



Community gathers to honor Citrus County soldier

Ed Caum

Soldier returns home, hometown hero honored, wounded warrior welcomed. All of these statements hold true as Chief Warrant Officer 2 Romy Camargo was escorted back home by family, friends, Special Forces teammates and fellow bikers to admiring townsfolk and dignitaries Sept. 12.

This hometown hero hales from Crystal River, Fla., where he attended school from third grade to graduation, before joining the Army.

Wounded during a firefight in Afghanistan, Camargo, a 14-year veteran, has fought his way out of a coma and off a full-time respirator. He is now focused on achieving little goals every day as he slowly recovers from a bullet to his upper spine which paralyzed him from the neck down.

"I was with Chief Camargo on the day he was injured," explained Sgt. 1st Class Steven Hill, senior team medic, ODA 7115, 7th Special Forces Group. "We had (intelligence) on a



photos by Ed Caum/PAO

With the help of his wife, Gabriella, Chief Warrant Officer 2 Romy Camargo speaks to a crowd at Black Diamond Country Club in Crystal River, Fla., Sept. 12. Camargo went home for the day via a motorcycle procession and received a Key to the City from Mayor Ronald E. Kitchen Jr.

possible ambush on us in our sector of the a valley in Afghanistan. Chief gave up his seat in the front of the vehicle so a female interpreter would be better protected and took a spot in

the rear. We got in a four-way, high-ground ambush shortly thereafter and I heard a call for all 18Ds (Special Forces Medical Personnel) to get to Chief's vehicle – that he had been hit.

"When I got to him, he had lost color and wasn't breathing," Hill continued. "At first we thought it was a glancing wound, but after closer inspection found it was a through-and-through, with the bullet passing through the C3 (vertebra). I had to immediately establish an airway and immobilize him as we began to egress out of the area."

Camargo requested James A. Haley Veterans' Hospital because of the great strides they were making in

Take proper steps when creating Internet sites

Regional Counsel Office

As a reminder to employees, the use of official equipment (including VA issued e-mail addresses) is restricted and limited for all employees; you should only use your officially assigned VA e-mail for work-related purposes. If in doubt, ask your supervisor for prior approval.

Additionally, an official VA sponsored Web site is another

great tool, but remember to follow proper protocol and all Veterans Health Administration and Veterans Affairs Office of Information and Technology rules and policies. The failure to follow the rules can result in administrative discipline up to and including removal and possible criminal prosecution.

Remember, the use of the James

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On the MOVE at James A. Haley Veterans' Hospital

Kamryn Jaroszewski

We've all been subject to the front pages of magazines while waiting in the checkout line of a grocery store.

We get our purchases lined up neatly on the belt (or, in my case, thrown haphazardly by an over-eager 3-year-old) as the person in front of us gives 47 coupons to the cashier.

A quick scan of the tabloids shows Hollywood's finest in the latest trends – you know, the 'zines we read while eating ice cream lamenting the fact that we'll never have the body of Angelina Jolie/Kate Hudson/Insert your favorite actress here.

Or maybe that's just me.

While waiting for the cashier to begin my order, I read the not-so-Hollywood headlines. One magazine promises me I'll "Lose weight, feel great!" and another says I'll get flatter abs in 15 minutes.

I assure you – I've read these magazines before, and I'm sad to report my abs are still flabstastic. And the "Lose weight, feel great!" headline should really say "Dine on a fillet of cardboard and a side of sawdust while silently cursing everyone eating real food!"

Now that it's finally my turn in line, I toss a bag of M&Ms on the belt. Magazines, schmagazines.

I thought trimming down after having my second child would be easy, especially considering I only gained half as much as I did the first time around.

Instead, I had to buy larger pants for my return to work. "In-between" pants, I told myself. Only temporary. Just a few weeks, right?

Wrong.

I decided when my littlest one was 4 months old that I was at the end of my "I just had a baby" excuse. It was time to do something about my not-so-whittled waistline.

So I picked up the phone and dialed the four hardest numbers I've dialed in a long time: 6-7-1-6. Don't get me wrong – those numbers work just fine on my phone. It was the person at the other end of the line I dreaded. I knew this person was about to pop the cushy little bubble of reality I'd lived in.

I had seen her in the halls before, and I've attended the same birthday parties and office gatherings as her. I'd say something cliché like "she's one tough cookie," but everyone knows she doesn't eat cookies.

Brenda Burdette is a dietary drill sergeant.

Don't let her demeanor fool you – beneath that smile and positive attitude lies a lean, mean, fitness machine. (Lots of emphasis on the "lean, mean" part.) Are you scared



illustration by Kamryn Jaroszewski/Public Affairs

yet? I sure as heck was.

I signed up for the MOVEmployee Program, which aims at bringing a higher level of fitness and nutrition to Haley employees. It's free, it's enlightening and it's been totally worth it.

On my first day, I sat down with Brenda and got my measurements. I wondered if I should bring Kleenex, but decided I could tough it out. I won't lie – it was hard to see a few of those numbers, but it was only a starting point.

We went over some goals, and I agreed to keep a two-week food journal. For me, that was the hardest

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The Director's e-NEWS is published by the Public Affairs Office for employees, volunteers and other hospital staff.

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Internet

from page 1

A. Haley Veterans' Hospital's name and the VA seal or logo are restricted to approved uses only and can result in these actions being taken against you, so if in doubt ask for prior approval.

A private Web site is prohibited

and only a VA-sponsored one is permitted.

If you have any questions, contact Senior Attorney James Kelly at james.kelly2@va.gov.

If you would like more information about having your information on the Tampa Internet, contact Kamryn Jaroszewski at kamryn.jaroszewski@va.gov.

Great Gasparilla!

Pirates piled in to port and grabbed unsuspecting nurses Aug. 19 to celebrate efforts to improve health care for our veterans. James A. Haley Veterans' Hospital, a nursing Magnet hospital, hosted a nationwide conference for other veterans' hospital nursing staffs. They learned how to duplicate best practices and the innovative methods that have allowed the nursing staff here to achieve and maintain the high standard of the Magnet program since 2001. The Magnet Recognition Program® was developed by the American Nurses Credentialing Center (ANCC) to recognize health care organizations that provide the very best in nursing care and uphold the tradition within nursing of professional nursing practice.

Top right: Nurses attending the two-day conference were exposed to the Tampa Bay culture with a Gasparilla float, beads, coins, Flamenco dancers and pirates.

Right: Wounded warriors and their families were also invited to join the festivities followed by an ice cream social.

Below: Pirates took a few minutes to pose with patients Scott Nelson, Jesse Karns and Robert Hayes while attending a nationwide Magnet event hosted by JAHVH.



photos by Ed Caum/Public Affairs

Life in the Fisher House

Finding friendship through tragedy

Kamryn Jaroszewski

They aren't unlike other military families. At the end of a long day, they come home and relax in the TV room.

One cooks, the other cleans. They may pop in a movie or just sit and talk. They finish each other's sentences and are often interrupted by a 2-year-old.

They are married, but not to each other. Instead, Ivonne Thompson and RyAnne Noss are two peas in a pod – that is, if the peas are proud military wives and the pod is the James A. Haley Veterans' Hospital where they now call home.

RyAnne, sitting in a recliner in her husband's hospital room, says she never believed in fairy-tale love until it happened to her. She and Staff Sgt. Scot Noss, an Army Ranger, met in 2001 through mutual friends when she was an undergraduate at Auburn University and he was stationed at Fort Benning, Ga.

