

"Excellent Care – Earned by Veterans – Delivered Here"

# Voices of VISN 6

Official news from around your VISN

TLANTIC HEALTH CARE NETWORK VISN SIX

July 31, 2015

# **Designers Develop Solutions For Vets At Tech Event**

By David Hodge and Steve Goetsch

The McGuire VAMC hosted a grand finale Make-A-Thon event, July 28-29, inviting the area's brightest engineering minds to work hand-in-hand with facility clinicians to solve issues experienced by a panel of disabled Veterans.

More than 100 participants of all ages attended the VA Innovation Creation Series, Prosthetics and Assistive Technology Challenge, a capstone event in which design

teams sought to improve care and quality of life for disabled Veterans through the development of personalized prostheses and equipment.

Veteran Eric Young kicked off the Veteran's panel. It was his chance to take the stage and personally challenge the engineers to provide him a solution.

He asked the room to close their eyes while he painted a serene picture of the sun rising in the West, and for each person

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Steven Goetsch

Army Sergeant Lisamarie Wiley explains her prosthetic design problem to a group of student engineers at the McGuire Make-A-Thon in Richmond, Va.

# VA Deputy Secretary Spends Day At Hampton

By Daniel L. Henry Hampton VAMC public affairs

VA Deputy Secretary Sloan D. Gibson dropped by Hampton VAMC to meet with leadership and visit staff on Friday, July 10.

The deputy secretary took a tour of the new Primary Care spaces in Prime 5, visited the emergency medicine department, and took additional tours of the women's clinic and palliative care.

While in palliative care, Gibson visited with a World War II Veteran who resides on the unit and learned of the history of dedication and care



Daniel L. Henry

Dr. Janet Henderson, chief of Hampton's medical services, takes VA Deputy Secretary Sloan Gibson on a tour of the emergency department. They are joined by VISN 6 Network Director Dan Hoffmann and Hampton leadership.

provided to Veterans in of their lives.
Hampton at the end stage Continued on Pg 3

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VA launches no-cost training program to help develop skills.

VA expands review of exposure to Camp Lejeune drinking water.

Atomic attacks launch nuclear medicine, now available at 122 VA sites.

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# A Message From The Secretary: My VA Plan & Overview

To VA's Dedicated Staff:

VA is undergoing a radical transformation to improve our relationship with our Veterans. This relationship is the cornerstone for all that VA does. This connection begins the moment a person joins the military and lasts through final honors. VA is the bridge that helps Veterans transition to civilian life, and we continue to support them through other key life events, such as learning a trade or getting a degree. The foundation of that relationship is built on trust and respect. It must be built to last a lifetime.

Veteran and employee relationships are inextricably linked. We cannot improve service to Veterans without improving how VA develops, supports, and empowers employees to provide the world-class service we intend to deliver. We're developing training and tools that will help employees at every level to become exceptionally effective, efficient, and successful. This is an essential piece of VA's transformation and drive to improve performance.

The bottom line is that we all want Veterans to be proud of VA and feel it is an ally actively working in their best interests. We hope their experience will be so excellent that they will recommend VA to their closest friends and family. We also want employees to find even more pride and meaning in their service at VA. In short, we want both Veterans and employees to be so proud of their association with VA that they refer to it as "MyVA."

The following document is the latest integrated view of how we are going to work together to achieve the MyVA vision. The MyVA Integrated Plan is not intended to be a detailed step-by-step operational plan or program plan, but rather a framework for how we will mobilize our resources to implement this transformation in a synchronized, efficient, and effective manner. This plan is not perfect and will need to be refreshed periodically following discussion and feedback from you. However, execution will be the real key to success, to include relentless follow through and the agility required to quickly and iteratively adjust course as we learn.

The integrated plan was recently briefed to the MyVA Advisory Committee, a group of experts from the private, non-profit, and Government sectors to assist

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Mark Shelhorse M.D., Chief Medical Officer Bruce Sprecher, Director, Public Affairs Steve Wilkins, Network Public Affairs Patrick Schuetz, Chitra Productions

in reorienting the department to better meet the needs of Veterans. The Advisory Committee meets multiple times per year and conducts periodic reviews to ensure the department achieves the goals of MyVA.

If you are unable to read the plan in its entirety, please take a moment to read this overview. We hope you find this document helpful in understanding the spirit of MyVA and help you understand how you can do your part so that you too can proudly call it "MyVA."

Robert A. McDonald Secretary of Veterans Affairs

#### MESSAGE FROM THE UNDER SECRETARY FOR HEALTH July 30, 2015

Last week, Secretary McDonald outlined the scope of our budget challenges for members of Congress at a hearing held by the House Veterans' Affairs Committee. I'm pleased to report VA leadership and Congress understood the urgency of this situation and worked diligently to develop a plan that will allow us to provide uninterrupted care for our Veterans.

