Features

Serving in Harm’s Way 6
Part 2 of women employees deployed in the war on terror

Preparing for the Next One 12
Facilities in hurricane-prone areas are ready for the 2006 season

VA’s Newest Shrine 14
Georgia National Cemetery is dedicated in a June ceremony

Seeing a Way Out of Homelessness 16
A pilot program is helping to restore the vision of homeless veterans

Wrapping Up the Diamond Jubilee 18
VA’s yearlong celebration of its 75th anniversary concludes

The Search for Our World War I Veterans 21
Time is running out to find and recognize the last of a vanishing breed

Privacy & Security Awareness Week 23
A look at how facilities around the country observed the event

The National Veterans Wheelchair Games 32
Ever wonder what it takes to put on this major event?

Departments

3 Letters
4 From the Secretary
5 Outlook
24 Around Headquarters
27 Introducing
28 Medical Advances
29 Honors
30 Have You Heard

On the cover
Formerly homeless veteran Gary Bracey gets an eye exam at the Baltimore VA Medical Center. He is one of the beneficiaries of a pilot program at the Baltimore VAMC and four other VA medical centers that is providing glasses for homeless veterans who would not normally qualify for VA eyewear.

photo by Robert Turtil
Warning Labels on Fast Foods?
When I have an appointment at the VA hospital, I like to get there early in order to read the veterans magazines. This time I picked up the March/April issue of VAnguard and read an article by the Secretary of Veterans Affairs, Mr. Nicholson, about the problems of obesity and diabetes among veterans, as well as the general population. The article went on to say that nationally, 64 percent of Americans are overweight or obese, and 7 percent (or 20.8 million) have diabetes. Among veterans, it said, these figures are higher, and the reason for this was the emergence of the factory farm/fast food industry as well as “processed” foods, which contain large doses of salt, fat and sugar.

In a separate study of Indiana residents, the obesity rate has gone from 25.5 percent in 2004 to 27.3 percent in 2005.

These increases are nothing new. People who are health conscious have known this for years. What is new is that this is the first time a government official has publicly stated this message. It seems that since the beef industry sued Oprah Winfrey, people of influence have been reluctant to publicly state the health hazards of the factory farm/fast food industry.

Documentaries such as “Super Size Me” and books such as Fast Food Nation, although critically acclaimed, go largely ignored by the public. Why? Some people have tried to claim that their obesity is a disease due to their addiction to fast foods. Why do people who know something is harmful to them do it anyway? Maybe there is something in fast foods that is just as addictive as cigarettes and alcohol.

Nutritionists say that we should frequent fast-food restaurants no more than once a month. The FDA is now proposing that all restaurants (I believe they are doing this because they can’t single out fast-food restaurants) provide nutrition labels on what they sell. Maybe what we need are warning labels on fast foods, the same as cigarettes.

Ray Wilson
New Middletown, Ind.

Retired and Still Serving
During my more than 27 years of service with the U.S. Army, I have had many occasions to use VA medical services. I can say for myself, the service was always of the best quality and I was treated with respect.

I retired as of January 2006 and am now a disabled vet. I now have the honor of being part of the VA team as a program support specialist at the Vocational Rehabilitation and Employment office in Fort Lauderdale, Fla.

I am pleased each day that I can now help my fellow disabled vets by helping the very professional staff with the daily office administrative functions, thus allowing the counselors to have more time to devote to my fellow disabled vets.

Jerry Abney
Program Support Specialist
VR&E Office
Fort Lauderdale, Fla.

Corrections
Credits for two photographs we ran in the May/June issue were incorrect. The photo on page 18 was taken by JR Garza; the photo on page 21 was taken by Amanda Stanislaw.

We Want to Hear from You
Have a comment on something you’ve seen in VAnguard? We invite reader feedback. Send your comments to vanguard@va.gov. You can also write to us at: VAnguard, Office of Public Affairs (80D), Department of Veterans Affairs, 810 Vermont Ave., N.W., Washington, D.C., 20420, or fax your letter to (202) 273-6702. Include your name, title and VA facility. We won’t be able to publish every letter, but we’ll use representative ones. We may need to edit your letter for length or clarity.

Dance of Honor
Robert Nez of the Navajo Nation dances with others in the American Indian Veterans Gourd Dance performed June 29 at the New Mexico VA Health Care System in Albuquerque. Known as a “warriors’ dance,” the gourd dance honors all veterans. Nez has been a gourd dancer for 11 years. He dances in honor of two uncles who died in World War II. The dance was sponsored by the New Mexico VA’s Native American Special Emphasis Committee.
The Yearlong Observance of VA’s 75th Anniversary

Jim Nicholson
Secretary of Veterans Affairs

The Diamond Jubilee of the Department of Veterans Affairs was a smashing success and I could not have been more proud of the participation and effort of VA staff from Maine to Manila.

From the opening moments of our kick-off ceremony at Constitution Hall in Washington, D.C., last July to the finale in the Capitol Rotunda this July, the yearlong observance of VA’s 75th anniversary highlighted the many achievements of VA and our dedicated employees, and showcased the proud legacy of our service to veterans.

Now, we begin this next period of VA history on solid footing. The safety and efficiency of our electronic health records was recognized in July by Harvard University, which awarded VA the very prestigious Innovations in Government Award. More than 1,000 entries competed for this honor but at the end of the day, it was VA and our health care technology that were recognized for excellence.

Awards are a fine testament to things done well, but the practical aspects of our electronic health records and prescription drug programs—which save lives every day—are also being increasingly recognized by the media and the American public.

Just days after VA received the Harvard award, the Institute of Medicine issued a report on prescription drug errors in American health care and a number of news agencies, including ABC World News Tonight and the Los Angeles Times, came to VA for comment. As one reporter put it, VA was included in their news coverage as “an example of somebody who does it right.”

The headline of a six-page Business Week article on VA health care called it “The Best Medical Care in the U.S.,” and U.S. News & World Report published an article that called VA hospitals “models of top-notch care.” Clearly, our anniversary year was one in which our fine reputation grew and received the recognition it deserved.

During our 75th anniversary year, VA reached an important milestone in another way. The agency guaranteed its 18 millionth home loan as part of a program that has loomed large in making the United States a nation of homeowners. This 18 millionth home loan guarantee went to a young family in Texas and it exemplifies not only our service to veterans but VA’s positive impact on the nation and its economy.

Homeownership is a cornerstone of the American Dream and VA has been in the forefront of making this dream a reality ever since Franklin Roosevelt signed the GI Bill into law in 1944. We will guarantee millions more home loans over the next 75 years, and you can rest assured that we will continue making a difference in the lives of returning veterans and those of the future by helping them and their families have a home of their own.

VA’s disability compensation and pension programs also play a large part in ensuring the security of veterans and their families. Last year, VA provided $30.8 billion in disability compensation, death compensation and pensions to some three-and-a-half million veterans, and the spouses, children and parents of deceased veterans. The fulfillment of this commitment does more than provide money to veterans and their survivors; it helps give them the peace of mind that comes from economic stability.

VA’s Diamond Jubilee year also saw major progress on our commitment to expand the national cemetery system. America is saying its final farewell to the generation that fought and won World War II, with more than 1,000 veterans from that war dying every day. To meet those needs, the number of national cemeteries, each of which is maintained as a shrine to those who served, has grown to 123 over the past year, and we remain on track to continue this expansion.

There are also challenges that lie before us as we move into the next era of VA service, not the least of which is addressing our handling of sensitive veteran data. The theft of VA data earlier this year was a wake-up call for our entire agency, and we have already taken a number of steps to remedy the situation and improve on it. Our goal is simple: for VA to become the gold standard for information and data security, and to become as widely respected for this as we are for our electronic medical records.

There always is and always will be more to do, and I have every confidence that VA will rise to this challenge. Be it increased vigilance with sensitive information, compassionate health care, providing benefits to injured veterans or conducting a fitting burial for a homeless veteran, VA has been there for more than 75 years and we will continue to be there for the next 75.

It is an honor for us to serve together those who served us in uniform. We are the agents of a grateful nation, who take great pride in fulfilling our noble mission.

Read more about the conclusion of VA’s Diamond Jubilee year on page 18 of this issue.
Looking Back With Pride in Our Accomplishments

Jonathan Perlin, M.D.
Under Secretary for Health

On Aug. 11, I will resign my position as Under Secretary for Health. I am honored to have had the opportunity to serve VA, veterans, and my fellow VHA employees since 1999. In that time, we have made VHA the gold standard in health care, and have made great strides toward providing veterans with care that is safe, effective, efficient and compassionate. It has been my great privilege to be a part of this renaissance.

Our accomplishments over the past few years have been widely recognized—by the news media, by the health care community, and, most importantly, by veterans themselves. Just last month, for example, we received the prestigious Innovations in Government Award from Harvard University's Kennedy School of Government and the Ash Institute for Democratic Governance and Innovation for our leadership in combining performance measurement and electronic health records to improve care for veterans.

Last year, the RAND Corporation, an esteemed health services research organization, found that VA systematically outperformed all other health care providers across a spectrum of 294 directly comparable measures of quality in disease prevention and treatment. This translates into the best rates of immunization, gender-specific health services (such as breast and cervical cancer screening) and diabetes care available anywhere. Improved pneumonia vaccination rates alone have saved more than 6,000 lives just among veterans with emphysema.

Veterans today are more satisfied with their health care than patients anywhere else. VHA is the benchmark for inpatient and outpatient care and pharmacy services in the externally administered American Customer Satisfaction Index. And Americans are more satisfied with the value of the care we provide—The New York Times, The Washington Post, Washington Monthly, Business Week and U.S. News & World Report all have lauded VHA as a model health care system, efficiently providing the best care anywhere.

And even as VHA’s budget has doubled proportionate to patient growth, and as our quality has improved to benchmark status, our cost-per-patient remains unchanged from 1995; adjusted for inflation, VHA’s care is 32 percent less expensive than it was a decade ago.

