



VA MID-ATLANTIC HEALTH CARE NETWORK • VISN SIX

Vol. 1, No. 6

“Excellent Care – Earned by Veterans – Delivered Here”

# Voices of VISN 6

Official news from around *your* VISN

April 12, 2011

## New Beckley VAMC Memorial Honors Vietnam Vets

By Debbie Voloski  
Beckley VAMC Public Affairs

During a solemn ceremony held at the Beckley VAMC March 30, West Virginia Veterans of the war in Vietnam were memorialized with the unveiling of a monument dedicated to their service and sacrifices.

A crowd of nearly 150 people, including about 75 Vietnam Veterans, gathered in the frigid temperatures to take part in the unveiling of a black granite memorial adorned with the likeness of three soldiers and inscribed simply with the words, “In tribute to all Vietnam Veterans.”

Veterans along with family members and medical center staff recited the Pledge of Allegiance and joined in as Sidney

Catus, a Veteran of both Vietnam and Iraq and an employee of the medical center, sang the National Anthem. Karin L. McGraw, director, paid homage to Veterans, thanking each of them for their sacrifices and their service.

“This Vietnam memorial means a lot to me. I spent ’67 ’68 during Tet offensive and ’69 ’70 in Vietnam. Now I will have a place to honor my friends lost in the war,” said Vietnam Veteran Steven Stone minutes before the memorial was unveiled. Like many of the Veterans, Mr. Stone could not hold back tears as he saw the memorial for the first time.

During the ceremony, Dave Simmons, president of the West

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*Tanaya Lusk*

*Vietnam Veteran and Beckley VAMC Chief of Staff Dr. John Berryman pauses to reflect at the unveiling of the new memorial.*

## Salem VAMC To Be First With Panorama MRI

By John D. Hunter  
Richmond VAMC

By July of 2011, the Salem VAMC will be the first medical center in VISN 6 to become home to state-of-the-art Panorama® high field open magnetic resonance imaging (MRI) technology. This cutting edge MRI scanner, manufactured by Philips Electronics, provides high quality, panoramic images in an environment that is both comfortable and relaxing to Veterans who experience anxiety within tight spaces.



The \$1.6 million dollar piece of equipment will be installed in a newly constructed

2,700 square foot clinic space on the medical center campus. This project is part of a broader \$2.1 million construction project to expand space for clinical services at Salem.

The new open MRI machine will join Salem’s existing “closed” cylindrical MRI and will increase access to MRI services and reduce wait times for Veterans needing to receive the procedure. The two machines will be operated

ly for 12-hour shifts, according to Donna Donithan, Chief Diagnostic Radiologic Technologist at Salem. This expanded

operating schedule will allow the Salem VAMC to offer MRI services to Veterans unable to make an appointment during the standard work day. According to Donithan, the open air MRI will also allow Veterans with anxiety disorders, such as PTSD, to more comfortably have the scans performed without the use of sedation medications. It will also allow elderly, obese, and mobility impaired patients a more comfortable experience. The more comfortable the patient, the better the MRI experience, thus decreasing the overall length of time the patient will typically need to devote to the scan.

An alternative to traditional X-ray imaging, MRI uses a powerful superconducting magnet to generate a detailed view of the body’s internal organs and systems. Trained specialists then use this infor-

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### Mid-Year: Enhancements Continue

Here we are at the midpoint of the fiscal year. I am pleased with our accomplishments to date, and have high expectations for what we will accomplish by Sept. 30.

Last Friday, we dedicated our newest CBOC in Greenbrier County, W. Va. Like North Carolina and Virginia, West Virginians have a proud history of answering the call to serve, so it is an honor to be able to enhance access to VA health care for Veterans in this area.

As you read on page one, our Beckley VAMC is now home to a beautiful monument memorializing Vietnam Veterans. West Virginia lost more service members in Vietnam than any other state, and this monument will stand forever as a reminder to those Mountaineers who perished in service to America.

Monuments are not the only way we recognize those who served. April is the 'Month of the Volunteer.' More than 5,000 people come to our facilities everyday to help our Veterans. This army of volunteers stands shoulder-to-shoulder with the entire VISN team. From helping Veterans in the door to assisting them in every stage and manner of care, Volunteers make it happen. While we take this time to specifically recognize all those who give so freely of themselves, I hope everyone who comes in contact with our Volunteers will take a moment to say thanks. I know they don't do it for the recognition, but we would be remiss not to highlight the people who give of themselves so freely.

While I can't personally meet all our Volunteers, please accept my sincerest thanks for the more than 625,000 hours of

time you contributed last year. You are all heroes in my book.

Finally, we are currently in the second week-long effort dedicated to accomplishing Compensation and Pension exams. For those just joining us, last August the VISN became overwhelmed by the number of new exam requests. Following the normal scheduling routine was like being in quicksand. After a few months of trying typical response actions, it became clear that to accomplish these exams within the accepted time frame would require a much different and highly-focused approach.

In January, we put the gears in motion to apply a VISN-level team approach one week per month in March, April and May. With every VISN 6 medical center contributing, the March C&P week resulted in the VISN accomplishing more than 2,000 exams. The effort was a learning one, primarily from the scheduling aspect where we work to have the right record in the right facility on the right day. We had a few bumps along the way, but we have made adjustments to our scheduling efforts and believe that this week will go even smoother for our Veterans as well for all the care givers who are engaged with making it happen. The bottom line is that Veterans deserve their exams done in a timely fashion and we are leaving no stone unturned in our effort to do our part.

