



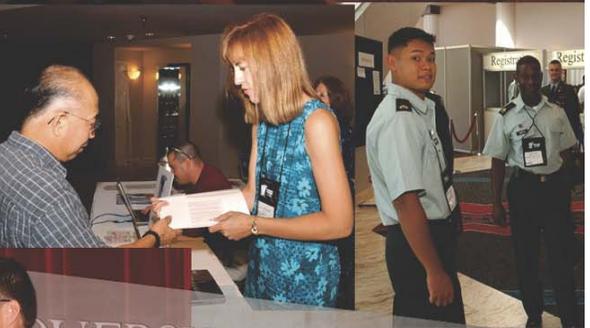
U.S. Army Center for Health Promotion and Preventive Medicine

The Sentinel

FHP CONFERENCE

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Bring Your Child To Work Day 2003

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CHPPM'S ORGANIZATIONAL DAY PICNIC

By: LTC Ronald Smith
Directorate of Health Promotion and Wellness

A warm and sunny day greeted the attendees of the CHPPM Organizational Day on June 27. This year's picnic was held at Maryland Boulevard Park, Aberdeen Proving Ground, Maryland. The last minute location change was prompted by construction work at CAPA Field at the Edgewood area park. Over 350 soldiers, civilians, and family members attended our organization day's activities.

The committee members began set up early in the morning and provided an abundance of food and fun activities. Activities ranged from a monster modified HMMWV to a Moon Bounce. There was tug-of-war, volleyball, bocci ball, horseshoes, and Frisbee football. Displays included a great show by the K-9 demo team, a nostalgic look at classic cars, and the very popular oversized and fun "Humvee". The younger kids enjoyed a variety of games including face painting, Ident-A-Kid, and balloon animals. A DJ provided music as we ate a catered fare of tasty barbeque. The CHPPM family enjoyed the day of getting away from the normal routine of work, and spending time greeting our fellow co-workers, and friends. Thanks to all who attended and made the 2003 Organizational Day a great success. Photos provided by Mildred Martin, Directorate of Laboratory Sciences



(additional photos on back page)

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Commander...BG William T. Bester

Public Affairs Officer...Ann Ham
Editor...Anne Gibson
Assistant Editor...Linda D. Patrick

TECHNOLOGY RUSH

By: LTC Jim Boles and Desmond Bannon
Directorate of Toxicology



In the last few decades, by leaps and bounds and society implementation of new ideas. The By nature humans thrive on new ideas and tools, so long as they do not breach our comfort zone. Subsequently, many of us now expect to see new technologies emerge where we work and play. Outside of gadgets, which get our fleeting attention, there are now a number of newer technologies that have enormous potential in the applied sciences.

technology has advanced now virtually demands technological rush is on.

New Technologies Rush into Our Lives and Workplace.

The technology revolution has changed the way we do things in nearly every aspect of life. Most of us recognize the impact of new technology as a “better mouse trap,” and these improvements cover everything, from wireless digital voice communication, through robotic assembly of automobiles, to DNA fingerprinting. Much of the technological revolution has been driven by the change from analog to digital technology, and there are many more examples illustrating how newer technology allows us to do things faster, in less space, with less effort, more economical and so on. Thanks to technology, we create, manufacture, communicate, feed, educate, heal and serve each other better now than in any other time in history. This is important for improving the quality of life and is lucrative in a society that thrives on growth and profit. In the biological sciences, this revolution has probably had the greatest impact, even influencing the very development of our language. Some of the words introduced by technology include clone, LASER (light amplification by simulated emission of radiation), modem, space shuttle, digital TV, etc.

In the biological sciences, oddly enough, the revelation of many technological advances can come about through utter error (the discovery of Penicillin being the oft quoted example). In addition, a discovery’s import is often not realized at the time and often not applied in its full potential until well after its inception. The gap between acquiring technology and its application transcends time and geography, and this gap persists even in today’s world of rapid tech transfer. This is especially true for (biological) research and development of a proprietary nature. This gap between discovery and application, either intentional or not, is now narrowing for a number of reasons.

(continued on page 5)

Today's rapid communication is a major technology multiplier and flourishes as a result of technological advances. The near-instant exchange of data puts more people on a level playing field faster than ever before and science is a major benefactor. Rapid dissemination of new technology (publications, personal messages, advertisements) especially through the electronic media has heightened technology awareness. Rapid data acquisition and dissemination and the sheer competitive nature in science feed the upward spiral of the tech base.

Today's rapid communication is a major technology multiplier and flourishes as a result of technological advances.

The technology rush also appears to be self-perpetuating. For example, the science of bioinformatics was born out of the need to analyze vast amounts of data compiled through genetic sequencing research. Bioinformatics has in turn spawned a myriad of new technologies, which has given us the tools to sequence organisms from the nematode to the human. For example, the advent of microarray technology has allowed the visualization in a digital pictogram of multiple thousands of expressed genes in a tissue sample, deepening our understanding of complex diseases such as cancer. Furthermore, the sister science of proteomics, through examination of global protein expression, will provide even greater insight into our understanding of ultimate gene expression. Today's revolution in gene mapping is even being compared to that time when the periodic table of the elements was

assembled, organizing all of the elements based on their atomic number and mass, and giving chemists a blue print for the natural world.

Whether by design or serendipity, new technologies find their way into our lives and workplace. Potential profit plays a role too, while demand is the driver. Demand for newer technology is in part driven by our love and need for new, better, more powerful tools.

The Techno Rush.

The powerful urge to be in step (or one step ahead) with one's contemporaries is a compelling reason we introduce new technology into our lives today. Our passion for the latest does have some influence on how we behave and ultimately how we conduct the science of basic research. The introduction of newer technologies into research appears to be looked upon favorably as study groups seem to be more apt to grant funding to those that are contemplating the use of cool, gee-whiz type of technologies.

Science and medicine are not immune to the aesthetics and impressions that new technologies may project about a lab or clinic. There is a business aspect to even seemingly noble scientific endeavors. And it's big business, where image plays a vital role in the competition for research dollars.

However, for the experimental scientist having adopted a strict "function before form" philosophy, aesthetics and image may seem trivial compared to the impact new technologies have on output, i.e., data quality, volume and speed.

What's the Rush?

Classical science is simple, at least in concept. Scientists control variables in experiments, altering one at a time to determine if that variable affects any of the measured parameters. The ultimate goal is to relate that single variable (cause) to change in one or more of the parameters

(effect). If there is no difference in the measured parameters the data is termed "negative," which unfortunately has the connotation the name implies or "inconclusive." Either way the data is rarely published and pubs are a scientist's professional currency. Data is negative either because there actually is no relationship or due to experimental error. Technology allows scientists to reduce one aspect of experimental error by affording the means to improve accuracy, increase the number of parameters measured or increase the sensitivity and specificity of measurement. Therefore, it behooves the scientist to have the most sensitive "best mousetrap" available. Newer technologies have advantages such as lower sampling volume, better resolution, etc., to improve sensitivity and specificity as well as the other favorable properties of accuracy, speed, occupied space, etc.

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In contrast to the “better mousetrap” types of technology, some technological advances have enabled us to do things previously thought to be impossible or unimaginable, but in addition have challenged our core beliefs about our humanity. Human cloning is an example where the application of a powerful technology poses serious questions. Although there are a number of ethical and moral issues we could get caught up in, suffice it to say that human cloning appears possible in the near future, although a number of moral and philosophical issues require resolution before it will be accepted by society.

In research these “enabling” type technologies can be used to generate data that are often difficult to interpret because of their unique nature. Sir Isaac Newton wrote, “If I have seen further it is by standing on the shoulders of giants.” In essence, contributions others have made to science (data) are built upon by subsequent investigation making science the great collaborative effort of humanity. The more data that is in agreement on any given subject, the more likely a hypothesis will pass from opinion to dogma and possibly to theories and laws of science. The disciplines or aspects of science that base data on these cutting edge technologies will need time for their giants to emerge and the meaning of the novel data they generate to be fully understood as well as the rationale for their use.

Newer technology is currently being applied to some of the most exciting areas of research to generate novel types of data. Gene expression and microarray technology, protein manipulation such as chimeric technology, nanotechnology and digital imaging all offer us tools to probe other complex biosystems to include acute inflammatory proteins, the CNS/behavior (particularly the brain), signal transduction (cell to cell and intracellular communications) and cell cycle mechanisms (implications in the aging process and cancer). These research areas will hopefully provide knowledge leading to disease prevention, control and cures while at the same time provide information on how to best utilize new technology in the applied fields.

Basic science will continue to unlock some of the mysteries of biology using these cutting edge technologies. These facets of basic research that are currently applying a number of newer technologies to study disease processes will have tremendous potential in the medical diagnosis, intervention of disease and regulatory applications. However, introduction of newer technologies in the more applied fields must be accompanied by the knowledge gained through their use in basic research.

