



U.S. DEPARTMENT OF VETERANS AFFAIRS
Vanguard

APRIL 2002



Youth Volunteers

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Youth volunteers like high school freshman Paris Noelle Guy, pictured here with 95-year-old veteran Morris Moore at the Washington, D.C., VA Medical Center, are an increasing presence at VA facilities. The Department will honor its nearly 95,000 volunteers during National Volunteer Week April 21-27.

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810 Vermont Ave., N.W.

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(202) 273-5746

E-mail: vanguard@mail.va.gov

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INTRODUCING

William "Paul" Fetzer



His colorful depiction of Amish children marks the primary care entrance to Building 17, and his elaborate lighthouse graces tile in the cafeteria. "Paul creates a lifelike scene," said Trostle. "We've had a

Art is making it easier for veterans to navigate the half-mile maze of corridors connecting the sprawling campus of the Lebanon, Pa., VA Medical Center.

The 55-year-old medical center is undergoing a multimillion-dollar renovation project and Director Charlene Szabo used the opportunity to introduce functional artwork to enhance the facility's new look. Her plan was to recruit artistic high school students and community volunteers to paint directional designs on ceiling tiles.

She pitched the idea to Voluntary Service coordinator Kathy Trostle, and the directional artwork program was born. "Ms. Szabo planted the seed," said Trostle. "I knew this would be a wonderful idea—I just had to figure out a way to make it work." She met with instructors in a high school vocational training center, and several students took on the assignment as senior projects. The program continued this way for nearly a year. Then came Paul.

William "Paul" Fetzer has been volunteering at the VA medical center for 20 years. When he learned of the directional ceiling tile initiative, the 74-year-old took on the project as his own personal challenge and now spends about 15 hours a week painting the grainy white tiles.

tremendous amount of positive feedback from his work."

It hasn't always been that way for Fetzer, who's had to overcome some difficult challenges in life. He was born deaf and taught himself to communicate by reading lips. Later in life, he lost his right arm in an industrial accident and had to retrain his left hand in order to sign documents, brush his teeth, or even feed himself.

For each of his creations, Fetzer finds inspiration from within. He uses no pictures or other references for his designs—all are painted from memory. He says even though it's difficult to paint the porous tile, he enjoys it. "He enjoys giving something back to our veterans," said Szabo, "and he is honored to have his work displayed in the medical center."

Fetzer has logged nearly 7,000 volunteer hours. In the early 1990s, he was named a "Point of Light" for his community service and was invited to the White House by former President George Bush. April 21-27 is National Volunteer Week. VA salutes the nearly 95,000 volunteers like Fetzer who give their time and talents to enhance services to America's veterans. ❑

By Matt Bristol

Nicole D. Glawe,
Truman Fellow, National
Rural Development
Partnership



VA and the National Rural Development Partnership have been working together in rural communities for more than 10 years.

This partnership helps veterans living in rural areas access quality health care, develop professional skills, enhance microenterprise development, learn to use the Internet, and much more.

The National Rural Development Partnership is comprised of 40 state rural development councils with which VA regional offices and medical centers partner. Pooling resources ensures that VA can reach out to all veterans and its efforts go even further into the rural communities it serves.

A year ago, VA representation on state rural development councils was dwindling, but a VA Central Office effort to stimulate participation last fall changed that. Nearly 60 percent of all state rural development councils now have VA representation. Veterans in rural communities can be difficult to reach, but partnerships with state rural development councils have shown that living in rural, even remote, areas is not always a detriment to quality service.

In Alaska, the lack of landlines requires rural areas to use satellite transmissions for telecommunications and information technology. The Alaska Rural Development Council successfully partnered with VA to expand the use of telemedicine (emergency medical, dermatology, and otolaryngology) services to 25 villages in remote western Alaska. This project is now used as a model for health care services in more than 235 rural villages and communities.

Florida's Rural Development Council Americorps/Vista volunteer program placed a volunteer at the

Unique Partnership Helps Veterans in Rural Areas

Disabled Veterans Emergency Aid Mission for seven months. In this position, the volunteer located funding for the Mission's projects and helped the Mission disburse new donated goods to disabled and homeless veterans in the five-county Panhandle area outside Pensacola.

A study of rural veterans' health care needs in Utah entitled "Meeting the Health Needs of the Rural Veteran: A feasibility Study on Tele-medicine and other technologies" resulted in the development of a mobile clinic for rural residents, including veterans. This mobile clinic treats hundreds of veterans close to their homes, right in their very own community. Thanks to the partnership between VA and the National Rural Development Partnership, rural residents will continue to see improved access and service.

These partnerships and countless

others help veterans in rural communities every day. Recognition of the success of these partnerships is shown in both the House and Senate-passed versions of the Farm Bill. The bill would formally authorize the National Rural Development Partnership and encourage all federal agencies to participate.

As part of this program (in addition to the 40 state rural development councils), a National Rural Development Coordinating Committee will bring officials from each federal agency together to identify collaborative opportunities between the agencies. Not only will VA be directly involved with helping veterans, but all federal agencies will share in the responsibility of serving rural communities better. These partnerships will likely create vast opportunities and services for rural veterans. □



VA Talk

VA Secretary Anthony J. Principi, center, was a guest on "The Dolans," a nationally syndicated radio talk show with a personal finance focus hosted by husband-and-wife team Ken and Daria Dolan. The show was broadcast live from Michael Jordan's Restaurant in Washington, D.C., on Feb. 22.

Tiger Team Gaining Ground on Older Claims

Six months into its mission to expedite long-pending benefits claims of older veterans, the Tiger Team is reporting significant progress. The project involved shifting the workload of some of the longest-pending claims of older veterans to the new unit, headquartered in Cleveland, while nine regional resource centers around the country tackled the older claims of other veterans.

The longest-pending among an estimated 164,000 claims of veterans age 70 and older—veterans who, VA Secretary Anthony J. Principi said, “couldn’t wait much longer for the government’s attention”—have been the Cleveland Tiger Team’s first focus. The Tiger Team and the regional resource centers are continuing to work these claims, as well as those of veterans of all ages that have been pending for more than a year.

This joint effort has resulted in the completion of more than 18,000 claims so far. The goal is to adjudicate more than 83,000 claims by March 2003.

Veterans helped by the Tiger Team have been calling and writing to express their appreciation for the team’s efforts. An 82-year-old Southern California veteran thanked the team for helping secure evidence to support his claim for service-connected disability benefits. Before the Tiger Team intervened, the veteran said, he felt lost in a bureaucratic abyss. “Everyone at the VA Tiger Team has been wonderful to me,” he said. “It makes me feel proud to be a U.S. Army veteran.”

After waiting for resolution of his claim for a service-connected hearing condition for more than a year, another elderly World War II veteran wrote that he had all but given up on VA, until the Tiger Team’s Sandy Woods, a veterans claims representative, stepped in to make sure the veteran provided some medical information critical to substantiating his claim.

“I was ready to give up,” the veteran wrote. “Mrs. Woods called and said, ‘No, don’t do that ... we are almost there,’ and it was her perseverance that brought good results.”

While visiting the Tiger Team in

January to review its progress, Secretary Principi personally authorized a retroactive service-connected disability compensation award totaling nearly \$30,000 for an 83-year-old Oregon veteran. The Secretary called the veteran, who had waited more than two years for resolution of his claim, to give him the welcome news that the lump-sum check was in the mail.

“The veteran was pleasantly surprised, glad that his case had been decided, and impressed that the Secretary himself had thought enough about him to call,” reported Jack Ross, director of the Cleveland VA Regional Office, who is heading up the Tiger Team.

The claims of the older veterans have been particularly challenging for the Tiger Team because of the difficulty in securing evidence and the complexity of the legal and medical issues involved. Special arrangements with a variety of agencies are helping the team get

information needed to resolve these claims.