The legislation passed today by Congress will give us the budget flexibility we need to continue providing quality care for our Veterans through Sept. 30.

With this budget flexibility comes the requirement to develop a plan to consolidate the seven different community care programs we currently have into a single program, called the "Veterans Choice Program," by Nov. 1. That will take a team effort to accomplish, and together, we must ensure we meet this obligation for our Veterans.

Although a funding shortfall for this fiscal year has now been averted, our growing requirements are a clear signal that even greater budget challenges lay ahead, so we can't afford to be short sighted. To meet our requirements next year, VA needs the adequate funding the President's 2016 budget request provides.

We will continue to review ways to improve our budget planning process to better anticipate the changing needs of Veterans and ensure we have the resources to meet them.

Thank you for all you do for our Veterans every day.

David J. Shulkin, M.D. Under Secretary for Health



## Local News

# Hampton's Changing Landscape: Projects Expand Services

By Daniel L. Henry Hampton VAMC public affairs

A cursory glance around Hampton VAMC will undoubtedly include large bulldozers, backhoes, scaffolding and men in yellow vests with hard hats as the hospital buzzes with ongoing construction activity. The projects, part of a five year investment of \$159 million, will bring sorely needed clinical space and parking for Veterans and staff at the hospital's main campus.

One of the most visible and important projects is the expansion of parking and the raising and repaving of the entrance near Franklin Road. What had formerly been re-routed and blocked off with access on a makeshift gravel road, will now circle the waterfront and provide a tremendous view of the bay.

In addition to being a path to the campus, the interior area that it borders, which is being raised approximately six feet, will provide an additional 59 parking spaces. The project is scheduled to be completed in late fall 2015. An additional 244 parking spaces will be added between the boiler plant and water tank along Harris Avenue in 2017.

Across from the parking lot and newly crafted road, the expansion and renovation of the spinal cord unit moves forward as Phase II of the project brings in an additional 12,000 square feet. This addition will include new rooms that allow for more patient privacy among residents. The project will be completed in 2016.

In addition to projects underway, several are in varying stages of being approved and completed; these include:

• A new Mental Health building which will sit where the former director's quarters and older white house located near the Mallory Street Entrance and Franklin Road. The facility will house staff offices and expand mental health patient space and will be completed by



Daniel L. Henry

A road grader sits on a dirt field that will soon become 59 parking spaces near the Hampton VA's waterfront. In the background, construction takes place on the spinal cord injury unit.

winter of 2017.

- A second floor addition to Bldg. 110B will finish out the second floor of the ambulatory care facility, adding approximately 36,000 square feet of outpatient primary care, specialty care and infrastructure support.
- Renovation and expansion of operating rooms and surgical suite. Already in Phase III of the renovation with expected activation in winter 2015, the project provides the hospital with the appropriate clinical spaces for quality surgical services and necessary square footage for four general OR's, a cystoscopy room, a special purpose orthopedics/OR and all associated PACU and ASCU space.
- A new 20,000 square foot clinical dialysis building and eye clinic scheduled for activation in 2018.

## Gibson continued from Pg 1 -

After his tour, Gibson sat down with leadership to discuss the hospital's operations and success in both quality and bringing wait times down dramatically within the preceding several months.

Gibson's visit also afforded him the opportunity to recognize one of Hampton's own, Nathaniel Robinson, for his recent acknowledgement by the Secretary as one of the VA's finest health care workers.

Gibson also spent time in his day hosting a town hall for Hampton VAMC staffers and local union leadership, as well as a gathering of area stakeholders including Mayor George Wallace of Hampton, John Newby, deputy secretary of Veteran Affairs for the state of Virginia, congressional staffers from the Virginia congressional delegation and Veterans Service Organizations.

Gibson ended the visit with a media availability where he answered questions about Hampton's recent success with lowering wait times and the future of the VA. Gibson praised the facility's leadership and staff in their efforts to bring down wait times and stressed the importance of the hospital's request to have an HCC built to meet continued future demand for Veterans in the region, particularly those on the Southside of Hampton Roads.

According to Gibson, getting the HCC approved and built is "a pretty high priority."



## Local News

# **Construction updates**

Veterans throughout the VISN will soon benefit from the opening of new sites of care. Within the next 12 months, VISN 6 will add more than one million square feet of health care space.



Courtesy Photos

Kernersville (Above) and Charlotte HCC (Below): Interior rough-in continues at both. VA is slated to take possession of the buildings in December.



Courtesy Photo

Interior finishes are nearing completion and equipment installation is underway at the Fayetteville HCC. A grand opening is tentatively scheduled for Nov. 20.



Courtesy Photo

Jacksonville CBOC. A ribbon cutting is tentatively scheduled for Nov 6.



Courtesy Photo

Sanford (Lee County CBOC) VA expects to activate this clinic in January.