Today, VHA is solidifying our critical partnership with our academic affiliates on a basis of trust, equity and synergy; our research program is squarely focused on its core mission of improving the health and well-being of veterans; and VHA leads America in adopting the principles of the President’s New Freedom Commission on Mental Health. We’ve also improved the percentage of community-based outpatient clinics offering specialty mental health care services from 71 percent two years ago to more than 90 percent today.

In the future, genomic medicine offers the promise of allowing us to treat each patient’s disease uniquely, not just similarly to the way that disease is treated in other par-

laborative practice. I am proud to know that I will leave VHA better than it was and with veterans receiving far better care than ever before. My goal for VHA has always been that we be the leaders in providing safe, effective, efficient and compassionate health care. We will know that we have reached this goal when every veteran receives such care without the need for an advocate. There is much work still to do, but I leave VHA in the capable hands of Dr. Mike Kussman, who has been chosen as acting Under Secretary for Health, and my other colleagues—men and women who have already brought about one revolution in health care, and are fully capable of bringing about another.

I am proud to know that I will leave VHA better than it was and with veterans receiving far better care than ever before.

Thank you all for your help and support—and for the honor and privilege of serving with you, and serving the nation’s veterans. I wish you all the best in the future.

Dr. Kussman Named Acting Under Secretary for Health

Dr. Michael J. Kussman will serve as VA’s acting Under Secretary for Health while the Department conducts a search to replace outgoing Under Secretary for Health Dr. Jonathan Perlin. Kussman, who becomes acting Under Secretary on Aug. 12, has served as VA’s Principal Deputy Under Secretary for Health since August 2005. Before coming to VA, Kussman had a military medical career spanning three decades. His service included stints as commander of the Walter Reed Health Care System in Washington, D.C., and commander of the Europe Regional Medical Command.
Women employees have been deploying in support of the war on terror in record numbers. Here are some of their stories, in their own words.

Women are serving on the front lines in the war on terror in record numbers. Fifty-one women have been killed in Iraq and more than 370 wounded as of April 2006, according to the Department of Defense.

They are our mothers, daughters and friends. And increasingly, they are our colleagues as well. More than 700 female VA employees have been called to active military service since 2001. Through an informal survey conducted via e-mail to VA nurses, social workers and women veteran health managers, VAguard uncovered the stories of about 50 women employees, most of whom deployed to combat zones in Iraq and Afghanistan.

Their stories are raw and emotional. Many shared similar fears, such as anxiety over the constant threat of attack. Others struggled with the grim realities of treating combat casualties. All shared the hardships of separation from family and friends, and the lack of privacy or creature comforts. In the May/June issue, we shared some of their stories with you. Here are more, in their own words.

Cookie S. Avvampato, R.N., nurse manager, Southern Arizona VA Health Care System, Tucson

I deployed on June 1, 2004, with the Air Force Reserve’s 944th ASTS (Air Staging and Transportation Squadron). We began in Camp Wolverine, Kuwait, and later moved to Ali Al Salem Air Base, Kuwait, and then forward to Balad, Iraq. My job involved keeping track of all injured troops in the Contingency Aeromedical Staging Facility and providing reports to the medical crew that flew the patients to Ramstein, Germany, for advanced care.

There were no real surprises about my deployment, except when we went forward and were on the C-130 and were told we had to circle because the base was under attack. I thought, “Well, I guess this is for real, I’m in the war.”

The hardest part of my deployment was treating the soldiers who had body parts missing due to IED explosions. These kids are younger than my children and their lives changed drastically in a flash. The most memorable experience was the young soldier who had a gut wound that we were dressing. He handed me his digital camera and asked me to take a picture of his wound as we took off the bandages … what a souvenir for him.

There is little in my normal military experience or civilian job that could compare to my deployment to Iraq. When I left Iraq and rotated to Ramstein from August 2005 to January 2006, my role as the chief nurse was much like my job at the VA (management), except we had to move and care for the wounded troops. I don’t “hump” litters in my civilian job.

“There is little in my normal military experience or civilian job that could compare to my deployment to Iraq,” says Cookie Avvampato, left, a nurse manager in Tucson.
Barbara Baker, registered nurse, Charles Wilson Outpatient Clinic, Lufkin, Texas

I served as a registered nurse with the 228th Combat Support Hospital in Tikrit, Iraq, from Dec. 26, 2004, to Dec. 1, 2005. I joined the service in 1983 right out of high school for several reasons: I come from a military family, to help pay for college, and I was pretty gung-ho back then and wanted to serve my country.

There are several memories from my deployment that I will never forget. The first is the faces of the soldiers and their buddies for every trauma I was involved with. Next are the people I served with. In the military, and especially on deployments, they become your family. You become so close so quickly and experience things that no one else will be able to understand or share. Then there were the sandstorms. They were unbelievable; the sand just gets everywhere.

What I missed the most about my life back home was being away from my three boys, the freedom to do what I want when I want, and my bathtub.

Karen Mack, nurse practitioner, VA Connecticut Healthcare System, West Haven

I belonged to the 11th Battalion Institutional Training Unit and deployed to Baghdad in October 2004. I worked in the Green Zone with translators, Iraqi medical doctors and was also a team leader.

I have to say that I feel like I am a different person now that I have been to a combat zone and defended our country’s freedoms.

Michelle Lafferty, administrative support assistant, Michael E. DeBakey VA Medical Center, Houston

I am a Yeoman Third Class (E-4) who has been in the reserves for eight years. I have been serving in the Navy Cargo Handling Battalion 6 since 2001. We deployed to Kuwait to support the port operations and move equipment and supplies both in and out of theater and stayed from August 2004 to March 2005. My duties were to support the headquarters with security clearance processing, transportation support, emergency leave paperwork and other duties.

I shared a tent with about six other females that I didn’t know until I got there. Spent the Christmas holidays away from my family but was well supported by the VA staff back home; I received two large boxes of goodies from my co-workers. I even made some wonderful lifelong friendships with fellow reservists from other parts of the United States, as we were merged with other Cargo Handling battalions from Ohio, Illinois and California.

I have to say that I feel like I am a different person now that I have been to a combat zone and defended our country’s freedoms.
and the surgeon general. We developed a medical training program for the new Iraqi soldiers and life-saving skills for new Iraqi police officers. We worked 12-hour days seven days a week, except for four hours off on Friday mornings.

I guess the biggest surprise about my deployment was living in the Green Zone. This area houses all Iraqi government buildings, American civilian contractors, security and the American Embassy, so I thought I was going to be safe.

Well, the mortars started on the second night. They were shot randomly and continually. They knew the best times to hit us were on American holidays and Election Day in November. I'll never forget when our dining facility was hit on the night before the first Iraqi election and military and civilians were killed.

Cheryl B. Proper, combat veteran coordinator, Indianapolis VA Medical Center

"I have been in the Army (active and reserve) for 25 years. I am currently in the 801st Combat Support Hospital (Army Reserve) and was deployed from March 2003 to October 2004. I joined the service because I wanted to be an Army nurse and I come from a military family. The biggest surprise of my deployment was being extended for six months after our year was up. We were actually in front of customs in Kuwait with a plane planned in less than 24 hours to transport us home when we were asked to stay to help take care of a large group of wounded that were expected. One of the toughest experiences was actually the day we did get to fly out of Iraq on her way home. Cheryl Proper "wanted to be joyous, but I had a flag-draped soldier at my feet in the back of the transport plane."

Flying out of Iraq on her way home. Cheryl Proper "wanted to be joyous, but I had a flag-draped soldier at my feet in the back of the transport plane."

One of my most memorable experiences was when I flew all over Kuwait and southern Iraq with the Medevac pilots in a Black Hawk. Other memorable experiences were just being able to take care of young wounded and detainees and hoping to make a difference. Their faces looking up at you and trusting you with their care were my most moving times.

I was gone about one-and-a-half years without being able to come home on leave, so I missed grandchildren being born, green grass, my family and friends, and privacy (the only place you can be alone is in a port-a-john).

Mary Gary-Stephens, psychiatric nurse specialist, Louis Stokes VA Medical Center, Cleveland

I was assigned to Walter Reed Army Medical Center (WRAMC) in Washington, D.C., from March 2003 to March 2005. I was the clinical nurse specialist for Ward 53 Psychiatric Continuity Services. On my departure, we had provided clinical care coordination to around 400 servicemen and women evacuated for psychiatric reasons.

One of the support duties for nursing service was to provide triage on the arrival of air evacuation planes coming from Andrews Air Force Base to WRAMC from Germany. As an officer, I was assigned on a rotating basis as the officer in charge. We could expect anywhere from a few injured soldiers up to 28, which was the most on one night.

This by far was one of the most difficult duties of my tour … welcoming injured troops back home, and assisting families waiting for their arrival. I was always impressed with these young soldiers’ courage and good humor under difficult circumstances.

My most memorable experiences included seeing some patients with severe post-traumatic stress disorder and depression work hard on their traumas and make progress on the road to recovery. In my many years of experience with WWII, Korean, and Vietnam veterans, I’ve found that they often wonder how things might have been if they had sought treatment 50 or 30 years ago. This was a great opportunity to put that to the test.

Leaving my daughter, Taylor, who was 7 years old at the time, was the most difficult part of my entire experience. Since I was stateside I tried to keep in frequent contact, and she was able to visit. I think once she saw what I was doing she was able to turn her fear into being proud of her mom.

This has been hard to attempt to separate my thoughts and feelings and keep this short. As with my first deployment I always ask myself, "How have my experiences helped me to provide better services to the veterans I care for?" I think I am still integrating all of this, but I know I am grateful for life, family, friends and purposeful work. I strive to always treat our veterans with a caring professionalism, and most of all to listen.
Behind the Scenes of VET IT

Lia A. Locasto, program support assistant, Santa Rosa, Calif., Outpatient Clinic

I entered the Marine Corps in January 1981. Went to Okinawa, Japan, for a couple of years, then on to Marine Corps Air Station El Toro until 1988. I then got out for about a year, just long enough to realize I was a better Marine than civilian, so I came back in.