The historic lag-time between discovery and application of a new technology shortens for several reasons of which demand and

advances in communication are foremost. The same holds true for basic and applied research. Applications of new technologies tend to lag somewhat behind basic research, but this gap is narrowing fast. This trend is noteworthy because, as we advance as a civilization with the ability to free ourselves of some of the drudgery necessary to exist, we too would expect to use technology of one field to advance the endeavors of another. There are physical limitations to advancements but analog went digital and now binary digital may be supplanted by neuro-networking. Thought we could not get any smaller than microchips and microprocessors? Think nanotechnology instead! With the ever increasing ability to do more with less human input, the more specialized we become allows us to be more creative and continue to free ourselves to think. Of course we’ll never be able to free ourselves of that, or will we?

Sir Isaac Newton wrote,
“If I have seen further
it is by standing on the
shoulders of giants”

MILITARY NEWS**ARRIVALS**

MAJ Dean Bancroft – DCPM
MAJ William Bettin – DEHE
LTC James Cartwright – DHPW
LTC Laurie Cummings – DEHE
CPT Colleen Daniels – DOHS
LTC Mustapha Debboun – CHPPM-South
MAJ Thomas Delk – CHPPM-Europe
COL Ralph Erickson – CHPPM-Europe
LTC Teresa Hall – DHPW
CPT Christopher Haynes – DOHS
SPC Rachel Henry – DLS
CPT Craig Gehrels – CHPPM-West
SGT Scott Gray – CHPPM-South
SGT Matthew Griffiths – CHPPM-Europe
CPT Caroline Kalinowski – DCSOPS
LTC Thomas Little – CHPPM-Pacific
CPT Paul Lyons – CHPPM-North
MAJ Kenneth McPherson – CHPPM-North
2LT Valerie Metroff – CHPPM-West
MAJ Christine Moser – DHRM
LTC Heidi Overstreet – CHPPM-Europe
CPT Steven Patterson – CHPPM-North
PFC Nikisha Reed – CHPPM-South
SSG Trenholm Rice – DOHS
MAJ Sonya Schleich – CHPPM-West
MAJ Paul Scott – DEDS
SGM Garfield Skyers – CHPPM-Europe
SGT Andrea Vincent – DOHS

AWARDS and RECOGNITIONS**Meritorious Service Medal**

MAJ James St Angelo – CHPPM-Pacific

Army Achievement Medal

SPC Evan Mathiason – CHPPM-Pacific
SGT Kevin McElvany – CHPPM-Pacific
SGT Jewell Oliver – CHPPM-Pacific
SGT Javelle Spann – DLS
SSG Frank Strother – CHPPM-Pacific
CPT Evan Tillman – CHPPM-Pacific

DEPARTURES

COL Brian Commons – CHPPM-Europe
MAJ Anthony Cox – DHPW
LTC Beverly Crosby – DHPW
LTC Mike Custer – DHPW
MAJ Emery Fehl – DOEM
MAJ Susan Goodwin – DTOX
CPT James Houlihan – CHPPM-West
LTC Lisa Keep – DEDS
LTC Eric Lund – CHPPM-Europe
SGT Evan Mathiason – CHPPM-Pacific
LTC Zia Mehr – DOHS
SPC Terry Messex – DLS
CPT Joanna Mysen – OCO
CPT Scott Newkirk – DCSOPS
MAJ Dennis Palalay – CHPPM-North
SGT Lisa Phillips – DLS
CPT Trina Powell – CHPPM-Europe
LTC Sharon Reese – DHPW
SSG Frank Strother – CHPPM-Pacific
CPT Evan Tillman – CHPPM-Pacific
SPC Samang Top – DLS
SPC Jans Williams – DLS
LTC William Sames – CHPPM-West
MAJ James St Angelo – CHPPM-Pacific
CPT Paul Sourivong – DOHS
COL Christine Scott – DOEM

PROMOTIONS

1LT John Bradford to CPT
SFC Jerry Beatty to MSG
MAJ Michael Dyer to LTC
PFC Kristin Havrika to SPC
CPT Timothy Kluchinsky to MAJ
MAJ Timothy Lobner to LTC
1LT Alison Winstead to CPT
LTC Bruno Petruccelli to COL
LTC Mark Rubertone to COL

Certificate of Appreciation - U.S. Component of the Armed Forces Institute of Medical Sciences, Bangkok, Thailand

CPT Sueann Ramsey – CHPPM-Pacific

CIVILIAN NEWS**ARRIVALS**

Patricia Carey – DEHE
 Gary Carlton – CHPPM-Pacific
 Patrick Carpenter – DLS
 Erica Carr – CHPPM-Europe
 Gretchen Christianson – DEHS
 Joe Chronowski – DEHE
 Keera Cleare – OCO
 Patrick Dickinson – DCSIM
 Jeannette Dennis – DHRM
 Michael Gerstner – CHPPM-Europe
 Laura Greuter – DEHE
 William Hauck – DLS
 Jeri Humphries – DLS
 John Kantorski – DCSIM
 Mark Lundquist – DHRM
 Robert Muller – DLS
 Michael Russell – DCSIM
 Gray Scott – CHPPM-South
 Andrea Settle – DOHS
 Dennis Silvestri – CHPPM-North
 Christie Swanson – DEHE
 Caprice Sylvan – DLS
 John Svalina – CHPPM-Europe
 Frances Thomas – DEHS
 Valerie Valiant – DEHS
 Lisa Vigus – DLS

AWARDS and RECOGNITIONS**Commander's Award for Civilian Service**

Daniel Buckson – CHPPM-Pacific
 Jerald Jordan – CHPPM-Pacific
 Kenneth Olds – DOHS
 Sheena Young – DLS

Retirements

Hubert Snodgrass – DTOX

DEPARTURES

Anthony Bratt – DOHS
 Alyson Berkshire – DLS
 Kathlyn Cage – DOHS
 Jennifer Choich – DHRM
 Angela Conlon – DEHE
 Laurel Copper – DHPW
 Christina Digiulio – DLS
 Frances Ellison – CHPPM-North
 Kim Fink – CHPPM-Europe
 Nicole Fletcher – DLS
 Susannah Fox – DHRM
 David Gehring – DLS
 Jerald Jordan – CHPPM-Pacific
 Paul Lilley – DLS
 Alyssa Mansfield – CHPPM-Europe
 Matthew Robinson – DEHE
 Lauren Roso – DEHE
 Amish Shah – DEHS
 Jeffrey Shaffer – DHRM
 Michael Sheely – DLS
 John Svalina – CHPPM-Europe
 Matthew Wyant – DLS

Certificate of Appreciation – U.S. Component of the Armed Forces Institute of Medical Sciences, Bangkok, Thailand

Daniel Buckson – CHPPM-Pacific

Service Certificate and Pin

Farhana Lotlikar – 5 years
 Mary Grez – 10 years
 Linda Patrick – 10 years
 Kayode Akeredolu – 15 years
 Donna Pierce – 15 years
 Marilyn Swantkowski – 15 years
 Laveda Durbin – 20 years
 Frances Thomas – 20 years
 Diana Bonds – 25 years
 Felix Sachs – 30 years
 Hubert Snodgrass – 40 years

CHPPM'S NEW PUBLIC AFFAIRS OFFICER



Ms. Ann Ham came to the position in June 2003 with five years of military medicine public affairs experience, having built a combined resume of installation, missile defense, and tri-service medical public affairs accomplishments and training.

Ham started her public affairs career at the U.S. Army Space and Strategic Defense Command (now U.S. Army Space and Missile Defense Command), Huntsville, Alabama, in 1993, where she created and edited the first command newspaper for the worldwide components of the command.

Seeking to expand into the full realm of Army public affairs work, she applied for and was accepted as a Department of Army Public Affairs intern and actively worked all phases of public affairs for I Corps and Fort Lewis, Washington, from 1996-1997. As an intern, Ham graduated from the Public Affairs Officers Course at the Defense Information School at Fort Meade, Maryland, followed by a three-month stint as an Army spokesperson in the Office of the Chief of Public Affairs, the Pentagon. She was the first DA Public Affairs Pentagon intern to receive the Army Commendation Medal for Civilian Service, which was awarded for her work with national media while at OCPA.

Her first public affairs position after completing the internship was Deputy Public Affairs Director for the Armed Forces Institute of Pathology in Washington, DC. From late 1997 until December 2000, she worked all phases of public affairs with a concentrated effort in media relations. She successfully developed and pursued positive media connections, which resulted in widespread national and international coverage of the scientific and military-related activities of the AFIP staff. Her promotion of the AFIP through cooperation and support of special events with other DOD agencies and foundations was instrumental in new collaborations between AFIP researchers and these agencies.

In late 2000, Ham established and staffed the DOD TRICARE Northeast Region Lead Agent Public Affairs Office located at Walter Reed Army Medical Center, Washington, DC. There she designed and produced the first quarterly newsletter to inform a broad public, political, military, medical, beneficiary, and internal readership. She followed a proactive approach in developing extensive public affairs guidance on controversial issues that could arise throughout the Region and initiated contacts with media on TRICARE Northeast issues. She produced videos of success stories throughout the Region to be used in staff briefings and for Web site viewing. She contributed heavily to the development of a new Web site for the Region. She received the DA Superior Civilian Service Award for her public affairs achievements in a complex mission.