## Ribbon Cutting

Dignitaries and Veterans' advocates cut the ribbon officially opening the new Vet Center and VA Clinic in Princeton, W. Va., on Aug. 4. The new clinic, located at

1511 North Walker Street, is an extension of the Beckley VAMC. The facility will provide primary care services telehealth services for up to 1,200 Veterans. The clinic is collocated with the Princeton Vet Center.



### Local News

### Tech Event continued from Pg 1

to imagine themselves moving through that beautiful landscape.

He loves to ride motorcycles, but it is still a dream for him because his amputation prohibits him from riding. He wants an arm brace that he can feel confident enough to take a bike out West to visit his daughter in California.

One of the younger designers at the event, 13-yearold Kayleigh Childress, and her career and technology education teacher, Ed Levis, worked diligently to try and turn that dream into a reality. They 3-D printed a prosthetic device capable of attaching a prosthetic arm to a motorcycle handlebar.

While riding a motorcycle, a rider relies on the push and pull of the handlebar to turn and balance, said Levis. The design can be attached with relative ease, but not lock into place. This, they explained, was essential in the event of an accident or emergency, the hand would break away at a predetermined stress point.

This wasn't the first time Childress built a prosthetic device. When she was in the 7th grade she helped a boy in her class born without fingers on his left hand. She found an existing 3-D hand design online and modified it to suit her design needs. All the pieces were printed and assembled using fishing line and elastic bands.

"He had wrist movement and when he moved his wrist down, the elastic would pull, and the fingers would close and he could grasp objects," Childress said.

Childress added that she has grown to like 3-D printing and its applications and intends to pursue a career in aerospace technologies.

The Veterans' stories and issues with tasks that most in the crowd complete daily inspired the designers. The Veterans themselves were in awe at the innovation and compassion shown to them from such a large and diverse group of brilliant philanthropists.

Michel Nash, who has trouble tracking the multiple medications she must take, first debuted her problem on a video that was shot at McGuire months earlier. It is on that video where California engineers David He and Jie Hu first saw Nash. "We decided to build a custom pill box after we saw the video," Hu said. "We saw the video at Palo Alto, and began designing a [pill] case for Michel," he added. "It took about two months to build."

Nash was overwhelmed at the level of support not only from her new California friends, but the Innovation Creation process.

"I didn't know they were going to make my video into one of the challenges," Nash said. "What that tells



Steven Goetsch

Student Samuel Jin, a member of Team 5190, and the FRC Robotics Team out of Cary, N.C., checks the fit of the coupling device on a prosthetic leg. The 5190 team also submitted an assistive hand device using a dovetail pattern built with a 3-D printer that will help stabilize hand tremors. The hand tremors were one of the challenges put forth by the Innovation Creation Team.

me is that they [VA] were listening."

Nash said the Make-A-Thon just reinforced what she already thought about the McGuire VA. She originally was receiving care in Alabama, but relocated her family near her surgeon, McGuire physician Douglas Boardman, who performed the first shoulder-fusion takedown to reverse shoulder replacement in the country.

Her outcome improved her life so drastically; she knew she had to return. Now she receives all of her care at McGuire.

Engineers He and Hu thought the trip to McGuire from the West Coast was well worth it. "It was re-

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## Tech Event continued from Pg 5

ally great to get to speak directly with the doctors and patients and get their perspectives," said He. "That's what makes the Innovation Creation so good."

The doctors and patients in attendance weren't by happenstance. Two dozen engineers, physicians and providers were there as official mentors from a variety of disciplines representing organizations like McGuire, Walter Reed, Google and Virginia Commonwealth University.

That diversity fueled collaboration and a successful event. "Bringing together individuals from various backgrounds and expertise allows for this synergy of creativity," Melissa Oliver, assistive technologies program manager, said. "The Veteran is at the center of this process and as

a result, innovative

Some of those

rapidly, like in the

case of Army Ser-

Wiley, who lost her

left leg below the

knee in a bomb blast in Pain-Kalay,

several of the dozen

prostheses she has

been fitted for since

She explained to

the participants that

she runs into prob-

all of those prosthe-

ses while traveling.

Her request was a

single, interchange-

able coupler for all

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Steven Goetsch

McGuire Orthotist/Prosthetist Bill Lovegreen steadies a prosthetic while prosthetic resident William Shill uses a laser to build a scan of it. The scan will be used to make a sheath for a bracket. Members of the prosthetic lab came down to the multipurpose room to offer their expertise to the design teams.

That led to her vehemently exclaiming, "If you can figure out how to see a smiley face on Mars, surely it's not impossible to develop a coupler for a prostheses."

Team Spline members Matthew Kelly, Mihir Shelke, Jason Suh, Ausvin Khanna, Matt Baker and Rod Goode took on her challenge.

