

The Nameless Paper

SERVING THE U.S. NAVAL HOSPITAL, ROOSEVELT ROADS, PUERTO RICO

CAPTAIN W. F. LORENZEN

CO's Corner



HAPPY NEW YEAR! What a great year we have just had!!! I can think of no better way to start off 1997 than with another improvement....for that is what this newsletter is all about, improving how we communicate. I could fill this newsletter with a narration of the great and wonderful accomplishments of all you folks that comprise the team we call "U. S. Naval Hospital Roosevelt Roads". The accomplishments range in magnitude from large to small.....from the terrific results of our Joint Commission for the Accreditation of Healthcare Organizations Survey (98%, and accreditation with commendation for three years) to the gentle touch of reassurance and kind word given to a patient on MSPU, seemingly in passing, by the Hospital Corpsman. Instead, I will let this newsletter communicate all of these accomplishments. The different sections inside will give a portrayal of the superb work done by all of you throughout the year. The Executive Officer, Directors, Command Master Chief and others have recounted the achievements of the command much more eloquently than I could hope to. Foremost in my mind is my desire to adequately convey to you my thanks for your tremendous contributions to our Nation, the Navy, Navy Medicine, your Command, and our Patients during 1996. (continued on page 2)

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CO's Corner

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Approximately eighteen months ago as I gave my remarks during the change of command I noted that I believed in Total Quality Leadership (TQL) as a leadership philosophy, and that we were going to put that methodology in place here at Naval Hospital Roosevelt Roads. Eighteen months later I feel even more strongly that the teamwork, empowerment, data driven decision making, continuous quality improvement and other methods that go with TQL are absolutely the way to organizational success. We have enjoyed many successes here at the command, they came with a lot of hard work and perseverance, that is always true, but I am convinced they came primarily because of the organizational culture created by TQL wherein the good ideas are allowed to blossom and flourish and bubble up from the good folks actually doing the jobs within the command. Nothing brings future successes like having successes....once we know we have a great opportunity to be supported and successful with one of our ideas, then we are even more likely to bring future ideas out into the open....and by doing so show others how to be successful. Please keep those innovative ideas and continuous improvements coming.

We just finished our customer relations training program given to approximately 150 of you here in the command. From your feedback on the course it was very well accepted. Customer relations is a very important aspect of the quality care that we provide to our patients. In early January I attended the annual Managed Care Conference in Washington, DC.....the first four speakers on the agenda were the Assistant Secretary of Defense for Health Affairs, and the Surgeon Generals from the Army, Navy and Air Force.....all four of these individuals, the most senior leaders in the military medical system, stressed customer relations. They focused not on the actual medicine, the application of scientific methods of medical care, because they know that when you use that measure to define quality we in military medicine consistently come out on top when compared to our civilian counterparts.....rather, they used that other definitional tool for quality.....how do our customers [patients] view quality. Our patients most often define quality medical care based on how they have been treated as a human being rather than as a medical patient. Have we taken care of their quality of life needs while they are in our system? Are we a user friendly system when it comes to making appointments? Were they assisted to their destination when we found them wandering the hallways? Did we treat them as we ourselves expect to be treated? We can always do better in our customer relations....just think about it for a moment, you can never be too nice or too helpful to someone, particularly when they are here to get our help in the first place. Can we sacrifice highly quality medicine to provide higher quality customer relations? No, but do we have to? Absolutely not, we can increase the positive aspects of customer relations with our patients on a continuous basis while still providing the highest quality medicine.....together they comprise high quality healthcare.

Please look for ways to make things better for our patients and then bring those ideas up so that we can implement not just in your clinic, but across the entire command. Each and everyone of us must have a direct line-of-sight all the way to the patient....each of us must be clear in our responsibility in this area.

I look forward to another great year here at Naval Hospital Roosevelt Roads....we will continue on our Total Quality Leadership journey, focusing on continuous quality improvement, involving all of you in the planning and the decision-making process, and putting our strategic goals into place. This year we do not have any formal inspections scheduled, but we are ready each and every day anyway. We can look forward to the start of our construction projects which in the long run will make this facility safer and more capable. Each of you, as members of this command have alot to be proud of.....CONGRATULATIONS and keep up the good work!!

CAPTAIN J. E. FAJARDO

XO's Corner



A few years back, as a department head, I went to congratulate a member of my department for something he had done well. Not finding him at his desk, I left a short note telling him how pleased I was for his performance and congratulated for a job well done. A few years later when I detached from that command, this employee reminded me of the message I once left on his desk. He thanked me for it and informed me that he still had the note.

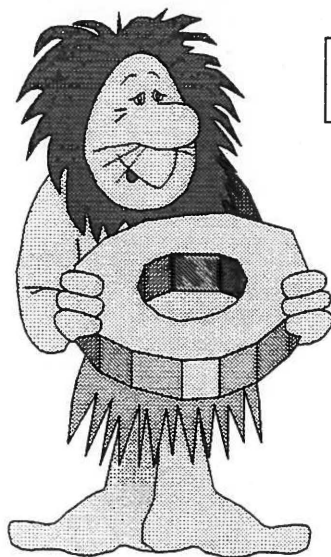
It was surprising to me that he had placed so much value in a piece of paper as to keep it for years. Most importantly, it made me realize that a word of recognition is a powerful incentive for anyone to continuously improve the quality of his or her job.
(continued on page 3)

XO's Corner

(CONTINUED FROM PAGE 2)

Michener, a well known author of historic novels, tells the story of his frustration at the reaction of someone providing him a service in a recurrent basis. The first time the author received the service, he paid for it and added a tip as was customary. Noting disappointment, he believed the tip had not been enough. He increased the amount of the gratuity over and over every time the services were rendered, but no matter how big the tip had become, the air of disappointment was still there. The author, noticing that another client was always greeted with great enthusiasm, decided to watch how much he tipped. To his surprise the tip was not in any way impressive, but it was accompanied by comments of satisfaction for the quality of services received. The recognition of the quality of his job was obviously more important to this individual than the financial reward.

While a practicing pediatrician I used to remind parents that punishment usually does not detract children from misbehaving. A simple encouraging word, in the other hand, markedly stimulates good behavior. What is true for children holds true for adults. As leaders we must remember that "we get what we reward". If we pay a little attention of what goes around us, we will quickly realize that the positive deeds by our personnel make our own work easier every single day. The compounding of these feats is what make us a great team. These acts, no matter how small, should make us constantly utter words of recognition and appreciation. How often we forget that simple words such as "Thank you" or "you did a wonderful job" are powerful indeed and they never wear off. I urge every supervisor, ...no, I urge everyone to use them as frequently as good performance is accomplished, that is to say, everyday!



IT BEGAN AGES
AGO

Command Master Chief's

SOAP BOX

By HMCM (SS) Larry Bailey



Supreme excellence is not to win a hundred victories in a hundred battles. Supreme excellence is to subdue the armies of your enemies without even having to fight them. Life has taught me that certain personal characteristics are vital to one's success in any profession. These characteristics include determination, personal integrity, academic and social discipline, unyielding dedication and a genuine interest in helping others.