"Our first 'unofficial' date was to play pool. Whoever lost had to take the other one to dinner. I actually beat him the first time," she says, emphasizing her victory with a finger-point to her knee.

"He was so mad. He let me win the second time so he could take me out to dinner the next day. We knew from the very beginning that we were meant for each other."

Ivonne also met her husband, Navy Hospital Corpsman 2nd Class Anthony Thompson, through mutual friends. Sitting in an identical recliner, she recalls the story she's likely told hundreds of times.

"His best friend (Mike) was a bartender at a bar that my friends and I used to go to," she says. "One night I was out with a different group

of friends and called Mike and said 'come out with us' and he said, 'I'm hanging out with a buddy of mine.' I said, 'Well, bring him too – the more the merrier.'

He showed up with Anthony and introduced us. Anthony, I think, maybe got in 10 words the entire night. I didn't stop talking the entire time."

"You, not talking?" RyAnne interjects with a look of feigned surprise. The two share a smirk.

After continuing to run in the same circles, Anthony eventually asked for Ivonne's phone number. They had been dating for about a week before he told her he joined the Navy.

"We just spent as much time as we possibly could together and I was the one to drop him off at the recruiter station when he left."

Two women, two new lives, two sets of hopes and dreams. The story of how Ivonne and RyAnne met, however, isn't quite so "storybook."

"RyAnne loves telling this story, by the way," Ivonne says. "Whatever," retorts RyAnne. "I just tell it better. I tell it with more emotion."

"Wait. Rewind for just a



photos courtesy of RyAnne Noss

RyAnne Noss (left) and Ivonne Thompson met in Bethesda, Md., after their husbands were injured while deployed in support of the Global War on Terror.

second," RyAnne says. "We met in 2001 – before 9/11. I used to always make fun of him and say, 'What in the world are you doing being a Ranger and training? What are you training for?' Then 9/11 happened and he was gone within a month. So now I have complete respect for peacetime training.

"Scot was on his eighth deployment when this happened," she says of his helicopter accident Feb. 18, 2007, in Afghanistan. "I'm not going to lie – it didn't surprise me," she says. "I went

Story continued on next page

to Bethesda, Md. (to the National Naval Medical Center) in February of '07; Scot was in ICU for eight weeks. We transferred to Tampa at the end of April and were scheduled to return (to Bethesda) for a cranioplasty. As soon as I got back on to the floor (in Bethesda), an ICU nurse came up to me."

"Wait, pause," Ivonne says as she breaks in. "We were in ICU for five weeks before we got up to 5 East, which is the medical-surgical floor up there."

"We were still in the process of finding out where we were going to go when we left Bethesda. I had people in one ear saying 'go civilian' and people in the other ear saying 'you have to stay with the government for a while.'"

Anthony had been injured on a dismounted patrol April 20, 2007, in Iraq during his second deployment. He was standing on a bridge with

I just kept thinking to myself, 'Honey, you have no clue what you're getting yourself into.'"

– RyAnne Noss

"his Marines" when a roadside bomb exploded.

"One day I just finally reached my breaking point," Ivonne says. "This nurse came up to me and said, 'There is a family you need to meet. The wife is young, just like you. Her husband is similar to Anthony. She's been down to Tampa and she knows about it.'"

"OK, go," she says, pitching the conversation back to RyAnne.

"My sister was there with me for Scot's cranioplasty and she talked to Ivonne in the ICU waiting room. She said to me, 'You've got to meet this wife.' So here's everyone trying to tell us we should meet."

"It was almost like a blind date,"

they say in unison. "Really? Stop it," RyAnne says smiling as Ivonne laughs.

"I remember going up to the "med-surg" floor. I was working on a quilt for Scot and I walked past Ivonne without knowing it was her. I remember seeing her pretty, curly hair and I noticed she was pregnant."

As if on cue, Anthony Thompson Jr. – affectionately called AJ – comes in to the room his dad shares with Scot. He's fighting the beginning of an ear infection and is uncharacteristically cranky. He has been playing with the staff at the nurses' station but has just dropped his juice. He instead settles for a piece of ice on Ivonne's lap and is happy.

"She was talking to someone and said, 'He's localizing to pain and that's a really good sign.'" RyAnne continues. "I'll tell you my heart dropped out of my chest. If she was on the "med-surg" floor and she was still talking about localizing to pain, I knew that her husband had to have been really bad off. I was there two months before her and had already gone through that – being excited because Scot was localizing to pain. I just kept thinking to myself, 'Honey, you have no clue what you're getting yourself into.'"

In fairness, neither did RyAnne. She later recalled bringing Scot's favorite clothing to the hospital thinking he would only be there for a few months before coming home.

The same nurse who had earlier spoken with Ivonne came to RyAnne saying a wife on the floor really needed help and could benefit from meeting RyAnne.