# VA Ends Innovation Creation Series With "Make-A-Thon Challenge"

On July 28-29, Richmond VAMC hosted the national Make-a-thon Challenge event aimed at accelerating the development of personalized technologies to improve care and quality of life for Veterans with disabilities. The Make-a-thon was the culmination of VA's Innovation Creation Series for Prosthetics and Assistive Technologies, which began in May. The challenge brought together designers, makers, technology industry leaders and Veterans.

During the Make-a-thon event, designs were built using 3D printing technology and tested to showcase how they meet the needs of Veterans with disabilities. During the event, participants were given prototyping equipment, along with mentoring from technical experts and Veterans to help codesign and develop their ideas. Event collaborators, including America Makes and Stratasys, supplied 3D printers, which allowed for onsite device manufacture and empowered teams to easily develop, test and refine designs with Veterans' input.

Completed designs were presented on the July 29 and reviewed by Veterans and an expert panel of judges from VA, Google.org, and General Electric.

Information about the VA Innovation Creation Series may be found at www.innovation.va.gov/challenge/.

The judging panel that included design engineers and executives from Toyota, 3-D Systems, Google and Dr. Lucille Beck, Chief Consultant of the Rehabilitation and Prosthetic Service for Veterans Affairs selected their coupler device as the overall Google.org winner and the \$20,000 prize.

All of the designs produced will be placed on the National Institutes of Health 3-D Exchange. An online, open source biomedical repository for 3-D designs.

Results:

- 1) \$20,000 Team Spline Coupler Google.org winner
  - 2) \$2,000 Glucose Tester
  - 3) \$1,000 Camo Cup
- 4) \$1,000 Makeup Glove Girls Lounge Personalized Prosthetic + Assistive Technology for Women Challenge
- 5) \$1,000 Drug Pushers Water Bottle Pillbox Challenge
- 6) \$1,000 Dr. McCarran Grip Strength and Speed Upper Extremity Prosthetic Challenge
- 7) Duck and Cover Spotlight Award for 18 and under team.

# Re-Design Makes Veterans Health Library Easier To Use

Changes to the Veterans Health Library are helping Veterans and VHA clinical staff get the health information they need more quickly and more easily, according to Becky Hartt Minor, a health educator at National Center for Health Promotion & Disease Prevention.

"In July, the VHL got a refreshing new look that makes it more user-friendly to Veterans who want to improve their health," she explains. "They're finding that the library is much more responsive to their needs—it gives them a better sense of what's available and gets them to the pages they want with fewer clicks."

#### More Responsive

Several of the changes were based on the recent re-design of VA's Web page, which now gives users a better sense of where they've been and where they're going on the site. "When VHL users move their cursor over a menu topic—called 'hovering'—they can now see the subtopics, too," Hartt Minor says. "And they

can see the 'trail' of pages they've visited, because these 'bread-crumbs' have been placed more prominently on each page."

Addition-ally, the Search and A-Z tools are now larger and easier to find because they appear under the navigation bar on each VHL page. "The navigation bar was moved to the top of the page, and 'flyout' menus have

been added so that users don't have to click as much," she explains. "Both features help users get more quickly to the information they want."

#### **Better Experience**

Hartt Minor thinks that other changes to the VHL's Search features will improve users' experiences, as well as save time when looking for information. "We changed how search terms work in the VHL—they've been narrowed so that users have fewer results to review," she says. "Additionally, we've added instructions to help them get more specific results from their

searches. And the information that comes up during a search is now labeled to indicate the type of resource it is—a Go-to-Guide is an 'Interactive Workbook', each video has a 'Play' icon, and each of the Online Guides is noted as a PDF, for example."

Important changes also were made to the VHL's Home Page, which sports a new layout designed for easier viewing and use. "The home page now contains four blocks, each with images and text, that randomly show videos from the entire video library, rotating through the main subtopics within that section," says Hartt Minor. "The Mental Health Library, for example, is featured on the home page, and a new video preview allows users to hover over video to watch it, too." For improved visibility, the print and social media icons are now bigger and at a new location on each VHL page.

#### Fresh, New Feel

Spanish-speaking Veterans are also benefitting from

the changes to the VHL. A new feature, the En Español button, is now located at the top of the each VHL page. "Clicking this button translates the entire top navigation into Spanish; clicking the En Inglés button translates the text back to English," savs Hartt Minor.

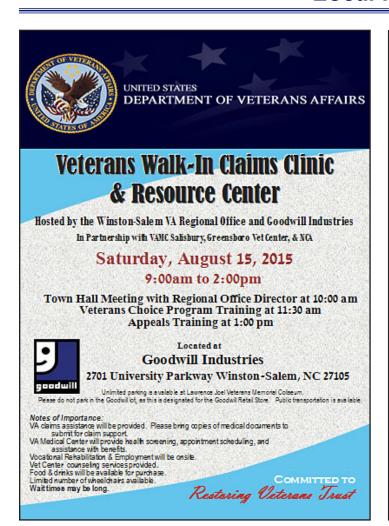
"This feature helps Veterans move more easily between English and



Spanish information in the VHL."