A native of middle Tennessee, she received a Bachelor of Science degree with a major in journalism from Memphis State University (now University of Memphis), Tennessee. She followed graduation with 2 years as the advertising copywriter for two Memphis radio stations. After 15 years as a full-time mother, and later as a part-time writer-editor for missile defense contractors in Huntsville, Alabama, she returned to the workforce full time as an editor of technical manuals for Test, Measurement, and Diagnostic Equipment Activity at Redstone Arsenal, Alabama.

Ham looks forward to fulfilling and expanding her public affairs role at CHPPM and is pleased to return to the Army environment while continuing to work in military health and medicine.

FHP CONFERENCE

By: Anne Gibson and Ann Ham
Public Affairs Office

The Sixth Annual Force Health Protection Conference and the Army Medical Command Public Affairs and Marketing Conference were held jointly August 11-17 in Albuquerque, New Mexico. Hosted by CHPPM, attendees totaled more than 1600 representatives from all the military services, reserves and coast guard, and national guards. In addition, visitors from many countries around the world, including Guatemala, attended a wide variety of technical and scientific sessions.

BG William T. Bester, Commander, CHPPM, opened the Conference at the plenary session on August 11. He thanked the attendees for coming to the conference and invited them to enjoy the many opportunities offered by this year's speakers. Local area military personnel presented the colors, and Ms. Dixie Albro sang the National Anthem.

His opening message commended LTC Michael Custer, FHP Conference Director, Ms. Jane Gervasoni, Deputy Director of the conference and the committee members for their efforts in planning and executing the conference. He encouraged the attendees to use the conference as an opportunity to make a difference in Army medicine, to widen their horizons, and explore new areas in health promotion and preventive medicine. "This year's conference was a significant expansion, in both quality and subject matter presented, compared to our previous conferences," Bester

said. "Considering the broadening scope of FHP in today's military environment, we were extremely pleased with the widening scope of issues and subjects covered at this year's conference." He also said that we were honored by the presence of representatives from our sister services and international colleagues.

This year's conference featured more than 350 sessions presented by experts from around the world.

Bester introduced guest speakers for the plenary which included LTG James B. Peake, U.S. Army Surgeon General and



Commander, U.S. Army Medical Command. Peake applauded the attendees for making this one of the best attended conferences and for the collaboration of professionals between the military forces and the Department of Veterans Affairs. Bester also introduced Ms. Ellen P. Embrey, Deputy Assistant Secretary of Defense for FHP and Readiness; BG George W. Weightman, Commanding General, 44th Medical Command/18th Airborne Corps Surgeon; Vice Admiral Richard H. Carmona, U.S. Surgeon General and Acting Assistant Secretary for Health; and

Rear Admiral Kevin J. Eldridge, Eleventh District Commander, U.S. Coast Guard.

The conference was directed toward military and civilian professionals responsible for planning, organization, and implementing health promotion and preventive medicine within the Department of the Army. It was designed to provide information on hot topics and occupational specialties for a wide variety of disciplines comprised of audiologists, community health nurses, entomologists, environmental science officers, sanitary engineers, health promotion and wellness professionals, industrial hygienists, nuclear medical science officers, occupational health nurses, occupational medicine physicians, preventive medicine noncommissioned officers, and veterinarians.

The conference was organized around ten specific tracks. Each track provided multiple continuing medical education credits and continuing education units for all attendees and an opportunity to foster wider understanding of all aspects of force health protection.

The tracks included Advanced Sciences, Behavioral Health, Environmental Sciences, Ergonomics, Health Physics and Radiological Sciences, Industrial Hygiene, Occupational and Preventive Medicine, VA Veteran's Health, Public Affairs and Marketing Conference and the Army Military Audiologists.

(photos on front cover)

FHP HOSTS GUATEMALAN MEDICAL PROFESSIONALS

(l to r) CPT Edgar Haroldo de Leon Barrear, COL Jose Manuel Lemus Arrendondo, LTG James Peake, COL Jose Manuel Cabrera Garrido, and CPT Alejandro Saravia Celiz.

By: Anne Gibson
CHPPM Acting PAO

This year's Annual Force Health Protection Conference drew attendees from all over the world. It was this author's pleasure to meet and interview four medical professionals from Guatemala who attended the conference as an opportunity to learn as much as they could about health promotion and preventive medicine, American style. Although language was a barrier, SGT William Coello-Sanchez, Tripler Army Medical Center, and SPC Teresa Arzu, 255th Medical Detachment, translated for each officer, making the interview fun, relaxing and enjoyable. Their escort officer was LTC Thomas Logan, Deputy Chief of Staff for Operations, CHPPM.

When asked how they were chosen to attend the conference, Colonel Joseph Manuel Lemus Arrendondo said it was because of their experience in preventive medicine and the fact that much of their work related directly to force protection.

Two of the officers were army surgeons who worked at the Military Medical Center (Centro Medico Militar), and two were preventive medicine doctors who worked at the army's Medical Branch (Sanidad Militar). Colonels Lemus, a radiologist, and Jose Manuel Cabrera Garrido, a gastroenterologist, specialize in treating patients while Captains Edgar Haroldo de Leon Barrera, administrative assistant, and Alejandro Saravia Celiz, nurse supervisor, both specialize in training and doctrine. Their work is very similar to work done at CHPPM. De Leon and Saravia teach and train soldiers and civilians on health promotion issues like sexually-transmitted diseases, nutrition, and disaster response.

Each one felt the conference sessions were very helpful and planned to take what they learned back to their work environments. In some cases, they planned to implement or replace what currently existed with their new knowledge.

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Colonel Cabrera said, "I really enjoyed the conference. The people were friendly, the sessions were excellent, and I didn't miss home at all."

"I think the conference was well organized," said Colonel Lemus. "Each session was timed well and the presentations were good."

Captain de Leon said, "Hospitality was great. There was a lot of good preventive medicine information. I learned a lot and plan to implement as much as I can in my own job."



"I enjoyed the networking and computers the most, but I also like the sessions on ergonomics and carpal tunnel," said Captain Saravia.

Prior to the onset of the conference, all four men were invited to dinner with BG Bester and his staff at El Pinto Restaurant in Albuquerque, New Mexico. While there, they enjoyed camaraderie with new friends and received a framed AMEDD Regimental Flag with Commander's coins as tokens of appreciation.

After the interview, several group photos were taken and refreshments were shared while exchanging new words and phrases in each other's language.

WEST NILE VIRUS DEBUTS EARLIER THAN USUAL

By: Jerry Harben
Public Affairs Office, U.S. Army Medical Command

While our infantrymen are still fighting small pockets of resistance in Iraq, a different kind of Army warrior, the preventive medicine specialist, is waging a war against the West Nile Virus in the United States.

Although there have been no cases of humans infected by West Nile Virus in the United States so far this year, according to U.S. Centers of Disease Control statistics as of June 11, the virus has been detected earlier than usual in birds and mosquitoes this summer. Therefore, measures to protect people are appropriate.

The virus, which can cause a form of encephalitis (inflammation of the brain), normally resides in birds and infects humans through mosquitoes that bite both the birds and humans. So, preventing mosquito bites is the best way to prevent human infection.

"Personal protection is the first line of defense," said LTC Dave West, an entomologist for Medical Command's Proponency Office for Preventive Medicine at Fort Sam Houston, Texas.

"People should wear long sleeves rolled down, wear insect repellent with DEET and wear uniforms treated with permethrin," he continued.

Staying indoors at dawn, dusk and early evening, when mosquitoes are most active, also will help.

Mosquitoes reproduce in standing water, so eliminating pools (even small ones such as in old tires or tin cans) can reduce the threat. Many military installations will take measures to control mosquito populations, but West noted that, "even with the most effective control measures, there will still be mosquitoes out there."

West Nile Virus is not transmitted from person to person – except, in rare cases, by blood transfusion or organ transplant from an infected donor – and there is no evidence a person can be infected directly from birds.

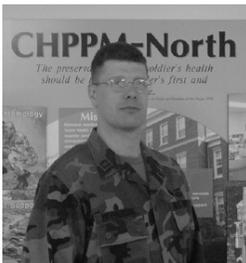
West Nile Virus is commonly found in Africa, West Asia and the Middle East. In 1999 it was identified in New York and it has since spread to 44 states. Last year there were 4,156 reported human cases and 284 deaths in the U.S.

(continued on page 17)

NEW FACES



LTC Teresa Hall is a Health Systems Coordinator with the Directorate of Health Promotion and Wellness. Before joining the CHPPM family she served as the Assistant Chief, Community Health Nursing and Chief, Wellness Center at the Womack Army Medical Center, Fort Bragg, North Carolina. Her previous assignments include Consultant, Community Health Nursing, 18th Medical Command, Seoul, Korea; Chief, Preventive Medicine, Fort Lee, Virginia; Chief, Community Health Nursing, Fort Meade, Maryland; Chief, Preventive Medicine, Honduras; Staff Community Health Nurse, Fort Jackson, South Carolina and Fort Benning, Georgia; Senior Clinical Nurse at Fort Gordon, Georgia; Head Nurse Outpatient Clinic, Baumholder, Germany; Clinical Nurse, Landstuhl, Germany.