Agencies offering special assistance include the National Archives and Records Administration’s National Personnel Records Center (NPRC) in St. Louis, the Department of Defense’s U.S. Armed Services Center for the Research of Unit Records, and the Defense Threat Reduction Agency. Since the Tiger Team initiative began, the NPRC has conducted more than 100,000 records searches, reducing the inventory of pending requests by more than 15,000.

The Tiger Team at the Cleveland VA Regional Office began its work in November, processing claims sent there from VA regional offices all over the country. The nine resource centers contributing to clearing the backlog of claims are located in Togus, Maine; Philadelphia; Huntington, W. Va.; Columbia, S.C.; St. Petersburg, Fla.; St. Louis; Muskogee, Okla.; Seattle; and San Diego. □

Ft. Snelling Documentary Honored

The best single piece of television journalism produced and entered in competition in 2001 was a documentary about the honor squad at Ft. Snelling National Cemetery (NC) in Minneapolis, according to the National Headliner Club. The Headliners chose “The Friday Squad,” produced by a photographer with the city’s CBS affiliate, as “best in show” in their annual awards program.

WCCO-TV’s Tom Aviles reported and edited on his own time an homage to the aging World War II veterans who form the honor guard. Ft. Snelling NC’s Memorial Rifle Squad began in 1979. It has different squads for each interment day, Monday through Friday. The last surviving co-founder of the Rifle Squad, George Weiss, appears in the program, said Cemetery Director Robert McCollum.

Aviles said, “We’ve all done pieces on vets for Memorial Day. But you never see them in winter, yet they are always there. Always.”

The photographer lives near the cemetery. For eight months he made

Friday visits to talk to the vets and shoot film. Placing his camera at the same spot throughout the year and using “dissolves,” he evoked not only the ebb and flow of seasons but also the unrelenting march of time and memory of a fading generation.

The five-minute program originally ran last May before Memorial Day, and was picked up by “CBS Evening News” for Memorial Day. It recently aired again in the Twin Cities area.

Headliner Club judges called it, “A visually stunning piece documenting men who seek to honor the vanishing WWII generation ... told entirely in the words of the men who make this story special.” The average age of those men is 77.

Last year’s TV winner was Ted Koppel’s “AIDS in Africa,” and Peter Jennings’ “The Century” won top honors in 2000. Founded in 1934 by the Press Club of Atlantic City, N.J., the National Headliner Awards is one of the oldest and largest annual contests recognizing journalistic excellence in the communications industry. □

Investigators Help Free World War II Veteran



Special Agents Chris Sanchez, left, and Dean Wauson, of the Phoenix Office of Inspector General, followed up on a tip about a veteran in distress.

Imagine a World War II veteran with a 100 percent service-connected disability dying alone in a filthy, dimly lit room on an isolated Mexican ranch 17 hours south of the U.S. border town of Nogales, Ariz. It would have been a tragic ending to a soldier's story, but thanks to the actions of VA employees, working with other U.S. federal agencies and Mexican authorities, this combat-decorated veteran is alive and back on U.S. soil.

The story began in 1996, when the veteran and his wife, who lived in Nogales, Mexico, traveled south to Mazatlan, where her children lived, so she could undergo a medical operation. Sadly, the veteran's wife died during surgery.

Grieving the loss of his wife, he was taken in by her children. His stepson invited him onto their ranch, gave him a small room, closed the door and turned the lock. He kept him there against his will for the next six years.

Apparently, he did it for the money. The veteran received monthly VA disability checks totaling just over \$5,000. His stepson would drive to Nogales each month to pick up his check, forge the signature and collect the cash.

Agents in the Phoenix Office of Inspector General were tipped off to the scam by a call from the veteran's

stepdaughter. Special Agent Dean Wauson took the call, but because the caller spoke only Spanish, he brought in Special Agent Chris Sanchez.

After speaking with the stepdaughter, who admitted to being scared of her brother but said she could not stand by any longer, the agents requested the veteran's VA claim file from the Houston VA Regional Office. They discovered he had a number of medical conditions, including multiple sclerosis, impaired vision and paralysis.

They called in the State Department, which contacted its consulate office in Mazatlan to investigate the case. Following up on the lead, the consulate officer conducted a "welfare check" of the ranch. What she found was shocking, explained Sanchez, a Gulf War veteran who has been a VA investigator since 1998. "He was in a locked bedroom lying in the fetal position wearing a soiled diaper ... his

toenails had grown so long they curled back and pierced the bottoms of his feet." The veteran was covered in open sores and unable to move; his muscles having atrophied, he couldn't get out of the fetal position. He was immediately transferred to a nearby hospital.

Worried the long ambulance ride back to the U.S. would kill the veteran, Sanchez contacted Ron Buchanan, a team coach at the Phoenix VA Regional Office, and explained the situation. Buchanan coordinated the efforts of VA, the State Department, and Mexican officials to get the veteran airlifted to the Phoenix VA Medical Center.

When he arrived at the VA hospital, the veteran weighed just 81 pounds. He has since stabilized and in mid-March was discharged to a state nursing home adjacent to the medical center. An investigation into the stepson's criminal activities is ongoing.

"One of the main points in this case is the timeline," explained Douglas J. Carver, special agent in charge of the Inspector General Western Field Office, based in Los Angeles. "When Chris and the other agents were notified, they took immediate action, which probably saved the veteran's life." □

New Under Secretaries on Board

White House nominees to head the Veterans Health Administration and the Veterans Benefits Administration were confirmed by the Senate on March 22 and sworn in to four-year terms on April 2. Robert H. Roswell, M.D., is VA's new Under Secretary for Health, and the new Under Secretary for Benefits is retired Navy Vice Admiral Daniel L. Cooper.

Roswell had directed VA's health care network for Florida and Puerto Rico (VISN 8) since 1995. Based in Bay Pines, Fla., the network includes seven medical centers, 10 satellite outpatient clinics and 34 community clinics.

From 1994 to 1999, Roswell served as executive director of the federal Persian Gulf Veterans Coordinating Board. He was chief of

staff at the VA medical centers in Birmingham, Ala., and Oklahoma City, and held other leadership positions at field facilities and in VA Central Office.

Cooper chaired the VA Claims Processing Task Force, a 12-member group charged with examining a wide range of issues affecting the timely processing of benefits claims. The task force delivered 34 recommendations for improvement to the Secretary in October.

After retiring from the Navy in 1991 with more than 33 years of service, Cooper served as vice president and general manager of the Nuclear Services Division at Gilbert Commonwealth. He also served on the board of directors for United Services Automobile Association and the EXELON Corporation. □

VA Medical Research i

Medical research has been an important part of the VA health-care mission since World War II. VA research has improved medical care not only for veterans but also for the entire population. VA investigators conduct an array of research activities on some of the most difficult challenges facing medical science today. And the Department has become a world leader in such research areas as aging, women veterans' health concerns, HIV/AIDS, post-traumatic stress disorder and other mental health issues.

The list of past achievements of VA researchers is well known by now. VA researchers played key roles in developing the cardiac pacemaker, the CT scan, magnetic source imaging, and high-tech prosthetics. The first liver transplant in the United States was performed at a VA medical facility, and the first successful drug treatments for high blood pressure and schizophrenia were pioneered by VA researchers. The "Seattle Foot" was created by VA to give amputees the push-off they needed to run and jump.

VA scientists have won many prestigious awards, including three Nobel Prizes. As the Department celebrates VA Research Week March 31-April 6, here are some recent achievements of VA investigators.

Heart Disease

■ Heart-attack patients cared for at VA hospitals are often more likely than patients at private hospitals to receive beneficial heart medications such as clot-busting drugs and aspirin, reported a study in the journal *Circulation*. In one of the largest studies to date comparing taxpayer-funded VA hospitals to private hospitals, researchers analyzed the records of more than 30,000 heart patients—from every private hospital in seven states, and 81 of VA's 163 hospitals nationwide.