As always, I welcome feedback. Please feel free to send any comments to my communications officer Bruce Sprecher. You can reach him at [bruce.sprecher@va.gov](mailto:bruce.sprecher@va.gov)

Dan Hoffmann

### Salem VAMC continued from Pg 1

mation to better identify and diagnose medical conditions including multiple sclerosis, brain tumors, torn ligaments, tendonitis, strokes, and cancer, just to name a few. MRI also allows physicians to view images of the internal organs and structures from many different angles. MRI produces these images more quickly and more economically than invasive exploratory surgeries.

Open MRI technology has been in use for several years, however, the Panorama® is the first to offer open air scanning without a sacrifice in image

quality. Open MRI technology expands the range of positions the physician is able to image even more so than traditional MRI. At the Salem VAMC, doctors will soon be able to use this technology to image the body's internal systems from angles and perspectives not possible using a standard closed MRI machine.

After more than one year of planning and construction, open air MRI will soon be another state-of-the-art diagnostic tool for Salem VAMC doctors to option for Veterans at the Salem VAMC.



Debbie Voloski

### Greenbrier County CBOC Ribbon Cutting

Mr. Daniel Hoffmann, network director, along with staff and dignitaries, celebrate the official dedication of the Greenbrier County Community Based Outpatient Clinic, April 8. The new clinic with its staff of physicians, registered and licensed practical nurses, a social worker, a psychiatrist, two medical support assistants and a pharmacist will provide initial assessment of health problems, basic diagnostic lab work, immunizations, cancer screening, and treatment of chronic health problems along with mental health and social work services. The 8,800 square foot clinic is designed to care for up to 2,400 Veterans residing in the West Virginia counties of Greenbrier, Monroe, Pocahontas, and Summers, as well as those living in Alleghany County, Virginia. The clinic also provides home-based primary care to Veterans in Greenbrier, Monroe, and Pocahontas counties, as well as Alleghany County, Va. Veterans in Alleghany County have the choice of going to the Salem VAMC or to the Beckley VAMC for their specialized medical care.

Voices of VISN 6 is published on the 10th of each month. The contents provide readers with information on VA programs designed to enhance the lives and health care of Veterans.

If you have questions or comments about the newsletter, e-mail [Bruce.Sprecher@va.gov](mailto:Bruce.Sprecher@va.gov) or call 919-956-5541.



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# Senator Hagan Meets With Female Vets At Durham VAMC

By Pete Tillman  
Durham VAMC

U.S. Senator Kay R. Hagan hosted a roundtable discussion at the Durham VAMC March 28. This visit provided the Senator an opportunity to hear first-hand how Durham VAMC's Women's Health Clinic is operating to meet the specific health needs of women. The goals were to learn about real experiences, listen to concerns and comments, and engage in candid dialogue about the services available to them.

"We are proud of the exceptional work being done at the Durham Women's Health Clinic. We are increasing access, providing high quality and specialized care, and ensuring that the privacy of Women Veterans is preserved," reported Joan Galbraith, Women's Health Program Manager at the Durham VA.

In 1994, the Durham VAMC opened one of the first eight Comprehensive Women's Health Care Clinics in the nation. Women's primary care, gynecology care, breast care, women's mental health care, and care for sexual trauma are provided and co-located in the

clinic.

Since its inception, the clinic has continually improved. The last two years have brought a momentum of changes to assure the best possible care is provided. Recently, the National Privacy Survey led to Women-specific improvements. These include setup of changing tables, sanitary product dispensers, and private bathrooms that are available to all Women in inpatient settings.

Women comprise one of the fastest growing populations of Veterans. There has been a 22 percent increase in the number of women enrolled at Durham over the last 3 years.

An estimated 6,000 women Veterans are expected to be enrolled in Durham's clinics by 2013 and careful planning is taking pace to ensure safe, high quality services are available. Part of this planning includes research into targeted health interventions.

In 2010, VA Health Services Research & Development selected the Durham VAMC as one of four sites as a Women Veteran Practice Based Research Network. This means that Durham will be a test site



*Pete Tillman*

*Women veterans surround Senator Kay Hagan (seated, center) at a roundtable to discuss VA's on-going improvements to health care for women.*

for VA-based Women's health interventions to improve services and care for women Veterans nationwide.

Durham is the only site on the east coast to have been chosen. This honor is largely due to the presence of the Comprehensive Women's Health Clinic and Dr. Lori Bastian, the first medical director of the Women's Health Clinic and a

successful researcher in women Veterans health.

Together, the exceptional clinical care and targeted research available make the Durham VAMC a model of care and a great location for the Senator to have visited. Through open discussion and with the valued opinions of women Veterans, services will get even better.

## New Director Selected To Lead Salem VAMC

By Bruce Sprecher  
VISN 6 public affairs

Dr. Miguel LaPuz has been selected to lead the Salem VAMC effective April 25. He becomes the 12th director in the medical center's history.

No stranger to VISN 6, Dr. LaPuz moves to his new position after serving as chief of staff at the Salisbury VAMC since March 29, 2009, where he also served as interim director from Feb. 7 to Aug. 15, 2010.

"Dr. LaPuz has excelled in all that VA has asked and I'm confident he will continue to achieve outstanding results in his new position," said Daniel Hoffmann, VISN 6 director. "I'm very glad that we could keep him in VISN 6 where he can apply his experience to

Veterans under our network's umbrella of care."

"It is a great honor to serve as the director. I look forward to working with all the fine men and women who make Salem the first class medical center that it is," said LaPuz.

Dr. LaPuz graduated from the University of the Philippines in 1982 with an M.D. degree and is board certified in Internal Medicine. He completed residency and fellowship positions at Brooklyn Hospital Center and at the Long Island College Hospital, both in Brooklyn, New York, and at the University of Kentucky, Lexington, Ky. He completed his M.B.A. at Wright State University, Dayton, Ohio, in 2000.