Seven months ago my impression of this command was that we have an excellent mix of individual professional talent who possess the attributes to make this hospital a pace setter for Navy Medicine. "BOY WAS I FOOLED!" "Just kidding". Since then we have experienced a Navy I.G. Inspection, HM Birthday Ball, Hurricane season, Captain Floyd's passing, Admiral Boorda's passing, JCAHO, the Navy Ball, Surgeon General and Force Master Chief's visit, Empowerment through TQL the Hortense disaster project and several fantastic parties! These events affected each of us in different ways, yet they also became rally points that bonded us together as a team that pursued command excellence and injected quality into every facet of our jobs and lives.

Today our drive is the result of lessons learned, trial by fire, discipline and the realization that no matter the degree of raw ability, the collective group effort ensures survival for all and completion of our mission.

NOW, ABOUT THAT SUPREME EXCELLENCE, NEVER TAKE BY FORCE THAT WHICH YOU COULD GAIN BY DIPLOMACY.



MEET THE STAFF FROM SABANA SECA, BRANCH MEDICAL CLINIC.

Branch Medical Clinic, NSGA, Sabana Seca, located in Toa Baja provides medical care to a cryptologic command consisting of 400 active duty members, their dependents and civil service employees. The clinic's mission is to provide primary medical care to active duty, dependents, civil service and retirees.

The clinic's staff consists of 2 officers and 9 enlisted personnel. The Senior Medical Officer LT Luis A. Ortega, Administrative Officer and Physician Assistant LT Saja D. Burgess, HMC Anthony J. Reale (IDC) LCPO (not in picture), HM1 Elena Resto (LPO), HM2 Harmon (Pharmacy Tech), HM2 Candelario (Laboratory Tech), HM2 Schuyler (Radiology Tech), HM3 Brown, HM3 Clements, HM3 Lewis and HN Lagrand.

Beginning March 1997 the clinic will undergo a one year renovation period to improve its infrastructure. During this time, services will be provided out of Quarters 51 located in base housing.



THE LONE SAILOR

The Bronze Statue Of The Lone Sailor Is The Creation Of Stanley Bleifeld, A Navy Veteran From World War II.

There Were Originally 3 Models Created Before The Fourth And Final Model Was Accepted. The First, Nicknamed "The Bobt," Was Sent Back To Add A Few More Years Of Service And Some Maturity To His Face. The Second, By A Navy Memorial In Jacksonville, Was Dubbed "Liberty Bound" Because He Looked Like He Was Eagerly Awaiting The First Boat Ashore. The Third Model A Close Version Of The Present Hid Too Much Of His Face. The Final Model, Known Today As The "Lone Sailor" Was Unveiled And Dedicated At The Navy Memorial In Washington D. C. On October 13, 1987.

Artifacts From Eight U. S. Navy Ships As Well As The National Defense Service Medal Were Melted Into The Bronze Statue Of The Lone Sailor. Ships Including The USS Constitution, Constellation, Hartford, Ranger Biloxi, Hancock And Even The Nuclear-Powered Submarine USS Seawolf.

The Following Is' An Excerpt From The Lone Sailor Final Guidance:

"The Lone Sailor Statue Represents All People Who Ever Served, Are Serving Now Or Who Are Yet To Serve In The United States Navy. He Is A Composite Of The U. S. Navy Bluejacket--Relatively Young, About 26--And A Senior Second Class Petty Officer Who Is Fast Maturing To Become A Sea-Going Veteran. He Is The Kid From Down The Street Who Left To Join The Navy Just A Few Years Ago. Since Then, He Has Been To Navy Schools And Off To Sea, Shipping Out In Different Types Of Ships That Have Crossed The Equator, The Arctic Circle And The International Dateline. Sea Duty Continues To Have The Aura Of Romance--The Adventure Of More Ports To Visit, More Miles To Log, More Training, More Duties, More Experience And More Responsibilities--Now Performed With The Seasoning Of A Veteran Sailor Who Has Been There Before And Is Willing To Go Back.

He Embodies Two Hundred Years Of World-Wide Experience, Loyalty And Courage, And He Is A Member Of The World's Best Navy."



Chaplains Corner
by LT McElwain

"REARVIEW"

What kind of year has 1996 been for you? Have you grown and changed over the last 12 months? How are you different? What accomplishments have you made?

As you answer those questions you need to consider both your personal and your professional lives. As Naval Hospital Roosevelt Roads we have accomplished many things and each item took alot of work and required the cooperation of everyone involved.

On a personal level what was great about 1996? What did you learn to make 1997 a better year? In all honesty every year has its wonderful moments and it also has those moments we would rather have done without. We grow most from the difficult parts of life. It is little consolation while we are in the middle of pain or struggle to say, "gee this is a growth experience." Take a few moments and reflect on how you have grown and what caused that change in you over the last year.

When you have finished looking in the rearview mirror take some time to think about what you would like to accomplish in 1997. What personal, professional, relational, emotional, spiritual changes would you like to review next January? You can either allow life to force you to change or you can take some control and shape yourself. Which will it be?

CHAPLAINS SERVICES

**Protestant Worship every
Friday at 1100**

Other services as announced



TRANSFORMATION
BY LT Kelly-Hamil

**Standing At The Crossroads Of A Life You Are
The Keeper Of The Watch Silently, Faithfully,
You Diligently Work Your Hands And Heart And
Spirit To Protect A Precious Life Entrusted In
Your Care.**

You Are Like A Mighty Gold Bridge

**The Link Between Calm And Fear, Joy And
Despair, Life And Death;**

**Weaving Your Most Magical Web, You Offer
Strength And Hope And Courage.**

**You Are Like A Sparrow Of The Spring Come To
Brighten Weary Winter Days With Words Of
Hope Or A Listening Heart;**

**Bravely..Loyally, You Stand Perched Upon The
Fragile, Yet Strong Intertwined Branches Of
Life.**

**You Are Like A Butterfly As It Emerges From
The Cocoon - Such A Remarkable
Transformation--For You Have The Courage To
Change And Be Ever Flexible, Always Ready To
Fulfill The Mission.**

**Standing At The Crossroads Of A Life You Offer
Strength And Hope And Courage**

You Are A Hospital Corpsman!

