Michael E. DeBakey Veterans Affairs Medical Center

VA Star

Vol. 9 No. 1 An Information Guide for the Veterans We Serve in Southeast Texas January/February 2010

Beaumont VA Outpatient Clinic • Charles Wilson VA Outpatient Clinic, Lufkin • Conroe VA Outpatient Clinic • Galveston VA Outpatient Clinic

ASK NOW about your FLU SHOT

Only 5% of the doctors in the country are selected: MEDVAMC boasts 37 staff physicians plus 41 consultant and attending physicians.

78 Houston VA Docs Listed as "Best Doctors" in the Nation

HOUSTON – The medical knowledge company, Best Doctors, Inc. has included 78 physicians who provide patient care at the Michael E. DeBakey VA Medical Center (MEDVAMC) in the latest compilation of The Best Doctors in America® database.

"I am very pleased with this recognition of our physicians' clinical excellence by Best Doctors," said J. Kalavar, M.D., MEDVAMC chief of staff. "This is yet another indicator of how the Michael E. DeBakey VA Medical Center continually strives to offer the highest quality health care possible for Veterans living in southeast Texas."

The MEDVAMC, located in Houston, boasts 37 staff physicians on the Best Doctors list, along with 41 physician consultants and attending physicians. **A list of the MEDVAMC staff physicians selected as the best in their field is available on page 5.**

According to its Web site, Best Doctors, Inc. is the global leader in providing information about, and access to, the best medical care in the U.S. and around the world. Founded in 1989 by doctors affiliated with the renowned Harvard University School of Medicine, the company uses continuous peer-to-peer surveys to identify specialists in more than 400 subspecialties of medicine who are considered by fellow physicians to be the most skilled in their fields and most qualified for reviewing and treating complex medical conditions. Their polling process is anonymous and confidential, qualitative, and quantitative. It provides detailed profiles of each physician, including his or her practice, research programs, and diagnostic and treatment procedures.

Best Doctors is completely independent. Doctors do not pay to be included in the database, nor does the company pay them to participate in the survey. The judgment of peers is the determining factor. Surveyors contact all currently elected physicians, including many department heads at major teaching hospitals, and ask them to rate specialists outside their own facilities. The process of peer review requires every listed physician be re-evaluated with each new survey. With person-to-person telephone interviews and proprietary polling and balloting software, more than 1.5 million evaluations are collected

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Photo by Bobbi D. Gruner, MEDVAMC Public Affairs Officer

Listed as one of the best doctors in the nation in the field of physical medicine and rehabilitation, Sally Ann Holmes, M.D., Spinal Cord Injury Care Line executive at the Michael E. DeBakey VA Medical Center, follows up with a recently discharged inpatient. Also an associate professor at Baylor College of Medicine, Holmes attended the University of Tennessee College of Medicine, Memphis, Tennessee and did her medical residency at Baylor College of Medicine. She is board certified by the American Board of Physical Medicine and Rehabilitation and the American Board of Spinal Cord Injury Medicine.

New Units Open to Care for Returning Combat Troops and for Women Veterans

Photo by Mike Nichols, Media Section

The Michael E. DeBakey VA Medical Center opened two new nursing units to provide specialized inpatient mental health services for returning combat troops and for women Veterans. Valdesha Ball, M.D., staff psychiatrist for the Returning OEF/OIF Veterans Environment of Recovery Program (left), and Wendy Smitherman, M.D., staff psychiatrist for the Women's Inpatient Specialty Environment of Recovery Program, work together to provide the highest quality health care possible for these two unique Veteran populations.

HOUSTON – Recently, the Michael E. DeBakey VA Medical Center (MEDVAMC) opened two new nursing units to provide specialized inpatient mental health services for returning combat troops and for women Veterans.

"This initiative is extremely important and will significantly enhance our ability to provide exceptional mental health care to these two groups of Veterans," said Adam C. Walmus, MEDVAMC director.

One of the new inpatient units focuses on the unique needs of our nation's newest Veterans, the troops who have served in Operation Enduring Freedom in Afghanistan (OEF) and Operation Iraqi Freedom in Iraq (OIF).

Combat Veterans are at higher risk for psychiatric problems than military personnel serving in noncombat locations, and more frequent and more intense combat is associated with higher risk. Many of the challenges facing these service members are stressors that have been identified and studied in Veterans of previous wars. In response, VA has

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Telephone Update

If you call the main telephone number for the Michael E. DeBakey VA Medical Center at 713.791.1414 and are trying to reach a particular office or clinic, you must now dial 1 + extension number + pound sign (#). The # sign is necessary in order to complete your call.

High-tech Prosthetics Improves Veterans' Quality of Life

HOUSTON – If you think the term "prosthetics" refers to artificial limbs, wheelchairs, eyeglasses, and hearing aids, you are right. But at the Michael E. DeBakey VA Medical Center (MEDVAMC), prosthetics also includes ramps, stair glides, home oxygen services, home modifications (such as widening doorways), vehicle modifications (to facilitate getting into a vehicle), adaptations to sports equipment, and implants such as hips, stents, and pacemakers.

With access to state-of-the art technology, the Prosthetics Section at the MEDVAMC now provides our Veteran heroes with devices that fit in the palm of their hand.

Global positioning systems (GPSs) and personal digital assistants (PDAs) may be beneficial for Veterans with certain cognitive impairments. An evaluation determines if a device will enable them to effectively manage their daily affairs. Examples include impairments in attention, orientation, memory, and organization due to medical conditions such as traumatic brain injury.

GPS is a navigation technology that uses satellites. A portable GPS unit, about the size of a cell phone, can "speak" to cognitively or visually impaired Veterans and help them navigate by telling them where they are or by giving them directions to where they are going.

Similarly, a PDA is a palm-sized computer that can help Veterans with a traumatic brain injury. A built-in calendar helps the user keep track of appointments, while its to-do list and address book are important for those with memory problems. Some PDAs have accessibility software (speech recognition, for example), making them easy to use for those with visual impairments.

Other prosthetic devices assist visually impaired Veterans with reading prescription labels, shopping, preparing meals, and even choosing matching clothes.

ScripTalk™ is a small machine about the size of a video tape. It is designed to be user friendly with only three buttons – one to turn it on or off and two to adjust setting. The Veteran can hang it on the wall near his or her medicine cabinet. Holding the device near a prescription bottle, it scans the encoded label and, using speech synthesis technology, tells the patient exactly what is inside. Pertinent information such as the name of the patient, the name of the drug, the dosage, general instructions, warnings, and the prescription number along with the doctor's name and telephone number are all converted into speech.

Another device, the I.D. Mate™, can be used in the home, the workplace, or the shopping center to identify cans, food, jars, boxes, bottles, clothing, playing cards, compact discs, albums, cassette tapes, pictures, important documents, and thousands of other items. When shopping, a Veteran holds an item near the device. The I.D. Mate™ scans the bar code on it and then verbally describes the contents. A headset can be used so the user can choose to be discreet.

The machine contains recorded product information on more than 700,000 items found at any grocery store and comes with a bar code label maker. This allows the user to make their own labels to identify individual pieces of clothing, shoes, or other items not in the machine's database. With the I.D. Mate, a Veteran independently can choose black socks to go with his black pants, wheat bread instead of white, or play a jazz music CD instead of a country CD.