By November 2002, I was in Kuwait. I remained there until the war started in March 2003. We then pushed through “The Line of Departure” and headed into Iraq, where I remained for the next couple of months. As our unit received casualties, we needed a casualties assistance calls officer back in the rear to tell the families of lost loved ones. After long, arduous meetings with the powers that be, I was picked to fulfill this billet.


My time deployed doesn’t compare to any other experience in my military or civilian career. Marines are a tight-knit family as it is, but get us in a war zone and the camaraderie is off the charts. We’re closer than brothers, closer than best friends. We will die for one another and all the trust within us is put in another Marine’s hands and his trust in yours.

Once I left the Marines, I was like a fish out of water and alone in the world. I’m from a small town, so going back to the regular, mundane lifestyle was difficult. For others, I became the talk of town. They’d listen to me speak or pay attention to my story, but then it was also as though they were intimidated. What have they done that compares? Would I be too hard to handle or too tough and set in my ways? When I was called by my old command and asked if I would be willing to come back on active duty, well, it was a “no-brainer,” so here I am.

Editor’s Note: Gunnery Sgt. Locasto was recalled to active duty on April 11, 2006, and expects to remain at Camp Pendleton serving as a casualty assistance officer until July 2007.

Anniemarie Harrison Gray, registered nurse, Hunter Holmes McGuire VA Medical Center, Richmond, Va.

I served as a flight nurse with the Air Force Reserve’s 459th Aeromedical Evacuation Squadron based at Andrews Air Force Base near Washington, D.C. My initial deployment was for eight months at Seeb International Airport in Oman.

Later, I was sent to Scott Air Force Base in Illinois where I coordinated aircraft for wounded troops. Finally, I returned to Andrews and worked on flights going to Landstuhl Regional Medical Center in Germany to pick up wounded soldiers and take them to hospitals in the United States. I ended up serving on active duty for 26 months, from December 2002 to February 2005.

My most memorable experiences came as I was caring for the wounded patients. I didn’t expect to see the things I saw … I mean guys who got blown up, missing limbs … that was my biggest wake-up call. Flight nurses are the only ones who bring the boys home when they’re hurt. And our job never ended.

Lisa J. Cole, physician assistant, Michael E. DeBakey VA Medical Center, Houston

Capt. Cole served seven years in the Air Force and currently serves with the Army Reserve. From August 2003 to May 2004, she was activated and sent to the Middle East. She was first stationed at Camp Wolverine in Kuwait, where she performed post-deployment health assessments for military personnel to document health issues and possible biological and chemical exposures.

She was then deployed to Camp Anaconda in Balad, Iraq, where she also volunteered with the civil affairs unit to perform health outreach missions to the local villages. She is currently redeployed to Iraq.
Margaret Rains was a Black Hawk helicopter pilot with the Hawaii Army National Guard in Afghanistan.

Margaret Rains, clinical coordinator, VA Pacific Islands Health Care System, Honolulu

I served with Company B, 193rd Aviation, Hawaii Army National Guard, as a commander and Black Hawk helicopter pilot in Kandahar, Afghanistan. ... Our soldiers completed over 50,000 man hours in maintenance support to the 10th Mountain Division during nine months deployed.

We blended right in with the active-duty 10th Mountain and became a total task force team. It truly exemplifies the Army of One concept, with the same mission: to fight terrorism. We went as a team, worked as a team, and ensured success for the follow-on units.

Editor’s Note: Our sincere thanks to all of the women who shared their compelling stories of service for this feature. The stories and photos were gathered and compiled by Matt Bristol.

Citizen Soldiers Called to Duty

More than 700 women employees have been called to active military service since 2001. Many served on the front lines in Iraq and Afghanistan; others performed vital support functions here at home. Their commitment to service reflects the true character of the citizen soldier—duty, honor, country. These are just a few of those who served:

- Cheryl Adams, women’s health coordinator at the Bronx VAMC, who deployed to Iraq.
- Marie Apelian, a nurse practitioner at the Cincinnati VAMC, who served with the 452nd Combat Support Hospital in Kuwait and Iraq.
- Rene A. Bloomer, R.N., a nurse supervisor at the Albany, N.Y., VAMC, served as a lieutenant colonel in the Air Force Reserve at Ali Al Salem, Kuwait, from September 2004 to January 2005.
- Pamela J. Breedlove, from the Topeka, Kansas, VAMC, who served with a Combat Stress Control Unit.
- Shirley L. Caldwell, the associate director of Patient Care/Nurse Executive at the Las Vegas VAMC, who served 14 months on active duty.
- Johnnie M. Carter, a nurse specialist at the Detroit VAMC, who serves as a lieutenant colonel with the Army Reserve and was activated and served at Fort Stewart, Ga., in 2003.
- Daphne T. Cuyler, a human resources specialist at the Fresno VAMC, who served as a sergeant first class with the California Army National Guard in Camp Arifjan, Kuwait, from September 2004 to December 2005.
- Jacqueline Deeds-Buford, a nurse practitioner at the Fayetteville, Ark., VAMC, who deployed for two tours as a flight nurse with the 137th Aeromedical Evacuation Squad-
Carolyn Doherty, R.N., an operating room nurse at the Togus, Maine, VAMC, who served at Camp Doha, Kuwait, from June 2002 to June 2003.
Lynn Fisher, R.N., Cleveland VAMC, who served in Iraq.
Darcie Greuel, a registered nurse at the Milwaukee VAMC, who deployed to Afghanistan during Operation Enduring Freedom.
Louise M. Guszick, a nurse practitioner at the Wilkes-Barre, Pa., VAMC, deployed to Camp Shelby, Miss., on Feb. 17, 2006, to medically clear soldiers for deployment overseas.
Sherryl Kempton, a nurse practitioner at the Togus VAMC, who was activated in June 2006 and expected to deploy to Iraq.
Elizabeth Lingenfelter, a registered nurse at the Togus, Maine, VAMC, who is currently in Iraq doing mental health work.
Bonnie McIntosh, social worker at the Providence, R.I., VAMC, who deployed to Iraq in 2003.
Lorri A. McLaughlin, a social worker at the Cincinnati VAMC, who served in Baghdad with an Army behavioral health team.
Kristina E. Miller, an informatics administrator at the Phoenix VAMC, who served in Iraq.
Courtney Monterusso, a registered nurse at the St. Louis VAMC, who served with the 320th Air Expeditionary Wing in Seeb Air Base, Sultanate of Oman.
Mary Ann Noland, a licensed practical nurse at the Martinsburg, W.Va., VAMC, who is serving with the West Virginia Army National Guard and deployed to Afghanistan in June 2005.
Jaime Perez, a social worker at the Springfield, Ill., Vet Center, who deployed to Iraq in 2003.
Marsha Shivley, nurse practitioner at the Poplar Bluff, Mo., VAMC.
Paula Smith, social worker at the Brockton, Mass., Vet Center, who deployed to Iraq in 2003.
Frances Snell, a registered nurse at the Cleveland VAMC, who served in Iraq.
Susan K. Sonnheim, a nurse at the Milwaukee VAMC, who served with the Wisconsin Army National Guard and was wounded in Iraq.
Melissa D. Strickland, a research pharmacy technician at the Gainesville, Fla., VAMC, who deployed to Iraq from February 2003 to October 2004.
Bridgette Stump, a member of the nursing staff at the Lebanon, Pa., VAMC and daughter of Hedy B. Stump (also at the Lebanon VAMC), who served with the Army Reserve in Kuwait and Iraq.
Carole S. Wagner, from the St. Louis VAMC, who served at Tallil Airbase in southern Iraq.
Sharon Webb, R.N., Martinsburg, W.Va., VAMC, served with the 167th Air National Guard and is currently on her second deployment.
Laura J. Williams, a program support assistant at the Montrose, N.Y., VAMC, who served in Iraq from February 2004 to February 2005.
In June, world-famous meteorologist William M. Gray predicted, “We continue to foresee another very active Atlantic basin tropical cyclone season in 2006. Landfall probabilities for the 2006 hurricane season are well above their long-period averages.”

Now, nearly two months into the hurricane season, VA emergency management preparedness planners have kicked their efforts into high gear, as the department gets ready for another hurricane season.

It’s a monumental task.

From the pre-positioning of food, supplies and medicines to preparing employees for the mental stresses of disaster, VA employees are gearing up in a variety of ways.

Callers to the Biloxi, Miss., VA Medical Center get voice messaging about hurricane preparations. At the Miami VA Healthcare System, “on-hold” messaging advises patients, families and staff members how to prepare for emergencies.

“Communicating was one of our biggest problems” following Hurricane Katrina, according to Christopher Alexander, Biloxi’s public affairs officer.

“It was important for us to communicate with our veterans,” he said, “but it was equally important that our staff was taken care of, because they are our greatest asset, and they are the ones who communicate with our patients.”

Having plenty of supplies—water, medications and food—is critical for facilities in hurricane-prone areas like Biloxi. Identifying key players, in advance, for each service team is a necessity. But preparing employees emotionally for disasters is becoming just as essential, according to Paul Brannigan, an area emergency manager for the VA Southeast Network (VISN 7) in Atlanta.

“I fully believe that the mental health component of any disaster is critical and something we can plan for, by preparing our employees,” he said.

Few can relate to that sentiment better than Dr. Gustave Sison, chief of psychology service and the Employee Assistance Program coordinator at the Biloxi VA Medical Center.

“We talk with our people and help prepare them emotionally by providing them with coping techniques, relaxation techniques and individual counseling,” said Sison. They provide lots of information about how to prepare for a hurricane, too, through Web postings, brochures, and as part of making rounds.