So, Strive....Soar.....Dream

For You Bear Witness To The Future;

**And, Greater Than The Most Precious Diamond,
You Are A Fortune In Our Hands!**

**"Until we design and build a Navy that can
be operated and maintained by untrained
men and women, the cost of training is not
overhead, it's the price of doing business."**

VADM TRACEY



**"CAN DO"
ATTITUDES**

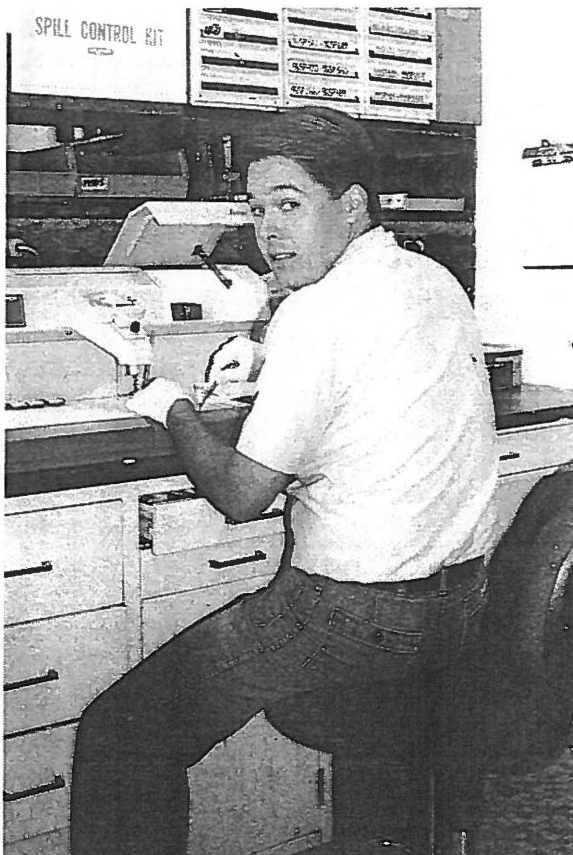
"CANT"....."CAN"

I Can't..... I Can

It can't be done.....It Can be done

It will never work.....Sure it will

We've never done it before...Let's do it



Meet HM2 Brian Hower

Histology Technician

(photo's by HM3 Jan Henry)

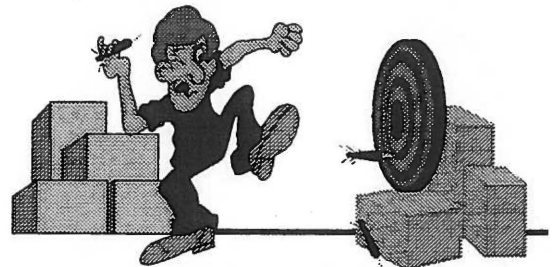
ANY DAY IN THE HOSPITAL



HAVE YOU MET THIS WOMAN?

Her name is Adelaida Morales and she works at the Information Desk for the Operating Management department. Adelaida was born in Ceiba PR and now resides in Naguabo, PR. She has two daughters, Nory and Norma, one grandson, Alex, and two granddaughters, Yamira and Raisa.

Her duties at the hospital are to provide information and operator assistance to staff members, patients and visitors. Prior to joining the staff at the Hospital she was a base operator. Adelaida's short term goal is planning for retirement and her long term goal is to take classes in Interior Design and to travel. She describes herself as a positive person with her best qualities being honesty. Her favorite food is rice and beans.



"GROUND HOG DAY" was 02 February and although we have warm weather all year around we shouldn't forget it is still winter around the world. The good news for those up north, in the Northern Hemisphere is, CNN reported, 03 out of 03 ground hogs **"DID NOT SEE THEIR SHADOWS"**!

**JUNIOR
SAILOR'S OF
THE YEAR
"1996"**

**HM3 EZEKIEL WILLIAMS NAMED
"JUNIOR SAILOR OF THE YEAR"**



HM3 EZEKIEL WILLIAMS



HM3 DONNA TENNEY



FN STEPHANIE SLYKER



HM3 TERRANCE GUISHARD

NOMINATIONS FOR JUNIOR SAILOR OF THE YEAR

FN Stephanie Slyker

HM3 Terrance Guishard

HM3 Ezekiel Williams

HN Shawntell Henderson

HM3 Donna Tenney

HM3 Stacie Sullivan

HM3 Donna Deal

CONGRATULATIONS TO ALL FOR A JOB WELL DONE

**SENIOR
SAILOR'S OF
THE YEAR
"1996"**



**"HM1 MARK KLINGE"
"SENIOR SAILOR OF
THE YEAR"**

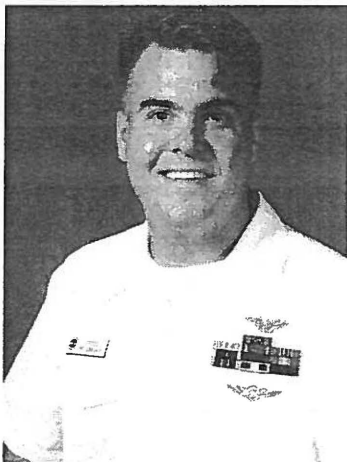


FIRST QUARTER

HM1 (HMC)
LENORA
WEATHERFORD

SECOND QUARTER

HM2 DIANE EARLE



THIRD QUARTER

HM2 DAVID SPEES

FOURTH QUARTER

RP2 THERESA
FLEMING



NOMINATIONS FOR SENIOR SAILOR OF THE YEAR

**HM2 Robert Libberton
HM2 David Spees
HM1 Miguel Briseno**

**HM1 John Bacon
Hm1 Mark Klinge
Hm1 Alonzo Cyder**

**RP2 Theresa Fleming
BM2 Joe Wilson
HM2 Diane Earle**

CONGRATULATIONS TO ALL FOR A JOB WELL DONE

MEET THE STAFF FROM VIEQUES BRANCH, MEDICAL

Branch Medical
Clinic, NASD, Vieques
is located on Vieques
Island.



HM1 AMIK

HM3 WARD

Consisting of only two enlisted members, HM1 (IDC) Amik and HM3 Ward, they provide medical care for a variety of training forces, Navy, Army, Marine Corps and Air Force. Their daily routine consists of conducting two sick call sessions and handling all medical emergencies. They are equipped to handle immunizations and routine laboratory studies. The active duty Navy personnel currently consists of 75 members.

VIEQUES CORPSMAN SAVES LIFE

On 27 January 1997, HM1 Amik received a call about a Seabee who was hurt and needed an ambulance. After searching for 2 1/2 miles he located EO3 Harvey who had went over an embankment in a road grader. She along with the road grader rolled and slid down 136 feet. HM1 Amik went down the embankment to assess the situation and instructed an onlooker to call for a Medevac flight. Upon reaching the wreckage HM1 Amik saw that EO3 Harvey was trapped inside with both legs pinned behind the seat. While the Seabees were diligently removing the back window to the cab portion of the vehicle, HM1 Amik conducted a rapid assessment which revealed a possible fractured right scapula, numerous contusions. Petty Officer Harvey was also complaining of lower back pain and a severe headache. HM1 Amik continued to apply direct pressure to control the bleeding. Although EO3 Harvey was not able to tell him if she had lost consciousness she was alert when he arrived on the scene. Utilizing all of his

training along with the resources at hand including, firemen and Seabees on the scene, he immobilized EO3 Harvey with a Kendrick Extrication Device and lifted her out of the rear window. Petty Officer Harvey was hoisted up the embankment using a miller board and safety lines to a military Humvee for transport to the helicopter pad from where she was medically evacuated. While waiting

for the helicopter to arrive, HM1 Amik started an IV and managed to keep the patient stabilized for another hour. She was transported to the U.S. Naval Hospital, Roosevelt Roads where she was treated in the Emergency Room by LT. Antonio Rodriguez, HN Jackie Cooper and HN Jason Hestand. A laceration to the scalp needed special attention and LCDR Harpreet Brar, General Surgeon, was called in to assist the ER team. Four days later EO3 Harvey returned to the NMCB-74 detachment in Vieques and is making a full recovery.