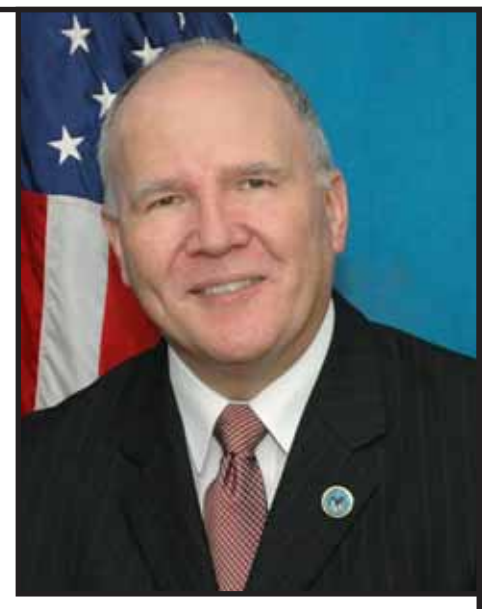
If you could benefit from any of the prosthetic devices mentioned here or want to learn more about prosthetic devices that may be appropriate for you, please contact your VA primary health care provider. ♦

Photo by Bobbi Gruner, Public Affairs Officer

A personal digital assistant or PDA is a palm-sized computer that can help Veterans with a traumatic brain injury. A built-in calendar helps the user keep track of appointments, while its to-do list and address book are important for those with memory problems.

A Word from the Director . . .

Get Involved with National Salute Week



Adam C. Walmus, MA, MHA, FACHE
Medical Center Director

HOUSTON - February 7 through 13, 2010 is a special time at Department of Veterans Affairs Medical Centers across the nation. Established as an official VA program in 1978, this week is known as National Salute to Veterans and is an annual event designed to increase awareness of Veterans and the sacrifices they have made for our nation. It is an opportunity for the public to visit the Michael E. DeBakey VA Medical Center (MEDVAMC) and its outpatient clinics, meet America's Veterans, and explore the various aspects of our facility's volunteer program.

Columnist Ann Landers initiated a movement several years ago encouraging school children and adults alike to write a special note of thanks to hospitalized Veterans in a Valentine's Day greeting. We take great care in distributing these cards to Veterans and displaying them throughout our hospital during this particular week.

In many cases, students deliver their Valentines in person. It is touching to see how young children brighten the lives of Veterans with their colorful Valentines. Cards come in every shape and size - and are made with everything from tissue paper, stickers, and colored doilies to crayons, construction paper, and stamps. One thing all of these cards have in common is they are made with love and respect for our nation's Veterans.

In addition to school children, hospitalized Veterans and those with outpatient clinic appointments receive visits and enjoy special programs provided by community and area Veteran Service Organizations, ROTC and Junior ROTC members, elected officials, celebrities, and local personalities throughout the week. These visits have traditionally included personal time together sharing stories and interests, playing cards or board games, and distribution of U.S. flags.

National Salute also draws awareness to the role of MEDVAMC in the community, as well as the many important volunteer opportunities at the facility.

I encourage you to consider sending a Valentine to a Veteran or supporting one of the many special activities during this week at the MEDVAMC. I know you will enjoy the wonderful atmosphere created by staff and volunteers to honor our nation's heroes. The cheer and well wishes spread to hospitalized Veterans is quite 'contagious' and is a 'prescription you can fill!'

Contact our Voluntary Service Program at (713) 794-7135 or *vhahouvolunteer@va.gov* for more information and how to get involved.♦

Building a Safety Culture

HOUSTON – The VA National Center for Patient Safety (NCPS) recently awarded the Root Cause Analysis (RCA) Bronze Cornerstone Recognition Award to the Michael E. DeBakey VA Medical Center (MEDVAMC) for completion of all root cause analyses within 45 days during fiscal year 2009, the second year in a row.

A root cause analysis is a process aimed at identifying the fundamental causes of problems or events. The practice of RCA is predicated on the belief that problems are best solved by attempting to correct or eliminate root causes, as opposed to merely addressing the immediate obvious symptoms. The process identifies the basic or contributing causal factors that underlie variations in performance associated with adverse events or close calls. RCA, an important element of the Patient Safety Program, contributes to building a culture of safety.

Award recipients are required to meet specific criteria focused on quality, timeliness, and quantity of root cause analyses. The award is given annually to facility Patient Safety Programs who meet these requirements.

"Our Patient Safety Manager Lekisa Ancalade, and Patient Safety Program Specialist Lisa Johnson are commended for ensuring the DeBakey VA Medical Center met the requirement to complete all root cause analyses within the established timelines," said MEDVAMC Director Adam C. Walmus. "Last year, the facility completed 11 individual and four aggregate root cause analyses. Not only were the RCAs completed in a timely fashion, but they also were of the highest of quality, helping us learn to be an even better medical center for our Veterans."

The NCPS was established in 1999 to develop and nurture a culture of safety throughout the Department of Veterans Affairs. The goal is the nationwide reduction and prevention of inadvertent harm to patients as a result of their care. Patient safety managers at 153 VA hospitals and patient safety officers at 21 VA regional headquarters participate in the program.♦

The Parking Hassle - What is Being Done

HOUSTON – Parking at the Michael E. DeBakey VA Medical Center (MEDVAMC) is a serious problem. Veterans, visitors, volunteers, and employees know this all too well. Dramatic growth in the Texas Medical Center and the number of Veterans seeking VA health care has aggravated the problem; however, hospital administration is taking action to improve the situation.

In fiscal year 2000 (October 1999 - September 2000), the Houston VA had 474,901 outpatient visits. Last year, fiscal year 2009, that number almost doubled to 815,695

Baylor College of Medicine (BCM) is our major hospital affiliate and the majority of our doctors are also on the faculty at BCM. MEDVAMC operates the largest VA residency program with 259 slots. Each academic year, more than 1,972 students are trained through 144 affiliation agreements with institutions of higher learning. Health care students from fields such as nursing, dietetics, social work, physical therapy, and a wide variety of medical specialties receive training here each year. This responsibility serves to enhance the quality of care provided to our Veterans.

The MEDVAMC is one of the few hospitals in the Texas Medical Center with free parking. It is believed individuals who work in the Texas Medical Center, park here, catch buses or ride bikes to their workplace. The VA Police continuously stop and question people to determine if they have legitimate business here, but this can be difficult. In the past, VA reimbursed owners who had their cars towed after discovering the person was a long-term inpatient or genuine visitor.

Almost 900 employees participate in the MEDVAMC Mass Transit Program, consisting of 79 vanpools, numerous carpools, and the Metro Bus system. The MEDVAMC runs the single, largest vanpool program in the city of Houston and has been recognized as a benchmark for not only VA facilities nationwide, but also within the Houston business community. This employee initiative is an effort to free up parking spaces on the VA complex for Veterans to use.

Last March, a VA motor pool parking area was established on the corner of Cate Terrace and Ringness Avenue, adjacent to the Holcombe Gate. All vanpool vehicles and government vehicles remotely park there to free up spaces in the regular parking lots. A shuttle service is provided for drivers parking in this area.

Also, free valet parking is available at the MEDVAMC main entrance for Veterans. This service operates Monday through Friday, 7 a.m. to 6:30 p.m., except for federal holidays. This service is extremely valuable for elderly, wheelchair or scooter-bound, and heat-sensitive Veterans.