With memories of Katrina still fresh, Sison notes there are “increased anxieties [among the staff], but there’s a certain resilience, too.” When the next storm hits the Gulf Coast, Katrina survivors will likely see a spike in their anxiety level, he said. But that increased anxiety is tempered by the knowledge that they are unlikely to experience another storm of the same magnitude.

“Our vulnerability is also our strength,” he said.
Are veterans of the 2005 Gulf Coast hurricanes any more vulnerable this year? According to Alexander and Sison, yes and no.

“We have folks still in trailers or temporary housing, so we need to have adequate shelter for them,” Alexander said. At the same time, the entire VA South Central Health Care Network (VISN 16) is more prepared, and more likely to err on the side of caution if another storm should hit the Gulf Coast.

“Communication’ is always the number one thing people say we didn’t do well enough,” said Brannigan, “and really, it’s one of the most critical roles we play. We have to know what the on-scene conditions are and we must have the ability to communicate to our people in the field.”

He notes that every facility has an emergency response plan and it is constantly being updated, tested and improved. These plans are truly ‘living documents,’” he said.

But plans only go so far. Training people, through table-top exercises or full-scale mock disaster drills, is critical. Doing—not just reading about—how to prepare for an emergency is what helps most.

“Awareness is half the game,” Brannigan said. “Once people are aware, we start to build a ‘culture of preparedness,’ which in turn helps others prepare.”

At the Miami VA Healthcare System, public affairs officer Susan Ward, a veteran of 1992’s Hurricane Andrew, has prepared information for employees and veterans to help them prior to hurricane season, and before, during and after a hurricane.

“We’ve developed brochures on disaster preparedness, generator safety, safeguarding your valuables, even how employees can properly insure their homes,” Ward said. But as the facility public affairs officer, she also works with each service at the hospital to get important operational status information to local and state emergency managers.

“Through the relationships we’ve developed with the federal, state and local governments, and our community partner hospitals, we are able to use their emergency broadcast capabilities to communicate to our veterans and staff,” Ward said.

The VA Sunshine Healthcare Network (VISN 8) in Bay Pines, Fla., has prepared employee and family preparedness handbooks that are posted on the network’s Intranet site. There are links to policies, plans, and telephone hotlines; to FEMA and the Red Cross; even to radar and satellite imagery.

In addition, VISN 8 has instituted a toll-free “Tel-Care” phone line that is activated around-the-clock in emergencies. Veterans, staff members, families and media representatives can call the number for current information on facility closings or alternate reporting sites. If the Lake City, Fla., campus of the North Florida/South Georgia Veterans Health System, where the system is based, is incapacitated, the “Tel-Care” phone line rolls over to VISN 3 staff in Bronx, N.Y.

There’s one catch, though. In major hurricanes like Andrew or Katrina, phone service is, for the most part, knocked out.

To remedy that, satellite phones are being purchased for each facility in Florida and Puerto Rico. Satellite phones are “almost a sure thing,” said Miami-based area emergency manager Frank Maldonado.

“The mobile van (a mobile health clinic owned by Veterans of America of Florida and staffed by VA health care professionals) has satellite phone capabilities and it was dispatched to Biloxi after Katrina,” Maldonado said. “The beauty of satellite is that it provided not only voice and data capability, but also connected us to VistA and CPRS (the computerized patient records system).”

After Katrina, VA was recognized for its ability to access patient records electronically—records that might otherwise have been destroyed.

“VA is so rich in resources, with our doctors, nurses, lab techs, pharmacists,” Maldonado said, “and we are so prevalent in so many places that we reach into virtually every community. We are a potent force to provide assistance.”

Some Hurricane-related Web Resources

- National Hurricane Center’s Tropical Prediction Center: www.nhc.noaa.gov/index.shtml
- VA’s Emergency Management Strategic Healthcare Group: www1.va.gov/emshg
- American Red Cross: www.redcross.org
- Salvation Army: www.salvationarmyusa.org/usn/www_usn.nsf
- VISN 8 Emergency Preparedness (Intranet only): vaww.v08.med.va.gov

By Tom Thomas
With a thunderous roar, more than 300 veterans on motorcycles—many with the American flag flying—rolled through the hills of northern Georgia and onto the grounds of the Georgia National Cemetery in Canton on June 4. Once there, they joined 400 other veterans, dignitaries, citizens and invited guests to witness the dedication of VA’s 123rd national cemetery.

“We are gathered in a shrine to the measure of bravery in this field of immortality,” said VA Secretary Jim Nicholson, keynote speaker for the ceremony. “We who are here should feel humbled to dedicate to the memories of the men and women who stood for freedom in war and those who stood in peace with that uniform on willing to be engaged in war and all to whom we owe an eternal debt of gratitude.”

The 775-acre site was donated to VA by the late Scott Hudgens, an Atlanta World War II veteran, land developer and philanthropist who had envisioned a tribute to veterans similar to the American cemetery in Normandy, France. The new cemetery is located in Cherokee County, about 40 miles north of Atlanta, and is administered by VA. Nearly 400,000 veterans and their families live within 75 miles of the national cemetery and, if eligible, could request to be buried on the hilltop overlooking the Etowah River.

William F. Tuerk, Under Secretary for Memorial Affairs, on hand for the dedication, talked about VA’s historic mission.

“The opportunity to provide and maintain memorials to the service of veterans is a sacred trust,” Tuerk said. “VA continues a proud legacy of establishing national cemeteries—some dating back to 1862—which stand in tribute to the sons and daughters of every generation who have answered the call of service.”

The new cemetery’s director, Sandy Beckley, has been serving veterans since 1972. She firmly believes she works for the greatest Americans—veterans and their families.

“It is a privilege for me to take part in building this national shrine,” Beckley said. “This cemetery is a beautiful final resting place for Georgia’s veterans.”

Burials began in April within an

Left to right: Pete Wheeler, commissioner of the Georgia Department of Veterans Affairs; Cole Hudgens, son of land donor Scott Hudgens; Jackie Hudgens, widow of Scott Hudgens; and VA Secretary Jim Nicholson were on hand to celebrate the dedication of the new cemetery.
Finding the graves of more than 3 million veterans and dependents buried in national cemeteries is now even easier thanks to a new map feature added to the gravesite locator available online since April 2004.

Someone looking for a gravesite can now go to gravelocator.cem.va.gov, enter the veteran’s name to search, click on the burial location link, and a map of the national cemetery is displayed, showing the section where the grave is located. These maps of burial sections can be printed from home computers and at national cemetery kiosks.

In a related development, the cemeteries in which 1.9 million veterans have been buried with VA grave markers have been added to the database. These are mostly private cemeteries. This addition brings the number of graves recorded in the locator to approximately 5 million. Those with maps are in VA national cemeteries, state veterans cemeteries, and Arlington National Cemetery for burials since 1999.

Beyond the 5 million records now available, approximately 1,000 new records are being added to the online database each day. The exact locations of veterans’ gravesites in the remaining state veterans cemeteries will also be added.

By Jurita Barber
When Pat Lane first met Bill Taylor, a Vietnam veteran living on the streets, he had one pair of clothing to his name, and had not been able to read small print for more than a decade.

“I knew I needed glasses, but I didn’t have the money,” said Taylor. “Thanks to Pat I got my glasses.”

Lane is a social worker in the Health Care for Homeless Veterans Program at the Baltimore VA Medical Center, one of five pilot sites across the country for a project called Restored Vision for Homeless Veterans. The project was created by VA’s Community Homelessness Assessment, Local Education and Networking Groups (CHALENG) through the VA Center for Faith-Based and Community Initiatives to provide glasses for homeless veterans who would not normally qualify for VA eyewear.

The Restored Vision program engages faith-based and community organizations so that outside organizations provide funds or vouchers to cover the cost of eyewear and eye exams. The majority of the sites maintain a partnership with local franchises of LensCrafters, a national optometry company that offers free or reduced-price glasses through its “Gift of Sight” charity program, supported by community organizations such as Lions Club International.

VA homeless program coordinators say that obtaining eyeglasses is a problem for homeless veterans that can keep them on the streets. Ac-
cording to Allison Haberfield, homeless program coordinator at the Asheville, N.C., VA Medical Center, 98 percent of those registering with VA’s homeless programs report vision problems. And eyeglasses aren’t cheap; a pair can run up to $600 for those with serious eye problems.

Lane’s program in Baltimore fits glasses for homeless veterans with sight problems ranging from far-sightedness to glaucoma. Formerly homeless veteran Gary Bracey suffers from vision problems related to high blood pressure. He knew he needed glasses for the past eight years, but just recently received them thanks to the Restored Vision program. His new glasses allow him to use the computer he needs for school and work.

“Glasses are essential to getting off the streets,” said Jim McGuire, Ph.D., the VA program manager for homelessness prevention based in Los Angeles. CHALENG pilot site homeless coordinators agree: homeless veterans with vision problems need glasses to read newspapers, street signs, and fill out forms or write resumes. They need glasses to work on computers at school or on the job. They need glasses to socialize and recognize the faces of people they meet.

McGuire and Craig Burnett, Ed.D., Project CHALENG coordinator, started planning the Restored Vision program in May 2005 when the VA Center for Faith-Based and Community Initiatives asked homeless programs to think of new ways to engage outside faith-based and community organizations to help VA serve veterans. Over the course of a year five programs began at VA medical centers in Baltimore, Asheville, Ft. Harrison, Mont., Jackson, Miss., and the Central Iowa Health Care System in Des Moines.

Each pilot program is tailored by the five homeless program coordinators to work within the unique environments of their communities.

Pam Mann, of the Ft. Harrison VA Medical Center, contacted “multiple, multiple outside organizations” to fund the program. The Restored Vision fund in Montana has provided glasses to 10 veterans. Mann’s only complaint? That she can’t travel more to raise funds. “I’m a one-person office and out here everything is hours and hours away,” she said.