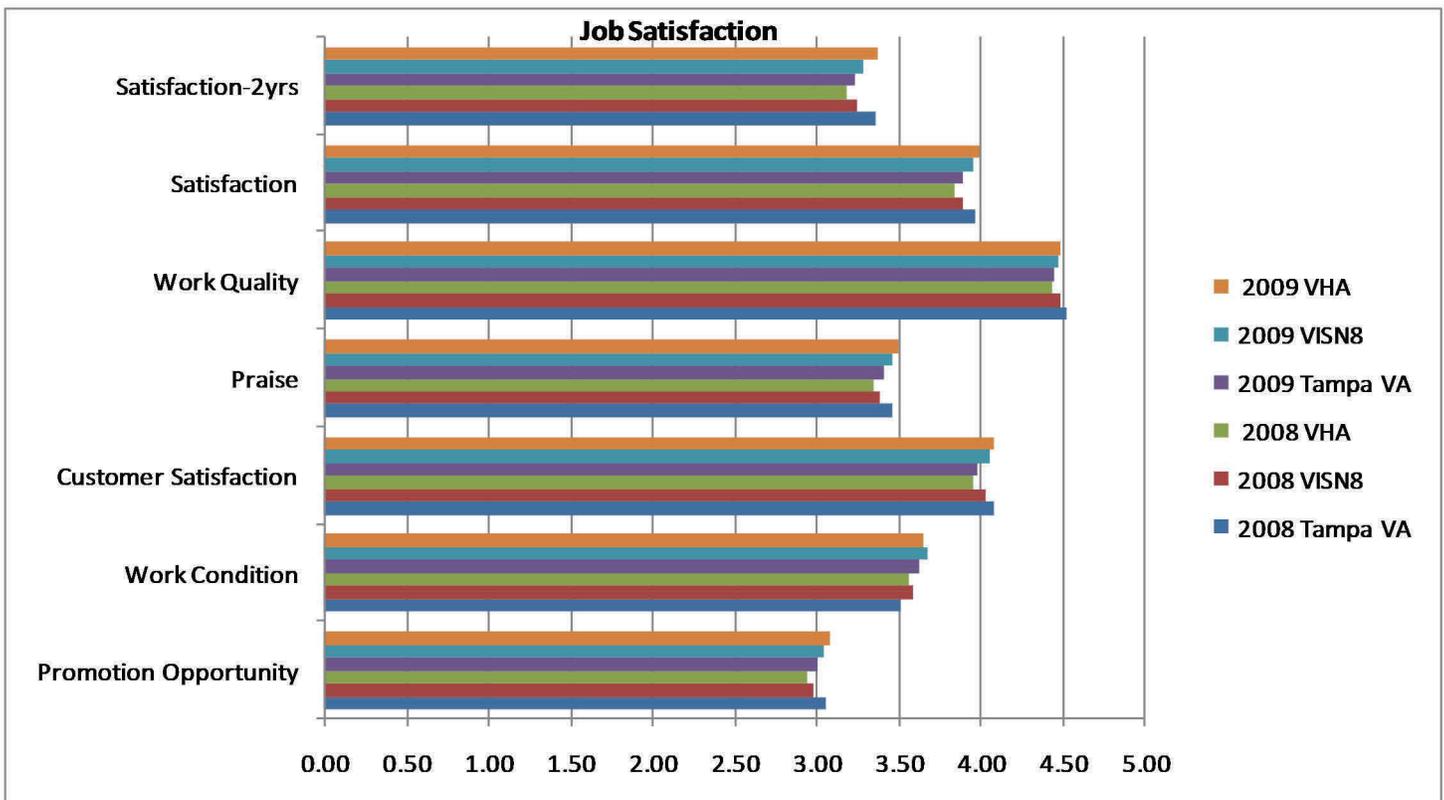
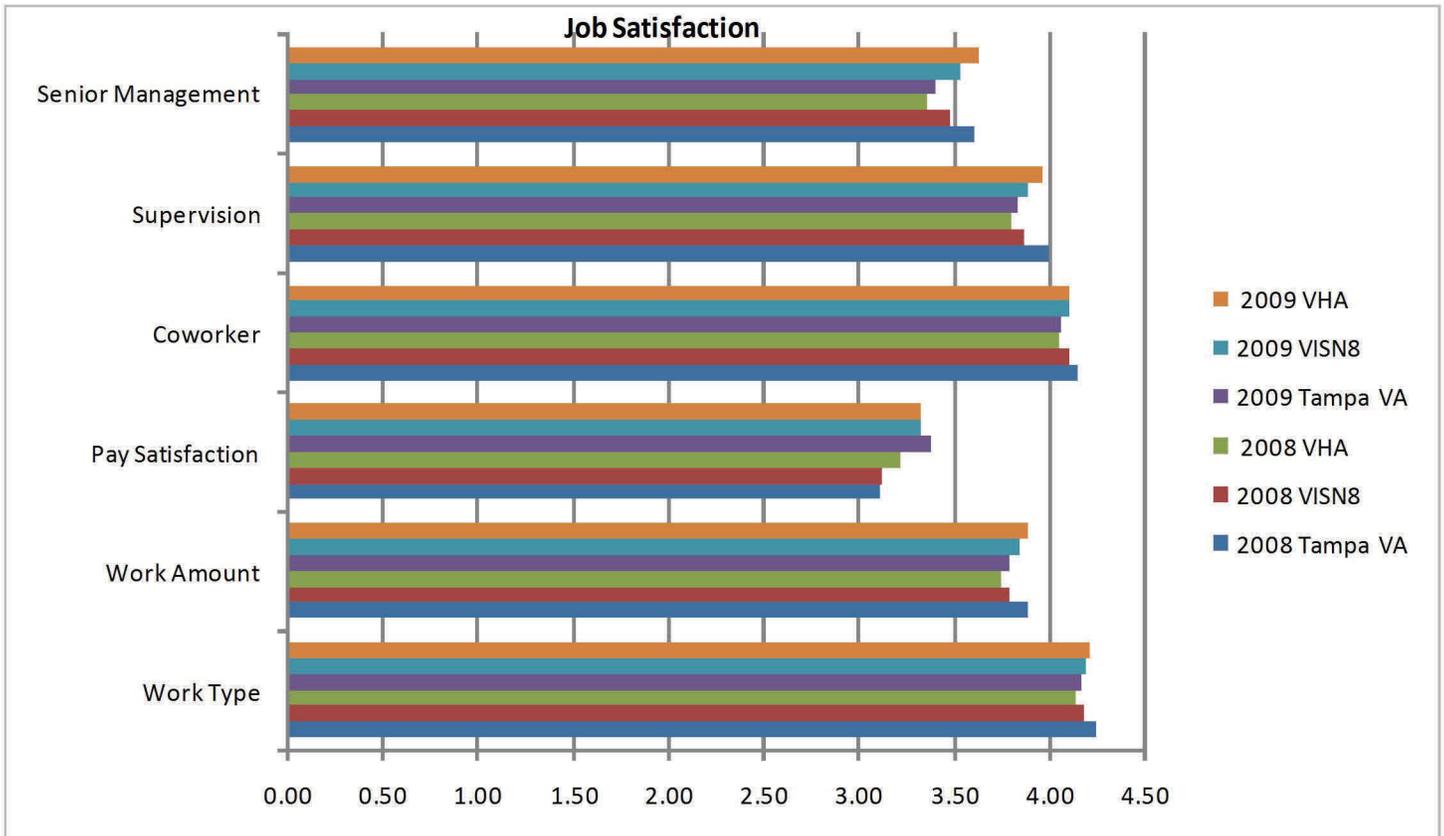


Ivonne and AJ Thompson and RyAnne Noss stand with ThunderBug, the Tampa Bay Lightning mascot, during a hockey game.