Photo by Bobbi Gruner, Public Affairs Officer

VA Police Officer Quentin Milroe checks the license plate of a vehicle parked illegally on the VA complex. To alleviate the parking problem, the Michael E. DeBakey VA Medical Center has an approved and funded project to reconfigure some of the parking lots as well as increase surface parking. The project is currently in the design award stage with construction scheduled for early summer 2010.

The MEDVAMC has an approved and funded project to reconfigure some of the parking lots as well as increase surface parking. The project is currently in the design award stage with construction scheduled for early summer 2010. This initiative will generate an additional 400 spaces. The project will also expand valet parking capacity to resolve daily closure issues. The parking reconfiguration will not take place until the additional parking lots have been completed.

Looking into the future, the MEDVAMC has requested funding to build a parking structure. It will be constructed in two phases with a final capacity ranging from 750 to 1,200 parking spaces.

While these projects are being worked, the MEDVAMC Parking Committee is evaluating a recommendation to place gates on all parking lots on the VA complex. This requires further detailed study to review the impact and implementation of a token/validation system while ensuring Veterans, employees, volunteers, visitors, and medical residents are not charged for parking. Vendors and other external parties choosing to use the VA complex for parking will be charged just like the other health care facilities in the Texas Medical Center.♦

Seasonal Flu usually hits southeast Texas in January.

Don't Wait - Vaccinate

HOUSTON – While the "H1N1 Flu" is in the news and on everyone's mind lately, it is important to remember the annual, "Seasonal Flu" usually hits southeast Texas in January. It is not too late to get your Seasonal Flu vaccination.

According to the Centers of Disease Control and Prevention (CDC), an average of five to 20 percent of the population get the Seasonal Flu. Each year more than 200,000 people are hospitalized from flu complications and about 36,000 die from the flu. Luckily, in most people, the flu ranges from a mild cold to a nasty, feverish illness with a sore throat, headaches, and muscle aches.

The Michael E. DeBakey VA Medical Center (MEDVAMC) and its four outpatient clinics are currently vaccinating against the Seasonal Flu. Vaccination remains the single most effective way to protect yourself and your loved ones from the flu.

Veterans who should seriously consider vaccination for Seasonal Flu are:

- Over 65 years of age,
- Residents of long-term facilities,
- With long-term health problems of the heart, lungs, asthma, kidneys, or diabetes and other metabolic diseases,
- With muscle or nerve disorders involving swallowing or breathing,
- With weakened immune systems,
- Women Veterans who may be pregnant during the flu season.

The MEDVAMC is also offering the H1N1 Flu vaccine. Following guidance from the CDC, the following groups have priority for the H1N1 Flu vaccine:

- Pregnant women,
- People who live with or provide care for infants younger than 6 months,
- Health care and emergency medical services personnel,
- People 6 months through 24 years of age,
- People 25 years through 64 years of age who have certain medical conditions that put them at higher risk for influenza-related complications.

When the demand for H1N1 vaccine for the first four groups has been met, the CDC recommends vaccinating everyone from the ages of 25 through 64 years. Current studies indicate the risk for H1N1 infection among persons 65 and older is less than the risk for younger age groups. After the vaccine demand among younger age groups has been met, the CDC recommends providers should offer vaccination to people 65 or older.

Both types of flu are thought to spread mainly person-to-person through coughing or sneezing of infected people. You can reduce your chance of getting sick and infecting others by covering your nose and mouth with a tissue when you cough or sneeze, and washing your hands often with soap and water. Carry and use an alcohol based-hand sanitizer.

For more information about the H1N1 Flu, the Seasonal Flu, and vaccines for both, contact the MEDVAMC Preventive Medicine Program at (713) 794-8768 or visit the CDC Web site at *www.cdc.gov.* ♦

New VA Outpatient Clinics Opening in 2010

HOUSTON - The Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC) is making progress toward establishing four new VA outpatient clinics in Richmond, Lake Jackson, Katy, and Tomball as well as reopening its clinic in Texas City.

Scheduled to open the summer of 2010, the Richmond VA Outpatient Clinic will be located in the professional building near OakBend Medical Center, close to U.S. Route 59. The nearly 10,000 square-foot facility will provide primary health care, mental health care, laboratory, and X-ray services to Veterans in the Richmond/Rosenberg area. Emergency medication needs will be met on a local contract basis.

The Lake Jackson VA Outpatient Clinic, scheduled to open in the fall of 2010, is in the final stages of the contract negotiation process. Physical location information cannot be released until this is finished. It will be similar in size to the Richmond clinic and also offer primary health care, mental health care, laboratory, and X-ray services.

The VA outpatient clinics planned for Katy and Tomball will be much larger in size than the ones in Richmond and Lake Jackson; approximately 30,000 square feet each. Because this exceeds local contracting authority, the VA Real Property Office in Washington, D.C. is handling the contracting process. These clinics are expected to open in 36 to 48 months.

The MEDVAMC also plans to reopen the Texas City VA Outpatient Clinic in 2010. Several properties are currently being considered for lease.

All of the planned VA outpatient clinics will be staffed by VA personnel.

The MEDVAMC currently operates outpatient clinics in Beaumont, Conroe, Galveston, and Lufkin. In fiscal year 2009, there were 815,695 outpatient visits at the Houston facility, 55,295 in Beaumont, 34,142 in Conroe, 18,860 in Galveston, and 45,054 in Lufkin. ♦

Little Fibs Can Lead to Big Health Consequences

HOUSTON - Exaggerating. White lies. Stretching the truth.

Whatever you choose to call it, almost half of us are not completely honest with our health care provider. Sometimes, we leave out important details, such as saying we consume alcoholic drinks only one evening a week, but failing to mention that we consume five to six beverages on that night. In some cases, we stretch the truth a little, or a lot, about our diet or exercise routine.

Why the falsehoods? Perhaps we believe the truth will make the doctor think less of us or judge us. *(Will he think I'm an alcoholic for drinking beer every night? Will he think I am lazy for not exercising? Will he think I am immoral because I am intimate with more than one partner?)*

Perhaps we fear we will be lectured. Or perhaps we do not want to admit, even to ourselves, that we are not doing what we know we should be doing.

The problem, however, is that a doctor can only treat us based on what we reveal, and failing to tell the truth (the *whole* truth!) about our physical and mental well-being can have devastating effects.

For example, if you claim you took a medication when you actually did not, your doctor may think the drug simply did not work. He may order unnecessary tests, increase the dosage, or prescribe something stronger, needlessly exposing you to potential side effects. Similarly, if you fail to tell your doctor about over-the-counter medicines, such as those that contain acetaminophen, you may end up taking a combination of drugs that can cause you to stop breathing, have a seizure, or go into cardiac arrest.

Patients who do not admit to drinking alcohol also face serious danger. Some antidepressants, for example, can cause heart palpitations when mixed with alcohol. If a doctor knows you sometimes drink, he can prescribe something that will not be problematic if you have a glass of wine.

Your entire health care team at the Michael E. DeBakey VA Medical Center wants you to be healthy and happy physically, mentally, and emotionally, but they cannot properly diagnose and treat you without accurate information. And that means all of it – the good, the bad, and the ugly.