Of heart-attack patients medically considered "ideal candidates" for angiotensin converting enzyme (ACE) inhibitors, nearly 71 percent of patients at VA hospitals received the



More than 3,800 VA investigators across the country conduct medical, rehabilitation and health-care delivery research.

medication at discharge, compared to 58 percent of patients at private hospitals. Upon admission to the emergency room, more than 51 percent of "ideal candidates" in VA received thrombolytic (clot-dissolving) drugs, compared to just over 47 percent of their counterparts at private hospitals. Experts believe failure to use these and other drugs after heart attack may lead to as many as 18,000 preventable deaths each year in the United States.

■ Using a simple, inexpensive blood test, a VA cardiologist developed a faster protocol for diagnosing heart attacks in the emergency room that may save millions of dollars in unnecessary critical-care hospital admissions. The new protocol—which can rule out a heart attack in 90 minutes, compared to six to 24 hours for existing methods—combines a blood test for three cardiac enzymes with an electrocardiogram and patient history.

Reporting his findings in the *American Journal of Cardiology*, Dr. Alan Maisel of San Diego said the method he tested over nine months on nearly 1,285 emergency-room patients with signs of heart attack led to a 40 percent drop in critical-care admissions. Hundreds of patients

who would previously have been admitted to the critical-care unit were either sent home or to non-critical units.

HIV/AIDS

■ More than three-quarters of HIV patients in the United States may carry strains of the virus that are resistant to drug therapy, according to a recent study by VA researchers in San Diego. The estimate was among the first for the national HIV population as a whole, and was higher than expected by many experts.

The researchers tested blood samples from 1,647 men and women and found that 78 percent showed signs of resistance to one or more drugs typically used to treat HIV. Drug resistance was particularly high—87 percent—among those who at the time of testing were receiving antiretroviral therapy, often consisting of potent "cocktails" of three or more drugs. Study leader Dr. Douglas Richman said the findings underscore the importance of drug resistance testing, which can identify which drugs will not be effective for a patient.

■ A VA scientist in Iowa City found that a form of hepatitis virus

s a National Resource

called GBV-C may actually prolong the lives of patients with HIV. The “friendly” virus works by keeping the deadly AIDS virus from replicating. In a study of 362 patients with HIV, Dr. Jack Stapleton found a lower death rate among those who also had the GBV-C infection. His team also showed that infecting human blood cells in the laboratory with GBV-C slows the rate at which the AIDS virus multiplies. Stapleton said that GBV-C itself appears to cause no symptoms and therefore may one day pose a new therapy for HIV. The study appeared in the *New England Journal of Medicine*.



Though VA investigators focus on improving health care for veterans, all Americans have benefited from their breakthroughs.

■ New ways of treating the AIDS virus, using up to four or five drugs in combination, are driving down medical costs for HIV patients, according to a study by VA researchers and colleagues. The study, published in the *New England Journal of Medicine*, tracked a national sample of nearly 3,000 HIV patients from 1996 to 1998. Drug costs were higher over time—reflecting the advent of new, stronger multi-drug treatments. But these expenses were more than offset by lower costs for medical care, including hospital stays. Overall, the average annual per-patient health care cost dropped from \$20,300 in 1996 to \$18,300 in 1998.

■ VA is teaming up with the national health research agencies of Canada and the United Kingdom for a major clinical trial aimed at identifying the best way to treat AIDS. The study, part of a larger collaborative effort among the three countries, will evaluate new drug combinations for patients who have failed to respond to powerful anti-HIV drug therapy.

Kidney Disease

■ The nation’s Medicare system could save as much as \$142 million annually by changing the way doctors administer the drug epoetin, used to boost the red blood cell count of patients with end-stage kidney disease. In a study at 24 VA hospitals, VA researchers and colleagues found that by giving epoetin subcutaneously (under the skin) rather than intravenously, doctors could safely achieve the same benefits with substantially lower doses. Since the drug is expensive, this could represent millions of dollars in savings each year for Medicare or other health systems. VA hospitals have already begun using the subcutaneous method for most patients, but the majority of patients elsewhere still receive the drug intravenously.

Stroke

■ A VA researcher found that a certain type of dental X-ray can identify post-menopausal women at high risk for stroke. The study, published in the *Journal of the American Dental Association*, showed that panoramic radiographs, besides yielding a wide view of the jaw, can detect the presence of stroke-causing plaques in the carotid arteries of the neck.

Study author Arthur Friedlander, D.D.S., said these panoramic radiographs should not replace more accurate screening and diagnostic methods, such as ultrasound, but

they can stretch the preventive-health care value of dental visits. “The panoramic radiograph is exceedingly crude—it only shows late disease. And we are not recommending it as a screening tool at all,” said Friedlander. “But we are saying that if a dentist, for dental needs, obtains a panoramic radiograph, then it should be read in its entirety.”

■ Using a technique known as Functional Neuromuscular Stimulation (FNS), VA scientists implanted electrodes in the leg muscles of stroke patients and used sophisticated software to electrically stimulate the muscles over a six-month course of treatment. The patients experienced significant improvements in gait and other abilities, with no adverse effects. The research was described in the *Journal of Rehabilitation Research and Development* and other journals.

Diabetes

■ VA is conducting a seven-year, \$57 million clinical trial to test a more aggressive therapy for type-II diabetes, which affects some 12.5 million Americans and about a quarter of the veteran population. The effort, also involving the American Diabetes Association and pharmaceutical companies, will test stronger doses of drugs currently given to lower blood sugar levels and help the body use insulin, to see if the new treatment helps prevent “macrovascular” complications from diabetes, such as heart attack.

■ A gene developed by VA researchers successfully triggered insulin production in the liver cells of laboratory animals. Just as important, the gene shut down insulin production before blood sugar levels dropped too low. Insulin, normally produced in the pancreas, is the hormone that helps convert glucose from food into fuel for the body’s cells.

A therapy based on the gene might benefit diabetes patients who depend on daily insulin injections to survive. The VA team reported on their research most recently in the journal *Gene Therapy*. □

Medal of Honor Recipients Are Still Serving

We're here today to honor one of America's heroes," said Jacob Lozada, Ph.D., the word "hero" lingering as if awaiting definition. "You represent the core values of service and dedication and we are honored to be in your presence," the Assistant Secretary for Human Resources and Administration added.

A hero isn't born with steadfast strength or unwavering courage. A hero hurts, struggles with pain and loss. No one asks to be a hero. When they are given a title of distinction, some hesitantly accept it; others shun it completely. Each has their reasons.

The word "hero" echoed through the Omar Bradley Room in VA Central Office as employees gathered to bid farewell to one of their own, Brian Miles Thacker, who retired March 1 after more than 25 years of VA service. The Congressional Medal of Honor recipient wears his title lightly. Addressing the group, he said, "I have a hard time grasping what I did to deserve this," his voice barely a whisper. "I tried to do my best ... I don't think it's anything that anyone else wouldn't have done."

Kontum, Vietnam, March 31, 1971

U.S. Army 1st Lt. Brian Thacker, serving with the 92nd Artillery, led a team of U.S. and Republic of Vietnam soldiers as they defended their isolated hilltop firebase from North



Thacker

Vietnamese Army soldiers in an early-morning assault. Outnumbered and overpowered, the hilltop defenders engaged the enemy in hand-to-hand combat as their perimeter crumbled. Rallying his troops, Thacker climbed into an exposed observation post to direct air strikes and artillery fire against the advancing enemy. By late afternoon, realizing their position would be overrun, he ordered his men to withdraw while he stayed behind to slow the enemy advance. Once all his troops had pulled back,

he directed friendly artillery fire onto his own position. Wounded and unable to escape, he eluded enemy forces for eight days until friendly forces regained control of Fire Base 6. He joined the Long Beach, Calif., VA Medical Center in 1975.

