
The United States Navy on the World Wide Web
A service of the Navy Office of Information, Washington DC
send feedback/questions to comments@chinfo.navy.mil
The United States Navy web site is found on the Internet at
<http://www.navy.mil>

Navy and Marine Corps Medical News
MN-01-06
February 9, 2001

Navy and Marine Corps Medical News (MEDNEWS) is a weekly compendium of news and information contributed by commands throughout the Navy medical department. Information contained in MEDNEWS stories is not necessarily endorsed by Navy Bureau of Medicine and Surgery (BUMED), nor should it be considered official Navy policy.

BUMED distributes MEDNEWS to Sailors and Marines, their families, civilian employees and retired Navy and Marine Corps families. Further distribution is highly encouraged.

Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC - Medical Corps (physician); DC - Dental Corps; NC - Nurse Corps; MSC - Medical Service Corps (clinicians, researchers and administrative managers). Hospital Corpsmen (HM) and Dental Technician (DT) designators are placed in front of their names. Photos for corresponding cutlines are available for download at Navymedicine.med.Navy.mil 1-3 days following the posting of this email.

Contents for this week's MEDNEWS:

- MN010601. Navy Publishes "Rights and Benefits" on CD-ROM, Web
- MN010602. AMSUS to hold 2001 Lecture Award review
- MN010603. Balboa improves at speed of light
- MN010604. The brick and mortar has dried; Naval Hospital staff gets to work
- MN010605. Great Lakes named Heroes of TRICARE
- MN010606. NNNMC bone marrow donor drive surpasses goal
- MN010607. Healthwatch: You are more important than a toothbrush!

Stories:

MN010601. Navy Publishes "Rights and Benefits" on CD-ROM, Web Special to the American Forces Press Service

The Navy's annual "Owner's and Operator's Manual," the January All Hands magazine, contains a special twist this year: a CD-ROM packed with rights and benefits information.

The "manual," also known as the All Hands Navy almanac, debuted in late January. It customarily contains facts and figures such as listings of surface ships, submarines, aircraft and weapons, Navy rank insignia, and pay tables.

The new, limited-edition compact disc replaces the Rights and Benefits Issue previously published by the magazine every few years. The disk contains a small program, `allhands.exe`, that details sailors' and Marines' many benefits, including pay and allowances, overseas duty, advancement opportunities and medical care.

The Rights and Benefits disk is in a plastic sleeve stuck to the inside back cover of the magazine. Anyone with a computer and CD-ROM drive can access the program, and best of all, Navy officials added, it links to the Navy Lifelines Services Network Web site with a single mouse click.

In the past, the officials said, some information in the printed Rights and Benefits issue was outdated when it hit the street. To solve that problem, the Naval Media Center, Lifelines2000 and the Bureau of Naval Personnel teamed up to couple technology, content for the disk and a "living" Web site.

The home page of the Lifelines multimedia site, www.lifelines2000.org, links to a bevy of tools and information for the entire Navy department family, from active duty sailors and Marines, to civilian employees, family members, veterans and retirees.

The disk, intended to help sailors and Marines make the right career choices, hyperlinks to the Navy Quality of Life Web site at www.LIFELines2000.org/rights. No matter how old the CD-ROM gets, it links to the live Web site and the regularly updated online rights and benefits handbook, the officials said.

With the current "war for talent" to retain the best personnel, they said, the Navy is committed to keeping sailors and Marines well-informed about their rights and benefits, thereby maintaining readiness. They called the CD the latest in a series of steps the Navy has taken to help sailors "accelerate their lives."

Many key personnel quality-of-life and quality-of-service programs and policies have changed, they said, so a review of rights and benefits is more important than ever.

For the first time, the All Hands Web site, www.mediacen.navy.mil, will also allow users to download and print high-resolution copies of the almanac charts containing commissioned and enlisted rank insignia and ratings.

Requests for copies of the All Hands almanac edition with CD-ROM can be made via e-mail to All Hands distribution manager Garland Powell at powell@mediacen.navy.mil. Include name, command, telephone number, e-mail and mailing addresses, and the number of copies desired. Inquiries related to magazine content should be directed to All Hands magazine at allhands@mediacen.navy.mil.

-USN-

-USN-

MN010602. AMSUS to hold 2001 Lecture Award review
From the BUMED Public Affairs Office

A review board from the Association of Military Surgeons of the United States (AMSUS) is scheduled to meet March 14 to review nominations for the AMSUS lecture awards.