MAJ Kenneth McPherson joins CHPPM-North as Chief of the Entomological Sciences Division. McPherson never really left the CHPPM family, transferring from CHPPM HQ as the Chief of Current Operations Branch, Deputy Chief of Staff for Operations. McPherson has served in the Army in some capacity since 1982, with his commissioning in July 1994.



MAJ Sonya Schleich arrived at CHPPM-West to serve as Chief, Entomological Sciences Division. She comes to CHPPM-West from Walter Reed Army Institute of Research where she served as Chief, Vector Control and Diagnostics Section and previously as the Dengue Vector Control Section Manager. Previous assignments included: Commander 5th Medical Detachment, Korea and Chief, Environmental Health and Industrial Hygiene, MEDDAC, Fort Riley, Kansas.



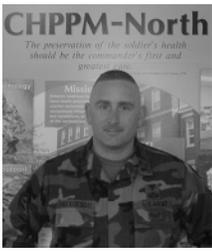
CPT Craig Gehrels arrived at CHPPM-West to serve as Chief, Industrial Hygiene Division. Gehrels received his Masters of Occupational and Environmental Health specializing in Industrial Hygiene from the University of Iowa. His previous assignments have included Chief, Industrial Hygiene, Operational Support Command, Rock Island, Illinois and IH Project Officer, CHPPM-South.



CPT Paul Lyons will take the reigns of the CHPPM-North, Preventive Medicine and Readiness Division, as the Division Chief. Prior to joining the CHPPM family, he finished a successful detachment command of a very proud and distinguished unit, the 224th Medical Detachment (Preventive Medicine). Lyons received a BS in Public Health at Austin Peay State University, Clarksville, Tennessee. His previous assignments include; Small Group Instructor, Environmental Quality Branch and Medical Operations Branch, Fort Sam Houston, Texas, 3rd Special Forces Group, Fort Bragg, North Carolina, the 704th Combat Support Battalion, 4th Infantry Division, Fort Hood, Texas, and the 124th Main Support Battalion, 2nd Armored Division, Fort Hood, Texas. Lyons brings with him a wealth of tactical and technical experiences from various combat/operational deployments, which include Operation Desert Shield/Desert Storm and Operation Enduring Freedom. Adding to the list of his operational experience are his diverse deployments to the National Training Center, Fort Irwin, California, Operation Ocean Venture, Puerto Rico, Joint Country Training Exercise, Africa, and numerous Unconventional Warfare Exercises with the Special Operations Command. We welcome Lyons and his family to our CHPPM family.

NEW FACES

(continued from page 13)



CPT Steven Patterson joins the Environmental Health Engineering Division at CHPPM-North. He is originally from Virginia. Patterson was awarded a Green to Gold Scholarship and received his BS in Environmental Science from the University of Arizona. His previous assignments include 10th Mountain Division, MEDDAC Fort Meade, 2ID, Eisenhower Army Medical Center, Fort Gordon, Georgia, and Command of the 154th Preventive Medicine Detachment. His interests are the outdoors and firearms.



2LT Valerie Metroff is a Sanitary Engineer assigned to the Environmental Health Engineering Division, CHPPM-West. Prior to arriving, she completed the Officer Basic Course at Fort Sam Houston, Texas. A native of Illinois, Metroff recently graduated from the University of Missouri - Rolla with a degree in Chemical Engineering.



SGM Garfield Skyers joins CHPPM-Europe. He is a recent graduate of the U.S. Army Sergeants Major Academy, Class 53, whose motto is, "We'll take it from here." Skyers has spent most of his career training, leading, and developing soldiers. His motto is "One Team, Duty First." He enjoys spending time with his family.



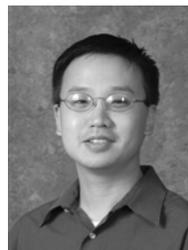
SSG Trenholm Rice Jr. is the non-commissioned officer in-charge for the Industrial Hygiene Division. Previous duty stations include: Fort Hood, Texas; Fort Riley, Kansas, and Wuerzburg, Germany. His hobbies include jogging and fishing, but he spends most of his time spare time with his family. He is very happy to be here at CHPPM.



Patricia Carey is the secretary for the Surface Water and Wastewater Program, Directorate of Environmental Health Engineering. Prior to joining CHPPM, she worked for Bethlehem Steel Corporation, Sparrows Point, Maryland for over 30 years in various clerical and secretarial positions. Carey enjoys boating on the Chesapeake Bay with her husband and spending time in Rock Hall on Maryland's eastern shore.



Patrick Carpenter is an ORISE intern with the Directorate of Laboratory Sciences. He is a lab technician. Carpenter was born in Watertown, New York and has traveled the world with his father who is in the Army. Carpenter has visited and lived in such wonderful and exciting places as: Natick and Boston, Massachusetts; San Antonio, Texas, and Wurzburg, Germany. While in Germany, he traveled all over Europe and experienced all the different types of cultures. He says the people were very nice and the sights were great. Carpenter earned an AS in Math and Science from Jefferson Community College, Watertown, New York. His favorite sports memory happened while at Jefferson, where they won the Conference Championship, and he led the nation in saves as a soccer goalie with 256 in 20 games.



Michael Russell is a computer specialist with Deputy Chief of Staff Information Management. He graduated from Towson University, Towson, Maryland with a Masters in Information Technology and a BA in History and Business from Frostburg State University. Prior to joining CHPPM, Russell worked for the Chesapeake Bay Program as a Web Development/Design Fellow. His hobbies include: Fishing, reading, and playing and watching sports.

CHPPM'S NEW COMMANDERS

CHPPM-Europe got a new commander in an Assumption of Command ceremony presided over by BG Bester, during a ceremony held August 1. COL Ralph Erickson replaces COL Brian Commons. The son of a Baptist preacher (and later Army chaplain), Erickson spent time growing up in Illinois, Kansas, Washington, New York, Texas, and West Germany.

He has a Bachelor of Science degree in Chemistry from the University of Washington and received his Doctor of Medicine from the Uniformed Services University of the Health Sciences, thereafter completing his internship at Madigan Army Medical Center and residency in General Preventive Medicine at the Walter Reed Army Institute of Research. He also earned his Master of Public Health from Harvard University and Doctor of Public Health from Johns Hopkins University. Erickson's military education includes: the Tropical Medicine Course, the AMEDD Officer Advanced Course, the Civil Affairs Officer Advanced Course, the Army Aviation Medical Basic Course, and the Command and General Staff College. His scholarly pursuits include teaching as adjunct faculty at USUHS; speaking at national conferences; and publishing a number of abstracts, journal articles and textbook chapters.

During his five years in special operations (1986 through 1988 and 1990 through 1993), Erickson deployed frequently overseas (at times under hostile fire) with both the 1st and 10th Special Forces Groups (Airborne) and the 160th Special Operations Aviation Regiment. He also served as the Preventive Medicine Residency Director at WRAIR (1997-2000) and the Director of Epidemiology and Disease Surveillance at CHPPM (2000-02). Most recently he has been the Chief of Preventive Medicine at Landstuhl Regional Medical Center. Erickson is also concluding his four-year tenure as the Preventive Medicine Consultant (Specialty Leader) to the Surgeon General. He is a returning veteran of Operation Iraqi Freedom where he served as the Civil-Military Operations staff officer (G5-Main) with the 30th Medical Brigade.

Erickson's awards and decorations include the Meritorious Service Medal with four Oak Leaf Clusters; Army Commendation Medal with two Oak Leaf Clusters; Army Achievement Medal with three Oak Leaf Clusters; Joint Meritorious Unit Award; Humanitarian Service Medal; Southwest Asia Service Medal, Armed Forces Expeditionary Medal; National Defense Service Ribbon; and Army Service Ribbon. He has also earned the Parachutist, Expert Field Medical, Flight Surgeon; and Korean and Thai Parachutist Badges. Erickson is a member of the Order of Military Medical Merit and the Delta Omega Honorary Public Health Society. He is the recipient of the Surgeon General's "A" Proficiency Designator Award and the 2002 Surgeon General's Physician Recognition Award.

Photo was provided by SGT Phillip Breedlove, Jr., CHPPM-Europe.

(continued on page 16)



(l to r) COL Brian J. Commons, outgoing commander; CHPPM-Europe, BG Bester, and COL Erickson, incoming commander; CHPPM-Europe, prepare for the August 1 change of command ceremony at Landstuhl, Germany.

CHPPM-SOUTH

(continued from page 15)



LTC Scott Gordon relinquished command of CHPPM-South, Fort McPherson, Georgia to LTC Mustapha Debboun on July 18. Debboun was born in Tangier, Morocco and was commissioned as a Captain in the U.S. Army Medical Service Corps in 1989 after

receiving a Doctorate from the University of Missouri-Columbia.

His civilian education includes a Bachelor of Arts in Cellular and Molecular Biology from Skidmore College in Saratoga Springs, New York, a Master of Science in Medical Entomology from the University of New Hampshire, and a Ph.D. in Medical and Veterinary Entomology from the University of Missouri-Columbia.