Thacker joins a growing group of Medal of Honor recipients who are also VA alumni. In the early 1990s, there were 11 recipients working at VA facilities. Today, there are seven.

Republic of Vietnam, Nov. 5, 1966

U.S. Army Pfc. John F. Baker Jr., while serving with the 25th Infantry Division, displayed conspicuous gallantry as his unit came under intense enemy fire. When his column's point man was killed instantly, Baker moved to the head of the column and, with another soldier, knocked out two enemy



Baker

bunkers. When his comrade was mortally wounded, he spotted and killed four Viet Cong snipers before evacuating the fallen soldier.

Moving to attack two more bunkers, he was blown from his feet by an enemy grenade. He recovered and single-handedly destroyed one bunker. Seizing his fallen comrade's weapon, he charged through a hail of fire to silence the other bunker. He evacuated his wounded comrade, replenished his ammunition, and returned to the front. When ordered to withdraw, he carried a wounded soldier to the rear before returning to cover his unit's deployment.

As he returned, he drew enemy sniper fire. He raced beyond the friendly troops to attack and kill the snipers. He evacuated one more wounded soldier and again returned to the front. His ammunition now exhausted, he dragged two more of his fallen comrades to the rear.

Baker retired from the Army in 1989 and joined the Columbia, S.C., VA Medical Center in 1992. He works as a computer technician in the Information Resources Management section.

Ding Tuong, Vietnam, Jan. 10, 1968

U.S. Army Pfc. Clarence Eugene Sasser, a medic serving with the 9th Infantry Division, risked his life to



Sasser

provide medical attention to wounded comrades when his unit was ambushed during an air assault operation. In the first few minutes of the attack, more than 30 mem-

bers of his unit were killed or wounded.

Sasser repeatedly ran through enemy fire to treat the wounded, even after being hit in the shoulder by fragments of an exploding rocket. While searching for injured soldiers, he received two more wounds that immobilized his legs. Unable to use his legs, he dragged himself 100 meters through the mud to another soldier. He reached the man, treated him, and encouraged another group of soldiers to crawl 200 meters to relative safety. There he tended their wounds for five hours until they were evacuated.

He joined the Houston VA Regional Office in Sept. 1977 and now works as a decision review officer.

Dai Do, Vietnam, April 30 to May 2, 1968

U.S. Marine Corps Capt. Jay R. Vargas, while serving with the 9th Marine Amphibious Brigade, led three companies of Marines in an



Vargas

attack on the fortified village of Dai Do. Though wounded from the previous day's battle, he maneuvered his Marines across 700 meters of open rice paddy while under intense enemy mortar, rocket and artillery fire to obtain a foothold on the enemy perimeter.

When elements of his company were pinned down, he led a platoon

to aid his beleaguered men. Again wounded by grenade fragments, he organized his unit into a strong defensive perimeter and held off a series of enemy counterattacks and probes lasting throughout the night. Reinforced the following morning, the Marines launched a renewed assault through Dai Do on the village of Dinh To. The enemy retaliated with a massive counterattack resulting in hand-to-hand combat.

Vargas remained in the open, encouraging his men when he was hit for the third time in the three-day battle. Seeing his battalion commander seriously wounded, he raced across a fire-swept area and carried his commander to safety.

Vargas retired from the Marines in 1992 with the rank of colonel. He was appointed a regional veterans service organization liaison by Secretary Principi in July 2001 and is based at the San Diego VA Regional Office.

La Chu, Vietnam, May 6, 1968

U.S. Army Sp4c. Robert Martin Patterson, while serving as a fire team leader in the 17th Cavalry, distinguished himself during an assault on heavily fortified enemy positions. With his platoon's leading squad pinned down by heavy interlocking automatic weapon and rocket-propelled grenade fire from two enemy bunkers, Patterson, along with two other soldiers, moved forward and destroyed the bunkers.



Patterson

Seeing his comrades fired upon from a third enemy position supported by enemy gunners in one-man spider holes, Patterson, ignoring the warning of his comrades, assaulted and destroyed the position. He continued to attack the bunkers blocking his unit's advance, single-handedly destroying five enemy bunkers, killing eight enemy soldiers and capturing seven weapons. His courage inspired his platoon to resume the attack and penetrate the enemy defensive position.

Patterson retired from the Army and joined the Winston-Salem, N.C., VA Regional Office in 1992. He now

serves as a veterans service representative at a pre-discharge benefits delivery office on Fort Bragg, N.C.

Republic of Vietnam, Dec. 30, 1968

U.S. Army Sgt. 1st Class Robert L. Howard, while serving as a platoon sergeant with the 1st Special Forces, distinguished himself while on a mission to rescue a missing American soldier in enemy-controlled territory.



Howard

As they left the landing zone, an estimated two-company force attacked his platoon. Howard was wounded and his weapon destroyed in a grenade explosion. Unable to walk, he crawled through a hail of fire to help his seriously wounded platoon leader. As he administered first aid, an enemy bullet struck an ammunition pouch on his belt, detonating several magazines of ammunition. He pulled the wounded officer toward the platoon area and organized a defensive perimeter.

Crawling from position to position, he administered first aid, encouraged his troops and directed their fire. With supporting aircraft fire, his small force held off the enemy for three-and-a-half hours until rescue choppers could safely land.

He retired from the Army and now serves as a supervisory veterans claims examiner in a pre-discharge benefits office operated by the Seattle VA Regional Office in Seoul, South Korea.

Quang Nam, Vietnam, March 11, 1970

U.S. Marine Corps Staff Sgt. Allan Jay Kellogg Jr., while serving as a platoon sergeant with the 1st Marine Division, led his small unit through fierce enemy fire as they evacuated a fallen comrade.

During the firefight, an enemy soldier maneuvered through the dense foliage and threw a hand grenade that glanced off Kellogg's chest. He forced it into the mud and threw himself over the lethal weapon, absorbing the full impact



Kellogg

with his body. Despite suffering multiple injuries to his chest, right shoulder and arm, he led his men to the relative safety of the company perimeter. A retired Command Sgt. Major, Kellogg is a veterans service representative at the Honolulu VA Medical and Regional Office Center. Since joining VA in 1995, he has located and issued identification cards to more than 1,000 homeless veterans.

Khe Sanh, Vietnam, March 23, 1971

U.S. Army Sp4c. Michael John Fitzmaurice, while serving with the 101st Airborne Division, displayed conspicuous gallantry as

North Vietnamese soldiers infiltrated his unit's perimeter. Observing three explosive charges being thrown into a bunker he shared with three comrades, Fitzmaurice hurled two of the charges out of the bunker and threw his flak vest and his body over the remaining charge.

Even though he was suffering from serious wounds and partial loss of sight, he charged out of the bunker and engaged the enemy until an enemy grenade damaged his rifle. While in search of another weapon, he encountered and overcame an enemy soldier in hand-to-hand combat.

He grabbed another weapon and returned to his original fighting position where he inflicted additional casualties on the attacking enemy. Although seriously wounded, he refused to be medically evacuated.

Fitzmaurice joined the Sioux Falls, S.D., VA Medical Center in 1987, and now works as a plumber in Engineering Service. □



Fitzmaurice

By Matt Bristol

High Schoolers Learn Leadership at Asheville VAMC

Summers were a challenge for Darlene Laughter. As chief of Voluntary Service at the Asheville, N.C., VA Medical Center, she was responsible for supervising about 40 high school and junior-high students volunteering at the hospital each summer.