Recipients of these awards are individuals who have made contributions to their fields in the past and who can make additional contributions to military healthcare. Lecture award recipients are requested to present a lecture at the AMSUS Annual Meeting relating to the theme for that meeting.

The four award categories are the Richard A. Kern Lecture Award, The William C. Porter Lecture Award, the Edward Rhodes Stitt Lecture Award, and the Sustaining Membership Lecture Award.

The Richard A. Kern Lecture Award honors Rear Admiral Richard A.

Kern, MC, USNR Retired. Rear Admiral Kern was Professor of Medicine, Emeritus, Temple University School of Medicine.

The recipient will be an individual who has made an outstanding contribution to Federal Medicine. The awardee will be requested to present a lecture on a topic related to Federal Medicine. A plaque and a monetary award are presented.

The William C. Porter Lecture Award honors Colonel William Clare Porter, MC, USA, a pioneer in military psychiatry. Colonel Porter served as psychiatrist with the New York State Hospital Service until 1918 when he was commissioned in the Army Medical Corps, and served as a psychiatrist in the Army until his retirement in 1947. He received the Legion of Merit and had a marked influence on the advances in diagnosis and treatment of the neuropsychiatric patient.

The William C. Porter Lecture Award recipient is an individual who has made some outstanding contribution to the field of psychiatry. The recipient will be requested to present a lecture on psychiatry relating to the theme of the annual meeting. A scroll and a monetary award are presented.

Edward Rhodes Stitt Lecture Award was established in honor of Rear Admiral Edward Rhodes Stitt, MC, USN. Admiral Stitt was the Surgeon General of the Navy for eight years and played a major role in the field of military pathology. Admiral Stitt had an international reputation as an expert in the field of tropical medicine.

The award recipient is an outstanding laboratory pathologist in the field of laboratory medicine. The recipient will be requested to present a lecture on laboratory medicine. A plaque and an award are presented.

The Sustaining Membership Lecture Award recipient is an individual in one of the Federal Medical Services who has made some outstanding contribution in the field of medical research.

The recipient will be requested to present a lecture relating to the meeting theme at the Annual Meeting. A scroll and an award are awarded.

The required information to include when nominating an individual is:

- A cover letter explaining why you feel that individual deserves the award.
- A curriculum vitae for the individual nominated.
- A listing of the individual's publications, awards, honors, and other professional accomplishments.
- A short, one-line citation suitable for use on a plaque or scroll.
- Any supporting letters from other individuals must be included with the nomination package.

Nominations should be forwarded to MED-07 and received no later than 12 March 2001. The points of contact are CAPT Peter G. Lynch, DC, USN at DSN 726-3411 or LCDR Lisa A. Anderson, NC, USNR at DSN 762-3417. Additional information can be found at www.amsus.org/amsus/aw_prog.html.

-USN-

-USN-

MN010603. Balboa improves at speed of light
By Doug Sayers, Naval Medical Center San Diego

Balboa doctors can now see into your heart faster than anyone... and your lungs, and spine and skull. The most advanced CT Scanner (Computed Tomography) in the world has just arrived at the medical center; an addition that will make patient diagnoses quantifiably faster, as well as increase diagnostic accuracy.

CDR Michael L. Puckett, MC, who oversees the CT program, says of the new capability, "This CT Scanner changes the way we do business. The patient spends less time on the table, the technician has better equipment to operate and the physician gets an end product that is far more accurate - which improves our patient care."

"Balboa is the first hospital in California to get the next generation CT Scanner," Puckett said. "Body scans that used to take minutes, now take only seconds. Our new CT Scanner is so fast it can complete a scan of the entire chest, abdomen and pelvis in less than 20 seconds," he said.

A CT Scan is a diagnostic test that combines the use of X-rays with computer technology. A series of X-ray beams from many different angles are used to create cross-sectional images of the patient's body. These images are assembled in a computer into images that display internal organs, bones, and tissues in great detail.

The faster technology couldn't come at a better time. Last year, the CT division performed an average of 1100 examinations per month, a 22% increase from the previous year.

-USN-

-USN-

MN010604. The brick and mortar has dried; Naval Hospital staff gets to work

By Rod Duren, NH Pensacola

The Surgeon General of the Navy and Pensacola's Navy historian cut through the red, white and blue tape Feb 2 to officially dedicate the opening of Naval Hospital Pensacola's new Outpatient Clinic.