His military education includes the Army Medical Department Officers' Basic and Advanced Courses, Combined Arms and Services Staff Course, Principles of Military Preventive Medicine Course, Combat and Casualty Care Course, and resident U.S. Army Command and General Staff Officers Course.

Debboun has held a variety of important positions culminating in his current appointment as Commander, CHPPM-South. Previous key assignments included Executive Officer, 714th Medical Detachment, 44th Medical Brigade, XVIII Airborne Corps, Fort Bragg, North Carolina; Operations Desert Shield and Storm, Saudi Arabia and Kuwait; Preventive Medicine Instructor, Academy of Health Sciences, AMEDD Center and School, Fort Sam Houston, Texas; Commander, 255th Medical Detachment, 30th Medical Brigade, V Corps, U.S. Army Europe, Vicenza, Italy and Task Force Medical Eagle, Operation Joint Endeavor, Bosnia; HQDA Medical

Research Technology Staff Officer, Office of the Assistant Secretary of the Army for Research, Development, and Acquisition, Pentagon, Arlington, Virginia; Program Research Manager, DOD Repellents and Personal Protection, Walter Reed Army Institute of Research, Walter Reed Army Medical Center, Washington, D.C.; and Theater Medical Entomologist, 3rd Medical Command (FWD), Coalition Forces Land Component Command, Operations Enduring Freedom and Iraqi Freedom, Camp Arifjan, Kuwait and Camp Bucca, Iraq.

Debboun's awards and decorations include the Bronze Star Medal, five Meritorious Service Medals, three Army Commendation Medals, Army Achievement Medal, Meritorious Unit Commendation, National Defense Service Medal, Southwest Asia Service Medal, Armed Forces Services Medal, Kuwait Liberation Medal, NATO Medal, Saudi Arabia Kuwait Liberation Medal, Military Outstanding Volunteer Service Medal, Global War on Terrorism Expeditionary Medal, and Expert Field Medical Badge.

Debboun is a Board Certified Medical and Veterinary Entomologist, a member of the American Society of Tropical Medicine and Hygiene, Entomological Society of America International Affairs Committee, American Mosquito Control Association, Society of Vector Ecology, Washington Entomological Society, Tropical Medicine Association of Washington, U.S. Soccer Federation, and an Adjunct Assistant Professor of Preventive Medicine, Uniformed Services University of the Health Sciences. He serves as Chair, Repellents Committee, Armed Forces Pest Management Board. He is an author or co-author of more than 20 publications and is a reviewer for the Journal of the American Society of Tropical Medicine Hygiene and Journal of Medical Entomology.

TAML GETS NEW COMMANDER

COL Ronald Shippee relinquished command of the 520th Theater Army Medical Laboratory to COL Jack M. Wedam on August 6. Wedam, Veterinary Corps, hails from Oregon and was born in Klamath Falls. He obtained a Bachelor's Degree from Oregon State University in 1980; a Doctor of Veterinary Medicine from Washington State University in 1983; a Masters of Preventive Veterinary Medicine from University of California at Davis in 1994 and a Masters in International Agricultural Development also from UC Davis in 1995. Wedam is Board Certified in Preventive Veterinary Medicine and holds a U.S. Patent.



Upon graduating from Veterinary College, Wedam joined his father in private practice. In time, he discovered that working with his dad was not as much fun as fishing with his dad, so he opted to join the Army and has been fortunate in achieving a successful military career while keeping a good fishing buddy.

Wedam's postings have included Fort Carson, Colorado; Fort Bragg, North Carolina (three assignments); Fort Campbell, Kentucky; Walter Reed Army Medical Center, Washington D.C.; Fort Leavenworth, Kansas; UC Davis; Naval Air Station, Jacksonville, Florida; Kaiserslautern, Germany; and Fort Sam Houston, Texas. While assigned with 5th Special Forces Group (Airborne) as the Group Veterinarian, he deployed 11 times to Africa and Central America. He commanded the 248th Medical Detachment (VS) and the 64th Medical Detachment (VS). Wedam also served as Command Veterinarian and Deputy Command Surgeon for U.S. Army Special Operations Command.

His awards and decorations include: Air Assault, Master Parachutist, Special Forces Tab, Expert Field Medical Badge, Meritorious Service Medals, Army Achievement Medals, Army Commendation Medal, Humanitarian Service Medal; and Kenyan, Honduran, and Zairian Parachutist Wings.

WEST NILE VIRUS

(continued from page 12)

Most humans infected with the virus have no symptoms. Some develop mild symptoms such as fever, headache, body aches, skin rash and swollen lymph glands. Less than one percent of infections cause serious illness, which could include encephalitis or meningitis (inflammation of the spinal cord). Some 3 to 15 percent of encephalitis cases result in death. The elderly are most at risk.

"Most of our military population is young and healthy. Even though we may become infected, most people will not show signs of disease," West commented.

The CHPPM states that there is no vaccine or specific medication against West Nile Virus, but the symptoms and complications can be treated. By far, most people who get this illness recover from it. The center's website (<http://chppm-www.apgea.army.mil/>) offers more extensive information about the illness and preventive measures.

(Adapted from the Army Medicine News service release, June 2003)

CHPPM FAMILY CARS CORRAL

By: Ken Williams
Directorate of Laboratory Sciences

This year, as in the past four years, the car display was of great interest to those who attended the CHPPM picnic. There were only five cars on display but they were all definitely show car quality. The following CHPPM family cars were on display for the enjoyment of the picnic attendees:

1948 Ford Pickup Truck: This step side pick-up truck was customized with many modern upgrades. These included a 351 cubic inch high horsepower V8 engine and running gear, lowered suspension, totally new custom interior and custom sport chrome wheels. The body was impeccably painted dark blue and looked like it had just rolled out of the paint shop. This was one beautiful vehicle and a show winner.



1960 Cadillac Convertible: This was a very rare Model 62 (Deville) white convertible with red leather interior and black power top. The car was fitted with custom airbags that allowed adjustable ride height, had the original 390 cu. in. 325 horsepower V8 engine equipped with factory original 3 two-barrel carburetors that increased the horsepower to 340, had the original Wonderbar radio and sported wide white wall tires with 50s style Cadillac spinner hubcaps. The license plate on this car was GR8TWHT. I was told that it was 19.5 feet long making this a whale of a car. I was also informed that less than 50 of these convertibles were equipped with air conditioning as this one was. This was one stunning vehicle that you might expect to see in old TV shows. I think Elvis owned a similar car-maybe it was this one \$\$\$\$\$\$\$.



CUSTOMIZED

V-8 ENGINE

390 HORSEPOWER

CLASSIC CARS

1967 Chevy Corvette Convertible: This was a Chevy Corvette Stingray convertible beautifully painted in the original goodwood green color with a white stinger and green interior. The green exterior was the most common color for this year Corvette but the dark green interior was the rarest color. It was equipped with a 427 cu. in. 390 horsepower V8 engine with side exhaust, 4-speed transmission and a positraction 3.55: 1 ratio performance rear. It sported rally wheels with red line tires. I bet this one could really get you where you wanted to go in record time. The drag race fans in the 60s referred to the Chevy motors as either mouse motors or rat motors. The MOUSE motor was the small block 327 cu. in. and the RAT motor the big block 427 cu. in. engine. That is why the license tag of this car was 6T7 RAT.



1971 Chevy Chevelle: This was one of the cleanest and nicest 2-door hardtop Chevy Chevelles that I have ever seen. It was so clean under the hood that a person could have eaten off of the engine and out of the engine compartment. The white interior with high back bucket seats had been restored to perfection. The exterior had a show car quality silver base clear coat paint job that made it look like it had just rolled off the showroom floor. It sported a set of Chevy rally wheels and tires that set this car off as a real show winner.



1992 Chevy Corvette: This was a stunning low mileage latter year C5 style Chevy Corvette convertible. It was white with gray leather interior, automatic transmission, AM FM CD surround sound stereo with air conditioning. The odometer shows only 37,000 original miles. It is just now getting broken in. I noticed that it was equipped with 9 inch wide tires that were speed rated for 160 miles per hour. In my opinion this is the way to travel. I understand that the owner routinely drives this car to work.



I hope everyone enjoyed the car display this year. I invite all of you who own a special interest, antique or classic car to consider bringing it to next year's picnic for all to enjoy. Photos provided by Blaine Plummer, Deputy Chief of Staff for Information Management.

COMMANDER'S AWARD FOR CIVILIAN SERVICE

Mr. Hubert L. Snodgrass, Biological Scientist, Directorate of Toxicology was nominated for this honorary award based on consistently superior achievement at CHPPM during the period 1972 through July 2003. During his civil service career at the Army Environmental Hygiene Agency also known as AEHA and now CHPPM, Snodgrass worked first as a biology laboratory technician and then a professional Biologist. During this time, he became one of the Army's foremost experts in the area of dermatotoxicology and the toxicology of insect repellents.

Snodgrass began his civil service career in 1963 as a physical science technician for the U.S. Army Biomedical Research Laboratory. He participated in studies investigating the toxicity of chemical and biological warfare agents. From 1972 to 1981, Snodgrass worked as a biological science technician for AEHA. It was in this job that he began his work investigating the toxicity of insecticides, repellents and clothing impregnants. His education, knowledge and skills continued to develop and in 1981, Snodgrass became a professional biologist.