Year after year, she and assistant Tom DeFrange had to put aside their regular duties just to keep a handle on the youth program. And still, it wasn't working. "Some kids would come in and spend the day running around the halls, goofing off," recalled Laughter. "I wasn't there to run a babysitting service." That was 1986.

Today, some of the medical center's best and brightest student volunteers are managing the summer program. They're part of a Youth Volunteer Council made up of kids with at least two years of volunteer experience who have proven themselves to be responsible and mature. Laughter credits the council with turning around the entire summer volunteer program.

The five council members are also volunteers. But in addition to their regular volunteer duties, they spend one day a week managing the other students, making sure they report for duty in the proper uniform and fulfill their work assignments. If a problem occurs, they mediate, counsel or find a resolution. "They're learning leadership and other life skills," said Laughter, adding that the position has gained a certain prestige among the youth volunteers. Last summer, she got about a dozen applications for the five council member positions.

Laughter said the council eligibility requirement to have two years of volunteer experience has brought stability to the summer program. "What we saw so often was the kids were in one year and out the next—they just weren't here long enough. Now, they're making a two-year personal commitment with the goal of making it to the council ... that's given us some continuity."

Ashley Kirstein, 17, has been president of the council for the past two summers. She started volunteering at the hospital when she was 12, filing papers and doing other clerical



Youth volunteer Ashley Kirstein helps Technician Libby Owen run an EKG on veteran Richard Moorer.

jobs. Over the years, she sought positions of increased responsibility and wound up working in the EKG clinic when she was 16.

She said her experiences on the council have helped her in many ways. "You definitely learn to think before you act or speak," said the high school senior. "In this program, kids are turned into adults over the course of a summer. I consider myself much better off." The honor student and aspiring journalist is applying to colleges and has her fingers crossed as she awaits a response from Washington and Lee University in Lexington, Va.

In addition to volunteering and managing other kids in the program, council members meet weekly to plan an end-of-summer bash. They've got to figure out how to plan the entire recognition ceremony, from picking an activity and obtaining parental permission slips to raising funds and organizing the ceremony.

The medical center isn't alone in its summer program. The Asheville community also plays a role. Laughter explains: "I tried to build a community connection by asking organizations to sponsor youth in the program." Community, civic and

veterans service organizations such as the Gold Star Mothers, the Masonic Service and the American Legion Auxiliary chip in \$25 each to sponsor a student for the summer.

The donations support the program and fund a \$250 college scholarship for volunteers. The kids apply for the scholarship and a panel of community members not associated with VA selects the winning applicant. In turn, the kids wear their sponsor's logo on their vest and the sponsoring organization gets credit for their volunteer hours. "This was the first year we were able to offer this scholarship," said Laughter, adding that she hopes to offer a \$1,000 scholarship in the future.

April 21-27 is National Volunteer Week. Of the nearly 95,000 volunteers in VA facilities nationwide, about 24,000 are youths. "There are tremendous volunteer opportunities for students in our medical centers," noted Jim Delgado, national director of VA Voluntary Service. "They can learn about career fields and responsibility, but perhaps most significant is the impact they have on our veterans, who really appreciate the intergenerational contact." □

By Matt Bristol

Nation's Oldest Known Veteran Honored in N.C.



Robert Hodges, 110, is the oldest known veteran receiving VA benefits.

His longevity already makes him a celebrity in the small North Carolina community where he lives. But now it's bringing Robert Hodges national attention as well. At 110, the World War I veteran is the oldest known veteran receiving VA benefits.

Hodges has been receiving a nonservice-connected VA pension for nearly half a century, and visits the community-based outpatient clinic in Greenville and the Durham VA Medical Center for his health

care. Employees at the Winston-Salem VA Regional Office were surprised when a national search for the oldest known veteran revealed it's Hodges who holds that distinction.

"We knew he was the oldest veteran in North Carolina," explained John Montgomery, director of the Winston-Salem VARO, "but we didn't know that he was also the oldest known veteran receiving VA benefits."

The Winston-Salem VARO and the VA Mid-Atlantic Health Care Network (VISN 6) in Durham teamed with Pamlico County officials to honor Hodges at a community-wide celebration in Grantsboro on March 8. Among the many honors Hodges received that day were a letter from President Bush, a flag flown over the U.S. Capitol from Sen. Jesse Helms (R-N.C.), statements read on the House and Senate floors, the Veterans Honor Rose, and recognition from the governor of North Carolina.

Veterans, dignitaries, friends and family members who attended the Robert Hodges Day celebration listened as the honoree sang his favorite patriotic song from the World War I era, "Over There."

VISN 6 Director Daniel Hoffman said the tributes to Hodges were well deserved. "We consider him to be a

national treasure for his longevity, and for his distinguished service to his country," he said.

Born the grandson of slaves on June 18, 1891, near Bath, N.C., Hodges grew up on a large farm and began working in the fields at an early age. He joined the U.S. Army in 1918 and served in France and Belgium with Company A, 702 Stevedore Battalion. This battalion worked the supply lines, shipping weapons, food and clothing to the front. He also served as a medical corpsman and ordnance technician.

Gen. John J. Pershing encouraged Hodges to stay in the Army, but he decided to keep a promise he'd made to his mother to return home at the end of his tour of duty. After the war, he married and had seven children with his wife, Malinda. He saved enough money to buy his own land and continued farming until failing eyesight forced him to retire in the 1950s.

Hodges eventually moved to Pamlico County, where he now lives with a daughter in the community of Stonewall. Although his World War I service in France potentially qualified him for the French Legion of Honor, he arrived there a few days after the date required to be eligible for the medal. VA estimates that less than 1,500 World War I veterans are still living. □

Agreement Shows 'Integrity' of VA's Commitment to Diversity

Wanda Jones smiled through the Feb. 21 ceremony marking the beginning of a new partnership between VA and the National Association for Equal Opportunity (NAFEO) in Higher Education, a public policy advocate for Historically Black Colleges and Universities.

As the national program manager for the Black Special Emphasis Program in VA Central Office, she'd spent the past few weeks supervising NAFEO intern Malcolm Beech II, a junior at Howard University in Washington, D.C., and saw exactly how the partnership would benefit VA.

Beech offered his own perspective. "This agreement shows the integrity of VA's commitment to

workforce diversity," he said. "It also provides better opportunities for students. One thing I've learned is that the VA has career opportunities for any major you choose in college and that there are resources here for any occupation you may choose to pursue."

The accounting major is learning workforce analysis and succession planning in the VA Office of Diversity Management and Equal Employment Opportunity.

Secretary Anthony J. Principi and Dr. Frederick S. Humphries, NAFEO president and chief executive officer, signed a memorandum of understanding before an audience of VA employees and veterans service organization representatives. The

agreement is patterned on one VA has with the Hispanic Association of Colleges and Universities.

One of its key goals is to increase educational and employment opportunities for students and faculty of the 134 colleges and universities represented by NAFEO. According to Humphries, 85 percent of black physicians in this country are graduates of Historically Black Colleges and Universities.

Secretary Principi said the partnership is a means of attracting more minorities to VA's workforce, especially minority veterans, in support of President Bush's recent executive order affirming support for Historically Black Colleges and Universities. □

Preserving Veterans' Histories for Future Generations

Editor's Note: When a patient shared memories of his experiences as a young soldier during World War II with Martha Allen, a social worker with the Eastern Kansas Health Care System, she realized the veteran had given her a valuable piece of history. Future generations of Americans, she knew, will have much to learn from those who served. This is Allen's story, originally published in *Synergy*, the newsletter of VA Social Work Service, of how she helped preserve this veteran's history for generations to come.

Darrell D. Martin is an 84-year-old blind veteran. He resides in the very small town of Wathena, Kansas. He is doing the best he can to remain active in his community. Martin's blindness has made it more difficult for him to handle his personal affairs. I have been working with this veteran on a referral to VA's Blind Rehabilitation Center in Hines, Ill., for evaluation for a reading machine. It was felt that with a reading machine, he could continue to handle his personal affairs and remain independent.