Dr. LaPuz began his VA career in 1995 as a staff physi-

cian at the VA Medical Center Huntington, W. Va. He transferred to the VA Medical Center in Dayton, Ohio and served as staff physician until his appointment as chief, Medical Service in October 2000. He then went on to serve as chief of staff of the Chalmers P. Wylie VAACC in Columbus, Ohio, March 20, 2005.

The Salem VAMC is a level 2 facility serving Veterans in southwestern Virginia with community based outpatient clinics in Lynchburg, Danville, and Tazewell, and new clinics on the way for Wytheville and Staunton.

The medical center has been caring for Veterans for more than 75 years and celebrates the fact that President Franklin Roosevelt presided over the opening ceremony on



*Dr. Miguel LaPuz will be appointed director of the Salem VAMC on April 25.*

Oct. 19, 1934.

The medical center has more than 35,000 veterans enrolled and operates with a budget in excess of \$267 million.

# Salisbury VAMC To Open New Cancer Center

By Carol Waters  
Salisbury VAMC public affairs

The Salisbury VAMC will open a new state-of-the-art Cancer Center this summer.

The new center will deliver clinical oncology and chemotherapy services, enabling area Veterans to receive high quality oncology care within the VA health care system. The new center will be located on the second floor of Bldg. 21. Construction of the \$481,715 project began March 7.

Currently, Veterans requiring cancer care are receiving care under fee basis, or traveling to other VA facilities, creating unnecessary hardship and constraints to receiving cancer care.

The clinical oncology program was initiated in December 2010, and is currently providing thoracic oncology services.

The new Cancer Center will feature a 12,495 sq. ft. oncology suite with exam rooms, offices, infusion areas and a conference/training room. In developing the oncology service, the infrastructure concept was designed to provide a patient-centered en-

vironment and care delivery experience.

Veterans will be able to receive clinical care by oncology specialists, and chemotherapy in areas specially designed to create a home-like environment.

The Cancer Center will be staffed with oncologists jointly appointed with Wake

Forest University Baptist Medical Center's Comprehensive Cancer Center, pharmacists, oncology trained nurses, and extensive and diverse support staff. In addition, the program will develop cancer support groups where Veterans will have the opportunity



*This three-dimensional artists rendering depicts the many facets of the Salisbury VAMC's new Cancer Center.*

to share their experiences and network with other patients. The oncology program will also be a training center for Oncology fellows.

"The Cancer Center will bring a state of the art program to Veterans and ensure that patients have access to the most advanced cancer treatment

available," said Dr. Charles A. de Comarmond, interim associate chief of staff, Medicine Service, Salisbury VAMC.

For more information about this and other Salisbury VAMC improvement projects, visit [www.salisbury.va.gov/construction/Renovations\\_and\\_Improvements.asp](http://www.salisbury.va.gov/construction/Renovations_and_Improvements.asp)



## Vietnam Veterans Memorial continued from Pg 1

Virginia State Council, Vietnam Veterans of America, spoke about the lessons learned from Vietnam, the cost to our country and to America's young men and women. He announced that West Virginia acting Gov. Earl Ray Tomblin signed a Senate Resolution making March 30, West Virginia Vietnam Veterans Recognition Day. Then, echoing a salute Vietnam vets still provide one another as a token of respect, he added, "Welcome home. I thank you guys for serving."

This new monument joins other memorials on the Beckley VAMC property which pay tribute to those who served in World War II, Korea, and those who were Prisoners of War and listed as Missing in Action.

The idea for this memorial began in 2006 and is credited to Mr. Gerard (Jerry) Husson, the former medical center director. Mr. Husson, now working for VA in Washington D.C., is a Vietnam Veteran. Donations were slow coming until Joseph DiClaro, who served with the famed "Screaming Eagles" out of the 101st Airborne Division, persuaded the Raleigh County Commission to supply a \$7,000 grant. Once the grant was secured, the medical center worked with local Vietnam Veterans, the leadership of the West Virginia State Council, and Vietnam Veterans of America to determine the appropriate design.

Heather Sturgill from Egnor Monument Works in Beckley took on the task of bringing the design to life on the five-foot tall slab of granite. In little more than a month, she transferred the artwork from a piece of paper to the monument which will stand through the years as a reminder of those who served and sacrificed in Vietnam.

Currently the monument is in a temporary location near the picnic shelter, but will be moved to a permanent location following the construction of the parking garage.

# New Arrivals, Offices Enhance Field Support

Willie Bivens is the new VISN 6 Video Teleconferencing Specialist. Willie started in this new role Feb. 27. In this key role for VISN 6, Willie is responsible for providing Video Teleconferencing services to the entire organization.



Willie is a native of Moultrie, Ga. He retired from the United States Air Force in 2009 where he served as a Voice Network System Technician for 18 years then worked as an Air Force Recruiter serving a 2-year tour in Danville, Virginia. After retiring from the Air Force, he worked for 2 years with MicroTech as a Video Teleconferencing Technician before he was selected to work for VISN 6. Willie graduated from Bellevue University with a Bachelor Degree in Business Information Systems and has a Certified Technology Specialist Certification with InfoComm Academy.

Cheryl D. Chrisman is the new Telehealth Program Coordinator for VISN 6. She began in this role Jan 30, moving from her position as the VISN Customer Service Program Manager where she has served since 2007. In this role, she will manage the growth of all the VISN's telehealth programs including Care Coordination Home Telehealth, Clinical Video Telehealth and Care Coordination Store and Forward programs.



Cheryl will work out of the Asheville VAMC and can be reached at Phone: 828-298-7911 x5619.

Mr. Jeff Doyle is the new Network Homeless Coordinator. Jeff manages all efforts associated with the Homeless program throughout the VISN with a focus on ensuring VISN 6 moves forward on accomplishing VA's objective to end homelessness among Veterans by 2015.



