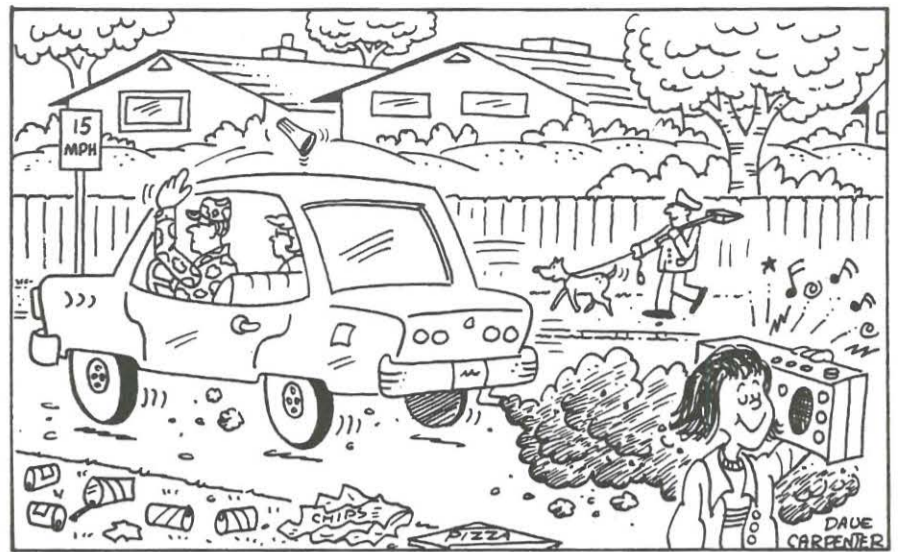
Eligibility is open to any dependent child of an active duty enlisted member permanently stationed aboard any of the National Naval Medical Center (NNMC) complex commands.

Further information and scholarship applications may be obtained from your Command Master Chief or by contacting the scholarship chairman HMCM(SW) S.J. Robillard at 301-295-5762. Deadline for applications is Aug. 30.

To Report Fraud, Waste and Abuse in Naval Medical Activities



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Autovon 8-294-0343
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1. Chimney on first house.
2. Length of dog leash.
3. Number of buttons on boy's coat.
4. Number of cans on ground.
5. Door handle on car.
6. Position of tossed coffee cup.

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A portion of the proceeds from Fuddruckers Stars & Stripes Victory Celebration Weeks to be donated to the USO, Washington, D.C.

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013 WANTED

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Let's Help Each Other!

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The Journal

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MAILING ADDRESS:
ATTN: Classified Dept. Comprint Inc., 9030 Comprint Ct. Gaithersburg, MD 20877.

HOURS:
Mon - Fri. 9:00 am - 5:00 pm.

INDEX:
Announcements & Notices 001-009
Lost & Found 010-012
Wanted 013-014
Child Care 015-019
Services 020-029
Auctions 030-034
Sale Items 035-044
Employment 045-049
Housing (Rent) 050-059
Housing (Sale) 060-073
Busi. Oppor. 075-079
Vehicles 080-090

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All advertising must run one time before we can cancel or change copy. When an ad is cancelled, a cancellation number will be issued as a receipt. All matters involving this cancellation will be settled on the basis of the advertiser submitting the cancellation number for verification.

ERRORS:
The Journal cannot be responsible for more than ONE incorrect insertion. Check your ad carefully and please notify us immediately, if an error occurs. No adjustment will be given unless, in the opinion of the newspaper, the error materially affects the value of the advertisement. The paper will not be responsible for more than the cost of such advertisement.

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The Journal reserves the right to refuse or revise any advertisement which it deems objectionable.

NOTICE:
All housing advertised in this newspaper is subject to the Federal Fair Housing Act of 1968 and to the Federal Civil Rights Act of 1966. These two laws make it illegal to discriminate or to advertise "any preference, limitation, discrimination, based on race, color, religion, sex, or national origin." This newspaper will not knowingly accept any advertisement for real estate which is in violation of the law. Our readers are informed that all dwellings advertised in this newspaper are available on an equal opportunity basis.

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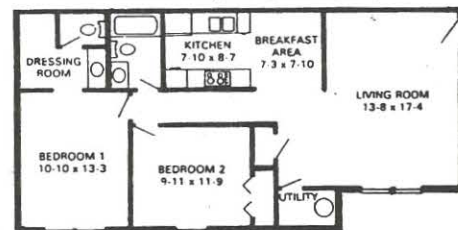
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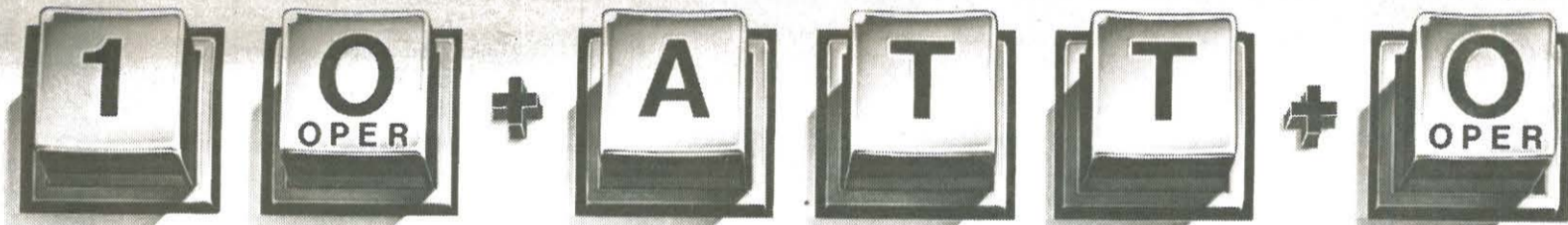


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