Before an application could be completed for his blind rehabilitation training, Martin needed to come to the VA for a series of tests. On one of those days he left me a package. The package contained 35 pages of his memories and experiences as a young soldier in World War II. When I talked to him, he explained to me that he had never been able to discuss his war remembrances with anyone. It was something that was too disturbing for him.

In the early 1990s, his sister pressed him to record his recollections of his war experiences. Knowing how difficult it was for him to talk about the war, she brought a tape recorder for him to tell his stories alone. When he had finishing recording his experiences, a friend volunteered to transcribe the recordings. The result was a very informative, factual and moving memoir.

After reading the veteran's story of his 103 days of combat, I asked him what he planned to do with the manuscript to preserve it for posterity and make it available for people to read. He explained he had taken it to a reunion of his old military division, the 42nd Rainbow Division, but that he did not know what to do with it beyond that.

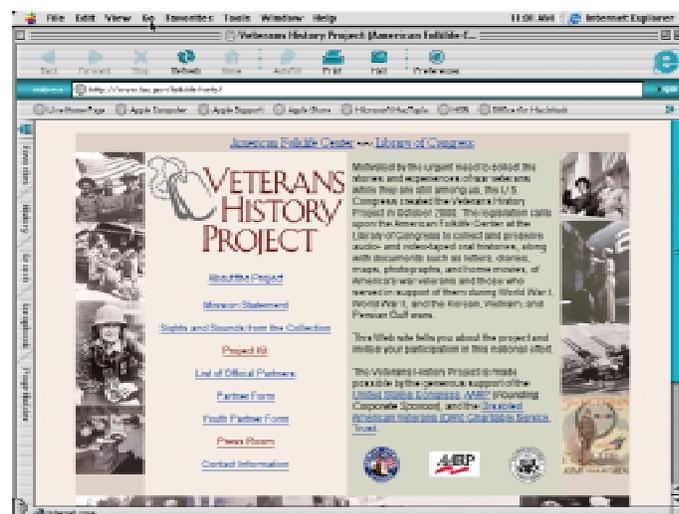
In March 2001, I had visited the National D-Day Museum in New Orleans, which opened June 6, 2000. The museum displays the many aspects of the D-Day invasion and the subsequent European Theater battles through the end of World War II. On Dec. 7, 2001, the museum opened a new section to present the story of the Pacific Theater.

I felt Martin's work would be truly valued in a place like this, because it would allow others to read about his experiences. With the veteran's very moving memoir in hand, I called the curator's office at the museum to ask about their willingness to accept first-hand accounts of soldiers' experiences. The curator said she would be very happy to have it and include it in the museum's library of the recollections/histories/memoirs of WWII veterans.

I checked with the veteran, who said he would be

honored to have it placed in that library. So I sent a copy to the museum. The museum will be acknowledging its receipt and thanking the veteran for his donation.

Martin's story tells how he moved through the Battle of the Bulge, the ruins of the Eagle's Nest at Berchtesgaden, and Dachau. Not only does he include his remembrances of the actual events, but he also describes the emotional reactions he had then and still has toward those events. It makes for a satisfying read and gives the reader the sense of being on the front lines and seeing, hearing, touching and smelling the battles and personal interactions of a common soldier who maintained a strong sense of duty throughout the most frightening of war experiences. □



The Veterans History Project is a national initiative of the Library of Congress through its American Folklife Center to collect and preserve oral histories and documentary materials from veterans of World War I, World War II, and the Korean, Vietnam and Gulf Wars. The project receives and archives video- and audio-taped, as well as written, accounts, plus letters, diaries and photographs from veterans and civilians who served to support them.

Veterans and non-veterans alike are invited to join the project's Volunteer Corps. Volunteers interview veterans and identify documents to donate. A project kit, available on the Veterans History Project Web site at www.loc.gov/folklife/vets, contains all the information volunteers need to participate.

Eventually, the Library of Congress will create a catalog of all oral histories and other documentation collected through the Veterans History Project. The names of all veterans and civilians who are interviewed or whose letters, diaries, and other documents are donated will appear on the Web site. The Library also plans to develop online presentations of selected portions of the collection for its popular American Memory Web site (<http://memory.loc.gov>) as an educational resource for the American people. □



San Diego VA Researchers Develop Oral Drug to Treat Smallpox

In a multi-institutional study, VA researchers have found an oral drug that kills smallpox and other viruses and could be the answer to saving thousands of lives during a bioterrorism attack or widespread epidemic.

The drug, called hexadecloxypropyl-cidofovir (HDP-CDV), stops the smallpox virus from replicating and spreading. To date, it has only been tested in mice and is not available for human use. Researchers at the U.S. Army Medical Research Institute of Infectious Diseases are conducting further studies.

The anthrax scare that swept across the country following the September attacks fueled fears of the highly contagious smallpox virus being used as a weapon of terror. There is concern that even people who were vaccinated before 1972 are no longer immune to the disease. Army researchers, headed by Dr. John Huggins, screened hundreds of existing drugs to combat smallpox at the Centers for Disease Control and Prevention in Atlanta before identifying an existing compound called cidofovir.

"HDP-CDV is a potent derivative of cidofovir," said developer of the new drug, Dr. Karl Y. Hostetler, director of the Endocrine and Metabolism Clinic at the VA San Diego Healthcare System and professor of medicine at the University of California at San Diego (UCSD). "However, cidofovir must be administered intravenously, thus limiting its fast application in an emergency. If you've got thousands of people exposed to smallpox, oral treatment would be far more effective."

If continuing studies support the drug's effectiveness and safety, it could be given in pill or capsule form over five to 14 days for prevention or treatment of smallpox in people exposed to the disease, said Hostetler, who along with Huggins and Dr. James Beadle, also a VA researcher and UCSD professor, presented their results at the 15th International Conference on Antiviral Research in Prague, Czech Republic, on March 20. The research was supported by grants from the Department of Defense, the National Institute of Allergy and Infectious Diseases, the National Eye Institute and the VA San Diego Healthcare System.

New HIV Drug Treatments Don't Increase Risk of Vascular Disease, Say VA Researchers

Aggressive HIV/AIDS drug treatments do not increase patients' risk for vascular disease, concluded researchers after analyzing data from nearly 37,000 patients treated at VA medical facilities between January 1993 and mid-2001. Physicians were concerned that the powerful new drug combinations used to treat HIV/AIDS may increase the risk of heart attacks and strokes. This study eases those concerns.

"The increased survival from combination HIV treatments seems to far outweigh any risks of vascular disease," noted researcher Dr. Samuel A. Bozzette, of the VA San Diego Healthcare System.

The results were announced Feb. 28 during the 9th Conference on Retroviruses and Opportunistic Infections in Seattle, Wash. The research team's analysis included data derived from VA's Immunology Case Registry, which captures information on every HIV patient in the VA health care system, along with other sources of data, such as hospital admissions and causes of death.

San Francisco VA Researchers Study Effects of Cholesterol on the Brain

Cholesterol-lowering drugs just might reduce the likelihood of developing Alzheimer's disease, according to a new study conducted by Dr. Kristine Yaffe, chief of geriatric psychiatry at the San Francisco VA Medical Center, and colleagues. They found high levels of cholesterol appear to damage the brain and lead to the type of mental decline seen in Alzheimer's disease.

"Our results support the hypothesis that statins may prevent Alzheimer's disease," said Yaffe. Statins are drugs that lower LDL-cholesterol levels by slowing down the production of cholesterol and by increasing the liver's ability to remove the LDL-cholesterol already in the blood. They are sold under the brands Lipitor and Zocor, among others.