BRAVO ZULU TO HM1 AMIK AND THE REST OF THE ATTENDING TEAM HERE AT THE HOSPITAL FOR A JOB WELL DONE!



(photo's and story by DT1 Hardie)

Ombudsman Newsletter

by Jim Cavallario

Hello Members of the Hospital Family,

I am often asked what is an Ombudsman? The idea of the Ombudsman originated in Sweden in 1809. The nature of this position was as a public officer with the duties of handling public complaints against the government or business. Ideally, the Ombudsman acts as a public advocate, who is impartial and who can expeditiously handle all public grievances. Variations of the Ombudsman system now exist in 12 countries, in fact, the Department of Commerce has an ombudsman for Business. Their job is to handle complaints, suggestions, and inquiries from business men and women dealing with the agency. In 1970, the United States Navy adopted the Ombudsman program to give navy families the chance to share their concerns with the commands their spouse was attached to. This Ombudsman was elected by the local wives groups.

Today Ombudsman are military spouse "Volunteer's" selected and appointed by the Commanding Officer to assist in improving the lives of our sailors and their families. This help comes in many forms, from information about base and military events, to assisting with individual needs and problems that might arise while stationed here. Ombudsman work hand in hand with the Family Service Center and attend numerous meetings to gain information and share opportunities and ideas with other commands. An Ombudsman also acts as a liaison between military spouses and the command. They can assist a spouse in resolving problems that cannot be handled on their own through regular channels. The Ombudsman is a valuable resource to the command.

Over the past year I have assisted in helping the staff at the hospital with the painting projects, delivering flowers to staff members and their families, helping with bake sales and my all time favorite "giving rides to the airport". Please feel free to call on me if you have any questions or need my assistance at 865-1561.



U. S. Naval Hospital Command Career Counselor
HM1 Christine Orlins and Assistant Career Counselor
HM2 Donna Brenner Photo by: HM3 Henry

Advancements for September 96 Cycle

E-4		Work Area
HM3	Alexis, Dean	Pediatrics
HM3	Cook, Patricia	Patient Admin.
HM3	Davis, Leanna	Ortho/Surg
HM3	Dooney, John	Internal Med
HM3	Hartl, Bradley	X-Ray
HM3	Hovermill, Annissa	Labor & Delivery
HM3	Jenkins, Isaac	Patient Admin.
HM3	Johnson, Kevin	Emergency Room
HM3	Jordan, Tony	Eye Clinic
HM3	Macayan, Melissa	Emergency Room
HM3	Nalls, Susan	MSPU
HM3	Tenney, Donna	Pediatrics
HM3	Vathy, Richard	Facilities
HM3	Ward, Douglas	Vieques
HM3	Wright, Naome	Labor & Delivery
E-5		
DT2	Moya, Jesus	Dental
HM2	Ortiz, Helvis	Family Practice
HM2	Marini, Martin	Preventive Med
HM2	Hower, Brian	Laboratory
HM2	Fuller, Tammy	Urology
HM2	Reynolds, Kristen	HRMD
HM2	Anderson, Kevin	Laboratory
HM2	Quinn, John	MSPU
E-6		
HM1	Barnes, Jurmin	Oper Room
HM1	Freeman, Cynthia	Materials Mgt
HM1	Gonzalez, Andy	Materials Mgt

"WELCOME"

To all the new additions to families of our staff we would like to welcome to the U.S. Naval Hospital Family too.

Madison Lynn Shiplett: Born 19 January 1996 to Gerald L. and Deanna M. Shiplett

Kenji J. Delperal: Born 20 October 1996 to Natsuko Yoza-Delperal and Hilario Delperal

Gabriella Renee Lugo: Born 05 June 1996 to Violeta and Frank Lugo

Jadon Tyler Tate: Born 12 January 1996 to Laura and Tyrone Tate

Megan Elizabeth Scott: Born 27 May 1996 to Lisa and Michael Scott

Alyssa Leigh White: Born 18 June 1996 to Amy and Brian White

Corbin Ray Henkel: Born 17 September 1996 to Malinda and Darren Henkel

Rashad Tiriq Reed: Born 24 April 1996 to Robin C. Reed

Taylor Laine Johnson: Born 21 November 1996 to Denise and Tony Johnson

Kathryn Allyson Marini: Born 09 May 1996 to Erlinda and Martin Marini

Mathew M. Hower: Born 26 May 1996 to Jessica and Brian Hower

Kevin Gibson: Born 23 April 1996 to Maritza and David Gibson

Serena Kumari Colvin: Born 29 October 1996 to Kirti and Scott Colvin

Thomas Etienne Mejia: Born 13 September 1996 to Etienne A. and Winnie A. Mejia

Jordan Alexander Asqueri: Born 18 February 1996 to Tiffany L. and Luis Asqueri

Isaac David Jenkins III: Born 11 August 1996 to Shannon and Isaac Jenkins Jr.

**DO YOU KNOW YOUR CHAIN OF COMMAND?****U. S. NAVAL HOSPITAL CHAIN OF COMMAND****President of the United States****The Honorable William Clinton****Vice President of the United States****The Honorable Al Gore****Secretary of Defense****The Honorable George C. Cohen****Secretary of the Navy****The Honorable John H. Dalton****Chief of Naval Operations****Admiral Jay L. Johnson****CINCLANTFLT****Admiral J. Paul Reason****COMNAVSHORLANT****Rear Admiral Robert S. Cole****COMNAVBASE JAX****Rear Admiral Kevin F. Delaney****Responsible Line Commander****Commanding Officer, U. S. Naval Station,
Roosevelt Roads****Captain Keith W. Martello**

The Nameless Paper
U. S. Naval Hospital, Roosevelt Roads

Captain W. F. Lorenzen, Commanding Officer
Captain J. E. Fajardo, Executive Officer
LT. Andrew Davidson, Public Affairs Officer
HMCM Larry Bailey, Command Master Chief
DT1 Paulette Hardie, Editor/Photographer
HMC Beverly Davis, Assistant Editor
HMC Marvin McDaniels, Assistant Editor
HM3 Jannifer Henry, Photographer

The Nameless Paper is an authorized publication for members of the Military Services and civilian personnel of U. S. Naval Hospital, Roosevelt Roads. Contents are not necessarily the official views of, or endorsed by, the U.S. Government, the Department of Defense or the U.S. Navy. Letters to the editor are encouraged. The editor reserves the right not to publish inappropriate material.

Director for Administration (The Scoop)

By: LCDR B. C. Kinney

During 1996, hospital personnel and the Facilities Management Department completed planning and budget acquisition to support an extensive \$17M renovation program. The numerous construction projects will commence this summer and last for approximately 3 years. We also completed a comprehensive basic facilities requirements review which is preparatory for our facility addition in 2000. At the same time, on-going facilities maintenance projects will continue to improve the environment for our customers and you.