Jeff arrived for duty March 13. He came to VISN 6 from New Mexico where he worked as a VA homeless coordinator for the past 10 years.

Ms. Jantene (Jan) Johnson is the VISN 6 Grant Specialist. Jan is responsible for managing the System Redesign Ambulatory Care Optimization Improvement Grant. She coordinates all grant activities and directs implementation of the primary care model. Additionally, she provides technical and analytical support to the field. She also ensures that all related contracts are developed, maintained and implemented in accordance with VA mission, regulation, and directives in addition to VISN 6 policies.



Jan brings with her 14 years of experience in Health Care Administration, 10 of those years with the VA. Jan transferred from the Louis Stokes Cleveland VA Medical Center in VISN 10 where she was the Telehealth Program Manager. Prior to joining the VA, Jan was employed with the US Department of Health & Human Services in the Office of Intergovernmental Affairs located in Washington, D.C.

Additionally, Jan spent two years in Brazil studying and volunteering with Women's Health, Health Care Equality and Health Education.

Ms. Cheryl Keen is the new VISN 6 Patient Transfer/Patient Flow Manager. In this role, she collaborates, directs, and facilitates workgroups, policies, procedures, and processes in relation to Patient Transfers and Patient Flow that maximize the capabilities of each facility in delivering high-quality, cost-effective care.



Cheryl began her new position Jan. 31. Her past assignments include her time as an Emergency Nurse Manager and Patient Flow Coordinator in VISN 4 at the Wilkes Barre, Pa. VAMC, followed by a promotion while there to Deputy Nurse Executive in November 2007. She came to North Carolina in June 2009, as the Emergency Department Nurse Manager at the Durham VAMC.

Prior to her career with VA, she was the Emergency Room Nurse Manager of a community trauma center in Pennsylvania for 3 years. In addition, she held a part time position at Marywood University in Pennsylvania as a Critical Care faculty member in 2006 and 2007.

Cheryl is a member of Sigma Theta Tau International Honor Society of Nursing and Delta Epsilon Sigma National Scholastic Honor Society.

Cheryl D. McKoy is the new VISN 6 Utilization Management officer. She assumed this role on Feb. 13 and is responsible for providing guidance and facilitation of the VISN's utilization management program.



A native of Wilmington, N.C., Cheryl is a registered nurse with more than 16 years of nursing experience in utilization management, quality management, patient flow-system redesign, long term care, medical surgical, telemetry, hospice, nursing education and nursing administration.

She holds a Master's of Science in Nursing and Master's in Health Administration Degree from the University of Phoenix and a Bachelor's of Science Degree in Nursing from North Carolina Agricultural and Technical State University.

Ms. McKoy is a member of Sigma Theta Tau Nursing Honor Society and Chi Eta Phi Nursing Sorority.

David E. Monroe, Jr. has joined VISN 6 as the Human Resource Development specialist. In this role, David will work to transform the HR community to a more consultative, business partner relationship with their client base, as well as, to design and develop strategies to leverage in-house resources to enhance both HR and Supervisor/Manager Skill sets.



David will also, on an as needed basis, select and procure appropriate external vendors and materials to support these and any other VISN initiatives.

Prior to his arrival, David served as a consultant to DoD in the area of Human Performance Management and Improvement. He additionally served as a trainer for the VA's Learning University for many of the VA's Performance Based Training courses.

Since his retirement from the US Air Force in 1999, he has also served with the American Red Cross and NASA.

Continued on Pg 10

# National Volunteer Week Honors Those Who Give

By Steve Wilkins  
VISN 6 Public Affairs

VA Volunteers give more deeply and in more ways than most people would imagine. Last year within VISN 6, more than 5,000 volunteers ranging in age from 13 to more than 90-years old volunteered 625,000 hours, accomplishing meaningful work that supported Veterans while also saving the network money. When tallied, the hours they contributed equaled an additional 312 full-time employees.

They probably aren't thinking about the money they're saving the network or about how the money saved can be better spent on services, equipment and programs that will benefit the Veterans served in our medical centers.

"Many volunteer as a way to give back. So many of our volunteers are Veterans themselves who want to do what they can for their fellow Veterans," said Ronni Miller, Durham VAMC Voluntary Services Chief. She said volunteers have many reasons for donating their time, suggesting that often they do it to honor the sacrifices or lives of loved ones, or to thank VA for service their loved ones received while being treated there. Others, she said, do it simply to support our warriors and help speed and comfort their recovery.

Visitors to each facility encounter volunteers as they walk through halls, offices and department sections. Many are greeted by a volunteer as they enter one of the facilities and others receive directions to an office or point of contact who can help. Volunteers also assist those who need help getting back to their car, or in some cases, they even help patients return home after an appointment.

Without the commitment of the Disabled American Veterans organization, many Veterans would not be able to get to their appointments. Members of the DAV or Auxiliary volunteers drive VA-owned vans to and from the medical center, based on calls that are coordinated by a DAV or Auxiliary volunteer member. In some cases, DAV provides the vans. Devoted to making sure every

**Continued on Pg 8**



THE SECRETARY OF VETERANS AFFAIRS  
WASHINGTON  
March 31, 2011

**NATIONAL VOLUNTEER WEEK  
APRIL 10-16, 2011**

The week of April 10-16, 2011, is National Volunteer Week. It is a great privilege to take this opportunity to acknowledge and celebrate the many important contributions of the Department of Veterans Affairs' (VA) volunteers.

VA volunteers provide enormous benefit to Veterans and their families by serving at VA medical centers, community living centers, outpatient clinics, Veteran benefit offices, and national cemeteries. In addition to offering a warm smile, an ear to listen, a quiet presence, and, most importantly, their time, volunteers are loyal and dedicated individuals who proudly, humbly, and tirelessly serve Veterans. The value of VA volunteers and their organizations is truly beyond measure.