In the four-year study, researchers analyzed data on 1,037 postmenopausal women with an average age of 71. They found women whose total and LDL-cholesterol levels had declined were about 50 percent less likely to have mental decline than those who had increased total and LDL-cholesterol levels. The study appears in the March issue of the Archives of Neurology.

Palo Alto VA Study Shows Treadmill May be Best Test for Longevity

Move over obesity, smoking and heart disease. A treadmill test may be the best predictor for how long someone will live, according to a study conducted by researchers from the VA Palo Alto Health Care System and Stanford University. The test measures a person's peak exercise capacity and is routinely used to check for heart trouble.

Patients in the study, some healthy and others with heart problems, were hooked up to sensors as they walked on a treadmill that gradually went faster and steeper. They walked until they reached their maximum heart rate, developed chest pain or other heart problems, or could walk no further.

Researchers measured their health in terms of what's called a "metabolic equivalent," or MET, which refers to the amount of oxygen a person uses when seated. Walking at a pace of two miles an hour is the equivalent of about two METs; four miles an hour is five METs; and six miles an hour is the equivalent of about eight METs.

They grouped the 6,200 study participants into risk factors and found those who couldn't get past four METs had more than double the risk of those who could hit the eight METs mark. "Walking briskly every day for half an hour is a great risk-factor modifier," advised Edwin Atwood, one of the VA researchers involved in the study. □

HONORS and awards



James B. Dale, M.D., received the Founders' Medal of the Southern Society for Clinical Investigation during their annual meeting in New Orleans. Dale is associate chief of staff for education at the **Memphis, Tenn., VA Medical Center** and professor of medicine and chief of infectious diseases at the University of Tennessee, Memphis. He served on the society's council from 1990-1995 and as president from 1994-1995. The award presentation detailed his professional accomplishments, personal and family background, and highlighted the 40-year history of streptococcal research conducted by **Drs. Dale, Gene Stollerman** and **Edwin Beachey** at the VA medical center and its affiliate university. Dale continues to receive attention for his research as inventor of the vaccine technology for group A streptococcal infection.

The VBA Reader-Focused Writing Tools Satellite Course received a National Association of Government Communicators Gold Screen Award during an April 4 ceremony in Arlington, Va. **Melodee Mercer**, an insurance specialist at the **Philadelphia VA Regional Office and Insurance Center**, played a key role in helping VBA achieve this distinction. She helped develop the course, was lead satellite instructor, and a member of the course re-write team. This is the fourth award won by either the team or member of the team for their broadcasts. The United States Distance

Learning Association named Mercer the 2001 Outstanding Distance Teacher in the Government category.

The Food and Drug Administration presented its highest award, the Commissioner's Special Citation, to **Paul Sherman**, a biomedical engineer in the **VA Center for Engineering and Occupational Safety and Health** located at the **Jefferson Barracks Division** of the **St. Louis VA Medical Center**. Sherman was honored for his work on the American Hospital Association's Telemetry Taskforce. Telemetry allows caregivers to monitor patients via wireless signals. The task force was established when it became apparent that the majority of medical telemetry in the United States was susceptible to disruption from electronic interference. Sherman and the task force identified available radio frequencies and successfully petitioned the Federal Communications Commission to dedicate them to telemetry.

Dr. Tumkur Shiva, a primary care physician assigned to the Mental Health Service Line at the **Tuscaloosa, Ala., VA Medical Center**, was elected to the rank of Fellow of the American College of Physicians. Fellowship is granted to board-certified internists who have demonstrated superior clinical, educational and/or research skills.

Dr. Stephan D. Fihn, a physician-researcher whose work has contributed to

improvements in health-care delivery throughout VA, received the 2002 Under Secretary's Award for Outstanding Achievement in Health Services Research. Acting Under Secretary for Health **Dr. Frances Murphy** presented the award during the annual Health Services Research & Development meeting held in February in Washington, D.C. Fihn directs VA's **Northwest Center for Outcomes Research in Older Adults**, part of the **VA Puget Sound Health Care System**, where investigators study ways to improve the diagnosis and management of chronic diseases such as heart disease, diabetes and depression. In addition to his VA duties, he is chief of General Internal Medicine and a professor at the University of Washington.

John E. Barilich was named VA Social Worker of the Year during the Uniformed Services Social Work Conference held Jan. 28 in San Diego. In presenting the award, Social Work Service Director **Jill Manske** said, "John has long been regarded as a role model for social work leadership in VA ... I cannot think of a more worthy recipient of this year's Social Worker of the Year award." He began his VA career at the North Chicago VA Medical Center in 1975 and is currently site manager for the **H. John Heinz III VA Progressive Care Center**, part of the **VA Pittsburgh Healthcare System**. The 396-bed facility is a Geriatric Center of Excellence and provides adult day care, primary care and hospice care.

P. Hunter Peckham, Ph.D., director of the **VA Rehabilitation Research and Development Center for Functional Electrical**

Stimulation in Cleveland, was elected in February to the National Academy of Engineering. Peckham is renowned for his work in restoring muscle function in patients paralyzed by spinal cord injury. He pioneered the "Freehand" system, which uses electrical signals to stimulate muscles in paralyzed limbs and allows users to grasp objects. Last year, he received the VA Magnuson Award, the Department's highest honor for rehabilitation investigators. In addition to his VA position, Peckham is a professor of biomedical engineering at Case Western Reserve University.

Estella Louise Morris, program manager of the **Comprehensive Homeless Center** at the **Little Rock, Ark., VA Medical Center**, received a Circle of Excellence Award for Community Service presented by GlaxoSmithKline. Through her efforts, the medical center's homeless veteran program has been transformed into a Comprehensive Homeless Center, which provides a wide range of services to help homeless veterans get back on their feet. The center has been designated a VA Clinical Program of Excellence since 1997 and in late January, received the two-year designation for the third time in a row.

Corvette Kowalski, director of the Materials Management Service Line at the **New Orleans VA Medical Center**, was named a Woman of the Year by the New Orleans Publishing Group. A 27-year VA employee, Kowalski was one of 35 businesswomen, selected from more than 600 entries, to receive the honor. The organization recognized the 35 Women of the Year at an awards banquet. □



To help the VA research community meet the Department's high standards of ethical conduct, the **Office of Research Compliance and Assurance** has developed several new tools. These include a compliance checklist for conducting research on human or animal subjects; a CD covering VA, the Common Rule, and Food and Drug Administration research regulations; plus a Web-based educational program dealing with human subjects that addresses VA-specific issues. For more information, call (202) 565-4835 or visit the Web site www.va.gov/orca.

Families of some veterans interred at the **Chattanooga, Tenn., National Cemetery** felt repercussions from the recent scandal involving a crematory in nearby Noble, Ga. The company failed to cremate hundreds of bodies, discarded some on nearby property, and deceived families by filling burial urns with powdered substances other than human remains. So far, 60 interments at the cemetery have been identified by funeral homes as being done for veterans or dependents cremated by the Georgia company. Families requested disinterments that have been conducted in 42 of those cases, and 24 of those remains have been reinterred. The cemetery is awaiting decisions from the other families. The daughter of a World War II veteran who had her father's remains disinterred and then reinterred, wrote to Director Candice Underwood, "I'll never forget

how helpful you were to me and my family—most of all, your truly genuine concern for us." The daughter also sent a note to field employees, saying, "You guys were so wonderful during one of the most difficult times I've ever had to go through."

Two **VA Salt Lake City Health Care System** physicians, **John W. Rose, M.D.**, and **John E. Greenlee, M.D.**, will be included in the upcoming ninth edition of **Best Doctors**. The database contains the names and professional profiles of approximately 31,000 doctors in more than 40 specialties. **Best Doctors'** listings have served as a vital resource to patients since 1992 by providing a listing of doctors who are recognized by their fellow physicians for their superior clinical abilities.