During the past year, the Management Information Systems Department has expanded Local Area Network (LAN) infrastructure from 469 network drops to 569; a 21% increase in personnel having access to the "Information Highway". We have successfully taken the capabilities afforded through MS Office to unparalleled heights in transforming our hospital into a "Near Paperless" command. By allowing document routing and file sharing through MS Mail and shared network drives, we will, during the course of the coming year, make significant strides to reducing paper usage, cost and "frustration" in tracking paper copies. The transformation to a "near paperless" environment is underway, however, it requires the command to reengineer its process of routing correspondence and how to share information on public directories. We ask for your help in "sending electrons, not paper".

The command now stands at the threshold of implementing TeleMedicine. With improved communication capabilities completed during 1996, such as the \$280K telephone switch and additional fiber optic cabling, we will have access to specialists the world over, thus adding a dimension of health delivery and specialty consultation for our patients not presently available. In the end, we will achieve the Surgeon General's goal of moving information, not people.

One of the major diagnostic enhancements was acquisition approval of a CT scanner, to be installed during FY 97. This, combined with a replacement X-Ray unit to be installed during the 2nd quarter FY 97, will greatly contribute to our diagnostic capabilities and provide more expeditious results for our patients.

We have sought ways to improve supply availability and reduce costs. The expansion of the credit card program is a significant improvement in providing purchasing power to the Pharmacy, Food Management, Laboratory, and Materials Management departments with the on-site ordering capability. This reduces the amount of paperwork and time required to order necessary material. In fact, we led the BUMED Claimancy with the lowest amount of interest paid to our creditors during FY 96. In essence, we get our material and pay our bills. At the same time, we were among the first OCONUS activities to implement the Medical/Surgical Prime Vendor Program which reduced stock levels from 90 days to 7 and inventory levels to approximately \$50K. The program provides us the ability to order material and supplies in days vice weeks, and has dramatically improved our ability to have what you need, when you need it. Lastly, through the combined efforts of the Comptroller and Materials Management Departments, the previous backlog of minor equipment has been eliminated. Time to get your FY 97 requirements in **NOW!**

We had the privilege of being nominated for the NEY Award (small hospital category), a prestigious food service award honoring outstanding galleys throughout the Navy. Consideration for this award is no small feat and the process for

consideration is detailed. We commend the Food Management Department for their hard work. In addition management personnel have totally revamped the menu, providing more low-fat, nutritious meals for our patients and you.

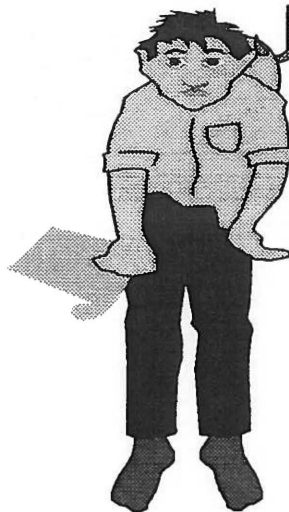
Patient Administration has been working with huge success in reducing the number of patients and non-medical attendants aeromedically evacuated to CONUS for medical treatment. Working with our clinicians to identify alternative and comparable care and treatment opportunities on-island has decreased the necessity to refer beneficiaries to stateside sources. The gains experienced as a result of this process improvement translates to a significant savings to area commands in both TAD dollars and manhours saved.

We have distributed the Naval Hospital Beneficiary Guide to fleet and shore units which includes a revision to the Patient's Rights and Responsibilities. Numerous administrative forms were translated to provide increased understanding for our Spanish speaking population. All of these efforts assist in providing information to our beneficiaries on the care available to them throughout Puerto Rico.

The addition of Health Sciences Television Network in December provides the ability to offer CME/CEUs on-site. In addition, this exciting educational enhancement affords training for all personnel with current educational offerings that will satisfy your thirst for knowledge. Come inquire at Staff Education and Training for more information.

We arranged for more than 17,800 hours of drilling time for Reservists and over 7600 hours of TAD-support. Using the Reserve force makes sense in this era of personnel reductions and we intend to capitalize on their expertise.

One of the true successes was the command sponsorship of the Navy Ball. Attended by 430 people, the theme highlighted Sailors and truly set a new benchmark for future birthday celebrations.



And finally, (yes editor, I said *finally*) our success with JCAHO. All departments have been deeply involved in performance improvement initiatives aimed at providing better customer service to you. A score of 98% with specific mention of numerous administrative areas, provides evidence of our commitment of excellence to you and our other customers.

**1996
YEAR IN REVIEW
NURSING DIRECTORATE**

by: LT Mary Kelly-Hamel

Filled with belief, passion, values, strategies, and bonding power, the Nursing Directorate proved there are no limits to ideas or dreams in 1996.

Realizing the gift of transcending our own well-being as a health care facility, the Perioperative Nursing Department initiated the Project Remedy Program led by LT Debra Myers. Project Remedy is a reutilization program that assists with transferring discarded, but usable medical supplies to developing nations. This program reduces regulated waste while being quite economical. Through this program, Naval Hospital Roosevelt Roads transferred over \$38,000,000 in disposable materials sent to the International Services of Hope/Impact Medical Division for use by medical personnel throughout the world.

Likewise, valuing the importance of continued nursing care after discharge, our nurses served as vital links for patients. LT Josue Toro, Internal Medicine Clinic, assisted by Mrs. Castro of the Champus Department, identified two established home health agencies providing continuity of care for high-risk medical or surgical patients prior to discharge from the hospital.

Coordinating efforts with the Physical Therapy Department, the Medical Surgical Pediatric Unit (MSPU) initiated crutch cane training for ward staff. This training offered staff the knowledge and skills to assess and educate patients in the proper use of ambulating safely with crutches.

Constantly aware of the precious bond between mother and newborn, the Obstetrics/Gynecology/Nursery/Labor and Delivery ward (OB/GYN/NSY/L&D) and OB clinic continued the successful Healthy Pregnancy/Healthy Baby program. Through teamwork, LCDR Dawn Cavallario, LT Susan Thul, RN Anne Marie Paynter, and LTJG Tani Corey facilitated this rotating, six-week educational project assisting parents in adapting to changes specific to pregnancy in support of their new arrival.

Similarly, understanding that sometimes loss is a part of growth when the destiny of a newborn does not mean survival, LTJG Christi Sierra (OB/GYN) attended Resolve Through Sharing. This unique training provides nurses with skills to support parents grieving issues the loss of their baby.

The Lactation Program developed by LCDR Carolyn Abney, continued to support and educate mothers who choose to breastfeed their newborn. Sensitive to the differences of individuals, this program expanded in 1996 under LT Nikkola (Pediatric Clinic), LTJG Corey (OB/GYN), and Ms. Panchula, Lactation Consultant, to include the multicultural dimensions of breastfeeding.

Valuing the maintenance of optimal health, the Wellness Center opened in April 1996 headed by LCDR Karen DiRenzo. With an holistic approach to wellness, the

center staff, composed of Mr. Sammy Gomez, HM1 Klinge and HN Diaz, energetically offered and promoted various events. Community activities included a health fair, various monthly screenings (blood pressure, glucose, cholesterol), educational booths and classes, and a weekly weight loss support group. The first Women's Health Forum offered a comprehensive educational and motivational seminar directed to increasing a woman's self-awareness towards taking responsibility for her health. In promoting health awareness by educating the community, the Wellness Center utilized multimedia modalities, including the base newspaper and radio station, maximizing their reach throughout the Naval Station.