Snodgrass's professional accomplishments are numerous. He was author or co-author on over 70 technical reports. He also published four peer-reviewed papers, and authored a chapter in a

textbook on the dermal absorption of toxicants. In 1989 he was recognized in the first group of Master Consultants for AEHA/CHPPM. He served as chairman of the Repellents Committee of the Armed Forces Pest Management Board from 1993 to 1998 and as a representative to the AFPMB from 1993 to the present.

His contributions to AEHA/CHPPM are also numerous. Since 1981 he has served as a member of the Radiation Control Committee; he has been a member of the Scientific Oversight Committee



since 1995 and a member of the Master Consultant Selection Committee since 1997. He has also served as the CHPPM representative for two projects undertaken by the National Academy of Sciences.

Snodgrass's technical abilities and contributions to the Army have been numerous but several projects exemplify his value to the organization and the DOD.

From 1981 to 1991, Snodgrass was involved in negotiations with regulators and

technical studies for the insect repellent permethrin. To further protect soldiers against disease vectors, the AFPMB proposed the use of the insecticide permethrin for the treatment of the Battle Dress Uniform or BDU against bite penetration by insects. When used in combination with DEET the treated BDUs provide greater than 98 percent protection. Despite its obvious benefit and safety, the availability of permethrin to the military (as a repellent) was contingent upon the Environmental Protection

Agency registration. EPA, however, was reluctant to approve its use as a repellent based upon an unfavorable political climate regarding insecticides, and the absence of critical exposure data. Representing the DOD in direct negotiations with EPA, Snodgrass proposed and later performed a novel toxicity study to quantitate the transfer

of permethrin from treated BDUs to the skin surface, using radioisotopes as a tracer. The data generated (and published in a peer reviewed journal) were pivotal in establishing acceptable risk/benefit computations. In addition, his established rapport with industry resulted in a major corporation granting DOD the right to use their confidential data in support of DOD registration application. Snodgrass used tact, diplomacy and negotiation skills in order to

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CHPPM'S BRING YOUR CHILD TO WORK DAY

By: Linda D. Patrick

CHPPM participated in "Bring Your Child to Work Day," on August 19, at the Edgewood Area Gunpowder Club. The event was open to all children, ages 6-15. CHPPM employees had the opportunity to introduce their children to an actual workplace environment and to portray the Army workplace as an environment where women, as well as men, serve as role models.

The purpose of this program was originally designed to inspire career visions in young women. Today, it is an event open to all children.

Harford County Schools used to observe this occasion by allowing students to miss a day in the classroom as long as they spent it in their parent's workplace. Last year, the schools decided not to participate in this program any longer, but CHPPM didn't let that deter them from providing this opportunity to the children. So the Federal Women's Program, coordinators Anne Gibson and Linda Patrick, decided to continue with the program and scheduled the event after the school year ended.

The event started at 0730 with breakfast with the military at the dining facility on post where children and their parents enjoyed a delicious breakfast buffet, military style.

After registration each child received a Bring Your Child to Work T-shirt designed by Carolyn Colburn, Visual Information Division. BG Bester welcomed 65



parents and students and provided a short overview of CHPPM and the day's activities. The morning was spent touring exhibits or working in the parent's office area so the children could get a true understanding of the working world. There was a wide array of exhibits. Jason Riley and Jon King from The Deputy Chief of Staff for Information Management set up six computer work stations and introduced the children to a computer system. After learning about the computer, the children got a chance to play a computer game called Star Wars. This game could be played individually or competitively, which caused lots of fun and excitement at the computer exhibit.

At another exhibit manned by SPC Jeremy Assmus, SPC Jason Newberry, and SPC Melissa Spaulding, of the Theater Army Medical Laboratory, the children were introduced to a radio-phone communications system (TA-312). Here the children were able to communicate with military personnel at Fort Bragg, North Carolina. TAML also provided a mock first aid station, equipped with a stretcher and a wounded soldier. They explained and showed the kids how to care for the wounded in a field type setting. After watching and learning the kids were given the opportunity to show what they had learned. The kids had to go out with the stretcher and pick up a wounded soldier and treat his/her injury and prepare the injured for a trip to the hospital. I'm not sure if they passed the test, but they sure had fun trying.

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APG AND CHPPM FAMILIES GET IN ON BIG LITTLE LEAGUE FUN

By: Yvonne Johnson
Reprinted with permission from APG News

The Cal Ripken World Series proved memorable for several families that hosted young players from around the world during their stay in Aberdeen. Two families from the Aberdeen Proving Ground hosted players from Mexico and Hawaii, the two teams that met in the title game, August 24 at Ripken Stadium, in which Mexico triumphed 13-2.

Hosting Mexico

Saul Martinez, a toxic materiel control operator with the Edgewood Area's Technical Escort Unit and his wife Cynthia, with the U.S. Army Center for Health Promotion and Preventive Medicine hosted four players from the Mexican team while George Martin, a police officer with the Directorate of Law Enforcement and Security and his wife Connie hosted two from Hilo, Hawaii.

"It's been a great experience and a real challenge," Martinez said as he watched the team's batting practice, Aug. 20. He said they decided to participate as hosts when the call went out for Bilingual volunteers. "They don't speak much English and I'm Puerto Rican so there really is no language barrier," he said of the four youths.

"The big screen television and PlayStation meant more to them anyway," he added.

With the couple's two children grown and off to college, Martinez said there was plenty of room for the four boys who included, Aldo, the third baseman; Sergio the catcher; and Moises and Dario who fill in at relief pitching and in the outfield.

The only cultural barrier was discovered during breakfast when he and his wife discovered the youths didn't care for eggs or pancakes, he said. "We found that frosted flakes is an international breakfast loved by all kids," he said.

He said the team was full of multi-talented players who practiced hard and fully expected to be in the thick of things during the weekend playoffs and that the city of Aberdeen "really outdid itself" in making the players feel welcome.

"There were so many great activities for them," he said.

The coaches have expressed their amazement at such a welcome. They said it was a blessing to come here and that they have never been treated so well."

He added that Aberdeen Proving Ground's Morale, Welfare and Recreation even allowed the team access to the Chesapeake Challenge amusement facility. "They gave us a group discount and the kids spent about three hours on the go-carts, putt-putt and in the batting cage," Martinez said. "My thanks to MWR for that."

Although hosting players provides sponsors with great "feel good memories," it is not without its challenges, he said. "You have to wash uniforms every night and you have to be available to spend time with the players and to get them to where they need to be," he said, noting that he put in for annual leave to ensure there would be no conflict.

He said that neighbors and friends also helped with food and transportation and that he and his wife plan to host players for the 2004 games.

"We will certainly do it again," Martinez said. "I've gotten attached to these guys and will hate to see them leave. We've had a blast together."

Laura Corona Verduzco, the team's business manager, said Martinez had been a "great host." "His speaking Spanish is a plus. It made everyone feel more at home here," Verduzco said. "The boys will miss him too," she said. "They loved it here and would stay if they could."



Cynthia Martinez, secretary for Deputy Chief of Staff for Operations, wears her autographed T-shirt with buttons showing the four young players from the championship little league team from Mexico that she and her husband sponsored and hosted during the playoffs. Photo provided by Ann Ham.



Hosting Hawaii

The Martins played host to 12-year olds Michael Kenui and Aisha Sueda, who drew plenty of attention as the only female participant on any of the teams participating in the World Series. A spry second-baseman and starting pitcher, Sueda hit the balls as hard and as far as her male teammates during an Aug. 21 workout on the Cal Ripken Sr. practice field.

Martin said the team arrived about 2 a.m., Aug. 14, fresh from winning their state Pacific Southwest Regional Championship in July. "We've really enjoyed this," Martin said. "It takes your full attention but its well worth it."

Connie Martin said the best part was cheering the team on during games. "We bring noise makers and yell and have a great time," she said. "It's been great and it's important these kids hear people out there supporting them."

The Martins agreed that those thinking about sponsoring a team next year be prepared for the responsibilities involved.

"It requires your full attention," George Martin said. "You can't just send these kids out to play. You have to know where they are at all times." He said that although the game committee helped with some expenses, such as laundry detergent and soft drink coupons, it could still be a strain and financially taxing for those unprepared.

"But still, it's worth it," Connie Martin added. "These kids are priceless. People don't know what they're missing."

"We will be so lonely when they leave," she added, noting they were especially proud to host the series' only female player.

"She's got great host parents," said Sueda's father, Russell, who accompanied the team along with his wife, Lori. "Aberdeen has been beautiful and the families have treated our kids well," he said. "We don't have to worry about them at night."

George Martin also is a member of Fraternal Order of Police chapter 116-F, which sponsors the APG Youth Services 9-to-10 year-old little league team.

HAIL AND FAREWELL

By: Linda D. Patrick

CHPPM's Hail and Farewell was held August 27, at the Gunpowder Club in the Edgewood Area of Aberdeen Proving Ground. The Directorate of Laboratory Sciences hosted the event.