Another important improvement expands users' access to the VHL, as it can now be viewed on both mobile devices and laptop computers. "Taken together, all of these changes have created a fresh, new feel for the Library and they really help users get the most out of it," Hartt Minor explains. "It's really exciting for us to continue to enhance the ways in which Veterans and VHA clinical staff use this powerful resource for better health and improved well-being."

Reprinted from HealthPOWER! Prevention News Summer 2015. (Clicking the above graphic links to VHL.)



## Richmond/Redskins Join Forces

Richmond VAMC and the Washington Redskins join forces to provide Veterans and service members a unique encounter called "Warrior to Warrior." On July 31 and Aug. 5, Richmond VAMC



patients and staff were given VIP access to the Washington Redskins training camp. While there, Richmond VAMC patients were treated to refreshments along with front-row seats to practice sessions and special access to players.

Along with numerous players, Robert Lee Griffin III and Joe Theismann met with patients, signed autographs and posed for photos. A photo from one of the sessions was shared on the Redskins Instagram page and aired on a local news broadcast.

Above, Damion Hedington and fellow sailors are greeted by Quarterback Robert Lee Griffin III, nicknamed RG3.

# Beckley VAMC Receives Distinguished Service Award

On Aug. 5, the Department of West Virginia Commandant of the Marine Corps League presented the Beckley VAMC with a Distinguished Service Award during an annual visit to the medical center. The Commandant and fellow members of the Marine Corps League toured the facility and provided Veterans in the community living center with certificates of appreciation for their patriotism and service to the United States. Left to Right – Marine Corp League member George Gill, WV Commandant Rick Shank, and Junior Vice Commandant Rod Mayberry present Director Karin McGraw with the Marine Corps League Distinguished Service Award for the Beckley VAMC.

Debbie Voloski



# VA Launches No-Cost Training Program To Help Develop Skills

VA has launched two new no-cost training programs, Accelerated Learning Programs and VA Learning Hubs, to help transitioning Servicemembers and Veterans from all eras learn skills, earn credentials, and advance in civilian careers following separation from service.

ALPs and Learning Hubs are part of VA's Veterans Economic Communities Initiative, promoting education and employment opportunities for Veterans through integrated networks of support in 50 cities.

Under VA Secretary Robert McDonald's MyVA transformation, VECI is now in place in cities across the United States.

ALPs offer transitioning Servicemembers and Veterans the opportunity to build on their world-class training and technical skills gained through their military service, and earn certifications in high-demand fields.

VA is piloting ALPs this summer with seven courses focusing on building skills and certifications needed to advance in high-demand careers in information technology (IT), as part of the President's TechHire initiative. Each ALP course is offered at no cost and includes free referral and support services.

The first ALP cohort includes seven courses covering a range of IT-related topics, including:

- Coding/Programming Boot Camps;
- 80+ IT Certifications in Hardware, Software, Networking, Web Services, and more;
- Network Support Engineer Job Training and Certification:
  - Cybersecurity Training and Certification;
  - IT Help Desk Job Training; and
- IT Boot Camps for Desktop Support and Windows Expertise.

Transitioning Servicemembers and Veterans from any era are invited to apply to their choice of courses. Applications will be accepted starting Aug. 17 – seats in the pilot cohort are limited; applicants are encouraged to apply early. ALPs do not involve use of the Post-9/11 GI Bill. Students are able to participate in these programs while also pursuing other programs of study using Post-9/11 GI Bill benefits. Visit the ALP website to learn more about each program and apply.

For more information about the VECI or to learn more about VA ALPs and Learning Hubs, e-mail VeteranEmployment.vbaco@va.gov.

## VA Funds New Studies Using Million Veteran Program Data

VA is announcing four new studies that will use genetic and other data from VA's Million Veteran Program to answer key questions on heart disease, kidney disease, and substance use—high-priority conditions affecting Veterans.

MVP, which has enrolled more than 390,000 Veterans so far, has already become the nation's largest database linking genetic, clinical, lifestyle and military exposure information. The newly funded studies are among the first to use MVP data to delve into pressing questions on Veterans' health.

"There's already been an impressive amount of data collected through MVP, and we're continuing to engage more Veterans in the program and building its research infrastructure through studies like these," said Dr. Timothy O' Leary, VA's chief research and development officer.

The new studies will also help establish new methods for securely linking MVP data with other sources of health information, including non-VA sources such as the Centers for Medicaid and Medicare Services.

The new studies include:

Cardiovascular risk factors—Drs. Farooq Amin and Peter Wilson at the Atlanta VA Medical Center, and Dr. Kelly Cho at the Boston VA Health Care System, will lead an effort probing the genes that influence how obesity and lipid levels affect heart risk. Using MVP data,

their team will also look at whether these genetic factors differ among African Americans and Hispanics.