Relax during appointments, trust your VA team, and give them the information they need so they can provide the best care for you. The more honest you are with them, the better chance they have of treating you safely and successfully. ♦

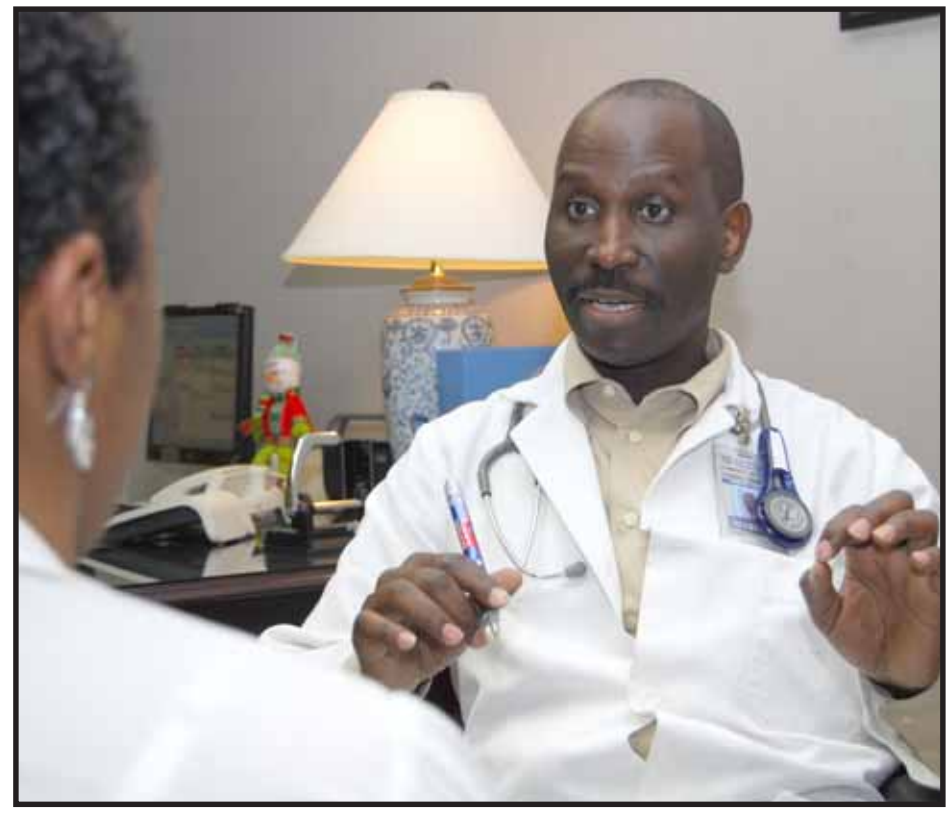


Photo by Bobbi Gruner, Public Affairs Officer

Primary Care staff physician Thomas Kumenda, M.D., answers a Veteran's questions during a recent visit. Remember, your health care provider can only treat you based on what you tell him or her, and failing to tell the complete truth about your physical and mental well-being can have devastating effects on your health.

Top 3 Lies Patients Tell Their Docs

What do patients lie about?

38% lied about following their doctors' orders
32% lied about their diet/ how much exercise they got
22% lied about smoking

Why do patients lie?

50% said they didn't want to be judged
31% said the truth was just too embarrassing
21% did not think the doctor would understand

Source: Editorial Survey on WebMD Health, "Why Do You Lie to Your Doctor?" www.medicinenet.com/script/main/art.asp?articlekey=46985

Sign up and Refill Your Prescriptions Online!

Visit *www.myhealth.va.gov* on the Internet and register today.

It's fast, easy, convenient, and secure!

New Mental Health Units

(continued from page 1)

developed world class expertise in treating chronic mental health problems, including post-traumatic stress disorder (PTSD), anger management, substance abuse, and depressive disturbances.

The MEDVAMC also added a mental health inpatient unit with 10 beds especially for women Veterans. By 2010, women Veterans will make up more than 14 percent of the total Veteran population. This new inpatient unit will respond to the distinctive mental health needs of this group and accommodate female Veterans who do not feel comfortable in mixed-gender treatment settings.

Women are 20 times more likely than men to endure sexual assault or sexual harassment in the military, according to specialists who counsel such Veterans. VA refers to these experiences as military sexual trauma or MST. Like other types of trauma, MST can negatively impact a person's mental and physical health, even many years later. Some problems associated with MST include disturbing memories or nightmares, feelings of depression or numbness, problems with alcohol or other drugs, problems with anger or irritability, and difficulty feeling safe.

The MEDVAMC Mental Health Care Line offers full interdisciplinary assessments of all patients and provides on-site treatment and referrals as needed, medication management, individual and group therapy, PTSD education groups, PTSD and substance abuse dual diagnosis groups, an intensive day hospital program, a sexual trauma track, a trauma recovery program, applied research such as medication trial and psychotherapy, a specialized smoking cessation program, alumni peer support groups, and coordination and formal consultation with the outpatient clinics in Beaumont, Conroe, Galveston, and Lufkin and the Houston Vet Centers. ♦

Bueller...Bueller...Bueller?

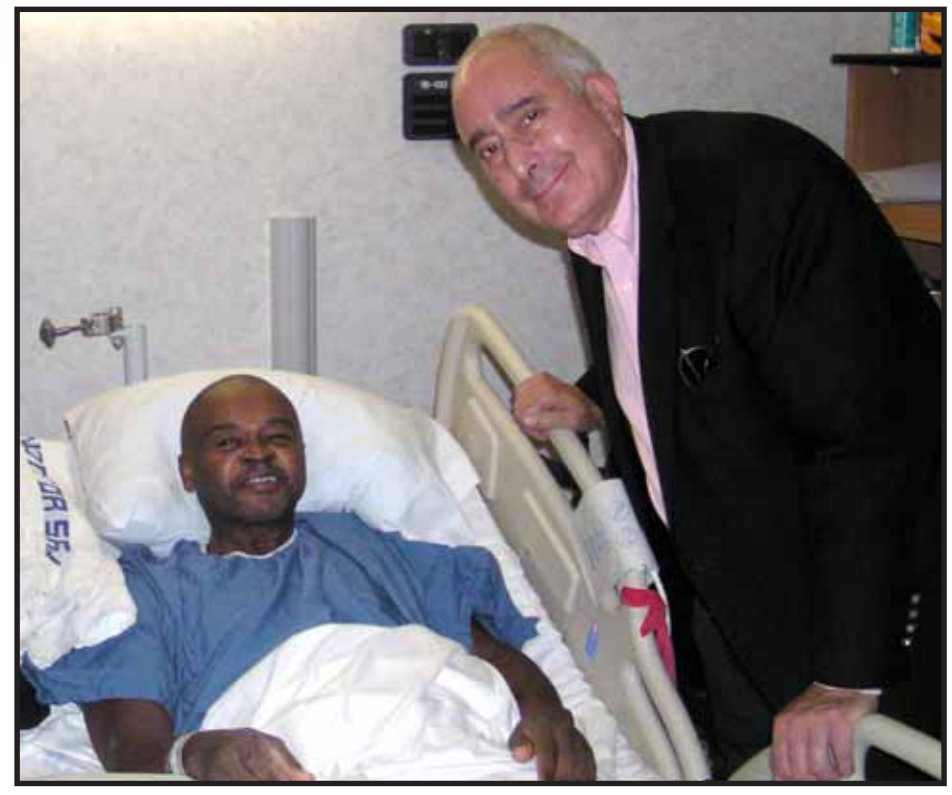


Photo by Nikki Verbeck, Voluntary Service Specialist

Actor and TV personality Ben Stein, best known for his supporting role as a teacher in the movie, Ferris Bueller's Day Off, talks with inpatient Veteran Sylvester Mitchell during a recent visit to the Michael E. DeBakey VA Medical Center. Visitors are always welcome and visits may be arranged by contacting the Volunteer Office at 713.794.7135 or Recreation Therapy at 713.794.7872.