The theme was "Summer Beach Bash." BG Bester and his directors hailed LTC James Cartwright, LTC Laurie Cummings, LTC Teresa Hall, MAJ Dean Bancroft, MAJ William Bettin, MAJ Christine Moser, MAJ Paul Scott, SSG Trenholm Rice, SPC Rachel Henry, SPC Jean Kabamba, Mr. Patrick Carpenter, Ms. Gretchen Christianson, Mr. Joe Chronowski, Ms. Ann Ham, Mr. Art Lundquist, Ms. Frances Thomas, and Ms. Valerie Valiant. CHPPM said a fond farewell to: COL William Chambers, LTC Michael Custer, LTC Lisa Keep, CPT Joanna Mysen, SGT Lisa Phillips, Ms. Angie Conlon, and Ms. Laurel Copper.

The party-goers received raffle tickets and dined on hot pizza, cold drinks and chips and dips. Charlotte Crouse of Deputy Chief of Staff for Resource Management designed, decorated and surfed up a super cool cake for this summer bash.

The door prize winners were: Ms. Nikki Jordan, Mr. Dave Davis, SPC Raul Villalobos, and Dr. Steven Richards. Each received a \$15.00 gift certificate to the Harford Mall.

PROFESSIONAL ASSOCIATE OF THE 3rd QUARTER



Michael Jackson is a Personnel Administration Center Supervisor for the Deputy Chief of Staff for Operations. Jackson's overall performance has been truly magnificent. He is extremely customer-focused, tackles all questions and issues with infectious enthusiasm and commitment, and most importantly--produces results.

Especially commendable were the improvements he made in the personnel actions (leaves, pay inquiries, etc.) He was directly responsible for the significant improvement in the processing rate accuracy going from 77 percent to a remarkable 100 percent. Jackson is a mentor, trainer, and role model to the soldiers that work in the PAC. "I have received many accolades from both senior officers and civilian managers because he sincerely cares about soldiers. He is always cheerful, a team-player and committed to excellence. If I was completing a performance rating on Jackson, I would rate him the highest possible," said 1LT Tanya Garcia, Office of the Commander. His performance is absolutely incredible and he has only been with this organization since January 2003.

EMPLOYEE OF THE 3rd QUARTER



Denise McMillin is an organization resource specialist for the Deputy Chief of Staff for Resource Management. McMillin has been a wonderful asset to CHPPM from the time she arrived here. "She is extremely knowledgeable concerning personnel actions and has been able to help me

personally and the entire directorate. She is a courteous professional who makes things happen. McMillin has helped the directorate wade through the entire personnel process from identifying job descriptions in FASCLASS to selecting qualified candidates for the job. As a result, she has had a significant impact on our mission by streamlining the process so personnel vacancies could be filled quickly," said COL James Little, Director of Laboratory Sciences.

COMMANDER'S AWARD

(continued from page 20)

overcome technical disagreements among the joint military services and others, including the U. S. Department of Agriculture, industry, and the Defense Logistics Agency. In 1991, permethrin received the EPA-approval for military use as a clothing (and tentage) treatment against insects. Within months, industry applied for and received approval by the EPA to market permethrin for use by the consumer public, citing the DOD data as the basis for the approval.

In the late 1980's, the availability of the standard issue insect repellent containing DEET was threatened due to changing regulatory policy and also a foreign report that the repellent caused adverse developmental effects in unborn animals. Cognizant of the impact on the military from an adverse ruling by EPA, Snodgrass developed and initiated a unique series of investigations, using radioisotopes, to track and measure the chemicals' involvement with the fetus. The results of these studies dispelled the initial health concerns and further assured the product's safety. The data were used by EPA in establishing the DEET Standard; considered by the Agency as a benchmark document.

For the past 5 years, Snodgrass has been involved with a major research and development effort to find more effective insect repellents. This program to develop more effective repellents prompted the appointment of a committee by Department of the Army to research/develop a new military standard repellent to replace DEET within 5 years. While DEET was the world standard it had several deficiencies in that it was not effective against certain disease-carrying arthropods, was a plasticizer, and for cosmetic reasons, experienced low user compliance among the military. Snodgrass was teamed with the DA Program Manager, Repellents, and USDA, AFPMB and the EPA members to fulfill the 5-year DA mandate. A series of products were screened for toxicity under his supervision and one USDA product was selected for advanced development. Conferences between Snodgrass and EPA have assured that the toxicity testing performed will meet the regulatory requirements for registration. He has also been involved in negotiations with industry to partner the development (and financial burden) of bringing the product to market such that it is available for military use. The repellent appears to be the most efficacious deterrent to insect-borne diseases since the Army developed DEET more than 50 years ago.

The work cited here demonstrates the significant accomplishments made by Snodgrass to CHPPM and the Army. His reputation among the toxicology and regulatory communities has taken years to develop and the accomplishments cited herein are a result of many years of dedication and service. His work has set the gold standard for others to strive to achieve and it is fitting that he receives recognition for his dedicated service.

COMMANDERS AWARD FOR CIVILIAN SERVICE



DEPRESSION, THE COMMON COLD OF MENTAL HEALTH

By: LTC Nancy Chapman, Behavioral Health Service,
Directorate of Health Promotion and Wellness

Depression has been dubbed the common cold of mental health. Steven Paul, Chief, Clinical Neuroscience, National Institute of Mental Health, states, "Depression is like a fever. It's a nonspecific response to an internal or external insult. Like fever, it has a number of origins and treatments."

In the United States about 10 percent of the population (7 percent women and 3 percent men) meet the criteria for major depression, and another 4 or 5 percent undergo a depressive experience that is not sufficient to be officially classified as clinical depression. Depression is an expensive illness, costing the American society about \$44 billion in lost workdays, poor job performance, and psychotherapeutic care. Although the financial consideration is significant, the personal costs are incalculable. Depression is more isolating and debilitating than any other chronic illness. During their lifetime nearly one fourth of all women will suffer major depression.

Depression is a growing concern for the military. In the 1998 Department of Defense Survey of Health Related Behaviors Among Military Personnel, 18.9 percent of the Army members surveyed screened positively for depressive symptoms. This screen indicated that these soldiers were "in need of further evaluation for depression". Depression was addressed in a keynote at the American Society of Surgeons' meeting in November 1998, indicating an increasing concern for depression in military personnel. Listed as one of the top 20 health concerns, a Department of Veterans Affairs/ Department of Defense working group was established to develop a practice guideline for primary care physicians. The guideline will be distributed throughout the military soon. Clearly, depression is a growing concern.

What is major depression? The American Psychiatric Association and *Diagnostic and Statistical Manual of Mental Disorders - Fourth Edition* classifies it as a mood disorder when at least **five** of the following symptoms occur within the same two-week period and represent a key change from previous functioning:

- a depressed mood most of the time (at least two weeks)
- apathy
- a significant weight loss or weight gain
- a significant change of sleep habits
- a marked decrease in mobility
- feelings of worthlessness
- a diminished ability to think or concentrate; indecisiveness
- excessive fatigue/loss of energy
- excessive guilt
- recurrent thoughts of death
- general suicidal ideas or a concrete suicidal plan/attempt

Depression is a huge challenge to the medical system. According to the book, *Mind, Body Health*, by Hafen, Karren, Frandsen, and Smith, approximately one fourth of all the primary care medical patients come from the 15 percent of the population with major depression and anxiety disorders. If minor depression and anxiety-related issues are included, this figure climbs to almost half of all the patients who present to healthcare facilities for treatment. (Depression and anxiety are combined here because they frequently overlap and have neurochemical similarities.)

Depression and anxiety generate many physical ailments. Patients present with complaints of their physical problems. They are often treated only for their physical concerns, and not questioned about potentially psychological factors that may be the underpinnings. Only about one third are recognized and treated for their primary concern, perpetuating costly patient return rates. Effective identification and treatment of depression have proven to greatly reduce the unnecessary suffering, employment absence, costs of ongoing treatment, and associated medical illness.

The good news is that more than 80 percent of the people who undergo treatment for depression experience a significant improvement within just a few months. New medications effectively alleviate symptoms with minimal, if any, side effects. The most effective treatment for major depression is the combination of psychotherapy and medication. Although there are many types of psychotherapy available when treating depression, studies primarily support two types: cognitive behavioral therapy and interpersonal therapy. The key for depression, as in most diseases, is early detection followed by swift and effective intervention.

CHPPM'S BRING YOUR CHILD TO WORK DAY

(continued from page 21)

Carmen Adrover, of the Directorate of Laboratory Sciences, displayed her mock chemistry laboratory. Here the children had first-hand experience dressing and playing the part of chemical scientists, while performing basic chemical reactions, pH testing of several household products, and viewing a demonstration of an analytical instrument called a Gas Chromatograph.

The children enjoyed picking Brad Roberts' brain for all his information on laser/ microwave, radio frequency, entomology and occupational and environmental medicine.

And the picking didn't stop there as the children ran to and from the Entomology exhibits. Some enjoyed the experience of having large and small creepy crawlies on their arms.

Later in the morning a military detail led by SSG Victoria Forrest, SGT Javelle Spann and SPC Sean Mangan, took most of the attendees to a make-shift military physical training field and the children learned first hand how hard it is to pass a military PT test. They enjoyed fun in the sun as they tried their best at military style pushups, jumping jacks, stretches and a three-legged relay.