Multi-substance use—Drs. Daniel Federman and Amy Justice at the VA Connecticut Healthcare System, and Dr. Henry Kranzler at the Philadelphia VA Medical Center, will examine the genetic risk factors for chronic use of alcohol, tobacco, and opioids—and the dangerous use of all three together.

Pharmacogenomics of kidney disease—Dr. Adriana Hung at the VA Tennessee Valley Healthcare System will focus on how genes affect the risk and progression of kidney disease. One goal is to examine how patients with diabetes—who often develop kidney problems—respond differently to the drug metformin, the standard first-line treatment for diabetes, based on their genetic profile.

The project will also look at the genetics of hypertension, a major risk factor for kidney disease.

Metabolic conditions—Dr. Philip Tsao at the VA Palo Alto Health Care System and Dr. Kyong-Mi Chang at the Philadelphia VAMC, leading a team of researchers from five VA regions and two universities, will explore the role of genetics in obesity, diabetes, and abnormal lipid levels (namely, cholesterol and triglycerides), as drivers of heart disease.

For more information about MVP and VA research in general, visit www.research.va.gov.

## VA Expands Review Of Exposure To Camp Lejeune Drinking Water

As part of VA's ongoing commitment to provide care to Veterans and their families, VA announced it will start the process of amending its regulations to establish presumptions of service connection for certain conditions resulting from exposure to contaminated drinking water at the U.S. Marine Corps Base Camp Lejeune in North Carolina.

This process is in addition to the healthcare VA already provides for 15 conditions to eligible Veterans who were stationed at Camp Lejeune for at least 30 days between August 1, 1953 and December 31, 1987 as a result of the Honoring America's Veterans and Caring for Camp Lejeune Families Act of 2012. VA also provides reimbursement of healthcare expenses for those 15 conditions to eligible family members who resided at Camp Lejeune during that time period.

The Secretary of Veterans Affairs recently met with Senators Isakson, Burr and Tillis and the Director of the Agency for Toxic Substances and Disease Registry (ATSDR) to discuss the creation of presumptions of service connection for diseases associated with the contaminated water at Camp Lejeune.

The diseases that are currently being reviewed for potential presumptive service connection include kidney cancer, angiosarcoma of the liver, and acute myelogenous leukemia, which are known to be related to long-term exposure to the chemicals that were in the water at Lejeune from the 1950s through 1987.

The chemicals are Benzene, Vinyl Chloride, Tri-

chloroethylene and Perchloroethylene, which are known as volatile organic compounds, used in industrial solvents and components of fuels. ATSDR and VA representatives will meet at ATSDR offices on August 19 to begin discussions on establishing these presumptions

VA will also work with ATSDR and potentially the National Academy of Sciences to evaluate the body of scientific knowledge and research related to exposure to these chemicals and the subsequent development of other diseases. VA will carefully consider all public comments received when determining the final scope of any presumptions.

Veterans with health problems they believe are related to exposure to the water at Camp Lejeune may file a claim for disability compensation online at www. ebenefits.va.gov, or call 800–827–1000 for assistance.

For more information, Veterans and family members should contact the nearest VA healthcare facility by calling 877–222–VETS or visit www.publichealth. va.gov/exposures/camp-lejeune. For further information on Camp Lejeune, VHA Office of Public Health has a website on Camp Lejeune historical water contamination at www.publichealth.va.gov/exposures/camp-lejeune/index.asp.

The U.S. Marine Corps encourages all those who lived or worked at Camp Lejeune before 1987 to register for notifications regarding Camp Lejeune Historic Drinking Water at https://clnr.hqi.usmc.mil/clwater.

## **Veterans Identification Card**

The Veterans Identification Card Act 2015 (Public Law 114-31) was enacted July 20. The Veterans Identification Card Act requires VA to issue Veterans an identification card upon their request.

In many instances, these cards will be able to serve as proof of service in the Armed Forces in place of the standard DD-214 forms. As indicated in the law, these ID cards would not take the place of a health care enrollment card, a Choice Card, or any additional identification card that confers VA benefits upon the cardholder.

VA is in the process of reviewing the law and has formed a working group to begin the process of implementation. This process will include outreach to Veterans and others to ensure that the law is implemented in the best way possible. VA will publish regulations and solicit public comment before finalizing the program.

As these implementation steps are finalized, VA will be reaching out to Veterans to explain how they can obtain an ID card.

## **President Extends Funding**

On July 31, the President signed into law H.R. 3236, the "Surface Transportation and Veterans Health Care Choice Improvement Act of 2015," which extends through October 29, 2015, authority and funding for the Department of Transportation's surface transportation programs and transfers \$8.1 billion from the Treasury General Fund to the Highway Trust Fund; and provides resource flexibility to the Department of Veterans Affairs for health care services and makes a number of changes to the Veterans Access, Choice and Accountability Act.



