



# The Journal

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U.S. Navy photo by MC3 Julio Martinez Martinez



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# Symposium Focuses on Integrated Naval Surface Force

By MC3 Brianna L. Bowens  
www.navy.mil

The 30th Annual Surface Navy Association (SNA) National Symposium concluded following three days of networking and information sharing highlighted by keynote addresses and panel discussions from naval leaders in Crystal City, Jan. 11.

The symposium focused on "Surface Forces and Cross Domain Integration," which highlights common procedures and combined exercises across the air, land, maritime, space, and cyberspace domains in preparation for a more powerful and integrated Naval Surface Force.

Adm. Philip Davidson, Commander, U.S. Fleet Forces Command (USFFC), delivered the final day's keynote address, in which he discussed the Comprehensive Review (CR) of Surface Force Incidents, a report that reviewed surface fleet operations and incidents at sea that have occurred over the previous 10 years. The purpose of the review was to identify shortfalls and areas of improvement throughout the surface force, and make detailed recommendations with respect to corrective actions necessary to ensure safety of personnel, safe operations at sea and improve overall readiness.

"The CR team consisted of 34 people that ranged in rank from E-5 to O-10 that came from all communities," said Davidson. "We also assembled a group of mentors to help think through the problem, and they were extraordinary, because they had experience, many of them in reviewing incidents like this previously, but also they brought individual skills that were extraordinarily helpful. They helped think through the problems



PHOTO BY MCI NATHAN LAIRD

**Chief of Naval Operations, Adm. John Richardson delivers the keynote address during the Surface Navy Association's 30th annual national symposium.**

and what the outcome needed to be. That is to create a safer and more effective surface force going forward, with emphasis on seamanship and navigation."

Davidson went on to discuss some of the recommendations and conclusions resulting from the review. He concluded his remarks by thanking those in attendance for their contributions and emphasized the importance of implementing the recommendations outlined in the review.

"Trust me...we're going to get after this. There's no doubt about it," said Davidson. "There's a lot of energy and effort and money going into this to get this solved."

Principal Military Deputy Assistant Secretary of the Navy for Research, Development and Acquisition, Vice Adm. David Johnson, moderated the symposium's final panels, shipbuilding and ship maintenance. Both panels consisted of Navy and Coast Guard leaders and focused on current and future force structure, industry investments and

partnerships, investments in ship platforms and ship systems, and the National Security Strategy.

"Our nation needs a stronger Navy," said Johnson. "There are three interrelated elements to the ships and ship system parts of that stronger Navy-capacity, building and sustaining ships; capability, with new and modernized systems; and maintenance keeping our ships at sea. The pace of delivery, christening and commissioning's continue and is increasing. The key to delivering this pace of capacity is to sustain stable acquisition profiles, building the base in industry for future growth as the nation demands. Affordability is critical to achieving the Navy the nation needs, the force structure, the modernization and the maintenance."

SNA was incorporated in 1985 to promote greater coordination and communication among the military, business and academic communities who share a common interest in naval surface warfare and to support the activities of Surface Naval Forces.

## Bethesda Notebook

### NCO Induction

The Walter Reed National Military Medical Center/U.S. Army Element-North NCO Induction Ceremony will be Jan. 19 from 10 a.m. to noon in Memorial Auditorium. Everyone is invited to attend and welcome the newly promoted Army sergeants into the Corps of Noncommissioned Officers. For more information, contact Master Sgt. Ernest Lubin at 301-319-2512.

### Army Nurse Corps Birthday

Walter Reed Bethesda observes the 117th Army Nurse Corps Birthday Jan. 29 at 11 a.m. in Clark Auditorium. Army Maj. Gen. Barbara Holcomb will be the guest speaker. This year's theme is "Keeping You in the Fight Since 1901."

### Children's Dental Health

In observance of National Children's Dental Health Month during February, Walter Reed National Military Medical Center and the Navy Medicine Professional Development Center will perform oral screenings and cavities assessments on all children ages 1 to 12 years with base access (TRICARE eligibility not required) on Feb. 2 from 8 a.m. to 2 p.m. in the America Building, fourth floor Pediatrics Clinic. The day's event will also include face painting, storytelling and games focused on teaching children good oral habits. For more information, contact Hospitalman Rogers at 301-295-1364.