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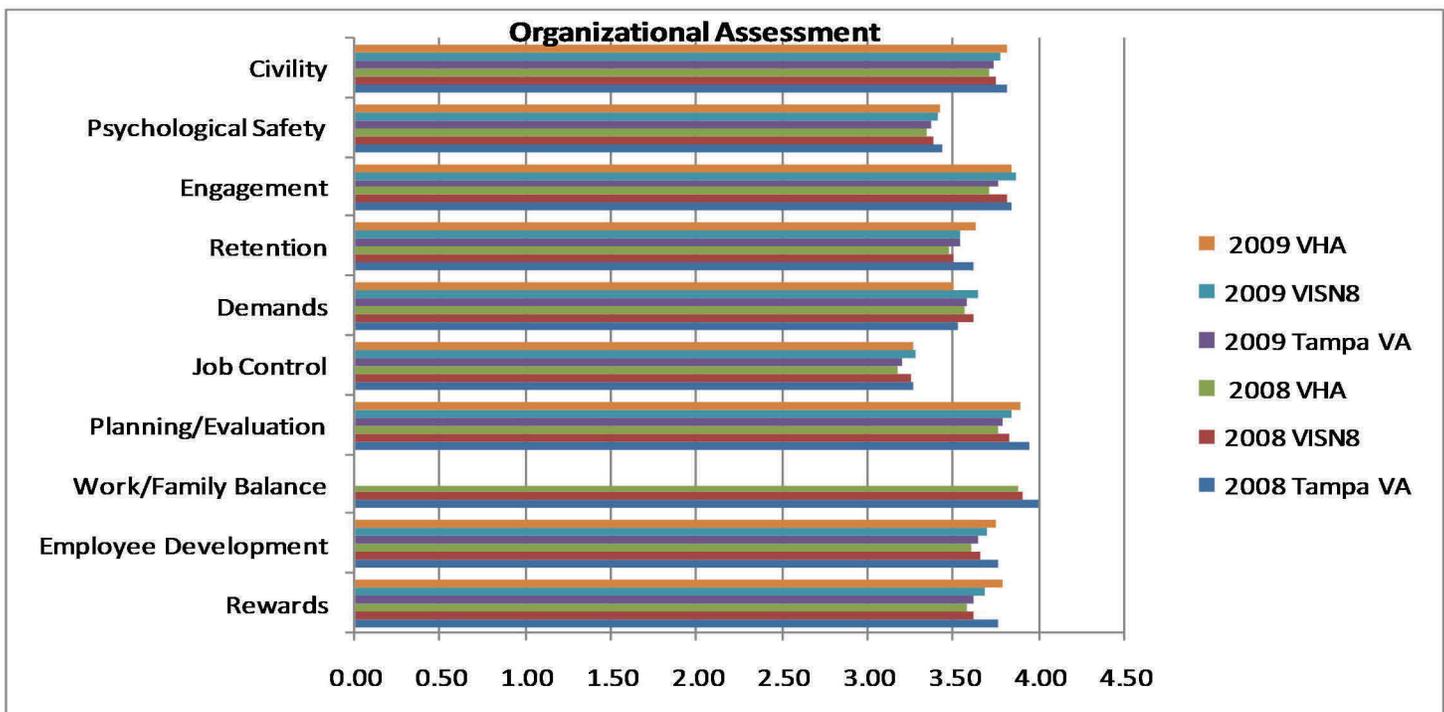
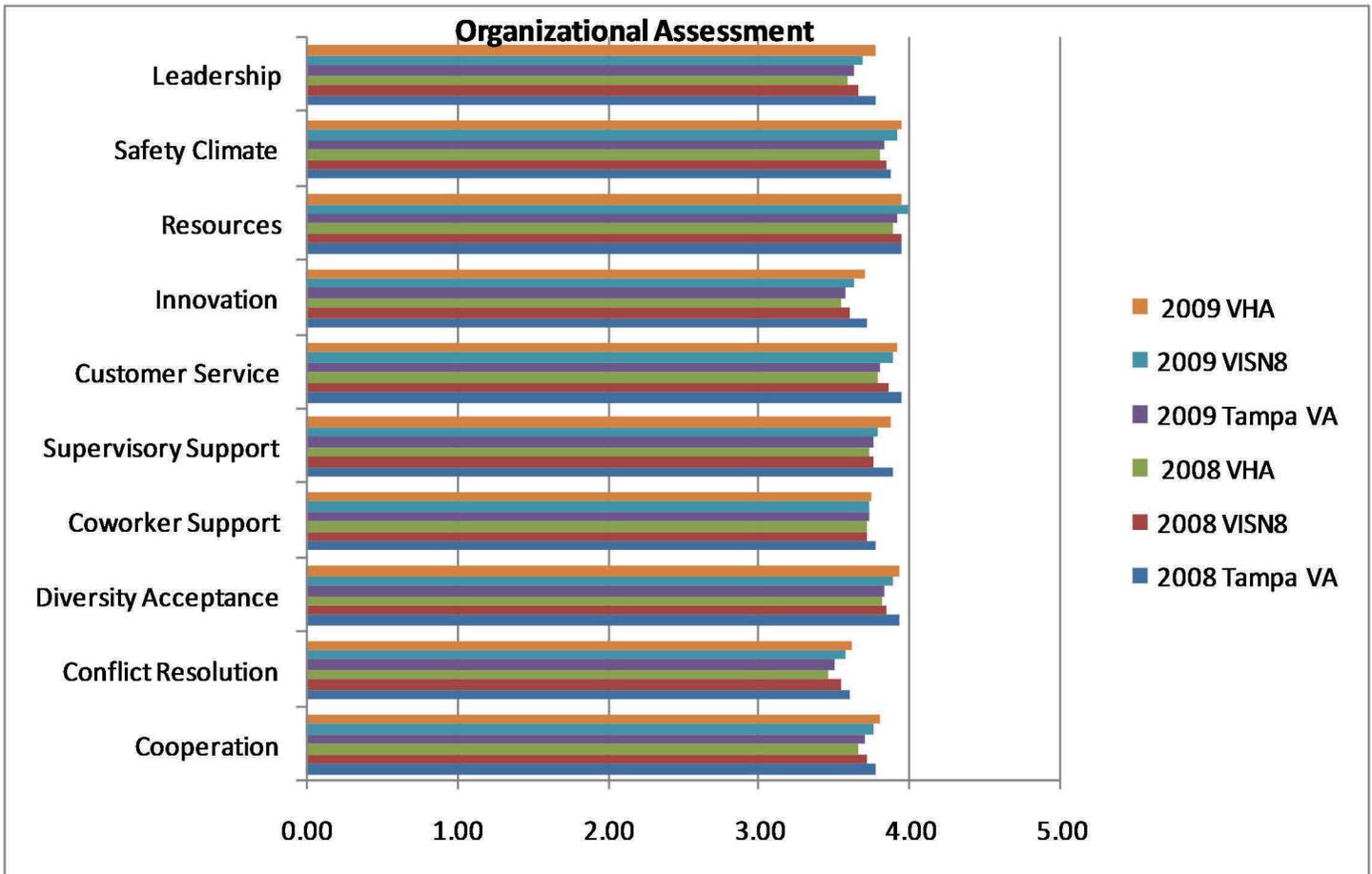
All Employee Survey results – What Tampa employees think ...

In this section, employees were asked questions about their satisfaction with their type and amount of work, pay, opportunities for promotion, working conditions, praise and more.



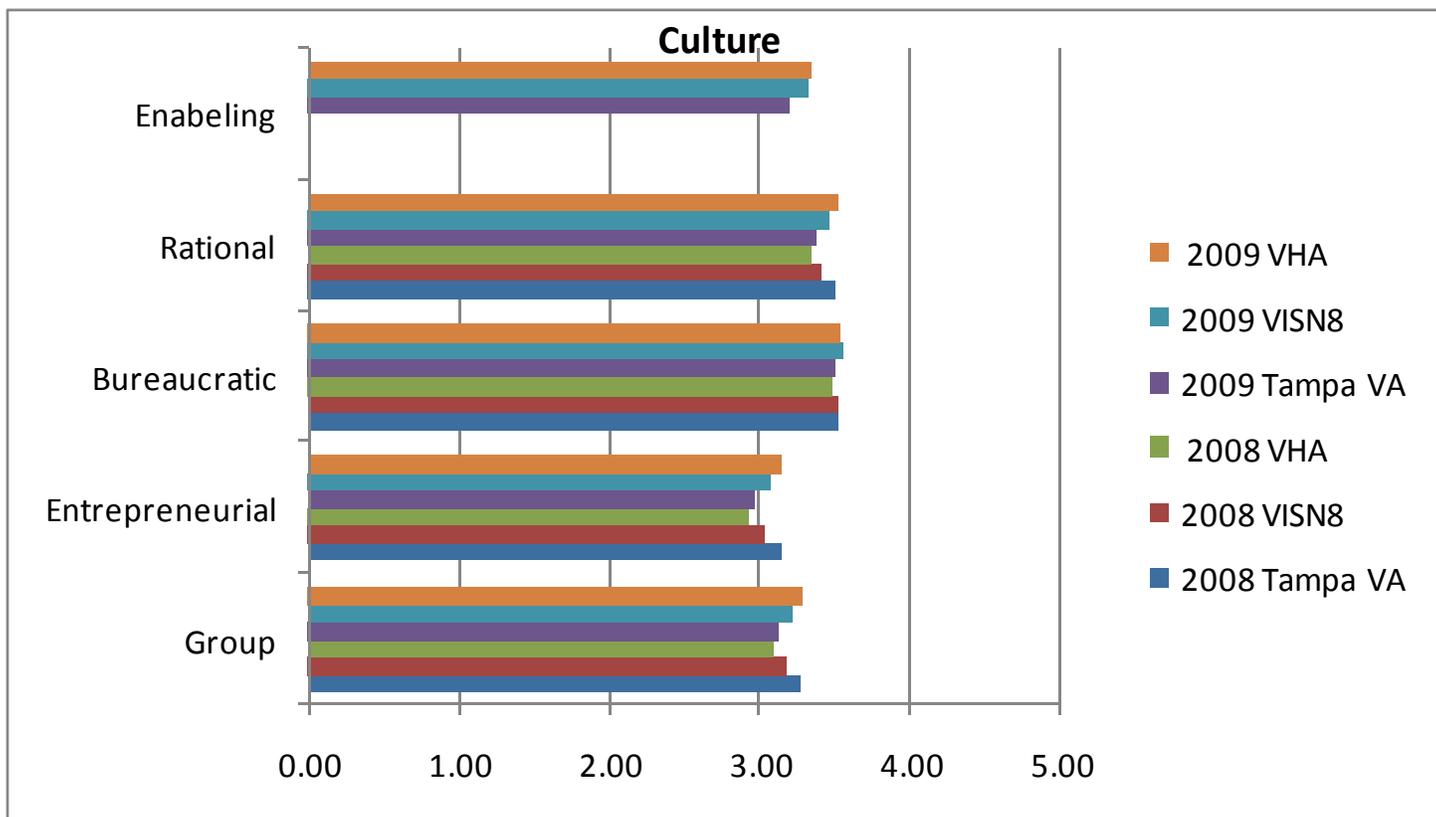
All Employee Survey results – What Tampa employees think ...