The event was sponsored by CHPPM's FWP Committee members who were: Shirley Macon, Deputy Chief of Staff for Information Management; Carmen Adrover, DLS; and Pat Beall, Directorate of Toxicology.

At the end of the program, each child received a certificate of attendance designed by Colburn, and a group photo with BG Bester. The children were free to spend the rest of the day visiting their parent's workplace.

Special thanks to all who helped make this day a real success.

DHPW ACKNOWLEDGES HEALTH EDUCATION SPECIALISTS

BethAnn Cameron, Judy Harris and Lisa Young, health educators with the Directorate of Health Promotion and Wellness completed requirements and successfully passed the examination credentialing them as Certified Health Education Specialists by the National Commission for Health Education Credentialing Incorporate.

Health educators are professionals who design, conduct and evaluate programs and activities that improve the health of all people. CHES are those who have met the standards of competence established by NCHEC.

Professional preparation and continuing education requirements ensure that CHES are qualified in every aspect of the profession and required to keep current with NCHEC's national standards for delivering effective health education and health promotion services.

CHES are specifically trained to:

- **Assess** individual, organizational and community health education needs.
- **Plan**, develop, implement, manage and evaluate health education programs.
- **Communicate** health education needs.
- **Build** coalitions.
- **Identify** resources and make referrals.
- **Act** as an advocate for health issues.
- **Train** assistants and volunteers.
- **Develop** and use a variety of educational methods and materials.



Congratulations to Cameron, Young, and Harris on their accomplishment.



FEMALE SOLDIER READINESS

By: MAJ Beverly Ann Crosby
Directorate of Health Promotion and Wellness

You asked for it — you got it! CHPPM has developed two readiness guides for females: Technical Guide 281A, *A Leader's Guide to Female Soldier Readiness* and TG 281B, *A Soldier's Guide to Female Soldier Readiness*. Since female soldiers encounter unique health care situations, the Female Soldier Readiness Guides and the resources referenced within are meant to assist leaders and female soldiers to ensure readiness with the least amount of impact on the day-to-day mission of the unit.

Every military leader is a manager of time, resources, and people. Effective military leadership demands the maximum use of each of these elements. The goal of the Leader's Guide, TG 281A, is to enable leaders to maximize the potential of the female soldier by including these unique situations in their planning for field exercises or deployments so that the problems that typify such duty assignments can be avoided. The Leader's Guide provides Army Regulations and quick references specifically targeting the uniqueness of female soldiers as well as samples of fact sheets and worksheets that their female soldiers will be using.

The responsibility for female readiness, however, ultimately falls to the female soldiers themselves. The Soldier's Guide, TG 281B, assists female soldiers in planning for their unique health care needs and considerations. More detail is provided in the Soldier Guide. Areas such as pregnancy profiles, exercise during pregnancy, field needs of female soldiers, and preventive health measures for the barracks environment are addressed. Samples of Family Care Plans and Economic Realities Worksheets are provided to assist you in having positive duty assignments. The more you are educated about yourself, the more empowered you will be to ensure your own readiness! Use the FSRG to learn more about women's health. Find out about health education for women on your post. Be aware of the barracks environment. Know how to handle unwanted attention. There will be a point of contact for all non-Equal Opportunity female-specific issues at your command.

The following are areas covered in both technical guides:

❖ **FEMALE SOLDIERS IN THE FIELD:**

- General Hygiene
- Packing List Additions
- Urinary Tract Infections
- Predeployment Education
- Nutrition Basics
- Weight Management Awareness
- Oral Health in the Field
- Roadblocks

❖ **REPRODUCTIVE HAZARDS, PREGNANCY AND PARENTING:**

- Pregnancy Counseling
- Pregnancy and Postpartum Profiles
- Exercise during Pregnancy and the Postpartum Period
- Oral Health during Pregnancy
- The Single Pregnant Soldier
- Pregnancy and the Army Weight Control Program
- Postpartum Duty, and Breast-feeding

❖ **MISSION IMPACTORS:**

- Unintended Pregnancies
- Sexually Transmitted Diseases
- Clinical Preventive Services

❖ **TOOLS AND STRATEGIES:**

- In-processing Education
- Support/Information Network
- In-services

❖ **THE APPENDIX:**

- References
- Fact Sheets
- Questions and Answers
- Sample Letter for Family Care Plans
- Economic Realities Worksheets for Childrearing

Leaders and soldiers can use the FSRG to learn more about women's health. As a leader or as a female soldier, you can enhance female readiness, save time and resources and support the mission.

Empower yourself!

Maximize your potential!

Be aware!

Be prepared!

For more information or to download a copy of these technical guides, go to:

<http://chppm-www/dhpw/wellness.aspx>

Leader's Guide (TG281A) and Soldier's Guide (TG281B)

ASK THE TROOP DOCTOR: SICK-CALL SLIPS AND PROFILES

By: MAJ Niel A. Johnson
Munson Army Community Hospital, Fort Leavenworth, Kansas.

Q. What's the difference between the Sick Call Slip and a Long-Form Profile?

Thank you for your question regarding two of the most commonly used forms at the Medical Department Activity. Both can be used to write a profile for a soldier with an illness or injury, but there are important distinctions worth discussing.

The two forms are the "Sick Slip" (DD Form 689) and the "Long Form" (DA Form 3349, Physical Profiles). The biggest difference is that the DD 689 is a unit form and the DA 3349 is a medical form. This means that the unit is responsible for generating the DD 689 and it is used for accountability within the unit. The DD 689 allows limited space for the medical officer to write profiling restrictions, and this is generally done for simple, short-term problems, such as "quarters x 24 hours" or "run at own pace for a week." The DA 3349 is a medical form used by the doctor to convey more detailed profiling restrictions.

The other key difference is time. The DD 689 has a maximum of 30 days (temporary only) and the DA 3349 can be written to a maximum of 90 days for temporary conditions.

The DA 3349 is sometimes confusing as to what a soldier can or cannot do. The easy way to read it is to know that it is a positive profile – that is, the soldier does what is checked off. If a box is left blank, then the soldier should not be doing that exercise/function.

Permanent profiles are done on the DA 3349. They may be amended at any time if clinically indicated and will automatically be reviewed at the time of the soldier's periodic examination. The soldier's commander may also request a review of a permanent profile at any time. Permanent profiles with a three designation or higher in the PULHES (Physical Capacity/stamina, Upper extremities, Lower extremities, Hearing/ear, Eyes, (military physical profile) section require review by a medical review board, while those with a two do not.

A soldier needs to keep a copy of his or her profile because it is proof that the commander has agreed to the disposition. Once a commander confirms and agrees with the soldier's profile, then it becomes an official order. A profile is meaningless until the commander signs it. Understand, as well, that a profile is not necessary to simply give a soldier rest from any event or duty – remember it is a command directive, not a medical directive.

Lastly, a soldier is given recovery time after being on profile. It is calculated by giving the soldier twice the amount of time on the profile, not to exceed 90 days, to train for the Army Physical Fitness Test. This

means that the soldier goes back to doing regular unit physical training, but cannot be given a record APFT during the recovery period.

It is ultimately the responsibility of the unit to decide what profiles to honor, and most units prefer to have all written profiles on their soldiers come from medical officers they know, and who understand the nature of troop medicine.

Q. My health-care provider wrote for me to be on quarters. What exactly does this mean? Can I go out, play sports off-post, or can I go to work for a short while?

Quarters is a term used to describe a medical officer's recommendation to not go to work for a specified period of time. It usually means that the soldier is too ill to be at his or her assigned place of duty and needs to recover or rest at home. It may also mean that the soldier is contagious and should not be at work where others can catch the illness.

For soldiers living off post, this means they must stay home. For soldiers living in barracks, this means they must stay at their barracks. Indoor activities within the confines of one's residence are allowed, as long as such activities do not interfere with proper recovery. Going outside, shopping, doing PT, going out to eat and other such activities are not allowed, as this defeats the purpose of the quarters in the first place.

For soldiers attending school, quarters can be a real impediment to keeping up with coursework. But we strongly advise that you not go to class, so you don't accidentally pass your illness on to the whole class.

The duration of quarters can be confusing and deserves clarification. Quarters for "24 hours" begins when the provider writes the order and ends 24 hours later. For example, 24 hours quarters written at 0800 will expire at 0800 the next morning. But another way of writing quarters is to say "quarters until tomorrow." This means that the quarters expire at the beginning of the next duty day. So the actual time of quarters may not be exactly 24 or 48 hours. Don't leave the clinic without understanding exactly what your quarters recommendation means.

In general, soldiers do not need to return to the clinic for re-evaluation after being on quarters, unless they feel they require further medical attention or extension of the quarters. It is okay for soldiers to go back to work directly following quarters, if they are feeling better and have not been advised otherwise.

(A Munson Army Community Hospital release)

ALWAYS A GOOD TIME FOR EVERYONE AT CHPPM



Bring Your Child To Work Day 2003

(article on page 21)



2003 CHPPM PICNIC

(article on page 3)