Motivated by the goals and ideals of the Wellness Center, two members of MSPU achieved personal goals: HM2 Frank Contreras completed the Boston Marathon and LT Mary Kelly-Hamel completed the Marine Corps Marathon.

Appreciating that no individual, group, organization or community can succeed or survive with apathy, negativism, or non-inclusiveness, the Nursing Services JCAHO task force promoted a climate of excitement through learning, actively assisting with survey preparations. The committee, led by LCDR Mark Fink and LCDR Stevens-Ross, included: LT Atterbury (EMD), LCDR Delaney and LT Swanson (Perioperative), LT Sturdivant and HM3 Deal (SCU), LT Kelly-Hamel and HM3 Nalls (MSPU), LT Clayton and HM3 Wright (OB/GYN). With determination, the Nursing Services JCAHO team, through creativity and communication, organized and implemented successful teaching methods igniting the spirit of learning within the staff. The JCAHO survey result of 98% offered tangible proof of the commitment to quality and successful teamwork by all staff members.

In 1996, teamwork permeated the hospital. After the Oakleaves Spouse Association initiated the "rag-rolling" painting technique on OB/GYN, staff members, oozing with abundant energy, participated in transforming the environment. This renovation incorporated new carpeting, vertical blinds, decorative stenciling and modular nursing stations. Staff dedicated hundreds of hours to this beautification project that saved thousands of dollars. Making a dramatic impact in transforming the facility, the spirit of teamwork infused the atmosphere like diamonds of sunlight filtering through deep ocean waters.

Understanding the importance of progress through continual improvement, the Special Care Unit (SCU), MSPU, and OB/GYN/NSY/L&D implemented dynamic performance improvement plans.

Focusing on providing optimal patient care, the SCU performance improvement plan resulted in staff augmentation and redistribution to meet customer needs during peak hours.(continued on page 14)

NURSING DIRECTORATE

(continued from page 13)

Furthermore, LT Jose Lema and LTJG Abe Brown completed the Critical Care Nursing Course expanding nursing knowledge and skills required in this specialty area.

Striving for excellence, the MSPU performance improvement plan, "Securing and Maintaining Patency of Pediatric IV Sites," resulted in an improved standard of care while increasing staff knowledge in the complexities of providing nursing care for pediatric patients. As well, building on previous successes, MSPU continued a teaching-learning tool based on patient rights and ethics developed during JCAHO preparations. This quarterly project, "What Would You Do?," addresses bioethical dilemmas and decision-making techniques for discussion by all staff members.

In celebrating the profound human connection, the OB/GYN/NSY/L&D performance improvement plan focused on Maternal-Infant Bonding. Implementation of this plan resulted in the mother and newborn sharing precious moments to kindle their cherished relationship from the moment of birth. Similarly, the OB/GYN corps staff, continually seeking excellence as paraprofessionals, designed and initiated a check sheet for newborn care. This check sheet resulted in an accurate, consistent method for assessing and documenting criteria, thereby enhancing the quality care for newborns.

1996, a year of change and transition, offered exciting and challenging opportunities for our staff:

CDR Torres reported from NH Pensacola to NHRR as ADNS and Department Head, Inpatient Nursing in August 1996, replacing CDR McAvoy who transferred to NH Millington, TN as DNS.

Forging the future while fostering an environment to learn, to laugh and to grow, the Nursing Directorate initiated a pilot study for a proposed re-engineering design. Encompassing a four-week trial period, MSPU merged with OB/GYN/NSY/L&D during the holiday season. Identified collectively as Inpatient Services, the unified staff demonstrated sensitivity and respect required in the fragility of change, and manifested a successful outcome for the pilot study. Embracing the philosophy of cooperative effort and responsibility while demonstrating how diversity can foster creativity, Inpatient Services captured the command holiday decorating award for 1996.

Now, complete with shared vision, personal and professional mastery, and continual team learning, the Nursing Directorate is a powerful pendulum bridging the threshold of transitions, and championing our resources for further transformation and discovery in 1997!

Promotions

CDR Andrea Rosemond
 LCDR Robert Arbeene
 LCDR Deborah Carter
 LCDR Dawn Cavallario
 LCDR Cynthia Flemig
 LCDR William Wells
 LT Rebecca Taylor
 LT Kelly Goddard

Selectees

LCDR Claribel Brown
 LCDR Scott Swanson
 LCDR Nelida Toledo
 LCDR Raymond Wilson
 LT Frederick Braswel
 LT Andrew Galvin
 LT Eric Jensen
 LT Michael Morgan
 LT Kathy Young

DUINS Selectees

LCDR Arbeene - Naval War College, Newport, RI
 LCDR Brown-Vidal - Catholic University of America, Washington,
 LCDR Keenan - Naval Postgraduate School, Monterey, CA
 LT O'Dell - Georgetown University, Washington, DC
 LT(s) Galvin - University of Texas

Sailor-of-the-Month for 1996

FEB - HM3 Ernesto Irizarry, SCU
 APR - HN Susan Nalls, MSPU
 JUL - HN Dean Alexis, MSPU
 AUG - HN Jennifer Faberzak, OB/GYN

Civilian of the Quarter for 1996

Miriam Torres, RN, OB/GYN



1996 A MILESTONE YEAR IN MENTAL HEALTH

by: LT A. Davidson

1996 proved to be a year that will be remembered by all as a milestone year. The most notable event was the unfortunate passing of CAPT Charles Floyd. He was a mentor, a role model, and a leader. To have known him is to have been blessed.

Under the leadership of DR Andy Davidson, 1996 also saw the introduction of the Crisis Response Team. This formidable Team, trained in Critical Incident Stress Debriefing, intervened in over 200 active duty and civilian lives to reduce the psychological effects of trauma. The team participated in dealing with the Coast Guard who recovered the victims of a downed aircraft off the coast of the Dominican Republic, an incident that received international attention. The team also effectively intervened in the lives of sailors and hospital staff members.

Over the course of the year the Mental Health Department utilized the services of CDR John Mangrum, a TAD psychiatrist from Pensacola, Dr Mangrum provided stability and guidance for our department during an important transitional phase. He was eventually succeeded by DR Mary Rusher from Portsmouth. DR Rusher came from her residency and quickly assumed the Psychiatry division. Through her capable hands she has significantly increased the availability of psychiatric services for beneficiaries throughout the Caribbean. Another important milestone was the transfer of Mrs. Sonia Huffman to the Family Service Center. After 13 years at the hospital, her position of Family Advocacy Representative, was transferred to the FSC under an MOU between BUMED and BUPERS. The position of Medical Social Worker currently remains unfilled at the hospital.

The department has also experienced the growth of Anger and Stress Management classes. Led by HM3 Hays, HM3 Williams, and HN Robinson, the classes have increased in size. After an increase in OPTAR funds, the corpsman negotiated with the family service center to lead these much needed classes for the naval station.