In this section, employees were asked questions about their work group, supervisor, goals, respect, spirit of cooperation and teamwork, safety and the VA.



All Employee Survey results – What Tampa employees think ...

In this section, employees were asked questions regarding the facility's character, managers, cohesion, and emphasis.



Actions taken since 2008’s All Employee Survey

In 2008, James A. Haley Veterans’ Hospital leadership implemented the following actions as a result of feedback from the All Employee Survey:

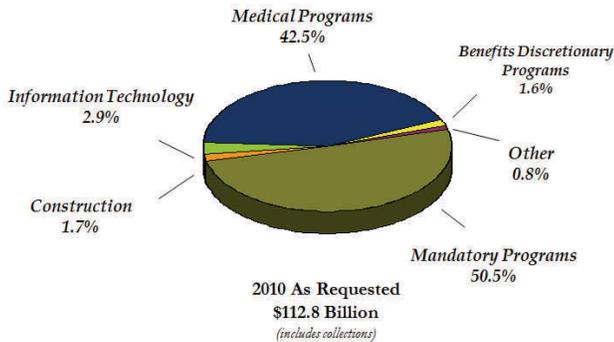
- Developed a New Employee Web site, which will make its live debut soon.
- Improved New Employee Orientation to include national modules.
- Created “On the Spot” cash awards.
- Continued improvements in parking by paving the Freedom and Liberty lots.
- Sponsored a Career Expo for employees.
- Added a Starbucks Coffee Shop in the Main Lobby entrance of the hospital.
- Continued Town Hall meetings and other communication forums.
- Activated several off-site leased spaces for existing clinics to move into. The results were decompression of main facility and expanded and improved physical space in these new buildings.
- Offered additional classes for employee development.
- Added an ATM in the Spinal Cord Injury Center lobby for greater convenience.
- Increased Wellness Works programs at off-site facilities.



file photo

Resource Allocation breakdown

Discretionary Entitlements

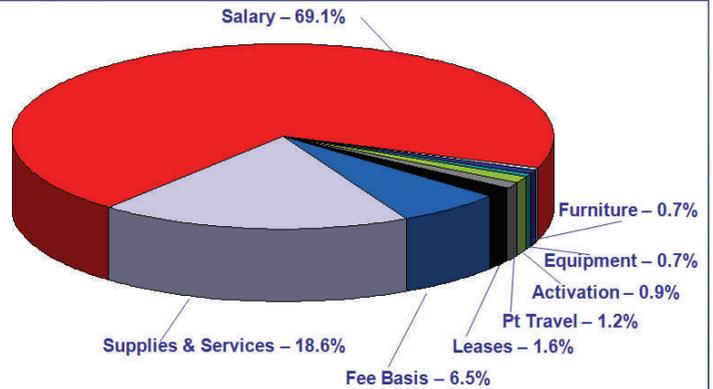


FY 2010 Congressional Request

- Workload is one factor in determining Tampa's budget from the VISN. We have the largest Polytrauma workload of the four sites. Through April 2009, Tampa uniques – the fifth largest in the country – were 91,230. The total number of visits was 1,312,922, and the total Bed Days of Care (BDOC) was 156,071.
- Supplies and services – such as paper products; S, Processing and Distribution; patient meals, etc.
- Fee Basis – non-VA provided care. This is necessary to avoid wait lists, and to provide services not available at JAHVH.
- Leases, Furniture, and Activation – increased over the last year or two and will continue, due to efforts at decompressing the hospital. Activation will also increase as we expand programs.
- Patient Travel – increased due to higher mileage reimbursement rates and a decrease in the deductible.

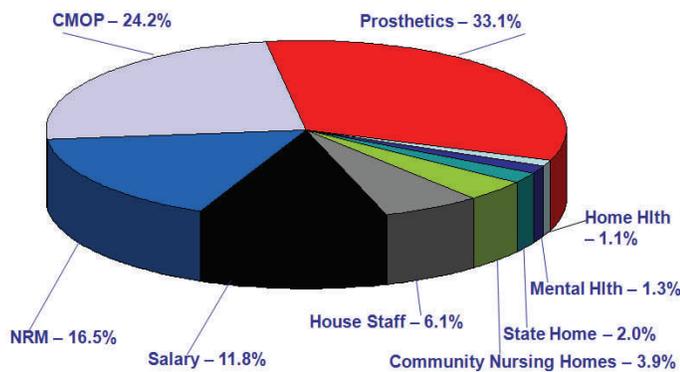
- A \$112.8 billion request currently working its way through Congress. Overall, the Department of Veterans Affairs, including Staff Offices of the Secretary; Veterans Benefits Administration; National Cemetery Administration; and Veterans Health Administration, has a 15 percent increase from Fiscal Year 2009.
- Approximately 10 percent of the increase is for medical programs. Of that, a significant portion is Specific Purpose Funding.
- Construction funds include items such as our parking garage, Polytrauma tower and renovation projects. The application process for construction projects takes several years before funding is approved.
- VHA falls under Medical Programs. The VISN piece of this pie is based on Veterans Equitable Resource Allocation (VERA), which is the credit we get for our patient care workload converted to money. VISN allocates Tampa funds based on a model allowing for increases in certain categories year to year. Examples are increases in complex care, decreases in uniques, etc.

FY 2009 General Purpose Expenses



Total GP Expenses \$560 Million

FY 2009 Specific Purpose Expenses



Total SP Expenses \$153 Million

- These funds are limited to only the purpose for which they were given to Tampa.
- NRM funds are focused on maintaining the structural integrity of the buildings. Much of this funding is focused on correcting Functional Condition Assessment deficiencies rated at 'D' and 'F.'
- Salaries are for those are specifically funded by VISN or VACO program offices such as DES staff.
- House Staff salaries.
- Mental Health funds have increased over the last two years as VA increasingly recognizes psychological affects of trauma as a result of active-duty service.
- CMOP are the pharmacy mail out prescriptions and saves the hospital money by making use of nationally negotiated contracts for drugs, and by gaining efficiencies related to the volume processed.

Friends

from page 4

"I went into her room and right when I saw her, I put two and two together," RyAnne says. The two laugh about their first conversation.

"They told me his name was Anthony, so I asked her, 'How's Tony doing?' She looked at me and said, 'Anthony is doing fine.'"