Paul Maten, of the Jackson VA Medical Center, raved about his VA optometry department’s ability to fit in unscheduled eye exams for homeless veterans. Because homeless vets often maintain transient schedules, it is important that exams, fittings and follow-up move as quickly as possible.

Charles Sherwood, ophthalmologist at the Jackson VAMC, receives pages from Maten while he’s in surgery or another appointment and often schedules eye exams directly afterwards. Sherwood praises this direct communication. “Instead of going through computers, [Maten] picks up the phone and pages me. … You get a fuller picture of what the patient needs when you communicate directly.”

Lane’s version of the program in Baltimore runs a little differently. When approached with the pilot program, Lane contacted the Maryland Society for Sight, which agreed to donate 10 pairs of glasses per month. Sherry Rose, the adult services coordinator for the society, visits the VA medical center to fit veterans for glasses on the last Thursday of every month. On average, the Baltimore VAMC has provided eight homeless veterans with glasses each month since the program started in February.

The Baltimore program’s success rests on Lane’s careful coordination with all parties involved—VA, veterans and the community. “When I was approached about the project and looked at the need to collaborate with outside as well as internal resources, I was hesitant,” she said. “After reaching out to the community, I was pleasantly surprised with the willingness of everyone to come together and work as a team.”

The Baltimore Restored Vision program is dynamic and growing. Lane hopes to expand the program to non-homeless veterans who do not qualify for eyeglasses under VA’s optometry policy. Ellen Mathes of the Central Iowa Health Care System hopes to increase her faith-based contacts through her VA medical center’s chaplain. Haberfield is working to expand her funding from outside faith-based and community organizations.

Nationally, McGuire hopes the success of the pilot sites will offer models for other VA medical centers to follow. He says that the enthusiasm of individual homeless program coordinators will remain the most important component of the project. “One thing I’ve learned is that these folks are very dedicated to their homeless population,” said McGuire.

Formerly homeless veterans Taylor, Bracey and Clarence Christion in Baltimore had high praise for the program and for Lane herself. “This homeless program Pat’s got helped us out a great deal,” said Christion. “It helped us get established back into society. … We got a couple of angels here in VA.”

That’s what Darin Selnick, director of VA’s Center for Faith-Based and Community Initiatives, is looking for every day—a few angels in VA and in the community willing to work together in innovative ways to meet veterans’ needs.

“These Restored Vision pilot programs are just the beginning,” he said. “The program will grow because there’s a real need and there are dedicated people within VA and in our communities who can make great things happen. They just need encouragement and a little support.”

By Rachel Scheer
Wrapping Up the Diamond Jubilee

VA’s yearlong celebration of its 75th anniversary concludes with a pair of events held in Washington, D.C.

The conclusion of VA’s yearlong celebration of its 75th anniversary was marked with two back-to-back ceremonies in Washington, D.C., on July 18 and 19.

VA employees gathered in the G.V. “Sonny” Montgomery Veterans Conference Center in VA Central Office July 18 to enjoy cake, lemonade and fellowship during an employee appreciation celebration. Secretary Jim Nicholson praised VA employees who come to work each day committed to “making a difference in the lives of veterans who have made a difference for us,” noting that the quality of its workforce is what defines VA as an organization.

Nicholson recognized two members of that workforce: one of VA’s longest-serving employees and one of its newest employees. Marilyn Twombly, a program specialist in the Office of Management, has been with VA for more than 39 years. Yvonne Stone, a management analyst with the Office of Asset Enterprise Management, has a lot of catching up to do—she joined VA six days before.

“VA has been good to me,” Twombly said. “I find the work challenging and it is so great to help veterans, at least in some capacity.”

Veterans and their family members, members of Congress, representatives of veterans service organizations, and VA employees assembled in the Rotunda of the U.S. Capitol July 19 for special services marking the close of the anniversary observance.

Surrounded by statues of American heroes and artwork recounting the discovery and founding of this nation, Edward F. Lawton of Fairfax, Va., sat quietly in his wheelchair looking through the program, waiting for the ceremony to begin.

“I don’t know of any other country that serves its veterans as America does,” Lawton said. “I’m honored to be here.”

He served in the Air Force from 1971 to 1993, retiring with the rank of captain. Lawton is 100 percent disabled and now serves in a voluntary capacity as the national liaison for the...
American Military Retirees Association.

Wearing the distinctive gold uniform and garrison cap of the Gold Star Wives of America, Edith G. Smith of Springfield, Va., mingled with other VSO representatives as the U.S. Army Band began to play the prelude music.

Smith said she joined the organization after her husband’s death from heart disease in 1998 because she saw the need to help other widows “through the maze of legislative issues” concerning survivor benefits.

Her husband served in the Marine Corps from 1950 to 1980, retiring with the rank of lieutenant colonel. Today Smith monitors a chat room for widows of service members killed in Iraq and Afghanistan. She answers their questions about legislation and survivor benefits. When Smith can’t answer their questions she turns to VA employee Diane Fuller, assistant director for veterans services in the Veterans Benefits Administration, for advice.

House Veterans’ Affairs Committee Chairman Steve Buyer (R-Ind.), offered the welcome and introductory remarks. He said today’s VA provides “what some say is the best medical care in the United States.”

Buyer noted that servicemembers fighting the global war on terror are “our newest veterans” and some are leaving the theater of operations with “horrific” injuries. He said these veterans are receiving “state of the art” medical care through VA and thanked the members of the Senate and House for their leadership in funding VA’s four Polytrauma Rehabilitation Centers. These centers were designed to meet the complex rehabilitation needs of severely injured servicemembers returning from Iraq and Afghanistan. They provide specialized treatment and expanded clinical expertise in polytrauma and blast-related injuries.

Senate Veterans’ Affairs Committee Chairman Larry Craig (R-Idaho), congratulated VA on winning the prestigious Innovations in American Government Award from Harvard University in recognition of VA’s electronic health records system. (See story on page 24 of this issue.) He related a personal experience he had about a month ago receiving a demonstration of a unique prosthetic device developed by VA. Craig said he slipped the device over his arm, thought about what he wanted to do, and the hand began to react, allowing him to pick up a glass of water with the device.

“That’s Veterans Affairs research at its best,” he said.

Nicholson said that while he is proud that Harvard honored VA with the award from more than 1,000 entries, and Business Week magazine recently named VA the best health care provider in America, he takes the most pride in the fact that “we are taking good care of our veterans.”

Nicholson said that over the portal of many VA hospitals is inscribed the phrase: “Enter here to witness the price of freedom.” In his travels to visit veterans wounded in Iraq and Afghanistan, Nicholson said he always asks how he can help them. Time and time again, the injured soldiers ask him, “Sir, can you help me get back to my unit?” He said this unselfish fighting spirit speaks volumes about the character and commitment of the nation’s warriors.

“The VA’s noble mission is to honor our veterans’ sacrifices and to dignify the cause they served, by serving them,” Nicholson said.

House Minority Leader Nancy Pelosi (D-Calif.), said that America must honor its promise to veterans that they have taken care of its citizens and the nation will take care of its veterans.

During a recent visit to troops stationed in the Persian Gulf, Pelosi said every question she fielded from...
The ceremony in the Capitol Rotunda drew veterans and their family members, members of Congress, veterans service organization representatives and VA employees. Right: “I don’t know of any other country that serves its veterans as America does. I’m honored to be here,” said Edward Lawton (in wheelchair), national liaison for the American Military Retirees Association. Below: Edith Smith (far left), a member of Gold Star Wives of America, helps widows of servicemembers killed in Iraq and Afghanistan.

the troops seemed to be along the same vein: how would they be treated when they came home?

In times of war, Pelosi said soldiers pledge that they will leave no one behind on the battlefield. “As a nation, it must be our pledge to leave no veteran behind.”

Sen. Ted Stevens (R-Alaska) noted that it has been nearly 60 years since he returned from the fighting in World War II and praised VA for continuing to honor its promise to today’s veterans stationed in some of the most dangerous places in the world. “For 75 years, your department has ensured that our veterans have gotten the square deal that they deserve,” Stevens said.

Speaker of the House Dennis Hastert (R-Ill.) wrapped up the ceremony by recognizing the most senior veteran in the audience. Navy veteran Lloyd Brown, age 104, served in World War I. Today he lives alone in his own home in Charlotte Hall, Md.

Following the ceremony, a number of veterans stood in line waiting to speak to Nicholson and shake his hand. One of them was Army Sgt. Steven Allen of Thawville, Ill. Allen has been undergoing surgeries and physical therapy at Walter Reed Army Medical Center in Washington, D.C., for the past 14 months after losing his right arm in an Improvised Explosive Device explosion. The 23-year-old had been stationed at Al Asad Air Base in Iraq providing gun truck escorts for convoys.

Allen said he attended the ceremony to support veterans, adding, “There are plenty of us around.”

By Renee McElveen
The Search for Our World War I Veterans

They are a vanishing breed. Time is running out to find and recognize the last remaining veterans of ‘The Great War.’

In a voice as strong as men 30 years younger, Frank Buckles, a spry 105-year-old, describes his personal experiences with a sense of pride and, at the same time, wonderment. His story isn’t wonder, though—it’s fact.

He sailed on the ship that rescued survivors of the Titanic. He met the famous World War I General John “Black Jack” Pershing. He was an ambulance driver and a motorcyclist. At age 16, he became a veteran of World War I, the “War to End All Wars.”

In the war after that, he was a POW.

“I’ve always been independent,” Buckles said. “And as a boy of 16, I was anxious to get to France.” The lad from Harrison County, Mo., made it to France. And he made it home. Now, he’s one of 17 known American veterans of World War I who are still living.

The rolls of World War I veterans have declined so rapidly that the day is fast approaching when there will be one remaining, then none. VA, with assistance from historians, state agencies and others, is keeping a roster of those veterans.

One key player helping keep track of them is William Everett, an independent radio producer in South Padre Island, Texas.