The 73,000 square foot Outpatient Clinic is home to the pharmacy, immunizations, respiratory therapy, family practice, pediatrics, OB/GYN, dermatology, audiology, and the eye clinic.

Brick and mortar is one thing," said Vice Admiral Richard A. Nelson, the Navy's Surgeon General, "but the staff of Naval Hospital Pensacola has a good reputation around military medicine as a staff that cares about the quality of care they give.

"I suspect you'll see that increase even more with the opening of this new clinic," he said.

Vice Adm. Nelson also noted the facility is "important evidence of the change in the way medicine is practiced not only in the military but in all of America. It represents what we're doing in Navy medicine today."

"We've transitioned from inpatient to an outpatient approach to healthcare focused on the well-being of the patient," the Navy Surgeon General continued. "This facility was built in a way to allow us to do that efficiently and to the satisfaction of both the patient and healthcare provider."

Dr. George Pearce, professor emeritus of history from the University of West Florida and a multiple book author on Navy Pensacola history, gave a detailed account of the 175-year history of the Naval Hospital in Pensacola.

He also noted that Navy hospital's economic impact on the Pensacola community was more than \$234 million annually, which is a far cry from the \$30-a-month the first surgeon paid to rent a house he used as a temporary Navy hospital in 1826.

-USN-

-USN-

MN010605. Great Lakes named Heroes of TRICARE
By LT Youssef Aboul-Enein, MSC, NH Great Lakes

Fourteen staff members from the Great Lakes TRICARE Service Center were recognized as "Heroes of TRICARE" by the TRICARE Management Activity recently for their commitment to 100 percent customer satisfaction.

Located within the naval hospital, they have taken the Treat Everyone As Me (TEAM) approach in dealing with solving complex health benefits issues and providing rapid access to beneficiaries in the Great Lakes region.

According to Ms. Janet Geller the TRICARE Area Manager in Great Lakes, if a beneficiary has a problem with mounting healthcare costs, billing problems or getting specialized care not provided by the military, they are instantly referred to the TRICARE Service Center.

"Our staff helps patients solve their issues and get the most out of their hard-earned health benefit," Geller said.

Geller attributes this success not only to her staff, who fully appreciate military families wanting to get care for their loved ones, but also to the fact that the Service Center is located within the Naval Hospital, making access to these health benefits experts immediate and effective.

"The TRICARE Service Center staff at Great Lakes receives 100 referrals weekly, 75 walk-ins daily and 190 telephone calls per day. Each is an opportunity to implement a positive attitude for change," said CAPT Elaine Holmes, MC, Naval Hospital Great Lakes Commanding Officer. "They also require every newly reporting member checking into Naval Training Center Great Lakes to visit the TRICARE Service Center in an effort to orient new families to healthcare options available in this region."

"It is this symbiotic relationship between Naval Hospital Great Lakes and its TRICARE Service Center that has made the TRICARE program a success here," said CAPT Raymond Swisher, MSC, Naval Hospital Great Lakes Executive Officer.

Whenever an access problem or an appointment backlog is discovered both the TRICARE Service Center and Naval Hospital administrators and quality assurance personnel meet to discuss and implement solutions. In addition the Service Center also operates on the weekends and takes appointments from beneficiaries to solve their healthcare access problems or help in explaining what providers are entitled to regarding reimbursement.

This view of a seamless TRICARE Team in which the Military Treatment Facility and contracted TRICARE Service Center are one is vital in Great Lakes, Holmes said.

"We pride ourselves in being the gateway to Navy Medicine for 56,000 Recruits per year training to be United States Sailors and the staff tasked with training and providing services for those Recruits," Holmes added.

During last April's Recruit Healthcare Symposium 2000 sponsored by Naval Hospital Great Lakes, RADM Michael Cowan, MC, said in his keynote speech, "TRICARE is two sides of one coin, the healthcare needs of military families must be taken care of. That way Marines and Sailors can do their job in the fleet and in the field, knowing that their loved ones are receiving the best and most timely medical care."