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# WRNMMC's MEDEVAC Team Assists Capital Beltway Accident Victims

By Bernard S. Little  
WRNMMC Command Communications

Returning to Walter Reed National Military Medical Center from an outbound mission at Joint Base Andrews, Maryland proved to be anything but routine for WRNMMC's joint-service MEDEVAC team the morning of Jan. 2.

On their way back to the medical center after taking a patient to Andrews that morning, the four-member team encountered a serious multi-vehicle accident involving a semi-trailer truck and four other vehicles on the Capital Beltway near New Hampshire Avenue.

"[Our] ambulance drivers, Army Spc. Mahadi Haque and Navy Hospital Corpsman 3rd Class Stephen Bubenko, noticed that we had come up on [the] accident [and] there was no EMS or police present," explained Air Force Capt. Amber Hadjis, a nurse on the MEDEVAC team who primarily works in WRNMMC's surgical intensive care unit.

"Several cars were involved [in the accident] and people were outside of their cars appearing to need help," Hadjis continued. "As soon as we stopped, Specialist Haque and HM3 Bubenko jumped out of the ambulance and started triaging and assessing those who needed help," she added.

Haque, an Army combat medic since June 2015, has been assigned to WRNMMC since January 2016. In addition to the MEDEVAC team, he has worked in WRNMMC's medical/surgical and neonatal intensive care units. Bubenko has been in the Navy since October 2013 as a corpsman.

ICU registered nurse, Air Force Capt. Lyndsey Rigby, a six-year Air Force veteran, was also a part of the MEDEVAC team that day. She has worked with the MEDEVAC since September.

Hadjis explained that the accident resulted from the semi truck rear-ending a car causing a chain reaction involving the other three vehicles. "The man whose car was hit by the semi had been pulled from his vehicle and was standing unsteadily. Specialist Haque and Captain Rigby lowered him to the ground while HM3 Bubenko and I grabbed supplies [including] a backboard, C-collar, and some dressings for a laceration to the back of his head where it was bleeding," she added.

"We put him onto the backboard and stretcher and got him into our ambulance. Specialist Haque and Captain Rigby even helped direct traffic to ensure the scene was as safe as possible, and HM3 Bubenko helped coordinate a plan for the patient," Hadjis continued.

She said civilian EMS arrived on the scene after several minutes.

"I stayed with the patient in the ambulance and set up a monitor to get his vitals," Hadjis continued. "The patient was stable, but he did not remember what had happened, in addition to the laceration to his head. I explained this to the paramedic, and then found out that they needed help transporting the accident victims to a local civilian hospital.

"Our team made sure this was alright with our military leadership, which it was, and we transported the male victim to Suburban Hospital [in Bethesda, Maryland] for further work-up," Hadjis explained. "We arrived there, gave our report to the doctors



PHOTO BY BERNARD S. LITTLE

**A MEDEVAC team from Walter Reed National Military Medical Center, (from left) Air Force Capt. Amber Hadjis, Army Spc. Mahadi Haque, Air Force Capt. Lyndsey Rigby and Navy Hospital Corpsman 3rd Class Stephen Bubenko, assisted victims of a multi-vehicle accident on the Capital Beltway Jan. 2.**

and nurses, and they upgraded him to a level 2 trauma patient due to positive seat belt signs," she added. Positive seat belt signs are abrasions and/or contusions associated with seat belt restraint, the nurse explained.

Hadjis had high praise for the action of her team's two medical techs, Haque and Bubenko, in their response to the situation.

"[They] did not hesitate to render assistance," she said. "They made the decision to stop, as Captain Rigby and I were in the back of the ambulance and couldn't tell what had happened. As soon as we stopped they immediately started assessing the situation and deciding how to help and formulating a plan of action."

Bubenko explained that this was why he joined the Navy – to care for and assist people.

"I pursued a job in the medical field because I want to help people, [and] being a Navy corpsman, I can do just that," said the native of Allentown, Pennsylvania.

Haque shared similar sentiments.

"I'm originally from Lansdale, Pennsylvania and did firefighting and EMS there as a civilian," he explained. "The medical field offers a uniquely rewarding feeling that can't be measured," the Army medic added.

Rigby, a Michigan native, also expressed a passion for helping people as a motivating force in her becoming a nurse. She's been an ICU RN for more than nine years. "I have a passion and drive to be a part of the healing process. Being a nurse isn't a job, it's a calling," she said.