At the end of fiscal year (FY) 2010, VA Voluntary Service had over 88,771 active volunteers, contributing a total of 12,549,708 hours. VA volunteers and their organizations contributed an estimated \$107 million in gifts and donations in FY 2010 for a total value of \$368.6 million in volunteer giving. Monetary estimates aside, it is impossible to calculate the amount of caring and sharing VA volunteers provided to Veteran patients.

VA volunteers are a priceless asset to our Nation's Veterans. I take special pride in their work, and I offer my sincere thanks and gratitude to all of them on behalf of the Veterans we serve.

Eric K. Shinseki

## Volunteer Opportunities

For information on opportunities to volunteer in your area, please contact:

|              |                 |                                 |
|--------------|-----------------|---------------------------------|
| Beckley      | Cheryl Yost     | 304-255-2121, ext. 4162 or 4165 |
| Durham       | Ronni Miller    | 919-286-0411, ext. 7810         |
| Fayetteville | Norma Fraser    | 910-822-7027                    |
| Hampton      | Judith Curtis   | 757-722-9961, ext. 3124         |
| Richmond     | Janet Langhorne | 804-675-5000, ext. 4989         |
| Salem        | Ann Benois      | 540-224-1919                    |
| Salisbury    | Nancy Perry     | 704-638-3409                    |



**Luke Thompson**

The Starry Night Quilters of Salisbury show the service quilts they make for Veterans in hospice and the community living center.



**James Coty**

Volunteer Patricia Hannum of the American Legion Auxiliary assists a Hampton VAMC veteran with her holiday shopping during the November 2010 American Legion Christmas Shop.

# VISN 6 To Begin Banding Together For Patient Safety

By Mary Tatum,  
VISN 6 Patient Safety Officer

Several years ago, a hospital in Pennsylvania reported an event in which clinicians nearly failed to rescue a patient who had a cardiopulmonary arrest because the patient had been incorrectly designated as “DNR” (Do Not Resuscitate). The source of the confusion was that a nurse had incorrectly placed a yellow wristband on the patient. In this hospital, the color yellow signified that a patient should not be resuscitated. In a nearby hospital in which this nurse also worked, yellow signified “restricted extremity,” meaning that this arm is not to be used for drawing blood or obtaining IV access. Fortunately in this case, another clinician identified the mistake and the patient was resuscitated. However, this near miss highlights a potential source of error and an opportunity to improve patient safety by re-evaluating the use of color coded wristbands. The above case led to many state initiatives to standardize color-coded alerts on patient wristbands.



*Dennis Mehring*

*A sample wristband shows some of the color-coded alerts patients will begin seeing May 1 at all VISN 6 facilities.*

Beginning May 1, all VISN 6 facilities will be using the standard colors for alert wristbands recommended by the American Hospital Association and by state organizations within North Carolina, Virginia and West Virginia. Color-coded alert wristbands, or labels on patient wristbands, are used in hospitals to quickly communicate a certain healthcare status, condition, or “alert.” This is done so every staff member can provide the best care possible, even if they do not know the patient. Each color has a certain meaning and the words for the alerts are also written on the wristband to reduce the chance of confusing the alert messages.

The most commonly used wristbands include RED for allergy, YELLOW for those at risk of falling, and PURPLE to indicate “Do Not Resuscitate.”

Knowing that a patient has an allergy to anything – food, medicine, dust, grass, pet hair, is vitally important and will be indicated with the color RED. Patients should not hesitate to inform care givers about any type of allergy.

It is always important to prevent falls, which is why nurses review patients throughout their stay to determine if they need extra attention in order to prevent a fall. When a patient has a YELLOW-coded alert wristband, the nurse is saying this person needs assistance when walking or ambulating to prevent a fall.

It is extremely important to know a patient’s documented decision regarding whether or not to resuscitate. The color PURPLE will be a clear indication when resuscitation is not wanted.

At some VA medical centers, including Asheville, Beckley, Hampton, Richmond and Salem, you may also see PINK arm-bands or which are used to identify a “Restricted Extremity” that should not be used for drawing blood or obtaining IV access. At Asheville, Beckley, and Hampton GREEN is being used to identify the patient has a latex allergy.

All patients are encouraged to share information such as a food allergy or a tendency to lose balance and almost fall. Also, patients with an Advance Directive should make sure the health care team knows what kind of care you would like if you become unable to make medical decisions.

VISN 6 is proud to be a supporter of this collaborative work, making health care safer and better for our Veteran patients and their families.

## Salisbury VAMC Hosts Second-Annual Education Fair

By Carol Waters  
Salisbury VAMC public affairs

About 100 Veterans, retired military, family members, and VA staff turned out for Salisbury VAMC’s second educational fair on March 24. The medical center hosted the fair in partnership with the University of North Carolina (UNC) system. Information was provided on all VA education programs including the new GI Bill by staff from Veterans Benefits Administration in Winston-Salem. Veterans and family members learned about educational opportunities available to them in the community, where they can use their GI benefits for education that will assist them in acquiring new skills, and prepare them for the future changing job market.

Frank A. Labagnara, D.O., Director, Student Medical Education at Salisbury VA said the goal “is to make the education fair an annual event.”

Representatives from 40 area colleges, universities, and universities that offer online courses provided information about their educational programs. In addition to UNC educational institutions in Charlotte, Chapel Hill, Greensboro, Pembroke, and Wilmington, other participants included Appalachian State University, Catawba College, East Carolina University, Livingstone College, Cabarrus College of Health Sciences, Winston-Salem State, ECPI, Montreat College, University of Phoenix



*Luke Thompson*

*Veterans interact with participants of the second annual Salisbury VAMC educational fair on March 24.*

(online), Walden University, High Point University, Central Piedmont College, Guilford College, Troy University and many more.