Nation's "Best Doctors" Work at Houston VA

(continued from page 1)

annually. Only five percent of the doctors in the country are actually selected to become "Best Doctors." — *portions of this article courtesy Best Doctors, Inc., www.bestdoctors.com*

Daniel Albo, M.D., Ph.D.
Operative Care Line
Specialty: Surgical Oncology

Kimberly A. Arlinghaus, M.D.
Mental Health Care Line
Specialty: Psychiatry

Samir S. Awad, M.D.
Operative Care Line
Specialty: Critical Care Medicine

Elizabeth F. Baze, M.D.
Eye Care Line
Specialty: Ophthalmology

David H. Berger, M.D.
Operative Care Line
Specialty: Surgical Oncology

Carol Bodenheimer, M.D.
Spinal Cord Care Line
Specialty: Physical Medicine and Rehabilitation

Timothy Boone, M.D.
Operative and Spinal Cord Care Lines
Specialty: Urology

Blase A. Carabello, M.D.
Medical Care Line
Specialty: Cardiovascular Disease

Petros E. Carvounis, M.D.
Eye Care Line
Specialty: Ophthalmology

Maria Dajoyag-Mejia, M.D.
Spinal Cord Injury Care Line
Specialty: Physical Medicine and Rehabilitation

Rabih Darouiche, M.D.
Medical and Spinal Cord Care Lines
Specialty: Infectious Disease & Physical Medicine and Rehabilitation

Charles S. DeJohn, M.D.
Mental Health Care Line
Specialty: Psychiatry

Donald T. Donovan, M.D.
Operative Care Line
Specialty: Otolaryngology

Bruce L. Ehni, M.D.
Operative Care Line
Specialty: Neurological Surgery

Hashem B. El-Serag, M.D.
Research Care Line
Specialty: Gastroenterology

P. G. Shankar Giri M.D., F.A.C.R., F.A.S.T.R.O.
Diagnostic & Therapeutic Care Line
Specialty: Radiation Oncology

John A. Goss, M.D.
Operative Care Line
Specialty: Surgery

David Y. Graham, M.D.
Medical Care Line
Specialty: Gastroenterology

Richard J. Hamill, M.D.
Medical Care Line
Specialty: Infectious Disease

Michael H. Heggeness, M.D., Ph.D.
Operative Care Line
Specialty: Orthopedic Surgery

Helene K. Henson, M.D.
Rehabilitation Care Line
Specialty: Physical Medicine & Rehabilitation

Sally Ann Holmes, M.D.
Spinal Cord Injury Care Line
Specialty: Physical Medicine and Rehabilitation

Joseph Huh, M.D.
Operative Care Line
Specialty: Surgical Oncology

Daniel Hwan Kim, M.D.
Operative Care Line
Specialty: Neurological Surgery

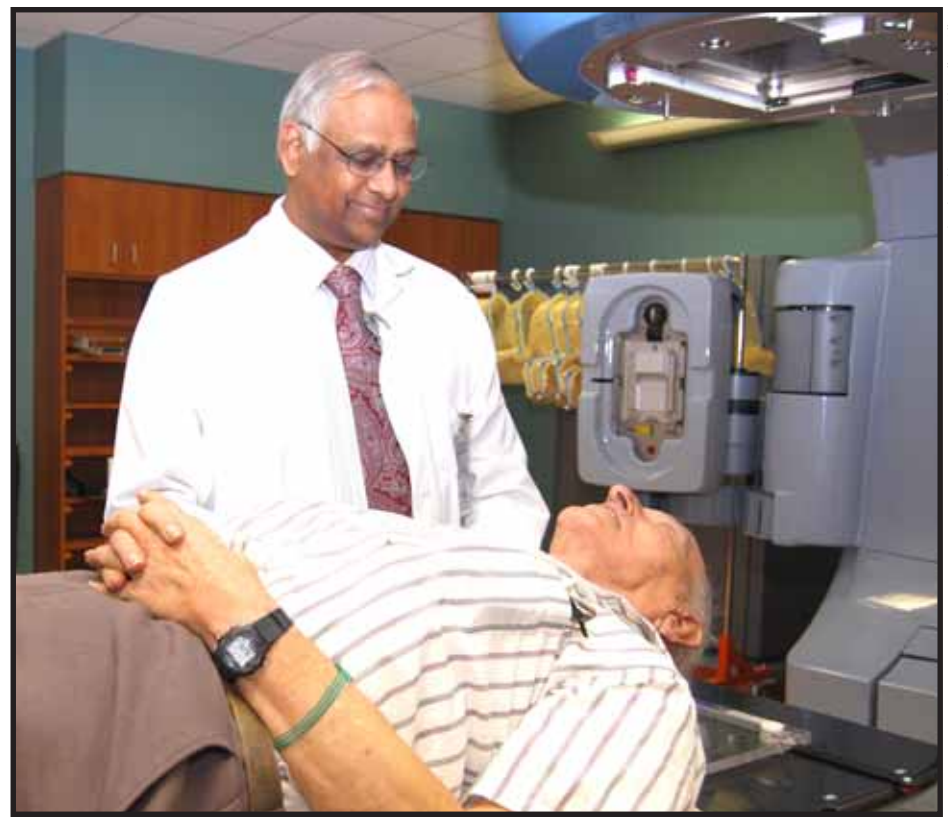


Photo by Bobbi Gruner, Public Affairs Officer

Listed as one of the best doctors in the nation in the field of radiation oncology since 1998, P. G. Shankar Giri M.D., F.A.C.R., F.A.S.T.R.O., chief of Radiotherapy Section, assists Veteran Everett Wehling during a procedure. Giri received his medical degree from St. John's Medical College, Bangalore University, India. He completed his therapeutic radiology residency at the Medical College of Virginia in 1980 and is board certified in radiation oncology.

Thomas R. Kosten, M.D.
Mental Health Care Line
Specialty: Psychiatry

Mark E. Kunik, M.D.
Mental Health Care Line
Specialty: Psychiatry

Daniel M. Musher, M.D.
Medical Care Line
Specialty: Infectious Disease

David T. Netscher, M.D.
Operative Care Line
Specialty: Hand Surgery & Plastic Surgery

Thomas F. Newton, M.D.
Research Care Line
Specialty: Psychiatry

Ida F. Orengo, M.D.
Medical Care Line
Specialty: Dermatology

Silvia D. Orengo-Nania, M.D.
Eye Care Line
Specialty: Ophthalmology

Robert B. Parke, Jr., M.D.
Operative Care Line
Specialty: Otolaryngology

Maria C. Rodriguez-Barradas, M.D.
Medical Care Line
Specialty: Infectious Disease

Theodore Rosen, M.D.
Medical Care Line
Specialty: Dermatology

George E. Taffet, M.D.
Extended Care Line
Specialty: Geriatric Medicine

Robert S. Tan, M.D.
Extended Care Line
Specialty: Family Medicine

Mitchell P. Weikert, M.D.
Eye Care Line
Specialty: Ophthalmology

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Interesting Facts about Our Nation's Veterans