Voluntary Service staff at the **Wichita, Kan., VA Medical and Regional Office Center** incorporated a month-long fundraiser into the National Salute to Hospitalized Veterans, Feb. 10-16, 2002, that netted \$900 to purchase new flags for their Avenue of Flags as well as comfort items for hospitalized veterans. They sold cards depicting the United States flag for \$1 each. Purchasers put their names on the cards and they were strung together and put on display throughout the facility.

The VHA **Public Health Strategic Health Care Group** has published and distributed **The HIV Prevention Handbook: A Guide for Clinicians** to

help health-care providers translate HIV prevention research findings into everyday clinical applications. It includes recommendations on how to conduct risk assessment and risk reduction counseling as well as VHA directives on HIV testing and counseling, partner notification, and condom availability through the VHA National Formulary. "We have a lot of research on what works in HIV prevention," explained **Dr. Kim Hamlett-Berry**, director of the Public Health Prevention Program for the strategic health group. "But the issue is how to get the information to clinicians in a way that they can integrate prevention into routine care." To get a copy, contact your publications control officer and ask them to place an order through the VA Publications Depot. They'll need the IB number 1091 and the P number P95644. The full text is on the Web at <http://vhacoweb1.cio.med.va.gov/phshcg/prevention/handbook.pdf>.

Mary Grela had just about everything she needed to finalize an award for a veteran's service-connected disabilities. The only things missing were his children's social security numbers and the amount of his military severance pay. Instead of sending him a letter requesting the information, the veterans service representative at the **White River Junction, Vt., VA Medical & Regional Office Center** accessed the VISTA system to check if he had an upcoming medical appointment. It turned out he was at the outpatient clinic that very moment. Grela, a 35-year VA employee, walked to the clinic to find the veteran and get the information she needed. Her actions prevented a delay in finalizing his claim and the

veteran received his compensation check shortly thereafter.

A Buffalo Soldier statuette was unveiled at the **Sheridan, Wyo., VA Medical Center** during the culmination of Black History Month. The numbered piece from the Ron Mench Studio depicts a typical Buffalo Soldier whose mission was to protect the communities of Sheridan and Johnson Counties. It was donated by **Dr. Robert Byrd**, director of the **VISN 19 Dental Product Line**, to honor the father of patient William Best. Private William Harold Best was stationed at Fort Mackenzie during the late 1800s as a scout with the 9th Cavalry. Private Best was honorably discharged at Fort Mackenzie. His son continues to visit the old fort, now Sheridan VAMC, for his health care needs.

Instead of seeking VA care when he was diagnosed with non-Hodgkin's lymphoma in 1998, a Vietnam veteran sought treatment at a private hospital and paid for it with his personal health insurance. But when his condition relapsed late last year and he found out his insurance wouldn't cover treatments, he turned to VA for help. Non-Hodgkin's lymphoma is a condition recognized as service-connected based on exposure to Agent Orange or other herbicides used in the Vietnam War. His claim was fast-tracked through the **Portland, Ore., VA Regional Office** and awarded 100 percent service-connection. **VA Roseburg Healthcare System** employees recommended treatment at the **Seattle Bone Marrow Transplant Center**, and the veteran began his three-month treatment program at the Seattle VA transplant center in March. □

HEROES



Miami VA Medical Center Nurse Jeannette Siler was driving to work on Feb. 23 when she spotted trouble. A young woman was running down the sidewalk with a panicked look on her face. She was barefoot and carrying a baby in her arms. When she saw the woman run into a local car dealership, Siler cut across three lanes of traffic and pulled into the parking lot to see if she could help. After evaluating the baby's condition, she realized the baby was having a seizure. She calmed the young mother, took the baby into her arms and held it until its tiny body began to relax. Her willingness to get involved saved the child from potential injury or perhaps worse. Siler serves as the off-tour nursing supervisor and has been a member of the Army Reserves for fifteen years.



Steven Scott never imagined his trip to the store for some cookies would take five hours, but that was before he saw the apartment complex in flames. After asking a nearby security officer to call 911, he raced to one of the apartments and started banging on the door. "A bunch of people were standing around just looking at the fire. I knew that people lived there and wanted to make sure everyone was out," said Scott, a long-time **Houston VA Medical Center** employee and Army veteran. As he pounded on the door, a young girl answered, but because she couldn't speak English, she didn't understand

what was happening. Finally, a man came to the door and Scott gestured to the roof. The man stepped out and realized his apartment was on fire. On the roof, the fire was spreading fast into other apartments. "I saw a little girl at the top and I didn't know if they knew she was up there. I saw her peeping out the window and the fire was coming straight at their apartments, so the first thing I wanted to do was help them get their family out of there safely." First by himself, then with other rescuers, Scott went door-to-door to make sure everyone was out of the apartment complex. Fire officials arrived as the last few residents were being evacuated.



John Drake, a medical technologist at the **Ralph H. Johnson VA Medical Center** in **Charleston, S.C.**, came upon a two-car collision late one night and stopped to help the victims. He found one victim dead and the other driver badly injured and trapped in the car. Another motorist stopped and called 911 as Drake tried to calm the trapped man. He thought the man might go into shock, so he climbed in the back seat of the car, covered the victim to keep him warm and stabilized his head and neck so he wouldn't move around and cause further damage. When emergency crews arrived 30 minutes later, Drake stayed and helped care for the victim. He remained with paramedics until they freed the victim using the Jaws of Life. The

man survived and thanked Drake from his hospital bed for stopping to help him.



Bath, N.Y., VA Medical Center Police Officer **Harry Adler** stopped by a gas



Adler

station on his way to work on Feb. 28 to put some air in his tires. As he filled up his tires, a man ran up and asked him to come to the front of the store. Once he got there, a man and woman placed their young daughter in his arms. "She was lifeless when I first held her," Adler told reporters from a local newspaper. "There was no breathing, no pulse, no signs of life." He immediately began CPR and managed to resuscitate her. An ambulance soon arrived and rushed the girl to the emergency room. Doctors said a rapid rise in body temperature, up to 103 degrees Fahrenheit in just a few minutes, had caused a seizure. They kept the girl overnight for observation, but she suffered no permanent injuries. The family credits Adler with saving their daughter's life.



Eddie Williams, Ph.D., a clinical psychologist at the **North Chicago VA Medical Center**, was going out to get some lunch when he saw a man hopping on one foot while pushing a bicycle. The man tried to flag down a passerby, but fell as he waved his arm for help. Williams pulled his car to the side of the road to investigate. The man's ankle was severely

twisted and flopped from side to side each time he moved. He looked as though he might go into shock, so Williams tried to calm him down and offered to drive him to the hospital. The man accepted his offer, but wanted to go in his truck, which was parked nearby. Williams drove him to the emergency room and helped him get checked in. Later, while driving home from work, Williams stopped by the hospital to see how the man was doing. He had just returned from surgery and was barely conscious. His ankle had been broken and he had tendon damage. His mom was waiting at the hospital and Williams introduced himself. She said she was surprised a total stranger would take the time to help someone he didn't know. "When you work in a medical center, it's just second nature to help someone when you see them in pain," he explained.



During a cross-country flight, **Peter Runich**, a physician assistant at the **Durham, N.C., VA Medical Center**, saw an elderly passenger fall to the floor while attempting to stand up. Runich immediately responded and determined the passenger was experiencing a syncopal episode, a loss of strength and/or consciousness. He asked the airline crew to start administering oxygen and placed the victim in the shock position. When the victim came to, Runich got a medical history and initiated additional interventions to improve the victim's condition. He monitored the victim for the remainder of the flight and helped emergency crews evacuate the passenger when they landed at the airport. The airline later sent a letter thanking Runich for his actions. □