Ivonne met Scot before his cranioplasty. RyAnne said the look on Ivonne's face was one of pure horror. She knew it was more devastating because their injuries were similar and Scot still looked so injured three months after his accident.

The Nosses later returned to Tampa and the Thompsons went as well. Anthony was admitted to JAHVH July 3, 2007, and was placed in the Spinal Cord Injury Center. In

addition to his traumatic brain injury, he also had damage to his spinal cord.

He was transferred to the 5 North Polytrauma unit after that injury was stabilized and became roommates with Scot.

When they moved to Tampa, RyAnne and Ivonne were staying at a local hotel. On July 9, the two moved into the brand new 21-suite Fisher House just a stone's throw away from the hospital.

As they transition from discussing the beginning of their "long journey" – a phrase they both have heard too much – to the Fisher House, they relax and the smiles come more freely.

"When we moved in, there were only three other families," Ivonne recalls, still rocking AJ. "Things were new, everything was pristine. It was great."

"It was ideal for us to be within

walking distance to our husbands," RyAnne adds. "In five minutes, I could be up in his room. But that's where Ivonne and I started seeing each other every night."

"At the Fisher House, when you get home after being at the hospital all day, it was almost natural that we congregated in the TV room," Ivonne says. "All the different families would sit there and talk about their day. It still happens two years later. You got to know the families really well."

"RyAnne and I were in similar boats. We just clicked all around. It was a blessing that we were both there for each other."

"Most of the families that come down are moms and dads of young soldiers," RyAnne points out. "We stayed with our husbands. With my experience at Bethesda, I saw many wives leave divorce papers. With her," she says, pointing to Ivonne, "I said 'I want to be friends with her and confide in her,' because I already know her character is strong. She's staying with her husband."

Their fast friendship that grew in the long days of hospital rooms and the Fisher Home, as RyAnne calls it, proved to be vital to Ivonne. She gave birth to AJ in September 2007 and within 30 minutes, RyAnne was there holding him.

Ivonne has frequently called her the "baby whisperer" because she has the ability to rock AJ to sleep when no one else can.

"I'm his 'Bubby,'" RyAnne says, smiling. "This is probably the closest thing I'll have to ever having a child. I fill a void in his life because his immediate family isn't here and he fills a void in my heart."

More than just a place to sleep, the Fisher House gave RyAnne and Ivonne an opportunity to forge new, extended family ties with its guests. Holidays, birthdays and anniversaries have been celebrated – with tears and smiles – with people



RyAnne Noss, Ph.D., got a surprise visit from Ivonne and AJ Thompson, who traveled to Alabama this spring to see RyAnne accept her graduation diploma.

Story continued on next page

who truly understand what the other person is experiencing.

“The Fisher House really allowed us to have a normal family life,” RyAnne says. “Every night, Ivonne cooks me dinner. She says it’s nice to cook for two instead of for one.”

“Oh, we’re so the married couple,” Ivonne blurts out.

As the house’s first guests, RyAnne says it’s their home and they respect it – not just the structure itself, but the mission of its founders. They have developed a relationship with the house’s staff, Paula Welenc and Sheila Brewington, and appreciate their open-door policy.

“As the first two guests to check in to our newly opened house, Ivonne and RyAnne are truly ‘plank-holders’ and have come to define what the Tampa Fisher House family is all about,” Paula, the house manager, says. “The bond of sisterhood that’s developed between them is both rare and touching and in fact, is probably as strong – if not stronger – than many biological



In the two years since they’ve been at the Tampa Fisher House, RyAnne Noss and Ivonne Thompson have become lifelong friends.



Despite the seriousness of their reality, Ivonne Thompson (left) and RyAnne Noss are quick to let their fun side shine through.

sisters. I have no doubt the trials and joys they’ve share with each other here will connect them for the rest of their lives.

“In fact, RyAnne’s already told me how excited she is her new house will accommodate both Scot and Anthony’s needs when the Thompsons come to visit. If that’s not a family, I don’t know what is.”

When Scot and Anthony each reached the one-year anniversary of their injuries, they were invited to participate in a research study on minimally conscious patients. Part of the offer was apartments off the JAHVH campus with no out-of-pocket cost to them.

“They said we had a choice – either have an apartment or you can stay at the Fisher House,” RyAnne says. “Right away we chose the Fisher House.”

“I need to be in a place where I can be up here in three minutes if need be,” Ivonne adds. “Was I willing to forego privacy and personal space? Yes. I most definitely was.

Communal living takes a toll, but it’s worth being able to be at my husband’s side at any given moment.”

Because the two haven’t had to worry about where they were going to live or the quality of care their husbands receive, they’ve had an opportunity to focus their efforts on becoming advocates for minimally conscious patients.

In the two years since they moved to Tampa, Ivonne and RyAnne have become subject-matter experts on traumatic brain injuries, able to rattle off each other’s husband’s six-syllable medical conditions like they’re reading from a grocery list.

They have testified in Washington, D.C. and other locations around the country on behalf of every veteran who has been affected by a brain injury.

Also during this time, RyAnne has completed her doctorate in Chemical Engineering. Her family on the 5 North ward and at the Fisher House couldn’t be prouder.

With equal amounts of optimism and trepidation, the wives are now looking toward the future. Each are having adaptive homes built by Homes For Our Troops. The Thompsons will settle in Texas and the Nosses in Alabama. They each look down when discussing what they’ll do the day they move away from each other.

These women, who understand what it’s like to hope for a miracle while dealing with reality, will no longer live under the same roof.

“I’m just not gonna talk about that right now,” RyAnne says. “The idea of going home is very wonderful and very difficult,” Ivonne chimes in, conveniently distracted by a diaper change. “It’s going to be hard.”

For now, it’s life as usual. Days spent with their husbands and nights with the Fisher House family. With all the unknown surrounding them, one thing is certain: there is always home.

MOVE

from page 2

part. It's very humbling to write down every thing you eat.

I was starving. I constantly thought about food. As I ate, my first thought was what I could eat next and when should I eat it.

I realized I quickly started feeling guilty every time I wrote something down in the Food

Journal of Shame. Should I have really eaten that? Was I really hungry?

What will Brenda think?

Dessert was the worst. I suddenly wanted things I never used to eat simply because I knew it was Off Limits.

The Good Brenda on my shoulder would say, "Don't eat that! It's

contaminated!" The Bad Brenda would say...just kidding. There is no Bad Brenda. Just Good Brenda, which sometimes is bad. Or, at the very least, eye-opening.

Fortunately, the first MOVE session I attended was a cooking demonstration and I was able to get some reassurance. I decided I wasn't "dieting," I was merely eating better. Dieting has such a negative connotation to me, so I've banned it from my

vocabulary.

Every Wednesday, my fellow MOVERs meet with the Chief of Choosing Right – some weeks it's in the Education Classroom where she gives us tips on healthy eating.

Other weeks, she cracks her whip at us in the employee gym (did you know we had an employee gym?! It's on the ground floor of the main

hospital).

I don't know how many more workouts I can take; all that encouragement and asking us how we're doing are really getting to me.

Truth be told, the MOVE program has been wonderful. Brenda has been more than helpful in answering all of my questions and she's fostered a feeling of camaraderie among employees who want to increase their level of health.

And the group's results -- physically and mentally -- are pretty amazing.

I'm closer than ever to my weight goal, but more importantly, I *feel* better. I have Brenda's program to thank.

I'm well on my way to reaching my goal. When that happens, I think I'll celebrate with a nice piece of chocolate cake.