# Salisbury Food Drive Garners 1,465+ lbs. Food

March 2011 was nationally recognized as National Nutrition Month. In an effort to get the community involved, the W.G. (Bill) Hefner VAMC's Nutrition and Food Services sponsored a non-perishable food drive to serve homeless veterans.

Collection boxes were located throughout the Salisbury VAMC and associated outpatient facilities. The food drive netted more than 1,465 pounds of non-perishable food. In the Charlotte clinic, 81 pounds of food were collected and donated to Loaves and Fishes Food Pantry.

The Winston Salem clinic collected 268.1 pounds, which were donated to the Winston Salem Rescue Mission. The Hickory clinic collected 134 pounds of food, which was graciously donated to Eastern Catawba County Cooperative Ministry.

Salisbury exceeded last year's collection and was able to amass 982 pounds of food that was donated to Rowan Helping Ministries.



## Volunteers continued from Pg 6

Veteran needing VA services gets to their appointments, the Durham Volunteer Transportation Network averages 100 miles per Veteran round trip for 26,000 Veterans each year.

"Volunteers have a long list of skills and abilities, and they want to contribute," said Darlene Laughter, a VSC at the Asheville VAMC who also serves as the VISN Voluntary Services Coordinator. Laughter added that volunteers fill many positions in a variety of departments and those with special skills and certifications can be found in each medical center. Laughter said volunteers can be critical liaisons for Veterans and their families when diagnoses or instructions may need clarification, or questions arise. Volunteers can convey the misunderstanding to medical center staff, who then work with the Veteran to clear up the issue. Laughter said the Asheville VAMC is currently benefiting by the work of a volunteer who happens to be a retired pediatrician. His expertise is contributing to the facility's Research section.

At Beckley VAMC, volun-

teers can be found stuffing letters, distributing mail and providing telephone services, as well as helping chaplains with spiritual needs assessments and assisting Veterans attending chapel services, according to Beckley VSC Cheryl Yost.

Volunteers can be found in every facet of the medical centers. From a puppeteer in Fayetteville and clown therapy in Beckley, to group participation in regular bingo operations or the monthly continental breakfast offered to CLC patients in Asheville. Volunteers in several locations perform regular memorial services and other ceremonies that honor those who may have recently passed from the facilities. Many volunteers at the Richmond VAMC are devoted to supporting Operation New Dawn patients' quality of life and do what they can to comfort Veterans in the Polytrauma Center.

At the Salem VAMC, the Star City Riders Club put on an annual car show for Veterans, as a part of a growing welcome home event, displaying more than 100 automobiles. The local American Red Cross recent-



**James Coty**

*Disabled American Veterans (DAV) volunteers serve the chili dog fixings for a volunteer service member during the Country Fair in May 2010 at Hampton VAMC.*

ly started a concierge cart on wheels to visit bedridden Veterans throughout the facility.

Each volunteer is provided training that covers their job, as well as issues of confidentiality and privacy, fire, safety, infection control, customer service and cyber security. According to Laughter, the recruitment, interviewing, training, scheduling, management and recogni-

tion of volunteers falls to the Voluntary Services office. She maintains that most VSCs relish their load because volunteers selflessly, happily give of themselves to help Veterans.

Miller said, "They work to make a difference. They make a huge impact in our medical center and are highly respected and considered part of the health care team."

Everyone can be **great** because anyone can **serve**...  
you only need a heart full of **grace**. — *Dr. Martin Luther King, Jr.*

**Make a Difference!**

We make a **living** by what we **do**,  
but we make a **life** by what we **give**. — *Winston Churchill*

If you want to lift **yourself** up, lift up **someone else**. — *Booker T. Washington*

**Volunteer!**

## VA Signs New CB Agreement

WASHINGTON – Officials of the Department of Veterans Affairs and the American Federation of Government Employees (AFGE) signed a new collective bargaining agreement, the first since 1997, on March 28. The new contract enhances VA's collaboration with union officials on work related issues; changes the rules for teleworking and expands the use of e-mail in labor-management relations. "This new agreement

reflects VA's commitment to collaborate with an important labor partner," said Secretary of Veterans Affairs Eric K. Shinseki. "The outcome will be a more highly motivated, more effective workforce serving our nation's Veterans." About 204,000 of VA's 315,000 employees are eligible for AFGE membership, with another 23,000 employees eligible for membership in four other unions.

## Register For Summer Sports Clinic

The sports clinic, sponsored by the Department of Veterans Affairs will be held Sept. 18 - 23 in San Diego. The goal of the sports clinic is to introduce recently-injured Veterans to various adaptive sports while training their caregivers, coach or recreational therapist in how to assist Veterans. With this approach, Veterans can continue these newly-learned activities with their friends and families back home. Participants will also have the opportunity to bond with fellow Veterans with disabilities and work together to

overcome challenges. Participation is open to Veterans who are eligible for VA medical care and have orthopedic amputations, traumatic brain injuries, burn injuries, psychological trauma, certain neurological conditions, visual impairment, spinal cord injuries or other injuries incurred during the past six years. For more information about the National Veterans Summer Sports Clinic, visit [www.summersportsclinic.va.gov](http://www.summersportsclinic.va.gov), or contact Tristan Heaton, Chair, Summer Sports Clinic at (858) 552-8585x6426.

## Paralympic Benefit Expands For Some

WASHINGTON – Some Veterans in training for the Paralympics will be able to qualify for a monthly subsistence allowance from the Department of Veterans Affairs under a new program to help disabled Veterans take part in competitive sports.