♦ Veterans are better educated overall. In particular, 89% of Veterans age 25 and older have a high school diploma, compared to 31.6% of the general population. In addition, 25% of Veterans age 25 and older have at least a bachelor's degree, compared to 18.9% of the general population. *(Source: US Census Bureau Fact Sheet CB06-FF.17 of October 12, 2007; US Census Bureau 2009 Statistical Abstract Table 223.)*

♦ Veterans earn more than their peers. The median income for Veterans is 5% higher than the median income for the general population. *(Source: US Census Bureau Fact Sheet CB06-FF.17 of October 12, 2007; US Census Bureau 2009 Statistical Abstract Table 679.)*

♦ Veterans are less likely to suffer poverty. Overall, 5.6% of Veterans live in poverty, compared with 10.9% of the U.S. adult population in general. *(Source: Veterans: 2000 Census 200 Brief)*

♦ The most common service-connected disability for Veterans is in the muscoskeletal system (affecting about 40% of all Veterans who have service-connected disabilities.) This is followed by hearing problems (about 11%) and skin problems (about 10%.) *(Source: VBA Annual Benefits Report FY 2005)*

♦ While any homeless Veteran is a tragedy, about one in 180 Veterans is homeless. *(Source: VA News Release, "Secretary Shinseki Addresses the National Coalition for Homeless Veterans National Conference, May 21, 2009; "America's Wars" November 2008.)*

♦ Veterans are half as likely as non-veterans to be in prison - 630 prisoners per 100,000 Veterans, compared to 1,390 prisoners per 100,000 non-veteran U.S. residents. *(Source: Department of Justice Bureau of Justice Statistics news release April 26, 2007.)*

New Vet Center in Spring Holds Grand Opening

HOUSTON - The new Spring Vet Center will hold a Grand Opening Celebration on Friday, January 8, 2010, 10 a.m. at 14300 Cornerstone Village Drive, Houston, Texas 77014.

The Spring Vet Center is a premier facility designed to provide quality readjustment services to Veterans who have served in a combat theatre. These services include individual, group, military sexual trauma, Post Traumatic Stress Disorder, bereavement, and marital and family counseling. Community outreach activities plus medical referrals, assistance in applying for VA Benefits, employment counseling, and alcohol and drug assessments are also available.

The goal of the Vet Center program is to provide a broad range of counseling, outreach, and referral services to eligible Veterans in order to help them make a satisfying post-war readjustment to civilian life.

The Department of Veterans Affairs Vet Center program operates a system of 271 community-based counseling centers located in all fifty states, District of Columbia, Guam, Puerto Rico and the US Virgin Islands.

The VA also has 50 motorized vehicles, resembling super-sized recreational vehicles, that are driven to far-reaching rural areas to provide Veterans with Vet Center services. Each motor coach houses a satellite dish that connects to communications and audio-visual equipment, telephones, computers, four encrypted computer lines and WiFi gear. Two dividers separate the motor coach into private counseling rooms. The cushy blue seats, tables fit-for-two, and couches allow for either individual or small group counseling sessions.

The Vet Center Program was established by Congress in 1979 because of the recognition that a significant number of Vietnam era Vets were still experiencing readjustment problems.

In April 1991, in response to the Persian Gulf War, Congress extended the eligibility to Veterans who served during other periods of armed hostilities after the Vietnam era. These periods are identified as Lebanon, Grenada, Panama, the Persian Gulf, Somalia, and Kosovo/Bosnia. In October 1996, Congress extended the eligibility to include WWII and Korean Combat Veterans.

On April 1, 2003, the Secretary of Veterans Affairs extended eligibility for Vet Center services to Veterans of Operation Enduring Freedom (OEF) and on June 25, 2003, Vet Center eligibility was extended to Veterans of Operation Iraqi Freedom (OIF) and subsequent operations within the Global War on Terrorism (GWOT).

The family members of all Veterans listed above are eligible for Vet Center services as well. On August 5, 2003, VA Secretary Anthony J. Principi authorized Vet Centers to furnish bereavement counseling services to surviving parents, spouses, children, and siblings of service members who die for any reason while on active duty, to include federally activated Reserve and National Guard personnel.

Photo courtesy Houston Vet Centers staff

The Spring Vet Center is a premier facility designed to provide quality readjustment services to Veterans who have served in a combat theatre. These services include individual, group, military sexual trauma, treatment for Post Traumatic Stress Disorder, bereavement, and family counseling, as well as, community outreach activities.

Veterans have earned these benefits through their service and provided at no cost to the Veteran or family.

The new Spring Vet Center has approximately 3,000 square feet, including two group rooms and several offices that can be used for readjustment counseling. The Vet Center has a well-trained core staff, (many Veterans or combat Veterans themselves) comprised of psychologists, social workers, counselors, and an administrator. The center uses research-supported treatment methods designed to improve and help sustain the quality of life for Veterans, their families, and significant others during the readjustment process.

The Spring Vet Center is open Monday - Friday from 8 a.m. to 4:30 p.m. Evening and weekend hours are available for those unable to schedule services during the week day.

There are two other Vet Centers located in southeast Texas. One on 2990 Richmond, Suite 325, Houston, TX 77098, telephone 713.523.0884 and the other on 701 N. Post Oak Road, Suite 102, Houston, TX 77024, telephone 713.682.2288. ♦

SUPPORT GROUP LISTING

Talk with a social worker on your nursing unit or in your Primary Care Clinic about available support groups, meeting times, and locations.

Alcoholics Anonymous (AA)
Meets every Wednesday, 7 p.m., Room 6C-105. Facilitator: Bo Cook, 713-791-1414, ext. 6987

Amputee Support Group
Meets 4th Wednesday every month, 3 p.m., Nursing Unit (NU) 2A Dining Room. Facilitators: Betty Baer, 713-794-7793 & Stacy Flynn, 713-791-1414, ext. 4441

Better Breather's Club
Meets last Wednesday every month, 1:30 p.m., Room 3C-371, Home Oxygen Clinic. Facilitator: Paula Denman, 713-794-8979

Breast Cancer Survivors Support Group
Meets last Tuesday every month, 12 noon, Education Conference Room, 4th Floor, Room 4A-380H. Facilitators: Magdalena Ramirez 713-791-1414, ext. 5287

Cancer Support Group
Meets 2nd Tuesday every month, 2-3 p.m., Cancer Center Family Room, Room 4C-365. Facilitators: Maria Lozano-Vasquez, 713-791-1414, ext. 5273 & Douglas Ensminger, 713-794-7200

Fibromylgia Education & Support Group
Contact facilitator for information: Gabriel Tan, 713-794-8794

HIV Support/Educational Group
Meets every Tuesday, 2 p.m., Clinic 4, Room 1A-442. Facilitator: Magdalena Ramirez, LCSW, 713-791-1414, ext. 5289

Hepatitis C Support Group
Meets 1st Friday every month, 1:30 p.m., Primecare Clinic 5. Facilitators: Garfield Norris, 713-791-1414, ext. 6189 & Jodi M. Francis, 713-791-1414, ext. 3394

Mended Hearts (Heart Disease) Support Group
Meets 3rd Thursday every month, 11 a.m., Nursing Unit 2A Dining Room. Facilitators: Patricia Suarez, 713-791-1414, ext. 6101 & Rosa Lane-Smith, ext. 4034