Just kidding, Brenda.

I'll celebrate it with a victory lap around the Spinal Cord Injury Center and a new belt.

My old one is too big now.

"I don't know how many more workouts I can take; all that encouragement and asking us how we're doing are really getting to me."

Program aims to teach effects of PTSD to law enforcement

Ed Caum

In an effort to educate local law enforcement on the effect post-traumatic stress disorder has on military personnel who have returned home, Dr. Carri-Ann Gibson, PTSD Trauma Recovery Program director, has put together a team to give presentations throughout the Bay Area to sensitize officers on the street to the complexities of the syndrome.

Veterans from previous and current conflicts volunteered to present their stories and how the disorder has played a part in their lives.

The classes cover an introduction to PTSD and Field Intervention for Police Officers then allow veterans to describe living with the PTSD and offer personal insights into how they

"It's amazing to see the veterans warm up to the law enforcement officers, and, in turn, the officers reciprocate."

deal with the effects daily, particularly in high-stress situations.

These classes give local law enforcement officials additional on-the-job tools if they ever make contact with veterans or their families on the job.

"What I have learned from working with veterans is that if they get to tell their story in a manner were they know it is helping others, it helps to bring closure," Gibson said. "When the police understand the various ways PTSD affects our veterans, and in some cases themselves, they can handle situations they may find themselves in on the street more effectively."

Gibson said the classes are for officers who have received training in crisis situations while serving on Critical Incident Teams and are familiar with negotiating with individuals in stressful situations.

"It's amazing to see the veterans warm up to the law enforcement officers, and, in turn, the officers reciprocate," Gibson said. "People in uniforms of all type understand the discipline and sacrifice of service, so they immediately have common ground. I'm not sure who this program is helping more," she added. "The benefits are felt both with the vets at home and the cops on the street."

Employee veteran learns he's more than just a number

Ed Caum

Hurry up and wait... a familiar phrase to anyone who has served in the military or sat in a waiting room at a doctor's office. As a vet, that case has held true more in visiting my civilian caregivers, not my VA doctors!

What... do I have your attention now? No long lines and extended waiting at the veteran's hospital. That's right, I am proof positive. That doesn't mean some patience isn't required of patients, but as a new employee to Haley and a disabled vet, I have been pleasantly surprised by the warm, friendly environment here when I in-processed went through the steps of getting my team assignment.

Before moving to Tampa, I had experiences waiting for several hours to see my family practitioner and that was after have to wait weeks for an appointment. No, I don't want to complain too much... wait...yes, I do.

Why when I ask for a (or am assigned) a specific time, can a person (the doctor) not keep their appointment with me? If it was work related and a person didn't make a meeting, sales call or deliver services on time they would be fired or lose the business. My last time to a "civilian" (non-VA) doctor was a referral to a specialist.

I waited three weeks for the appointment and then arrived 30 minutes early, as requested, to fill out the appropriate paperwork. I brought a good book with me because I know the drill.

After 45 minutes of waiting past my appointment time and losing the better part of an afternoon at work, I asked the receptionist how much longer it would be and she said, "The doctor is running more than two hours late now and you still have six people in front of you." I was aghast. I explained I had to take a couple

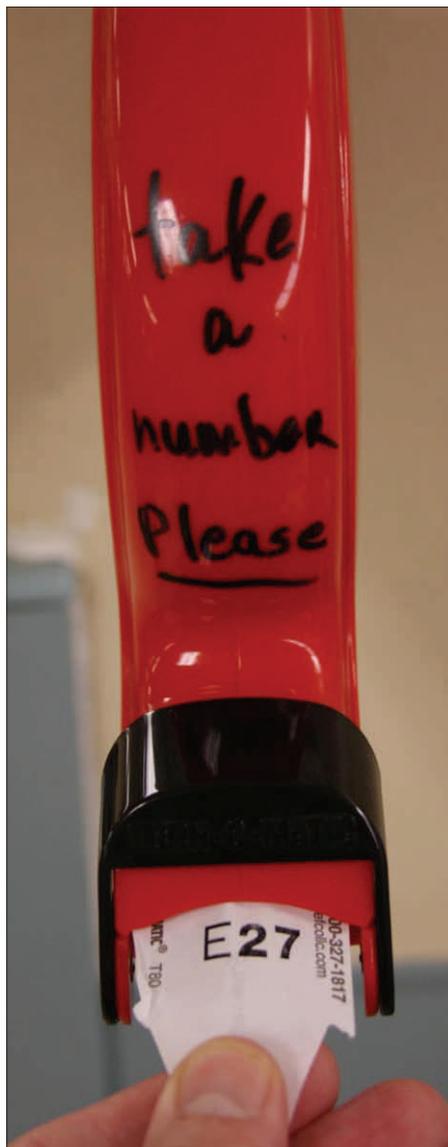


photo illustration by Ed Caum/Public Affairs

hours off work to make this appointment and now I was going to have to wait longer.

My words were a little sharp. She apologized and pointed out other people who had been waiting longer. "That's supposed to help," I roared! "Maybe I'll just bill the doctor for the time I have to wait for him. Then I can get seen at no cost!"

She explained I could reschedule, but there was no way he could see me until he had seen those in front of me.

It was now three in the afternoon and she thought it would be after five

when I would finally get in. Fuming now, I said, "Thank you," in a clipped tone, "and please tell the doctor he is fired!" and left.

I made my next appointment at the VA hospital in Louisville, Ky., and had an experience that was OK, but it involved some waiting and having to reshuffle some appointments. But nothing like my hometown experience.

Let it also be said I had to drive an hour to Louisville for my first appointment and then 30 minutes to each visit at the clinic near me. Still, the drive and the wait were not near as bad as my "civilian" sector experience over the last six years.

It had gotten so bad I just didn't go to the doctor – I didn't want to "waste" the time. Not smart for a man a year away from 50.

Then I came here to the James A. Haley Veterans' Hospital. Now this is refreshing. I went to my orientation and had all the paperwork completed and was assigned to Bravo Team in two hours.

The orientation was scheduled for all morning, but it didn't take that long. Everything ran smoothly. I was treated with respect and had my questions answered immediately every step of the way.

A week later, I received a card in the mail with my appointment time with the team. Lo and behold, it was a day I would be out of town, back in Indiana for my son's football game. I called and rescheduled it the following week, no problem.

I wanted to share with you the timeline for my Bravo Team visit. It may not be the same as others who visit Haley have experienced, but from the people I spoke to around me it seemed par for the course.

I arrived at 6:55 a.m. for my lab work set for 7 a.m. and pulled my number like everyone else in the

Number

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waiting room. I didn't bring a book this time. I spoke with a number of the vets around me about the service here and they were very complimentary about it. I hoped they weren't padding the case because I had a tie on...

At 7:35, they called my number and whisked me in and out of the lab (to include the mandatory pit stop in the bathroom with the specimen jar). I was out of there in 10 minutes and on my way to EKG.

At 7:42, I arrived at EKG just around the corner from the lab, grabbed a chair and sat down. At 7:49 I was called by a cheery employee who took me straight to her office and hooked me right up to the machine.

I passed the time with her chatting pleasantly (except when the tape was running) and was done in seven minutes. (I still say hi to her in the hallway when I see and she is always delightfully bubbly.)

Now back to the Front Lobby to

wait for an LPN, its 7:57. My appointment with the Bravo Team was supposed to be a 9 a.m.

But I had completed the preliminaries, so I grabbed a cup of coffee from Starbucks, chatted with some more folks in the lobby and then signed in at 8:20 a.m. and passed my folder to the front desk. The gentleman there said, "You're early, I'll let them know you're here."