The forecast for 1997 appears to be limitless as the department is poised to begin a number of new initiatives including the introduction of group therapy and a practicum site for Master's level students.



CHAMPUS NEWS UPDATES

By: Migna Castro

Active Duty Family Member Inpatient cost-share goes up! Effective October 1, 1996, the daily amount active-duty family members pay for inpatient care in civilian hospitals under Tricare Standard (CHAMPUS) and Tricare Extra increased from \$9.70 to \$9.90. This means that an Active-duty family member who is admitted to a civilian hospital for care under Tricare Standard (CHAMPUS) or Tricare Extra will pay the daily rate of \$9.90 or a flat fee of \$25.00, whichever is greater. The flat \$25.00 cost-sharing rate also applies to ambulatory (same-day) surgery. This rate does not apply to any category of Tricare/CHAMPUS eligible patients, only to active duty family members.

For eligible persons other than active-duty family members for most hospital admissions that occur on or after October 1, 1996, the daily rate is \$360.00. Tricare Standard (CHAMPUS) eligible persons who are not the family members of active duty, will pay either the fixed daily rate of \$360.00 or 25% of the hospital's bill, whichever is less.

For more information, please call your HBA at 865-5913.

Director for Clinical Services

By: Lisa Bacon

The directorate went through a major reorganization when medical, surgical, and ancillary directorates were combined into one clinical directorate, the Directorate for Clinical Services. For the Clinical Directorate, it was an educational year. The Radiology Department implemented its new On-The-Job Training program with its first two participants. Six corpsmen completed the Sickcall Screener Program, one officer was selected for post graduate fellowship in Managed Care, and three medical officers were selected for advanced medical training. In support of the Surgeon General's mandated programs, gang appointments in Acute Care were eliminated and sickcall appointments were implemented. Physical Exams department was able to provide "one-stop-shopping", therefore needing only one day to complete physicals. Also, our hospital became one of the first sites for the new "frames of choice" program for Navy eyeglasses. In the computer world, we have three physicians participating in a study program involving a voice recognition dictation system. New equipment procured for the directorate included a transrectal ultrasound machine for examinations and biopsies of the prostate; fiberoptic scope for handling difficult airways; a phacoemulsification unit for the Eye Clinic; a central monitoring unit for the Emergency Medical Department; CT Scanner for the Radiology department.

Other achievements include hearing test screens that do not require sedation for neonates; an updated filing system for x-rays; created new position for civilian physician in the Acute Care Clinic; Mental Health Department established Crisis Response Team; Early Intervention Program moved into new facilities outside the hospital; we became responsible for the Counseling and Assistance Center Performance Improvement highlights include restructuring of the triage area in the Emergency Room providing more privacy to patients; group practice model for Family Practice and Acute Care to increase patient access; establishment of relationship with Life-Flight Transport Helicopters improving medevac and transport services.

The Pediatric Clinic improved the visual surrounding of the clinic by a beautification painting project. Established the Wednesday morning Ear Clinic for all follow up ear re-checks. Patients are seen on a walk-in basis between 0800 - 0900. Conducted site visits to various civilian medical facilities and compiled important data detailing what services those facilities

can support and how to go about referring patients to those facilities. This information was then distributed to various departments throughout our hospital. Established the Lactation Clinic. Since the inception of the breastfeeding needs. Implemented a new Pediatric Lead Poisoning Prevention and Screening Program which utilizes a less invasive technique and decreases the number of blood draws by as much as 97%. Transformation of an underutilized space within the department into a functional patient isolation room in time for the Inspector General Inspection. Acquired and implemented the Ages & Stages Questionnaires: A Parent-Completed, Child-Monitoring System, which has assisted the physicians in the monitoring and identification of children with developmental delays from 4 months to 4 years of age. LT Sullivan staff Pediatrician was instrumental in getting the Ceiba WIC Office to come on base monthly for registration of our patient population. The Internal Medicine Department is now in the NHRR WEB homepage. The reserve specialty clinics, better utilization of reserve resources, savings for the command by eliminating outside consults for specialists. Developed and implemented new nursing care plan record and assessment form emphasizing health promotion and illness prevention for our diabetic population. Developed informative quarterly diabetic newsletter for distribution to patients and diets programs using local food exchanges. Responsive to our patient feedback, restructured the waiting area, provided informative educational material and TV for entertainment.



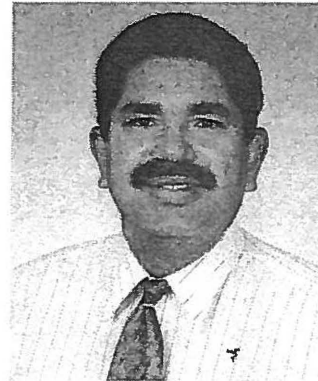
**CIVILIAN'S HONORED AS TOP
PERFORMERS FOR 1996**



**SECOND QUARTER
MRS. LISA BACON**



**THIRD QUARTER
MRS. MARGARITA TORRES**



**FOURTH QUARTER
MR. SAMMY GOMEZ**

Civilian Advisory Committee (CAC)

By: Mrs. Awilda Morales

The Civilian Advisory Committee was formed in December of 1995, and has served as a viable tool in developing cohesiveness between civilian and military staff. Under the tutelage of Captain Lorenzen serving as the Chairperson, the CCA has bonded and become a full blown thriving entity. Some of the major accomplishments are as follows:

Developed and published the "Civilian Connection Newsletter."

Conducted two highly successful fund-raisers
-pot luck luncheon

-Baked potato sale

Organized a "Civilian sponsored Christmas Party"

Laid the ground work for the establishment of the "Civilian Connection Club"

Adopted a New "Civilian Employees Awards Program"



"WELLNESS CENTER TIPS"

By: LCDR Karen DiRenzo

Contact lenses will not protect the eye from injuries in sports. A hard or gas permeable contact lens may break upon impact causing a corneal abrasion or corneal laceration with rupture of the eye. While a soft contact lens will not cause significant injury to the cornea upon impact, it will not prevent an eye injury due to sports.

AEROBICS SCHEDULE

Our very own HN Frances Diaz has begun an aerobics class at the hospital BEQ. The schedule is:

STEP AEROBICS/LOW IMPACT

MONDAY AND WEDNESDAY

1100-1130 and 1130-1200

STRENGTH TRAINING-ABS/ARMS/LEGS/ETC..

TUESDAYS AND THURSDAYS

1100-1130 and 1130-1200

THE SUPERVISOR'S ROLE IN THE INJURY MANAGEMENT PROCESS

By: Luis Crespo

1. INITIAL RESPONSE

One way to respond to a report of a mishap could be blame, apathy - or finding fault. It's not the recommended approach! The preferred response is to show concern, caring, and support. In fact the way the supervisor responds to an injury is a major factor in determining how soon an injured employee returns to work.

2. INVESTIGATE THE INJURY

We all operate under the assumption that mishaps can be prevented. If there is an injury, it means there is a problem that needs to be addressed. Methods designed to prevent the injury may have failed...risk factors may have been overlooked...corrective action may not have been taken...there may be a need for training. Injury investigation needs to be thorough and vigorous, and undertaken to find the root cause so they can be eliminated.