# **Atomic Attacks Launch Nuclear Medicine Field**

By Darlene Richardson VHA Historian

Seventy years ago, the world's first atomic bombs were dropped by the U.S. on Japan to facilitate an end to World War II. The first bomb, nicknamed "Little Boy," using the uraninum-235 isotope was dropped on Aug. 6, 1945 on Hiroshima. Three days later, on Aug. 9, a second bomb using plutonium and nicknamed "Fat Man" was dropped on Nagasaki.

Both bombs had been built under the special "Manhattan Project" which officially began in 1942 under the U.S. Army.

On Aug. 15, 1945, Japan surrendered. A formal signing of the surrender took place in Tokyo Bay on Sept. 2, 1945, aboard the U.S.S. Missouri.

Each bomb killed and injured tens of thousands of men, women, and children, and ushered in a new era of scientific possibilities tempered by fear from the new reality that they could annihilate all of mankind.



After the war, atomic research flourished worldwide and followed two major paths: development for use in warfare and development for peaceful purposes.

The U.S. Congress enacted the Atomic Energy Act on Aug. 1, 1946. The act established the Atomic Energy Commission,

which became the Nuclear Regulatory Commission in 1974. An important component of the law authorized the use of atomic radioisotopes for biological and envi-

ronmental research to benefit society. By the end of 1947, the Veterans Administration was among the first federal institutions to initiate an Atomic Medicine program.

In 1947, Dr. George Lyon, a naval medical officer involved with the Manhattan project during World War II and atomic testing at Bikini Island in the Pacific, became VA's Special Assistant for Atomic Medicine and Chief of the Radioisotope Section. Dr. Lyon was an expert who

was also appointed to the National Research Council's Committee on Atomic Casualties which studied the effects of radiation on atomic bomb survivors at Hiroshima and Nagasaki.

The initial purpose of VA's Atomic Medicine pro-



Courtesy japanfocus.org
Atomic Bomb Casualty Commission examines an atomic bomb survivor in Japan, 1947.

gram was to prepare for handling disability claims of Veterans exposed to radiation during the military's atomic bomb tests, but it evolved into a full research and clinical program. In 1947, the Atomic Energy Commission had licensed 25 institutions to receive isotopes, including six for VA hospital laboratories at Framingham, MA; Bronx, NY; Cleveland, OH; Chicago, IL; Minneapolis, MN; and Los Angeles, CA.

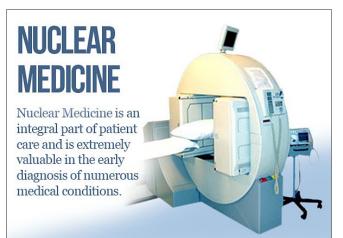
Dr. Rosalyn Yalow, who later received a Nobel Prize for her research in nuclear medicine, was among many interested scientists who flocked to VA after the war to work with this cutting-edge program.

By 1949, VA had established 12 radioisotope labs. VA was the seedbed for medical innovation in that exciting new age of atomic medicine and the world at-large has benefited tremendously from its results.

Around 1971, the field became more formalized and has since been known as Nuclear Medicine. Today, Nuclear Medicine is available in 122 VA facilities.

Radiation pharmacology to cure cancer and other dis-

eases, CT scanners, nuclear pacemakers, DNA/genetic testing, and more were borne from research conducted by VA doctors, scientists, and inventors working in collaboration with medical schools or partners like the National Cancer Institute or National Research Council.



## VISN 6 Sites Of Care & VA Vet Centers

#### **MEDICAL CENTERS**

Asheville VAMC 1100 Tunnel Road Asheville, NC 28805 828-298-7911, 800-932-6408 www.asheville.va.gov/