Hadjis, who hails from Minnesota, has been assigned to WRB for two of her six years in the Air Force. The Air Force captain explained she became a nurse for the enjoyment of "helping people, figuring out disease processes, and seeing people get better."

Although the accident was tragic for the victims, Hadjis said the day was "very rewarding" in that no lives were lost and the MEDEVAC team was able to assist the injured.



PHOTO COURTESY OF ARMY SPC. MAHADI HAQUE

**A MEDEVAC team from Walter Reed National Military Medical Center assisted victims of a multi-vehicle accident on the Capital Beltway Jan. 2.**

"Our team functioned great together," Hadjis said. "We all had a role and all worked together to get the patient to the higher level of care that he needed. For never doing a civilian EMS transport before, I think it went really well. The patient and his wife, who we called to update, were very grateful," she added.

"We have since spoken to the [accident victim's] family," Haque furthered. "The patient is stable but suffered rib and spinal fractures from the accident, in addition to the injuries described by Captain Hadjis. His injuries required surgery," he continued.

Haque said there were five patients total from the five vehicles involved in the accident.

"The four of us [on the MEDEVAC team] worked very well together despite the change of environment, different scopes of practice, experience and different branches of service," Haque added.

# NSAB Hosts Annual MLK Tournament



Photos by MC3 Julio Martinez Martinez  
NSAB Public Affairs

NSA Bethesda Warriors played the Fort Meade Patriots during an annual Martin Luther King Jr. weekend tournament Jan. 13. The tournament consisted of seven teams. The Warriors finished second.



# USU Surgeon Teaches High Schoolers How to ‘Stop the Bleed’

By Christopher Austin  
USU Public Affairs

The ninth graders of River Hill High School in Howard County, Maryland, filed into the gym and took their seats on the bleachers, abuzz with excitement. Their schedules were different — to make room for visiting health professionals from the Uniformed Services University of the Health Sciences (USU), Maryland Shock Trauma Center, and Howard County Fire and Rescue (HCFR) who were there to teach the students how to save lives through the Stop the Bleed campaign.

One of the providers, Army Col. (Dr.) Kyle Remick, has been supporting Stop the Bleed since its inception. The Stop the Bleed initiative was launched by the White House in 2015 to encourage bystanders to become trained, equipped, and empowered to help victims in a bleeding emergency before professional help arrives.

Remick, an associate professor in the Department of Surgery at USU, is responsible for teaching the next generation of military physicians to care for life threatening injuries, and as a trauma surgeon at Walter Reed National Military Medical Center, he has seen his share of traumatic injury patients. But, he felt the need to pass that knowledge along to a wider audience.

“I was doing all this work for the Department of Defense, trying to translate these lessons and realized I hadn’t done anything in the place where I live, specifically for the high school that my son goes to,” he said. “I had already been involved in the Parent-Teacher-Student Association and realized it would be good to have [this training] in high school.”

Remick contacted Dr. Matt Levy, the medical director for HCFR and associate professor of Emergency Medicine at Johns Hopkins University, to discuss setting up training. It turned out that Levy had already been promoting Stop the Bleed in the county, advocating for placement of Stop the Bleed emergency kits in public areas, including schools. It was these kits that the RHHS students would be learning about.

The freshmen were first given a presentation and taught to identify life-threatening wounds; for example, one spurting blood, or a patient who has already lost over half a cup of blood. In the United States, it takes emergency services on average 10 minutes to arrive at a location when they are called. In that time, a person can lose enough blood from a serious cut or gunshot wound to be fatal, but with the use of a tourniquet and/or medical gauze, death may be prevented.

A student wearing purple rubber gloves practices applying a tourniquet to one of his classmates.

Students were split into groups to test what they learned on extremity simulators, provided by Shock Trauma and HCFR, made up with realistic-looking traumatic injuries. Volunteers from Shock Trauma guided them. They were given the emergency kits, which contained gloves, a tourniquet and gauze. Before doing anything, they were instructed to put on their gloves, with instructors emphasizing the importance of using gloves whenever touching blood to prevent infections for both the wounded and the responder.