Everett, a World War I aficionado, is producing for National Public Radio a two-hour special on World War I veterans that will air this Veterans Day. Hosted by Walter Cronkite, the “WWI Living History Project” will feature interviews with Buckles and other veterans of “The Great War.”

“World War I is such an under-appreciated American conflict,” Everett said. It’s his mission to “tell the story through their experiences, but honor them in the process.” But with only 17 known veterans, it is difficult to capture their experiences.

His task is to conduct interviews with as many veterans—and their family members—as possible. “It’s like a jigsaw puzzle scattered around the country, but there are only 17 pieces...
left. And only three of those can talk about their experiences in trench warfare. There are no aviators left,” no one who can describe firsthand what the early days of aviation warfare were like.

Everett’s quest to track down World War I veterans began about three years ago, when he learned there were only about 250 remaining. His research eventually led him to VA resources; namely, VA’s Office of Public Affairs and its director of media products, Chris Scheer.

“I have attempted to develop a definitive list of living World War I veterans for VA purposes,” Scheer said. He exchanged names “within privacy limits” with Everett and another researcher, author Richard Rubin, to help generate a “final wave of awareness and interest in our quest to develop a list of living World War I veterans” and to attract the interest of those in the veterans community who will “work with us to identify those veterans.”

And from there, it took off. Everett’s detective work was ratcheted up significantly last November, when the idea of the radio special gelled. Using the Internet and contacting other WWI buffs and writers, he began connecting with veterans and their families.

One of them is California’s last WWI veteran—George Johnson, 112, who is one of Everett’s favorites.

Then there’s Samuel Goldberg, 106. “He’s a healthy, vigorous man,” Everett recalled. A member of the U.S. Horse Cavalry during WWI, Goldberg lives in Rhode Island.

“I’m looking for everyday life experiences—not war heroes—to help make their experiences relatable to today’s listener,” Everett said. But the bad food, monotony and military discipline of a century gone by are probably just as meaningful to today’s troops.

Rubin, who has interviewed 34 WWI veterans for his book, Last of the Doughboys, talked about the importance of honoring all veterans and acknowledged that Americans have tried hard to recognize Vietnam and Korean War veterans in the last 20 years or so. But he notes there is still time to honor those veterans; with WWI veterans, “time is running out,” he said.

“It’s like a jigsaw puzzle scattered around the country, but there are only 17 pieces left.”

Everett believes there may be other WWI veterans out there, perhaps in private nursing homes or in the care of family members. If they didn’t receive VA benefits or weren’t featured in local news coverage, that possibility exists. Scheer wants VA employees to be aware that the search continues for information about any remaining WWI veterans and that information can be relayed to him in VA headquarters.

“I’ll bet there’s more out there,” Scheer said.

Indeed there may be. If you know of any remaining WWI veterans, notify your facility’s public affairs officer or contact Chris Scheer at the Office of Public Affairs in VA Central Office, at (202) 273-5730.

By Tom Thomas
Privacy & Security Awareness Week
June 26-30

Clockwise from top left: Secretary Nicholson stopped by to check out the booth in the lobby of VA Central Office;

The week’s activities at the Waco, Texas, VA Regional Office included a special sequence check and folder reconciliation, here performed by George “Gunny” Jimenez, files team coach at the regional office;

Maggie Laustrup, left, and Shirley Blair, registered nurses at the Harry S. Truman Memorial Veterans’ Hospital in Columbia, Mo., display materials they received when the Information Security Awareness Team visited their patient care unit;

“Men in Black” took over the lobby of the Dayton, Ohio, VA Medical Center to spread the theme Keep Information Safe and Secure (K.I.S.S.). Left to right: Willie Payton, administrative intern; Joe Battle, associate director; and Cory Cookson, information security officer;

Birmingham, Ala., VA Medical Center employees Alverna Hudson (left), patient care services, and Devin Harris, cancer care coordinator, view an exhibit during the facility’s IT Privacy and Security Awareness Fair held June 28 and 29.
VA Takes Home Prestigious Award for Government Innovations

VA's groundbreaking electronic health records system received top honors July 10 from Harvard University and the Council for Excellence in Government. The prestigious Innovations in American Government Award specifically recognizes VA's development and use of the Veterans Health Information Systems and Technology Architecture (VistA).

"This is a proud day for us," VA Secretary Jim Nicholson said at a news conference announcing the award in VA Central Office. "This award tells the American people what millions of veterans and their families have known for years—that VA provides world-class health care in a professional, compassionate and high-tech environment."

During the news conference, Nicholson, VA Under Secretary for Health Dr. Jonathan Perlin, and Washington, D.C., VA Medical Center Chief of Staff Dr. Ross Fletcher spoke about the electronic health records system and how it has transformed VA's health care system.

VA was the only award winner in the Health and Education category, and it is the second time in five years the department has received the prestigious Innovations Award. In 2001, VA was recognized by the Ash Institute in the same category for its National Center for Patient Safety, a program that radically reduced preventable medical errors by using "root cause analyses."


"This program's decentralized, flexible approach has made our veterans the recipients of the highest quality, lowest cost medical care in the country," said Nicholson. "This program's decentralized, flexible approach has made our veterans the recipients of the highest quality, lowest cost medical care in the country," he said.

VistA was first introduced in 1996. It provides all needed information at the point-of-care and it can work with off-the-shelf software and products so that the program can be tailored to the needs of different facilities.

More information about VistA and the Innovations Award is available at www.va.gov/innovations.
VA Honored for Role in Online Service to Help Katrina Evacuees

Employees accepting the Pinnacle Award for VA included (left to right): Dr. Jennifer Delozier, physician, Altoona, Pa., VA Medical Center; Dr. Robert Lynch, director, VA South Central Health Care Network (VISN 16); Linda Fischetti, management analyst, VHA Office of Information; William Feeley, Deputy Under Secretary for Health for Operations and Management; Stephanie Patt, VHA privacy officer; Dan Bruneau, director, VHA Office of Communications Management; and David McDaniel, privacy specialist, VHA Office of Information.

VA was among the organizations honored recently for their role in creating an online service to ensure that evacuees of Hurricane Katrina received life-saving medications. The American Pharmacists Association Foundation presented their 2006 Pinnacle Award in the Government Agencies/Non-profit Organizations Category to the group on June 13 in Washington, D.C.

The online service, KatrinaHealth.org, provided authorized health professionals access to evacuees’ medication information, allowing them to renew prescriptions, prescribe new medications and coordinate care. The data and prescription information for the service was made available from a variety of government and commercial sources. Sources included electronic databases from community pharmacies, government health insurance programs such as Medicaid, private insurers, and pharmacy benefits managers in the states most affected by the storm.

Other organizations recognized in the group award included the American Medical Association, Informed Decisions LLC, the Markle Foundation and SureScripts. The American Pharmacists Association Foundation established the Pinnacle Awards in 1998 to celebrate significant contributions to the medication use process.

Under Secretary for Health Perlin Returns to Private Sector

VA Under Secretary for Health Dr. Jonathan Perlin, who led the Department’s health care transformation since 2004, resigned effective Aug. 11 to take a private sector position.

“Jon Perlin’s dedicated service to our nation’s veterans is evidenced by the fact that VA’s health care is now widely recognized as a model for safety, efficiency, effectiveness and compassion,” VA Secretary Jim Nicholson said. “He has been an invaluable part of my senior leadership team. The skill, knowledge and leadership he brought to VA will be sorely missed. I wish him the best in this new endeavor.”

Perlin, who has held several positions with VA since 1999, is accepting a position as chief medical officer and senior vice president for quality at HCA, a Nashville-based health care provider.

“I thank the President and the Secretary for the tremendous opportunity I’ve had to serve America’s veterans,” Perlin said. “I am deeply humbled by our heroes’ sacrifices on behalf of our nation, and I am forever grateful to the thousands of men and women at VA who serve our privileged mission of caring for veterans.

“I am also proud that I will leave VA better than it was and with veterans receiving better care than ever before,” he added.

Under Perlin’s leadership, VA’s health care has received numerous accolades for innovation and continues to outperform the private sector in quality, safety and customer satisfaction.

Coming Soon! New Personal Identification and Verification (PIV) Cards are coming soon. Look for more information about this program in the next issue of VAnguard. In the meantime, check out the following sites: www.va.gov/PIVproject (Intranet) and www.va.gov/PIVproject (Internet).
VA, Nationals Team Up for a Major League Salute to Veterans

VA and the Washington Nationals teamed up for a major league salute to veterans on Flag Day. June 14 was “Veterans Appreciation Day” at RFK Stadium, where the Nationals hosted the Colorado Rockies. The evening’s festivities included a pre-game ceremony featuring a military fly-over, a performance by the United States Marine Drum and Bugle Corps, veterans service organization color guards, ceremonial first pitches by VA Secretary Jim Nicholson and other veterans, and a display of veterans’ photos on the ballpark’s Jumbotron. Discounted tickets were available for veterans and VA employees.

In addition to honoring veterans, the event was also an opportunity to better inform attendees about the department’s array of benefits for eligible veterans, with VA officials staffing information booths at the stadium to provide benefits information.

“We are excited to be able to salute American veterans,” said Nationals President Tony Tavares. “The Washington Nationals baseball club is honored to be able to say thank you to the heroes who have served our country.”

DAV Names Deputy Secretary Disabled Veteran of the Year

Citing his quarter-century of advocacy for all veterans and dedication to improving the lives of those injured during military service, the Disabled American Veterans (DAV) named VA Deputy Secretary Gordon H. Mansfield their Disabled Veteran of the Year.

Mansfield received DAV’s top honor Aug. 12 at the group’s national convention in Chicago. DAV has 1.3 million members.

Mansfield was shot and suffered a spinal injury during the Tet Offensive of February 1968. His decorations include the Distinguished Service Cross, Bronze Star and two Purple Hearts. During his recovery, he earned a law degree from the University of Miami and began legal practice in Ocala, Fla., where he helped found a DAV chapter in Marion County.