At 8:35, an LPN in blue scrubs called my name. Wow, 20 minutes early!!! Maybe not bringing a book was a good omen...

She proceeds to take my stats, review my history, update my file; you know, the usual. She escorts me back to the lobby and explains a nurse will be with me shortly. It's 8:44.

At 8:50, I just went with the Flo... No, really a nurse called my name, and introduced herself to me and her name was Flo.

She proceed to ask a few more clinical questions and then explained to me the many programs offered here at Haley – social work, dietician support and physical therapy were available if needed, among others.

She even pointed out the proactive

MOVEmployee Program (she may have been referring to the 25 extra pounds I carry).

She escorted me back the lobby at 9:04 a.m. and told me that my doctor would be right with me... "Great," I thought, "sure a doctor getting right with me... ha!"

At 9:08, my name was called followed by a warm smile and a firm handshake. "Hello, I'm your Doctor. Call me Sam."

He spent 30 minutes with me, covered my chart, history and asked me what all I needed. He spoke with me about my job and family, updated my prescriptions and told me his door was open to me anytime... No really!

At 9:40, I was headed back to my office. I was so pleasantly surprised at the whole experience I was smiling the whole way back. Now after having work here two months I have found the same atmosphere permeates the whole staff.

Oh, of course, I have come across a few employees' having a bad day and some grumpy patients, but they are the exception, not the rule. I like this whole "the new VA" thing.

I'm not just a number anymore.

Impressive innovation

From left to right: Lea Rashka, Marti Veneman and Laureen Doloresco were named National Office of Nursing Service Innovation Award winners for their work on a nursing electronic hand-off communication tool between the Department of Defense and the Department of Veterans Affairs.



photo by Kamryn Jaroszewski/Public Affairs

Ride

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rehabilitation following spinal cord injuries and with the added benefit of the close proximity to his hometown just an hour north of Tampa.

“When Chief arrived here, he was severely injured,” said Dr. Steven Scott, chief of Physical Medicine and Rehabilitation Service. “He couldn’t move, talk or really do much of anything. Now he can talk, move his head, control his wheelchair with his chin and today is what it’s all about – going home.

“This is what we at the VA do to make it possible for our patients to go home. He’s going home with family to visit friends and neighbors. We understand the importance of going home. Taking care of the whole family is something we know we have to do and are working to get even better at it.”

His brother, Jorge, down from Alaska, lead the motorcycle procession back home on Camargo’s bike,

which had been shipped in from North Carolina for the event.

Camargo rode in his adaptive van trailing more than 150 bikers who braved the wet roads and stinging rain to escort him back home. Friends, family and those he has served with came in from across our nation and from as far away as Venezuela, to include his other brother, Daniel, in from Denmark.

Motorcycle organizations from around Tampa also turned out. Some of the supporters served in the armed forces; others had not. One former warrior made sure he was there to support Camargo.

“I know his teammates,” said Maj. Gen. (Retired) Dave Scott, Air Force Special Operations Command. “I know he loves to ride and he’s having a party today, so we all brought our bikes out to join him and take him home.”

The Para-Commandos jump team from Special Operations Command out of MacDill Air Force Base treated the crowd to a parachuting demonstration with four perfect landings.

The team presented the “jumped” American flag to Camargo at the Black Diamond Golf Course just outside his hometown.

Before an audience of 350 people, Ronald E. Kitchen Jr., mayor of Crystal River, proclaimed Sept. 12 as Romy Camargo Day and gave him the Key to the City. Congresswoman Ginny Brown-Waite presented him a Congressional Resolution passed in his honor.

There many more presentations and speeches from various organizations, but there wasn’t a dry eye in the house when Camargo was finished with his heartfelt thoughts about his wound, his faith, his family and his unit.

Jimmy Linesberry one of Camargo’s friends and a participant in the motorcycle escort summed up the event very well.

“When you become a soldier, you become a part of the biggest fraternity in the world,” he said. “This brotherhood stretches across international boundaries. When one bleeds, we all bleed.”



Above: Chief Warrant Officer 2 Romy Camargo receives his Special Forces flag from retired Lt. Col. Andy Burch, Special Operations Command Para-Commandos team member. Burch took Camargo’s flag from his room and jumped with it Sept. 12.

Left: Jorge Camargo rode his brother’s bike from the James A. Haley Veterans’ Hospital to Crystal River. Jorge traveled from Alaska to take part in the day’s festivities.

Team Tampa attitude shines through during ‘super surgery’

I want to let you know of a phenomenal *Team Tampa* display of teamwork that occurred Aug. 30.

Saturday, hours after finishing an operation for a gangrenous gallbladder, the surgical team was faced with a very unusual situation. We had four surgical emergencies in the Emergency Room, all of which needed urgent attention.

As a single team, we were not sure how we were going to care for all these patients in the time frame that was needed.

As a team, anesthesia, nursing and surgery discussed our options. We considered trying to transfer some patients to another VA or “fee basis” them, but we were concerned that this would not be the best for these very ill patients.

Unanimously, we decided the best course would be to see if we could get a second operating room team. With the support of the OR manager, this effort was set in motion. What followed was truly remarkable.

The Emergency Room physicians realized we were in a bind, offered to help in any way they could. They cared for these patients until we were able to get them to the OR.

The Nursing Officer of the Day quickly mobilized volunteers for the extra nurse/OR tech team and arranged for places to recover these patients.

After consultation with Dr. Malcolm Klein, Chief of Anesthesia, it was decided that all surgeries could go ahead as scheduled.

Anesthesia called in extra help and surgery organized their team and all pitched in to help. From 7 p.m. to 1 a.m., we were able to operate on a patient with dead bowel, one with a necrotizing soft tissue infection and repair two incarcerated hernias. The ICUs collectively mobilized their resources to recover the patients.



photo by Kamryn Jaroszewski/Public Affairs

On completion of the surgeries in the early hours, Dr. Klein took over emergency call from Dr. Paulino Nuñez to allow him some well-deserved sleep.

For those who know how long it takes to set up an OR room, put a patient to sleep, do the operation, wake the patient up and clean the room, this was a phenomenal feat.

The team never rushed, the team never cut corners, and everyone did their respective jobs with an efficient, organized team effort. I never heard one complaint or one note of dismay to be spending their Saturday night caring for these veterans. Instead, all were happy to be of help.

I was proud to be a member of the team. It was a great display of mobilization, triage and teamwork. A special note of recognition should be given to:

- The on-call OR team: Kelly Gallagher and Monique Mastropasqua.
- The OR team that volunteered and came in quickly to help: Latisha Torres and Guadalupe Ortiz.

- The on-call attending anesthesiologist, Paulino Nuñez, and Certified Registered Nurse Anesthetists Elaine Rowley, who not only cared for all the patients on Saturday, but worked the night

before on another emergency case.

- The Certified Registered Nurse Anesthetists who came in: Neil Roeper and Peter Schultz.

• The ER attendings: Edward Gillett, Enrique Cortes-Riera and Raghu Juvvadi.

- The Nursing Officer of the Day: Helen Harris.
- The outstanding staff of Supply, Processing and Distribution, the Intensive Care Units and the other hospital staff who pitched in with a positive attitude to help. Although we cannot name all of you, your assistance and willingness to help was tremendously appreciated!

– Lillian G. Dawes, M.D.
Chief, Surgery Service

“I never heard one complaint or one note of dismay to be spending their Saturday night caring for these veterans.”