Students practiced putting the tourniquets on one another and on the simulators, with the volunteer staff reinforcing they should only use them on bleeding limbs. Students were then instructed to apply the tourniquet so it sits between the heart and the wound, tightening it until blood flow ceased. Once the bleeding



PHOTO BY CHRISTOPHER AUSTIN

**During the ‘Stop the Bleed’ training, students were encouraged to practice applying tourniquets to one another to get a feel for how much effort is needed to stop blood flow. Students were careful not to go too far with their practice.**

has stopped, or if the cut is on the torso, it is time to apply gauze, students were told.

“You want to make sure that you pack the deepest spot of the wound that’s bleeding [with gauze], and not just wad up the gauze and put it on top of the wound,” Remick said. “That’s why there’s a model we use. If we just open up a bandage and stick it on the outside of the cut, it doesn’t do nearly as much. You specifically need to take the end of the gauze and push it down deep into the hole.”

A volunteer from Howard County Fire & Rescue shows three students how to stop bleeding using a tourniquet and gauze on a model of a human limb with artificial wounds put in it. The volunteer puts pressure on the fake limb while one of the students — who is wearing gloves — manipulates the tourniquet. A camera sits on a tripod to the right, filming this, with a hand holding a microphone out to capture sound.

“I liked how it was really hands-on, we didn’t just listen to a presentation,” said Maddie Florenzo, one of the students taking part in the training. “I think it will really help for future experiences, if I ever get into a situation where someone has a life-threatening injury.”

Remick believes that RHHS is the first high school in the state of Maryland to give Stop the Bleed training to students. The event was a collaboration between USU, HCFR, Shock Trauma, the Maryland Committee on Trauma and the Howard County Public School System.

Students and teachers were excited by the exercises, and very satisfied with the training they received, leaving with confidence that they will be able to properly respond to a bleeding emergency.

“This is my favorite thing to teach,” said Sybil Modispacher, the health teacher at River Hill High School. “It’s a life skill that students can take with them into the world.”

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# NEXCOM CEO Announces Early Rollout of Type III Uniform to All Navy Regions

By Courtney Williams  
NEXCOM Public Affairs Officer

Retired Rear Adm. Robert J. Bianchi, chief executive officer, Navy Exchange Service Command (NEXCOM) announced the conclusion of the Navy Working Uniform (NWU) Type III uniform rollout.

This final rollout began Monday, Jan. 8, ahead of schedule in Navy Region Northwest, Mid-Atlantic, Japan, Korea and Naval District Washington. This concludes the rollout of the Type III uniform in all NEX stores throughout all Navy Regions.

“At NEXCOM we are proud to support our deserving Sailors and families,” said Bianchi. “A key part of our mission is to provide the Navy’s newest uniforms to our Sailors, and so we’re excited to roll out the Type III uniform earlier than originally planned.”

Tom Jacobsen, NEXCOM Tidewater District vice president explained that, “NEX associates in the region are eager to assist Sailors who have any questions on the manner of wear of the Type III uniforms.” Jacobsen said, “Our NEX uniform associates are subject matter experts and have all the necessary guidance to help any Sailor with concerns regarding sizing or fit. We will continue to support our Sailors to ensure they look sharp in the new Type III uniform.”

Mallory, a Navy Lt., purchased her new Type III

uniform at NEX Norfolk Monday morning. She said, “NEX Norfolk was fully stocked and the NEX uniform associates were incredibly helpful and pulled a variety of sizes to ensure a correct fit.”

“Throughout the region we are prepared, fully stocked and ready with the Type III uniform,” said Jean Bergquist, NEXCOM Northwest District vice president. “We have the greatest job and that’s to serve our Sailors, so we continue to stock our shelves and assist our customers with any and all uniform matters.”

In accordance with NAVADMIN214/17, individual commanding officers will determine certain items for wear at their commands, such as the color/type of boot and ballcap. On Oct. 1, 2017, Recruit Training Command Great Lakes began issuing the Type III uniform with black boots to all new recruits and by Oct. 1, 2019, the Type III uniform will be a mandatory seabag item for all Navy Sailors.

Type III uniforms will be available for purchase online at MyNavyExchange.com by the end of January.

As the NEX rolls out the Type III within each region, the legacy NWU Type I “blue camouflage” uniforms will be removed from the NEX shelves to make room for the Type III NWUs. However, Sailors will still be able to purchase Type I components by calling the NEX Uniform Support Call Center at 877-810-9030 in the continental United States and 001-877-432-1736 overseas.