In 1981, he accepted the first of several positions with the Paralyzed Veterans of America (PVA), eventually serving as the group’s executive director from 1993 to 2001. His time with PVA was interrupted by a four-year tour as assistant secretary for fair housing and equal opportunity at the Department of Housing and Urban Development.

Mansfield was instrumental in elevating VA to a cabinet-level department, creating the U.S. Court of Veterans Appeals and passing the Americans with Disabilities Act.

“Gordon Mansfield overcame his disability and turned it into strength,” said DAV National Commander Paul W. Jackson. “He is a person of determination who has become a powerful advocate for his fellow veterans. Each day, his achievements mean better lives for disabled veterans and their families.”
Jay Fondren

If a film were made about Jay Fondren’s young life, the opening scene might be a public event where a handsome American hero—body battered but spirit strengthened by faith, family, patriotism and love for his fellow soldier—brings a crowd to tears, then to their feet, inspired by his courage and fortitude.

Flashback to his nine months in Baghdad where, beginning in March 2004, Army Sgt. Jay Fondren led a front-line combat observation laser team, directing close air support and conducting reconnaissance and security operations. When bad weather grounded Medevac helicopter flights, this unit of the 10th Cavalry's Charlie Troop escorted medical corps personnel out to wounded G.I.s, before evacuating all of them back to the Green Zone.

In that time, Fondren had lost two comrades to sniper and roadside bomb attacks. “Over there, the mentality wasn’t if you were going to get hurt, but when and how bad,” he told the Waco Tribune-Herald. Then, on the day before Thanksgiving 2004, a roadside bomb shredded his patrol vehicle.

What Fondren remembers of the attack and its aftermath—the mad dash across Baghdad, his legless body strapped to the hood of a Humvee—is mercifully cloudy. Still at the site were two injured comrades, as well as two Iraqi civilians killed in the blast. His last memories before blacking out were of doctors yelling, “Hang in there!” as they cut off his two-year-old wedding ring and the rest of his tattered uniform.

Eighteen days later, Fondren awoke at Walter Reed Army Medical Center in Washington, D.C. At his bedside was his wife Anne. His parents and a sister were also there, all flown in by the Army. His room was filled with cards and flowers from friends in his boyhood home of Corsicana, Texas. Micah, his 6-month-old son, was at home with relatives.

Recuperation from the devastating injuries was slow but steady. Along with the loss of his legs, Fondren, 26, suffered wounds and nerve damage to his right arm and hand. After nine months of what he describes as “exceptional care” at Walter Reed, he came home to Killeen, Texas.

Prior to his deployment to Iraq, Fondren's career was on a fast track to warrant officer. He'd been promoted to staff sergeant a month before he was wounded. Ultimately, he hoped to fly helicopters and make a career of the military. Now, though he had been asked to stay in the Army after sustaining his injuries, he felt that it was time to get out. He considered going back to school for his teaching degree, but had yet to make any firm decisions.

The rest of Fondren's Army unit returned from Iraq in March 2005. While attending a memorial service for his fallen comrades, he was invited by a VA representative to speak about his wartime and separation experiences at Veterans Appreciation Day ceremonies at the Waco VA Regional Office. “We were immediately impressed with Jay’s alertness, capability and positive attitude,” said Waco VARO director Carl Lowe. As a result, Fondren was asked if he'd be interested in applying for a position as a veterans service representative there.

“The offer came at a time when my wife was getting real tired of me,” Fondren recalled. “She said, ‘You’ve got to figure out what you want to do. Now hop to it.’ From their description of the job, I knew it would be something I’d enjoy doing, helping these guys go through what I went through.”

It was a whirlwind time of change. Anne gave birth to their second child, William, two days before Fondren took the job at the Waco VARO, in March 2006. The first few months involved on-the-job-training, including claims processing, veterans correspondence, and scheduling medical verification exams, all using real cases from the office files.

Lowe reports that Fondren is “sincerely committed to serving veterans effectively” and that his training is progressing very well.

“I like working at VA,” Fondren says. “Everything is new. Learning it all is the biggest challenge. Hopefully, I’ll have an impact by helping to identify problem areas and streamline operations. I want to make sure these [returning veterans] get what they need and are taken care of.”

By Robert Turtil
The Costs of Excessive Teenage Drinking

The costs of early heavy drinking for teenagers appear to extend far beyond the time drinking takes away from homework, dating, and the related tasks of growing up, according to researchers at the Durham, N.C., VA Medical Center and Duke University.

Mounting research suggests that alcohol causes more damage to the developing brains of teenagers than was previously thought, injuring them significantly more than it does adult brains.

In 1995, researchers placed delicate sensors inside living brain slices from adolescent rats and discovered that alcohol drastically suppressed the activity of specific chemical receptors in the hippocampus region.

Normally, these receptors allow calcium to enter neurons, setting off a cascade of changes that help create repeated connections between cells, aiding in the efficient formation of new memories. But at the equivalent of one or two alcoholic drinks, the receptors’ activity slowed, and at higher doses, they shut down almost entirely. The researchers, led by Dr. Scott Swartzwelder, a neuropsychologist at the Durham VAMC and Duke, found that the suppressive effect was significantly stronger in adolescent rat brain cells than in the brain cells of adult rats.

Valley Fever at Record Levels in Arizona

Reported cases of valley fever are at record levels in Arizona, according to an article in the June edition of Emerging Infectious Diseases. As of the end of April, 2,305 cases of the infection had been reported in Arizona, four times the five-year average for the January to April time period and more than 85 percent of the state’s five-year average of 2,732 cases per year.

Dr. Lisa Valdivia and her colleagues at the Valley Fever Center for Excellence at the Southern Arizona VA Health Care System and the University of Arizona College of Medicine report that valley fever, or coccidioidomycosis (coccici), is the culprit in approximately one of every three patients who are treated for what their doctors think is a community-acquired pneumonia. Most of these patients are treated with antibiotics, as if they had a bacterial infection, even though valley fever is caused by a fungus and does not respond to drugs directed at bacteria.

The fungus lives in the soil of certain areas in the Southwest, Mexico and other regions of the western hemisphere. Most infections cause respiratory symptoms such as cough, chest pain and shortness of breath. Other frequent symptoms include muscle and joint pain, skin rashes, weight loss, and unusually intense fatigue. These symptoms can last from weeks to many months but usually go away whether or not drug therapy is given.

A small proportion of infections leads to much more serious complications, including progressively severe pneumonia. The fungus also may travel through the bloodstream from the lungs to other parts of the body such as the skin, the bones or the brain.

While the cases of valley fever reported in Arizona in recent years have numbered less than 4,000 infections annually, other epidemiologic estimates have suggested that this is only one-tenth of the actual number.

How frequently valley fever actually causes a medically important illness has long been a source of uncertainty based upon previously available information, said Dr. John Galgiani, director of the Valley Fever Center for Excellence.

Can Curry Reduce Risk of Alzheimer’s?

Intriguing studies suggest older adults from India may have a reduced risk for Alzheimer’s, and investigators at VA’s Sepulveda, Calif., Geriatric Research Education and Clinical Center (GRECC) think they know why.

Greg M. Cole, Ph.D., and Sally Frautschy, Ph.D., focus on dietary factors that fight inflammation in the brain and reduce beta-amyloid accumulation. Curry, widely used in Indian cuisine, is one such anti-inflammatory. Its active ingredient, curcumin, gives curry its yellow color, and in a recent study, Cole, Frautschy and colleagues showed that the substance reduced brain amyloid in mice and improved other disease-related factors.

A pilot trial is now underway to determine whether curcumin can do the same in Alzheimer’s.

The Sepulveda GRECC team is also looking into the protective potential of omega-3 fatty acids—“good” fats essential for the health of neurons and nerve synapses that fall prey to Alzheimer’s. Epidemiological studies associate consumption of omega-3 fatty acids found in fatty fish like salmon with reduced Alzheimer’s risk. The work of Cole and Frautschy showed that withholding omega-3 impaired memory in mice, while its supplementation preserved memory and reduced brain amyloid levels.
Magnet recognition for Portland

Stilt walkers perform as members of the March Fourth Marching Band help Portland VAMC employees celebrate the news that the medical center was awarded Magnet status.

The Portland, Ore., VA Medical Center has joined an elite group of only 3 percent of the nation’s hospitals by being named a nursing Magnet facility. Magnet designation recognizes facilities that provide the very best nursing care and encourage an environment where nurses perform quality work. The Portland VAMC is the third VA medical center to receive this recognition, joining Tampa and Houston.

Leo P. Morgan has received the Silver Helmet Award from AMVETS. The award, a replica of a World War II helmet, is the highest honor given by AMVETS and was presented to Morgan in recognition of his volunteerism at the group’s national convention on April 1. Morgan was honored for his “outstanding leadership” at AMVETS Post 19, and for his volunteer work at the Coatesville, Pa., VA Medical Center, where he chairs the Voluntary Service executive committee. In 2004, he was named the Pennsylvania AMVET of the Year.

Rebecca Johnson, a volunteer at the Michael E. DeBakey VA Medical Center in Houston, was recently recognized for her outstanding volunteerism in the greater Houston area by Houston Mayor Bill White. The Mayor’s Volunteer Houston Awards program is an annual citywide volunteer recognition event held in partnership with Volunteer Houston and the mayor’s office. Johnson was one of 13 chosen from more than 100 nominations for her outstanding volunteer work. A disabled Army veteran, Johnson has been an active volunteer at the DeBakey VAMC for the past 14 years, accumulating a total of 3,135 hours of service. She volunteers as a Peer Partner in the Spinal Cord Injury Unit, sharing her experiences as a C4-5 quadriplegic with newly-injured veterans.