Pain Coping Skills Training Group
Meets every Tuesday, 1 p.m., Room 5C-215. Facilitator: Gabriel Tan, 713-794-8794

Pain Education Group
Meets every Wednesday, 2 p.m., Room 5C-215. Facilitator: Gabriel Tan, 713-794-8794

Pain Support Group
Meets every Wednesday, 1 p.m., Room 5C-215. Group facilitator: Gabriel Tan, 713-794-8794

Parkinson's Disease Education & Support Group
Contact facilitators for information: Naomi Nelson, 713-794-8938 & Lisa Whipple, 713-794-7951

Stroke Support Group
Meets 3rd Tuesday every month, 3 p.m., Nursing Unit (NU) 2A Day Room. Facilitator: Lisa Whipple, 713-794-7951

Vet-to-Vet Support Group
Meets every Wednesday, 6 p.m., Room 6B-117; every Thursday, 9 a.m., 6B-117; and every Thursday, 11 a.m., Room 6C-166. Veteran facilitator. POC for more information: Sara Allison, 713-791-1414, ext. 3402

Liver Transplant Support Group
Meets every Tuesday 3 p.m., Room 5B-166, Facilitator: Juleena Masters, 713-791-1414, ext. 6286

Michael E. DeBakey Veterans Affairs Medical Center
2002 Holcombe Blvd.
Houston, Texas 77030
713-791-1414
www.houston.va.gov

Adam C. Walmus, MHA, MA, FACHE, Director
Carlos R. Escobar, BED-Arch, MHA, Associate Director
J. Kalavar, MD, Chief of Staff
Thelma Gray-Becknell, RN, MSN, Chief Nurse Executive/Clinical Practice Office Director
James W. Scheurich, MD, Deputy Chief of Staff
Francisco Vazquez, BSCS, MBA, Assistant Director
Bobbi D. Gruner, BS, MSBA, Public Affairs Officer/Editor
Frances M. Burke, Public Affairs Specialist/Writer

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Building Partnerships between Recent and Past Stroke Survivors to Boost Recovery

Stroke Peer Visitor Program

Photo by Babbi Gruner, Public Affairs Officer

Barbara Kimmel, MS, MSc., CCRP, clinical research coordinator and Kirk Zihlman, MS, research coordinator (in white lab coat) join four of the five stroke peer Veteran volunteers. From left, Clarence Witherspoon, Edward Flynn, Kenneth Dexter, and Donald Foisie. Some of the Veterans, who are currently received help from peer Veterans, have expressed their interest in becoming peer visitors themselves once they complete the intervention program.

HOUSTON - A stroke diagnosis can be a devastating experience. It is very common for stroke survivors to be fearful of the future, feel unclear about expectations for recovery, and suffer anxiety, frustration, and depression. Now at the Michael E. DeBakey VA Medical Center (MEDVAMC), Veterans who have suffered a stroke have the opportunity to talk to other Veterans who have lived through the same experience and gain support in managing their daily life.

In partnership with investigators from the Veterans Health Administration Stroke Quality Enhancement Research Initiative, MEDVAMC researchers are currently conducting a study to determine the effects of a peer visitor program for stroke survivors. The Stroke Peer Visitor Program is based on the American Stroke Association Share Giver Program and being implemented as part of multiple research initiatives at the MEDVAMC Stroke Center.

Therefore, the primary role of a peer visitor is to listen to the stroke survivor or family member and to offer support based on experience. If possible, peer visitors are encouraged to visit Veterans during the hospital stay. If the Veteran has already been discharged from the hospital, the peer visitor calls the Veteran at home to initiate contact.

"The Veteran stroke survivors I work with seem to be more at ease after talking with me and have a more positive outlook for the future," said Veteran Donald Foisie, who has volunteered for more than six months. "Most have a real fear of the unknown and what is going to happen in the future."

"My motivation in the program is to give something back to stroke patients. I believe sharing conversation about each other's experiences is very therapeutic," said Veteran Ken Dexter, another program volunteer. "Whether on the phone or in person, it is always great to see and hear how relaxed and open the patient becomes knowing that someone would spend the time and effort to listen. This is so important toward recovery."

There are currently five stroke peer Veteran volunteers who have completed training on peer interactions in the program. These peer visitors have been assigned to ten Veterans who have suffered a recent stroke. As Veterans and stroke survivors themselves, the peer visitors offer support and encouragement through the perspective of experience and a common bond Veterans share.

"Every Veteran stroke survivor I work with is more than grateful for the one-on-one contact from a fellow Veteran. All are very at ease talking with me, and are really eager to open up with questions," said Foisie. "This has been a very gratifying experience for me."

Although, the Stroke Peer Visitor Program is still in the implementation phase, positive relationships have developed that may contribute to stroke patients experiencing an enhanced recovery.

"I retired and was spending a lot of time at home and wanted to do something useful. Volunteering for the study allowed me to get involved with stroke survivors, and to help them with their recovery - to do something useful and give back to my fellow Veterans," said Veteran Edward Flynn. "One of the most meaningful events was the encouragement and support I shared with a Veteran who passed away. Before he died, we developed a strong friendship and I helped him deal with various family problems. I feel like I made a difference in his life."

Some of the Veterans, who are currently receiving help from peer Veterans, have expressed their interest in becoming peer visitors themselves once they complete the intervention program.

For more information about studies conducted at the Stroke Center, contact the Study Coordinator Barbara Kimmel, MS, MSc., CCRP, at 713-791-1414, ext. 6281. ♦ *Barbara Kimmel*

Expert's Corner

Nicholas Masozera, M.D., director of the Michael E. DeBakey VA Medical Center's Primary Care, offers ten sure-fire ways to ensure your next doctor's appointment unfolds without a hitch. **And please don't be a "No-Show."** Call the Appointment Center at 713.794.8985 or toll-free 1.800.639.5137 to cancel or reschedule your appointment so it may be used by another Veteran in need of medical attention.

1 Make a list. "Before the appointment, write down the things you want to discuss. If the list is long, prioritize by putting your most pressing questions first."

2 Remember your meds. "Bring your medications with you or at least bring a list of what you are taking. Include non-prescription pills, vitamins, herbals, and anything you take on a regular basis."

3 Don't wait in line. "Avoid the crowds, save time, and have your blood drawn in your Primary Care Clinic. You can also have blood drawn a few days before your appointment (afternoons are usually slow times) or at any one of the VA Outpatient Clinics in Beaumont, Conroe, Galveston, and Lufkin."

4 Invite a friend. "Companions can remind you what to say during your appointment. They can also contribute their point of view and help you recall things after the session ends."

5 Arrive with pen and paper in hand. "Take notes or ask the doctor or your friend to write things down during the appointment. This way, you won't forget anything before you get home."

6 Scrub up. "It is okay to remind your doctor to wash his or her hands. The best way to prevent the spread of the flu and other diseases is to thoroughly wash your hands with soap and water or alcohol-based hand rubs."

7 Relax! "Try not to feel intimidated. Your doctor is smart, but no one knows you and your body better than you."

8 Ask questions. "If you do not understand something your doctor says, ask him or her to explain. It is very important for you to understand your medical condition and what is being done to treat it."