**Beckley VAMC** 200 Veterans Avenue Beckley, WV 25801 304-255-2121, 877-902-5142

www.beckley.va.gov/

**Durham VAMC** 

508 Fulton St. Durham, NC 27705 919-286-0411, 888-878-6890 www.durham.va.gov/

**Fayetteville VAMC** 2300 Ramsey St. Fayetteville, NC 28301

910-488-2120, 800-771-6106 www.fayettevillenc.va.gov/

**Hampton VAMC** 

100 Emancipation Dr. Hampton, VA 23667 757-722-9961, 866-544-9961 www.hampton.va.gov/

Richmond VAMC

1201 Broad Rock Blvd. Richmond, VA 23249 804-675-5000, 800-784-8381 www.richmond.va.gov/

Salem VAMC

1970 Roanoke Blvd. Salem, VA 24153 540-982-2463, 888-982-2463 www.salem.va.gov/

Salisbury VAMC

1601 Brenner Ave. Salisbury, NC 28144 704-638-9000, 800-469-8262 www.salisbury.va.gov/

#### OUTPATIENT CLINICS

Albemarle CBOC 1845 W City Drive Elizabeth City, NC 27909 252-331-2191

**Brunswick Outreach Clinic** 20 Medical Campus Drive Supply, NC 28462 910-754-6141

**Charlotte CBOC** 

8601 University East Drive Charlotte, NC 28213 704-597-3500

**Charlottesville CBOC** 

650 Peter Jefferson Pkwy Charlottesville, VA 22911 434-293-3890

**Danville CBOC** 

705 Piney Forest Rd. Danville, VA 24540 434-710-4210

**Emporia CBOC** 

1746 East Atlantic Street Emporia, VA 23847 434-348-1500

**Favetteville CBOC** 

2919 Breezewood Avenue, Ste 101 Fayetteville, NC 28304 910-488-2120, Ext. 6100/6101 800-771-6106, Ext. 6100/6101

Franklin CBOC

647 Wayah St. Franklin, NC 28734-3390 828-369-1781

Fredricksburg CBOC

130 Executive Center Pkwy Fredericksburg, VA 22401 540-370-4468

Goldsboro CBOC

2610 Hospital Road Goldsboro, NC 27909 919-731-4809

**Greenville HCC** 

401 Move Blvd. Greenville, NC 27834 252-830-2149

**Hamlet CBOC** 

100 Jefferson Street Hamlet, NC 28345 910-582-3536

**Hickory CBOC** 

2440 Century Place, SE Hickory, NC 28602 828-431-5600

Hillandale Rd. Annex

1824 Hillandale Road Durham, North Carolina 27705 919-383-6107

Jacksonville CBOC

241 Freedom Way, Suite 1 Midway Park, NC 28544 910-353-6406

Jacksonville II CBOC

306 Brynn Marr Road Jacksonville, NC 28546 910-343-5301

Lynchburg CBOC

1600 Lakeside Drive Lynchburg, VA 24501 434-316-5000

**Morehead City CBOC** 

5420 U.S. 70 Morehead City, NC 28557 252-240-2349

**Princeton VA Clinic** 

1511 North Walker Street Princeton, WV 24740 304-425-8105

Raleigh CBOC

3305 Sungate Blvd. Raleigh, NC 27610 919-212-0129

Raleigh II Annex

3040 Hammond Business Place Raleigh, NC 27603 919-899-6259

**Robeson County CBOC** 

139 Three Hunts Drive Pembroke, NC 28372 910-521-8452

**Rutherford County CBOC** 

374 Charlotte Road Rutherfordton, NC 28139 828-288-2780

**Staunton CBOC** 

102 Lacy B. King Way Staunton, VA 24401 540-886-5777

Tazewell CBOC

123 Ben Bolt Ave. Tazewell, VA 24651 276-988-2526

Village Green Annex

1991 Fordham Drive Fayetteville, NC 28304 910-488-2120 ext. 4020,

Virginia Beach CBOC

244 Clearfield Avenue Virginia Beach, VA 757-722-9961, ext. 1900

Wilmington HCC

1705 Gardner Rd. Wilmington, NC 28405 910-343-5300

Winston-Salem CBOC

190 Kimel Park Drive Winston-Salem, NC 27103 336-768-3296

Winston-Salem Annex

2101 Peters Creek Parkway Winston-Salem, NC 27127 336-761-5300

**Wytheville CBOC** 

165 Peppers Ferry Rd. Wytheville, VA 24382-2363 276-223-5400

#### DIALYSIS CENTERS

VA Dialysis and **Blind Rehabilitation Clinics** at Brier Creek

8081 Arco Corporate Drive Raleigh, NC 27617 919-286-5220

VA Dialysis Clinic Fayetteville 2301 Robeson Street, Ste. 101 Fayetteville, NC 28305 910-483-9727

#### **VET CENTERS**

**Beckley Vet Center** 1000 Johnstown Road Beckley, WV 25801 304-252-8220

**Charlotte Vet Center** 

2114 Ben Craig Dr. Charlotte, NC 28262 704-549-8025

**Fayetteville Vet Center** 

2301 Robeson Street Fayetteville, NC 28305 910-488-6252

**Greensboro Vet Center** 

3515 W Market Street, Suite 120 Greensboro, NC 27403 336-333-5366

**Greenville Vet Center** 

1021 W.H. Smith Blvd. Greenville, NC 27834 252-355-7920

Jacksonville, N.C. Vet Center

110-A Branchwood Drive Jacksonville, NC 28546 910-577-1100

**Norfolk Vet Center** 

1711 Church Street Norfolk, VA 23504 757-623-7584

**Princeton Vet Center** 

1511 North Walker Street Princeton, WV 24740 304-425-8098

Raleigh Vet Center

1649 Old Louisburg Rd. Raleigh, NC 27604 919-856-4616

Roanoke Vet Center

350 Albemarle Ave., SW Roanoke, VA 24016 540-342-9726

Virginia Beach Vet Center

324 Southport Circle, Suite 102 Virginia Beach, VA, 23452

757-248-3665