"Our disabled Veterans are models of courage, resilience and determination," said Secretary of Veterans Affairs Eric K. Shinseki. "This allowance will enable our disabled athletes to further their recovery by taking part in world-class adaptive sports."

VA officials caution that not all disabled Veterans will qualify for the subsistence allowance, which will be administered by the U.S. Paralympics.

The allowance will be pegged to VA's subsistence allowance for participants in a full-time institutional program. Those rates start at \$554 per month for Veterans without dependents. The current rate table is available at [www.vba.va.gov/bln/vre/sa.htm](http://www.vba.va.gov/bln/vre/sa.htm).

Under the new rule, VA will

pay the allowance to a Veteran with a service-connected or non-service-connected disability if the Veteran is invited by the U.S. Paralympics to compete for a slot on the U.S. Paralympic team or is residing at a U.S. Paralympic center for training or competition.

"While in uniform, our service men and women are challenged to push themselves beyond expectations, both physically and mentally," said Christopher Nowak, director of VA's paralympic program. "Their motivation and desire to succeed doesn't end with injury. Paralympic sports allow them to harness their competitive nature and push themselves beyond any perceived limitations."

Applications for the allowance must be submitted through the U.S. Paralympics. The VA Paralympics Program Office will work closely with U.S. Paralympic Committee to ensure that Veterans who are eligible for retroactive payments are processed in a timely manner.

## New PSA On Suicide Prevention

WASHINGTON – The Department of Veterans Affairs is reaching out to Veterans in crisis and their families in a new public service announcement to raise awareness about suicide prevention resources, such as the Veterans Crisis Line at 1-800-273-TALK (8255).

"As more Veterans return from Iraq and Afghanistan, the critical need for mental health care is rising," said Sonja V. Batten, assistant deputy chief patient care services officer for mental health. "VA is increasing its efforts to reach out to Veterans in need and their families, to inform them about available services and programs."

The new television spot encourages Veterans in crisis to call the crisis hotline number at 1-800-273-TALK (8255) and then push 1 on their telephone keypad to reach a trained VA mental health professional who can assist the Veteran 24 hours a day, seven days a week.

"Suicide is preventable," said Batten. "Every Veteran suicide is tragic and regardless of the numbers or rates, one Veteran suicide is too many. We feel the responsibility to continue to spread the word throughout the nation that suicide prevention is everyone's business."

So far, more than 379,000 people have called the hot-

line, and more than 200,000 of these callers have identified themselves as Veterans, family members or friends of Veterans. The hotline has led to more than 13,000 rescues of actively suicidal Veterans.

The hotline also operates an online Veterans Chat program, which provides Veterans, their families and friends with the ability to communicate anonymously online in real-time with a trained VA mental health professional. Veterans Chat can be accessed through the National Suicide Prevention Lifeline's web page at [www.suicidepreventionlifeline.org/Veterans/Default.aspx](http://www.suicidepreventionlifeline.org/Veterans/Default.aspx)

Through the hotline and Veterans Chat, VA can connect Veterans and their families with important services, including suicide prevention coordinators, as well as general inpatient and outpatient psychiatric services at VA medical centers and community-based outpatient clinics.

The hotline, which is part of the National Suicide Prevention Lifeline, was started in 2007 as a partnership between VA and the Substance Abuse and Mental Health Services Administration (SAMHSA).

The PSA can be viewed at [www.youtube.com/user/VeteransHealthAdmin#p/u/1/PPL7CAHixQE](http://www.youtube.com/user/VeteransHealthAdmin#p/u/1/PPL7CAHixQE)

## Post-Incarceration Care Extended

WASHINGTON – The Department of Veterans Affairs (VA) will extend health care to eligible Veterans in halfway houses and other temporary, post-incarceration housing under a new program aimed at cutting back on repeat offenses.

"There's hard evidence that lack of access to health care, including mental health care, for newly released inmates is a factor in people becoming homeless or returning to prison and jail," said Jim McGuire, director of VA's Veterans Justice Outreach Programs. "These are Veterans who otherwise qualify for VA health care."

A long-standing rule has barred VA from providing health care to Veterans for whom another federal, state or local government has an obli-

gation to provide health care. Frequently, that means inmates of prisons and jails.

Under the changed rule, that prohibition would be amended and VA would be allowed to provide health care to Veterans in halfway houses and other temporary, post-incarceration housing.

An Urban Institute study in 2008 found that good health care in the first months of community reentry played a key role in easing readjustment and reducing recidivism.

About 29,000-56,000 Veterans are released annually from state and federal prisons, and at least 90,000 Veterans are released each year from city and county jails, according to Department of Justice's Bureau of Justice Statistics.

# Labor-Management Forum Holds Inaugural Meeting

By Sheila Bailly  
Hampton VAMC Executive Assistant

The VISN 6 Labor Management Forum (LMF) held their first meeting March 15-16 at the VISN 6 Network Office in Durham, N.C.

The VISN 6 LMF charter was officially signed January 2011 in accordance with Executive Order 13522 which serves as a foundation to establish and maintain constructive joint processes to improve labor-management relationships.

The forum, which will meet quarterly, has a shared goal of improving employee-manager satisfaction and increasing organizational effectiveness and productivity.

The LMF is comprised of labor leaders representing the American Federation of Government Employees - AFGE, the National Association of Government Employees - NAGE, and the National Nurses United- NNU.

Management officials represented on the VISN 6 LMF include Medical Center



Steve Wilkins

Members of the VISN 6 Labor Management Forum assembled March 15-16 at the Durham N.C. Network Office for their inaugural meeting.

Directors from the eight VISN 6 facilities, as well as representatives from the

Associate Director and the Chief of Staff councils.