9 Get contact info. "At the end of the appointment, ask your doctor what is the best way to contact him or her and ask if they have a nurse to call with questions."

10 Nurse hotline. "If you have a question or concern about your medical condition or prescription between doctor's appointments, call the VA Network Telecare Center Hotline at (713) 794-8985 or toll-free 1-800-639-5137. Registered nurses, pharmacists, and administrative clerks are ready to answer health care questions 24 hours a day, seven days a week."

Veterans' Questions

Answers provided by Patient Advocates in Consumer Affairs
Room BA-200 (Basement)
(713) 794-7884
or email
vhahougeneralquestions@va.gov

Question: Many times there are no wheelchairs available on the 1st Floor. What is being done to address this shortage?
Answer: The Michael E. DeBakey VA Medical Center has ordered an additional 100 wheelchairs. If you need a wheelchair at the main entrance and none are available, go to the Information Desk and ask the personnel there to call Escort for assistance. An additional 25 wheelchairs have been assigned to Escort for this purpose.

Question: Hospital food is hospital food. Is anything being done to provide better meals for inpatients?
Answer: The Nutrition and Food Service is always looking for ways to better meet Veterans' needs. Quarterly, inpatients are surveyed and and the results are incorporated into the menu.

The special meal served for Veterans' Day included Shrimp Cocktail and Prime Rib. This meal was based upon requests from patients. Patient surveys continue to rate Nutrition and Food Service as excellent 99 - 100 percent of the time in courtesy and responsiveness.

There are plans to replace the current Patient Tray Delivery System which ensures cold food items are served cold and hot food items served hot.

Daily, Monday through Friday, Nutrition and Food conducts a taste panel of all food items prepared for patient meal service. Ward staff are invited to taste the 25 - 30 items prepared for both regular and modified diets. The Pureed Diet which incorporates the regular diet items for patients with swallowing difficulty has received rave reviews.

A Room Service on Demand Project has been proposed. This service would allow inpatients to eat what they want when they want. A first step in this direction is serving buffet meals in the Community Living Center (Long Term Care Units). Nutrition and Food recently conducted a trial and served a variety of items currently served on patient trays. The feedback was tremendous as residents raved about the food.

Question: Is it safe for my medication records to be stored electronically?
Answer: The VA Computerized Patient Record System is safe and it can save your life. For example, if a provider prescribes a medication for you that may interact with other drugs you take or that you may be allergic to, the computer alerts the doctor immediately. The electronic records system also allows your health care providers to see what other VA providers prescribe for you; and if you travel, your electronic medication record is available to providers at any VA facility across the country.

Question: What services do VA social workers provide?
Answer: Social workers in VA medical centers can help you with almost any issue. They find programs that offer financial or housing assistance, they help you with transportation needs, and they assist you with enrollment in VA or community programs such as Meals on Wheels. Social workers arrange for help after you are discharged from a VA hospital, and they can also explain to you about issues such as advanced care directives, living wills, organ donation, or hospice care. Talk to the social worker on your nursing unit or in your clinic for more information.

Question: I recently got out of the Army. Does the free health benefits for five years cover things that happened after I got out?
Answer: In an effort to enhance benefits for many of our nation's Veterans, the National Defense Authorization Act of 2008 extends the period of enhanced VA health care eligibility provided to Veterans who served in a theater of combat operations after November 11, 1998. Under the "Combat Veteran" authority, the VA provides cost-free health care services and nursing home care for conditions possibly related to military service and enrollment in Priority Group 6, unless the Veteran is eligible for enrollment in a higher priority of care.

This benefit applies to OEF/OIF Veterans, currently enrolled Veterans, and new enrollees who were discharged from active duty on or after January 28, 2003, and good for five years after discharge. Additionally, Veterans discharged from active duty before January 28, 2003, who apply for enrollment on or after January 28, 2008, are eligible for the enhanced benefit until January 27, 2011.

Veterans, including activated Reservists and members of the National Guard, are eligible if they served on active duty in a theater of combat operations after November 11, 1998, and have an honorable discharge. Health benefits include cost-free VA health care and medications provided for conditions potentially related to combat service.

Veterans can become "grandfathered" for future access by enrolling with VA during this period. Veterans with service-related injuries or illnesses always have access to VA care for the treatment of their disabilities without any time limit, as do lower-income Veterans.

Question: What illnesses are considered "presumed" service-connected for Vietnam Veterans exposed to the herbicides referred to Agent Orange?
Answer: The 15 illnesses are Acute and Subacute Transient Peripheral Neuropathy, AL Amyloidosis, Chloracne, Chronic Lymphocytic Leukemia, Diabetes Mellitus (Type 2), Hodgkin's Disease, Multiple Myeloma, Non-Hodgkin's Lymphoma, Porphyria Cutanea Tarda, Prostate Cancer, Respiratory Cancers, and Soft Tissue Sarcoma (other than Osteosarcoma, Chondrosarcoma, Kaposi's sarcoma, or Mesothelioma), plus the new additions of B Cell Leukemias such as Hairy Cell Leukemia, Parkinson's Disease, and Ischemic Heart Disease.

For more information, contact the Houston VA Regional Office at 713.393.1999.

Important VA Telephone Numbers

Michael E. DeBakey VA Medical Center 713-791-1414
toll-free 1-800-553-2278
VA Network Telecare Center 713-794-8985
toll-free 1-800-639-5137
Beaumont VA Outpatient Clinic 409-981-8550
toll-free 1-800-833-7734
Conroe VA Outpatient Clinic 936-522-4000
toll-free 1-800-553-2278, ext. 1949
Galveston VA Outpatient Clinic 409-761-3200
toll-free 1-800-553-2278, ext. 12600
Lufkin - Charles Wilson VA Outpatient Clinic 936-671-4300
toll-free 1-800-209-3120
Pharmacy Refills 713-794-7648
toll-free 1-800-454-1062 or www.myhealth.va.gov
Pharmacy Helpline 713-794-7653
Suicide Prevention Hotline ..... toll-free 1-800-273-TALK (8255)
Appointment Center ..... toll-free 1-800-639-5137
Automated Appointment Information 713-794-7648
toll-free 1-800-454-1062
VA Eligibility & Enrollment 713-794-7288
Health Care for Homeless Veterans Program 713-794-7848
Homeless Veterans Drop-In Center (1418 Preston St.) 713-794-7533

Operations Enduring Freedom & Iraqi Freedom Support Team
Team Members 713-794-7034/8825/7928

Vet Center (701 N. Post Oak Road) 713-682-2288
Vet Center (2990 Richmond Ave.) 713-523-0884

Patient Advocates
Houston 713-794-7884
Beaumont ..... 1-800-833-7734, ext. 113
Conroe ..... 936-522-4010, ext. 1952
Galveston ..... 713-791-1414, ext. 6586
Lufkin 936-671-4362

Houston VA National Cemetery 281-447-8686

VA Regional Office 713-383-1999
toll-free 1-800-827-1000

National Salute to Veterans Week

February 7-13, 2010

National Salute to Veterans is a great opportunity for community members and organizations to visit the Michael E. DeBakey VA Medical Center, meet America's Veterans, and explore various aspects of the facility's volunteer program.

Don't forget to send your Valentine's Day cards and letters to Veteran inpatients by mailing them to MEDVAMC, Mailcode: 580/00X, 2002 Holcombe Blvd., Houston, TX 77030.

For more information, call 713-794-7135.