3. MAKE A PLAN

Parallel with the injury investigation is a planning effort designed to help the worker return to work as soon as possible. A timely response reduces the chance of acute injuries becoming chronic. The best plan should have goals that are realistic and attainable...objectives that are specific, measurable and accomplished in a specific period of time.

4. MONITOR THE CARE

Closely tracking the injured worker's case will ensure the information is communicated to the appropriate parties on a timely basis.

5. SUPPORTING RETURN TO WORK

Supporting return to work communicates a strong message to the injured worker and co-workers. It says you care, want to help, values the worker's contribution and have their best interest in mind.

"BLACK HISTORY MONTH"

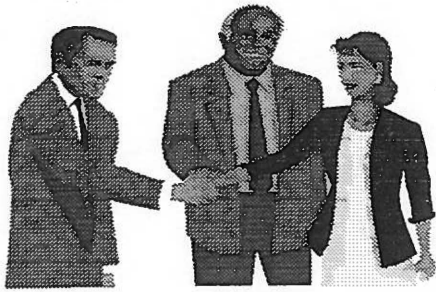
The Black History Ball is the finale for this year Black History Month. VADM Walter J. Davis JR., Director, space and Electronic Warfare, will be the guest speaker for the Ball to be held at the Westin Rio Mar Resort on February 28 starting at 1900. VADM Davis will also present the awards to the winners of the Black History Essay Contest held at Roosevelt Roads Elementary School. The schedule for the month of February is:

February 1	Multi-Cultural Health Fair
1000	Elementary School
February 15	Talent /Fashion Show
1800	El Coqui Theater
February 16	Black History Dance
2100	Woody's
February 21 & 23	Gospel Extravaganza
1800	Crossroads Chapel
February 27	Black History Essay
Contest	
1000	Elementary School
1300	High School
February 28	Black History Ball
1900	Westin Rio Mar

Everyone at Roosevelt Roads is invited to enjoy and participate in all of the events.

"HISTORICAL HAPPENING'S IN THE NAVY"

February 10, (1960)	Supply Corps Birthday
February 12	Lincoln's Birthday
February 16, (1945)	Carrier aircraft bombed Tokyo
February 17, (1942)	First contingent of Seabees to leave U. S. arrived at Bora Bora
February 18, (1846)	Navy Department general order made use of "port and starboard" mandatory, in place of "larboard and starboard".
February 18, (1991)	Tripoli and Princeton hit mines in the Persian Gulf
February 23, (1903)	President Roosevelt signed lease agreement with Cuba for Guantanamo Bay.
February 25, (1933)	Ranger, first true aircraft carrier was commissioned.



"HAIL"

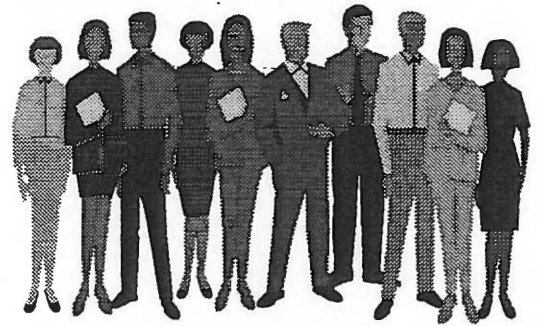
The following personnel reported aboard in:

January 1997

HN Claudia Ambrogi	HN Marel Mills
HM3 Phillip Mills	HN Anthony Monn
HM3 Laura Nemzek	HM2 Jeffrey Redd
HN Patrice Robinson Russell	LCDR Warren
HN Antionette Sims	HN Cathy Stair
HN Kimberly Walder	HN Jesse Yeager
HN Luis Zenopimental Ashenbremer	HN Kim
LTJG Sany Bankston	LT Lanny Boswell
HM1 Sherri Brown	HN Raquel Buie
LTJG Michele Bury	HR Kristin Deckar
HM2 Maurice Duckwort Carrilo	HN Georgina
HA Fawn Franks	HR Debra Grandy
HN Phoung Huynh	H M3 Issac Lopez
HR Katherin Matchinski	

February 1997

DT3 Eric Munizrivera
HN Stacy Miller
HN Eddie Rodriguez
HN Luis Vazquez



"FAREWELL"

The following personnel are detaching in:

January 1997

HM2 Andy Gonzalez
LCDR Mark Fink
DT2 Jerome Davis
LT Ruth Santana
LT Liza Rodriguez
LT Peter Khamvongsa

February 1997

HM3 Jose Rosado
LCDR Cynthia Fleming
HM2 Theresa Sanders
HN Kevin Johnson

March 1997

HM3 Carl Patrick
HMC Lenora Weatherford
HMC Kenneth Bittick
HM3 David Dejewski



"WANTED"

A NAME FOR THIS PAPER

We need a name for our Command paper so we are going to have a contest!

The contest is open to all staff members, military and civilian. You are the rightful owner's so let's find a name. The name should reflect the information found in the paper along with a sense of pride and teamwork. Yeah, I know, now you want to know what the prize is huh? Well the "prizes" consist of the following:

Two (02) tickets to the Hospital Corps Birthday Ball (enlisted and officers)

4 day (in conjunction with a holiday and 16 hours for civilians)

A command plaque

And last but not least, your picture and an article about how you came up with the name to be published in the first issue using it.

Sounds pretty good doesn't it? All you need to do is fill out the form below and submit it to DT1 Paulette Hardie. The winner will be chosen by a

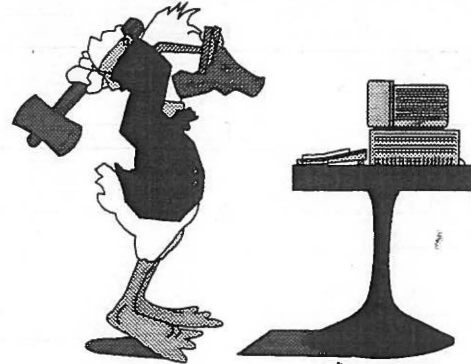
committee consisting of the Commanding Officer, Executive Officer, Command Master Chief and the papers staff. This is a great opportunity to do something that will be a lasting impact on this command. The last day to submit your entry is 15 March 1997.

Good luck and have some fun!!!!

WE NEED YOUR INPUT

This paper belongs to you!!! If your department would like to have a column in each issue of this newsletter, please ensure that your articles are submitted by MS-Mail or on a disc, to DT1 Hardie. The next issue will cover happenings in February and March and upcoming events for April and May. This is based on a first come first serve, basis due to the space limitations, so please get them in early. We would like:

Interviews and stories on your top sailor's, news about medicine and general tid bits about your golf game (or lack of). Letters to the editor are welcome!



"THE END"

NAME THE PAPER CONTEST

YOUR NAME: _____

YOUR DEPT AND PHONE: _____

YOUR NAME FOR THE PAPER: _____

Return this form to DT1 Paulette Hardie before the 15th of March 1997. The winning entry will be selected and announced at the next awards ceremony.

"GOOD LUCK AND HAVE FUN"