-USN-

-USN-

MN010606. NNMC bone marrow donor drive surpasses goal
By Kevin Sforza, National Naval Medical Center

The National Naval Medical Center's bone marrow donor drive Feb. 6 was supposed to end at 3 p.m. but the people kept coming in. When the last person had stepped through the curtains 320 people were added to the National Marrow Donor Program (NMDP) Registry, according to LCDR Elizabeth Montcalm-Smith, drive coordinator. "I want to thank everyone who participated," she said.

The drive was conducted in cooperation with the C.W. "Bill" Young/DoD Marrow Donor Program. Congressman Young and his wife, Beverly, were on hand to thank those participating in the event.

The National Bone Marrow Donor Program (NMDP), founded in 1986, now includes more than 3.7 million volunteers who hold the key to life for patients with leukemia or any one of 60 otherwise fatal disorders. Young established the program with a small appropriation to the Navy in 1985.

Since 1986, 13 other countries have created marrow donor registries modeled after ours. Through his work on the Appropriations Committee, he has provided funding to maintain the registry and allow marrow to be delivered around the world to save lives.

In the past six years, the National Naval Medical Center has sponsored donor drives resulting in 1,251 potential donors. Donors have come from different commands in all branches of the Armed Forces.

The process for bone marrow testing is simple: a small amount of blood is drawn from the volunteer and is then categorized and entered into the NMDP Registry. When patients are in need of a marrow transplant, the registry computer identifies potentially compatible donors.

Individuals who have previously been tested and entered into the NMDP Registry need not be retested. However, if you are listed on the NMDP Registry, be sure to update your address and other information through the C.W. Bill Young/DoD Marrow Donor Program, 5516 Nicholson Lane, 3rd Floor, Kensington, MD 20895, (301) 984-1515 or (800) MARROW-3 (627-7693).

-USN-

-USN-

MN010607. Healthwatch: You are more important than a toothbrush!
By LT George Kang DDS, Branch Dental Clinic, Yokosuka, Japan

Proper oral hygiene for your child starts with three simple things: a toothbrush, floss, and YOU the parent. The parent is the most important part of the equation. You as the parent should be responsible for brushing and flossing your child's teeth personally until he/she reaches the age of 7. Until that time, your child does

not have the manual dexterity to clean his/her own teeth properly. Even if children like to brush and floss by themselves, it's best to clean their teeth afterwards while praising their efforts and "checking" their work.

Flossing should be introduced to your child as soon as you see his/her teeth are touching. When teeth are touching, a toothbrush cannot clean in between them. Look at your child's front and back teeth to see if their teeth are touching. If you have problems flossing your child's little teeth with your large hands, floss holders may enable you to reach the back teeth easily. You should try to floss your child's teeth every night, but given the constraints of time, twice a week is adequate.

Diet is an important consideration to your child's oral health. A healthy diet is a balanced diet that naturally supplies all the nutrients your child needs to grow. Often times, a diet high in certain kinds of carbohydrates, such as sugars and starches, may place your child at a high risk for tooth decay. Watch for your child's intake of sugars, starches and sticky foods. Sugar can be found in many processed foods, even some that do not taste sweet. Always look at the labels provided on the package. Foods such as potato chips, rice and pretzels can provide starches that supply bacteria the medium to create acids for tooth decay. In addition, sticky foods such as raisins, fruit gummy snacks and taffy tend to stick in the grooves of teeth, once again leading to a medium for bacteria to create tooth decay. These types of foods are not easily washed away from the teeth by saliva. If snacking is a necessity, try sugar-free candy or chocolates that melt rather than candies that stick into a tooth's grooves.

Fluoride is an essential part of healthy teeth and can decrease the amount of tooth decay your child will experience. Do not give your child fluoride supplements on your own. Each dose of fluoride prescribed in the clinic to the child is an exact specified dose base on a child's age. Too much fluoride can cause permanent staining to the teeth called fluorosis. Too little fluoride will prove to be inadequate for the prevention of dental decay.

Remember that the most important element to this equation is you, the parent. Remember... "A Navy Smile Shines Over Seas!"

More information can be found on the following web sites:
American Academy of Pediatric Dentistry: www.aapd.org, American Dental Association: www.ada.org, American Dental Hygiene Association: www.adha.com.

-USN-

-USN-

Comments and ideas for MEDNEWS are welcome. Story Submissions are highly encouraged. Contact MEDNEWS editor, At email: mednews@us.med.Navy.mil; telephone 202-762-3218, (DSN) 762, or fax 202-762-3224.