Kevin Volpp, M.D., a staff physician and researcher at the Philadelphia VA Medical Center and assistant professor of medicine at the University of Pennsylvania, received the Outstanding Junior Investigator of the Year Award in Los Angeles in April. The award recognizes Society of General Internal Medicine members at the level of assistant professor whose career achievements and body of work have had significant impact on research through sustained and consistent accomplishment. Volpp’s research makes innovative connections between economics and the traditional agenda of general internal medicine investigation, including smoking cessation, hypertension control, resident work hours, racial disparities and health policy.

Arthur Bass, employment coordinator for the New York VA Regional Office, was named Vocational Rehabilitation and Employment (VR&E) Employee of the Year in the employment coordinator category during a May 17 ceremony in St. Louis. Bass was selected for his exceptional contribution to the delivery of vocational rehabilitation and employment services to veterans. He was instrumental in developing the concept of a pre-employment work experience tryout, placing potential VR&E veterans for a short trial at a worksite, allowing veterans the opportunity to check out the job and managers the opportunity to observe the work of these disabled veterans.

Dr. Kent Kirchner, chief of staff at the G.V. (Sonny) Montgomery VA Medical Center in Jackson, Miss., has been named recipient of the 2006 Founder’s Medal from the Southern Society for Clinical Investigation. Kirchner, a nephrologist and internal medicine specialist, oversees the medical center’s active research program that includes about 70 studies. Kirchner’s own research includes studies in diabetes, hypertension, and geriatric physical fitness—all of which are of great interest to veterans as well as the general health care community. This award was created in 1973 as part of the society’s efforts to formally recognize members of the organization who have carried out the mission of advancing medical research and the exchange of knowledge, information and ideas.

Joan Antonaccio, Northport, N.Y., VA Medical Center Guest Services coordinator, was one of only two volunteers in the nation to receive the 2006 Disabled American Veterans (DAV) George H. Seal Memorial Award, at DAV’s national convention in July. This prestigious award honors remarkable volunteers who serve disabled veterans and their families through the VA Voluntary Service (VAVS) program. The award is given in memory of a World War II combat-disabled paratrooper, former DAV director of Membership and Volunteer Services, and leading organizer and administrator of the DAV VAVS program from 1952 until his death in 1977. As Northport’s Guest Services coordinator, Antonaccio personally visits each new admission and presents the veteran with personal care items, a newspaper, and any other small item that will make the inpatient stay more pleasant.

Juan Maldonado, clinical pharmacy specialist with the VA Caribbean Healthcare System in San Juan, has been named president-elect of the Puerto Rico Society of Critical Intensive and Coronary Care Medicine. He will take office in 2008. It is the first time that a non-physician has been elected president of this organization.
The second phase of a unique partnership between VA and the Department of Defense in Illinois to offer health care to veterans, active duty Navy personnel and their family members in a single facility was marked with a dedication ceremony at the North Chicago VA Medical Center on July 10. VA funded a $13 million expansion and renovation of the North Chicago VAMC’s emergency and operating room departments to absorb the shifting of in-patient medical, surgery and emergency services from the Naval Hospital Great Lakes.

The renovated emergency department features specialized areas for pediatrics, OB-GYN, trauma, procedures, orthopedics, and a dedicated radiology suite. Pediatric care will be provided for Navy family members for the first time in a VA facility as a result of this partnership.

The first phase of this project was completed in 2003, when Naval Hospital Great Lakes shifted its inpatient mental health to the North Chicago VAMC. The final phase of the partnership will be a $130 million DoD construction project to include a new federal ambulatory care center co-located with the North Chicago VAMC, and is scheduled for completion in 2010. The partnership model these facilities are creating will be used for future VA/DoD joint ventures.

Civil War soldiers home at last
Six Union soldiers from the Civil War were returned home to Massachusetts 145 years after dying on a battlefield in northern Virginia. The soldiers were buried with full military honors executed by Civil War re-enactors on June 10 at the Massachusetts National Cemetery in Bourne (above).

The soldiers’ remains were discovered in 1997 at a construction site in Centreville, Va. Scientists from the Smithsonian Institution identified the remains as soldiers of the 1st Massachusetts Infantry who were killed on July 18, 1861, during a skirmish known as Blackburn’s Ford. Scientists were unable to establish the identities of the soldiers.

The Massachusetts Sons of Union soldiers arranged for the transfer of the soldiers’ remains to their home state. Like other veterans of the armed forces, the Civil War soldiers were eligible for burial in a VA-maintained national cemetery.

Independence Day concert for heroes
Riverside National Cemetery in California hosted its annual Fourth of July Concert for Heroes for an estimated crowd of 4,000. The concert featured a mix of classical and patriotic music by the Inland Empire/Riverside County Philharmonic fol- lowed by a fireworks display over the amphitheater lake.

The annual event began in 2001 as part of a rededication ceremony for the cemetery’s National Medal of Honor Memorial, when more than two dozen names were added to the memorial. The event has since become a tradition in the community. During this year’s concert, Cemetery Director Gill Gallo welcomed two Medal of Honor recipients: retired Army Col. Lewis Millett and Tibor Rubin, a survivor of Hitler’s concentration camps and a prisoner of war during the Korean War.

Reaching out to returning troops in Arizona
More than 9,000 active duty, National Guard and reserve military personnel have returned to Arizona after serving in Operation Enduring Freedom/Operation Iraqi Freedom. To assist them with a seamless transition from military to civilian life, VA facilities throughout the state—medical centers, regional office, vet centers and national cemeteries—have formed the Arizona OEF/OIF Summit.

Summit members Larry Johnson, of the Tucson Vet Center, and Annette Lavelle, of the Phoenix Vet Center, are OEF/
A ‘golden moment’ in Biloxi

A “golden moment” was created for four patients and their wives by the staff of the VA Gulf Coast Veterans Health Care System in Biloxi, Miss. Staff members transformed the Recreation Hall into a wedding chapel so that the four long-married couples could renew their vows on June 28. Tissue paper wedding bells, silver streamers and white balloons created the backdrop for the ceremony.

A flower girl sprinkled pale pink rose petals down the wedding aisle before the brides walked down the aisle carrying bouquets of white roses. The brides joined their husbands, who were already seated in front of the Rev. Anthony Menz, one of the chaplains at the facility, who conducted the ceremony.

James and Dorothy Musgrove renewed their wedding vows after 36 years of marriage; Fondren and Eva Walsh after 53 years; Albert and Ruby McKinney after 56 years; and Joseph and Lena Barbera after 67 years.

Following the ceremony, photographs were taken of each couple cutting their individual wedding cake. Family members, friends, fellow residents of the Alzheimer’s/Dementia Unit, and staff members toasted the couples with sparkling cider.

Experts were on hand to dispense advice on nutrition and fitness. Participants could also elect to walk one mile to the Columbia City Walks and Merchant Fair, above, where they could get their “passports” stamped at various venues. The event was designed to bring awareness to the public about the growing rates of obesity, diabetes and high blood pressure in America.

The Healthier US/HealthierUS Veterans program with King County Steps to Health was launched May 13 at the VA Puget Sound Health Care System in Seattle. Veterans and local citizens attending the event received free health screenings for diabetes, high blood pressure and cholesterol.

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OIF veterans who are able to provide insight into the needs of returning servicemembers. The goal of the Summit is to enhance communications, review shared services, and provide outreach to servicemembers and their families. The Summit created a One VA package to distribute at outreach events and National Guard and reserve briefings. The package includes information and contact information for all VA facilities and programs in Arizona.

**Beetle Bailey’s ‘Sarge’ signing on for stroke prevention campaign**

Cartoonist Mort Walker, a World War II veteran and creator of the Beetle Bailey comic strip, donated custom cartoons for the VA Stroke Quality Enhancement Research Initiative (QUERI) Center to use as part of an education and prevention project launched in May. The cartoons feature the Beetle Bailey character “Sarge” demonstrating behaviors considered high-risk for stroke, such as eating unhealthy foods and remaining sedentary, as well as some positive behaviors, such as eating fruit and walking.

The colorful posters featuring Walker’s cartoons were displayed during National Stroke Awareness Month in May in waiting areas of selected VA sites in North/Central Florida and Indianapolis, Ind.

**On the road to better health**

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Mark Finch, a social worker in the Alzheimer’s/Dementia Unit, coordinated the logistics for family members attending the event. He said it was “really touching to be able to witness such a joyous event.”

Linda Mitchell, the nurse manager of the unit, said she came up with the idea for the ceremony when the wife of a patient remarked to her that “there are so few golden moments in our golden years, especially when one spouse has Alzheimer’s.” Mitchell said she decided to plan the event with the staff because she thought it would be a good memory for the couples.
National Veterans Wheelchair Games: What It Takes

Ever wonder what it takes to put on the National Veterans Wheelchair Games, an event that draws more than 500 athletes, plus families, friends, officials, staff and volunteers? To get an idea, take a look at these stats from the 26th Games, held July 3-8 in Anchorage, Alaska:

- 18,000 bottles of water
- 2,000 towels
- 27 ramps for loading and unloading wheelchairs on buses (a total of 7,800 feet of ramp)
- 35 buses for transporting athletes and families
- Just under 2,000 Alaskan volunteers (6,000 volunteer shifts, totaling 2,400 hours in shifts; 6,000 meals for volunteers)
- 800 hotel rooms for athletes, families, friends, officials and staff
- 225,000-square-feet of tents
- 57 handcycles
- 30 quad rugby chairs
- 10 40-foot UPS trailers to bring equipment to Alaska
- 20,000-square-feet of warehouse space to store equipment in Anchorage

Orlando Perez, an Army veteran from Orlando, Fla., prepares to take a shot during a basketball game at this year’s National Veterans Wheelchair Games in Anchorage. A native of Puerto Rico, Perez won the Spirit of the Games Award as the most inspirational athlete at last year’s Games in Minneapolis. “The National Veterans Wheelchair Games are life to me,” he says.