PHOTO BY MC3 JULIO MARTINEZ MARTINEZ

Ensign Curt Christen is fitted for his Navy Working Uniform (NWU) Type III on Jan. 16. The uniform is currently being rolled out to the fleet to replace the NWU Type I.

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\*REGISTER ONLINE at [www.navymwrbethesda.eventbrite.com](http://www.navymwrbethesda.eventbrite.com).

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# New Year, New You—WRNMMC professionals share tips to successful New Year resolutions

By A.J. Simmons

WRNMMC Command Communications

The new year has begun, and so too have seemingly infinite resolutions for people across the nation. However, all too often we find our resolutions being abandoned as quickly as they began.

“A new year provides opportunity for reflection on where we are in our lives, where we’re satisfied and where we’d like to improve,” explained Public Health Service Cmdr. Arlin Hatch, the chief of the Resiliency and Psychological Health Service at Walter Reed Bethesda.

Hatch and his team of resilience and wellness professionals offer services to patients and staff at WRB that support recovery, growth and the ability to adapt to challenges associated with the “high visibility, high operational temperature environment.”

“When considering areas for positive change, rather than trying to make immediate broad and sweeping change, it’s better to identify one or two focus areas where we can make small steps of improvement that will be sustainable over the long haul,” Hatch continued. He recommended making use of the “SMART” acronym for making goals, meaning that they should be Specific, Measureable, Achievable, Realistic and Time-Based.

Travis Combest, exercise physiologist for Outpatient Nutrition Services at WRB, agreed with Hatch: “Sometimes if you’re setting [goals] that are too lofty, you can kind of burn out. The point is that you want to make progress and get better.”

Combest—who helps service members and dependents with weight loss, getting in shape and mission readiness—noted that focusing on gradual progress is one of the keys to a healthy and achievable goal, saying, “Some people think they have to do an hour [of exercise] to start with. But if you start going and doing 10 minutes and you start building some momentum and you start increasing it, then you’ve made progress. You’re starting to implement things as opposed to doing something and stopping.”

Hatch echoed Combest’s sentiment, “Remembering the reason the goal is important to us can help sustain our motivation. Likewise, tracking



COURTESY PHOTO FROM TRAVIS COMBEST

**Travis Combest, exercise physiologist for Outpatient Nutrition Services at Walter Reed Bethesda, recommends people not set exercise goals that are too lofty. “You can kind of burn out. The point is that you want to make progress and get better,” he said.**

and celebrating progress along the way allows us to see achievement and persevere.”

“Goals that promote overall wellness can have spillover benefits in making us more resilient to life’s difficulties and simultaneously support our psychological health,” Hatch added. “These could include choosing a goal that would enhance physical health, healthy eating or sleep, a goal to support better work-life balance or expand adaptive strategies for stress management.”

To help service members and dependents pursue healthy, successful New Year resolutions, the Outpatient Nutrition Services department has also launched its Soar into Shape program. The 12-week program aims to promote and track healthy behaviors among participants, particularly in regards to healthy nutrition and exercise goals.

Of these goals, Combest explained,

“Sometimes you can make substitutions for things that you’re already doing, and that’s one way of getting better. So, for example, if you’re eating white rice, then maybe switch to brown rice. If you are walking currently, maybe you can start putting a gradual incline on the treadmill. So it’s [important] to make substitutions for things you’re doing and gradually increase your exercise.”

However, as is sometimes the case, people fall short of their goals on occasion. Hatch explained that this should not be viewed as failure: “Part of the change process involves falling short from time to time. If we can accept that as a normal part of the change process, we can get back on track more quickly and ultimately experience greater success than if we expect perfection.”

Combest pointed out that the key to staying committed and avoiding setbacks is to promote confidence in

the process of pursuing goals. This confidence helps to make habits out of the steps that are being taken to accomplish the goal.

Ultimately, as Combest explained, it all comes down to developing a lifestyle around the resolution. “The main thing that we want everyone to look at is to try to feel good with making a lifestyle and making progress,” he said. “We can’t go from A to Z. We need to start from A to C, because even when you’re going from A to C, you learn a lot of things that will help you get further.”

To learn more about the Resiliency and Psychological Health service, which offers resources for managing stress, fatigue and more, visit their page on the WRNMMC cite or call 301-400-1974. For more information about Outpatient Nutrition Services and the Soar into Shape program or to schedule an appointment with the department, contact Robin Revell at 301-295-4065.