## Richmond VAMC Launches Health Information Exchange

RICHMOND, Va. – The Department of Veterans Affairs has announced a new pilot project at the Richmond VAMC to improve the delivery of Veterans health information. The medical center will partner with MedVirginia to create a comprehensive health information network for exchanging health information in the area.

“This pilot is one more step taken to deliver a Virtual Lifetime Electronic Record for our Nation’s Veterans and Servicemembers,” said Secretary of Veterans Affairs Eric K. Shinseki. “This new technology will enhance our ability to continue providing Veterans with high quality health care.”

The Richmond pilot builds on the success of the Virtual Lifetime Electronic Record program pilots in San Diego and Hampton Roads/Tidewater, Va. Participants will exchange information using the Nationwide Health Information Network.

Veterans in the area will be invited to participate in this health data exchange program, which went live on March 11. Veterans who choose to participate will authorize their public and private sector health care providers and doctors to share specific health information electronically, safely, securely, and privately. No exchange of information will occur without the appropriate permissions of the individual patients. More detailed information on the pilot program is available by calling 1-877-771-VLER.

## New employees cont'd from Pg 5

Ms. Robin Ward is the VISN 6 Compensation and Pension/Integrated Disability Evaluation System Administrator. In this role, she is responsible manage the VISN’s performance of C&P and IDEA exams. She works with all VISN medical centers and VBA to improve the processing of exam that Veterans have applied for through VBA. Additionally, she works with the local military facilities and VBA to ensure exams needed for service members that will be medically discharged are done timely.

Robin began her new role in December 2010. Prior to her arrival, she worked for VBA, first as a rating specialist in Atlanta, Ga, and then as a supervisor for the Compensation and Pension Division and later supervised a Rating team and the Appeal team.

Robin is married with three children and three rescue dogs.



## New Associate Director

Mr. David Pattillo is the new Associate Director for the Charles George VAMC in Asheville, N.C. Mr. Pattillo assumed this new role in January 2011.



In this role he is responsible for providing oversight of facility operations, including human resource management, financial management, engineering services, environmental management and other business operations.

Mr. Pattillo transferred from the Charlie Norwood VAMC in Augusta, Ga. In addition to his 20 years of active duty military service, Mr. Pattillo has a long history of administrative experience within the private sector and VA health care system to include having served as Deputy Director for Administration at the National Center for Health Promotion and Disease Prevention. Mr. Pattillo received his undergraduate degree from The Citadel, a Masters of Healthcare Administration from Baylor University and a Masters of Military Arts and Science from the US Army Command and General Staff College. He is a Fellow of the American College of Healthcare Executives.

He and his wife Deborah have one son, Chase, who works at the Memphis VAMC as an Industrial Hygiene/Occupational Safety Intern.

## CIVIL WAR COMMEMORATION

April 12 launches a four-year national commemoration of the Civil War’s 150th anniversary. On April 12, 1861, the first battle of the American Civil War took place at Ft. Sumter, S.C.

# Telehealth Minimizes Routine Visits, Increases Monitoring

By Steve Wilkins  
VISN 6 Public Affairs

For several years, VISN 6 has been using Care Coordination Home Telehealth to help Veterans keep up with physical conditions affecting their health without leaving home. Veterans with chronic or long-term illnesses like diabetes, hypertension, congestive heart failure and chronic obstructive pulmonary disease, known also as emphysema, can play a greater role managing their health by keeping track of it using this program. More recently, CCHT has developed methods to monitor Veterans' mental health, substance abuse and weight.

Connected by telephone line, Veterans enter information about themselves through an interactive appliance, their communication point with Telehealth staff. It continues the interactive experience with critical multiple choice questions that are coded and reported, once the Veteran has responded. The Veteran enters their personal health information from other monitoring equipment like a blood pressure cuff or glucometer, which

measures blood sugar levels, needed by clinicians to assess their daily health. The coded responses and Veteran-reported levels tell staff about changes in the Veteran's condition and who needs a follow-up call.

By assuming responsibility for relaying their information and interacting with equipment that also provides education on their health, Veterans are better able to manage their own health care.

Sue Kistler, a nurse practitioner who became a Telehealth care coordinator has helped Durham VAMC nurture the program since its start in 2001. She says Veterans like the interactive appliance because of the responsiveness, offering them feedback. Kistler said the medical center hears from two Veterans, at least 95-years old, who send information every day adding, "It's easy for them." She said the interaction is conversational; "How was your day?" Maybe the machine will answer back; "Sorry you're not feeling well," or with a response like, "enjoy your day!"

Kistler says the number of Veterans in the Durham VAMC CCHT program number is ap-

This is the fifth article in a series focusing on VA Telehealth services. Telehealth is a rapidly developing application that transfers medical information between providers and patients via telephone, the Internet or other networks to monitor health status, provide education and consulting or sometimes to provide remote medical procedures or examinations via telemedicine to improve Veterans' health.

proaching 400. Currently VISN 6 serves about 2,600 Veterans in the program.

According to VA Telehealth Quarterly, VA's national home telehealth information technology infrastructure has the necessary back-up systems to support ongoing Veteran care. Program officials also expect Veterans will access the service via cell phone before too long, once VA has completed work to ensure secure wireless transmission.

But Kistler indicated Veterans find the convenience relieves much of the stress many associate with a medical center visit. She said Veterans like that can call Telehealth staff when they need to communicate with their providers. "We don't work in the clinic. We work to serve them in this program." She added that Telehealth staff clinicians make the connec-

tion simpler for Veterans who sometimes have difficulty getting through to their primary care providers between appointments. They can convey messages or relay depleted prescription needs throughout the facility.

This enables the Veteran to make the most of visits to the medical center, when they need to go. It means they will only make the trip when they have an appointment or a truly urgent matter that cannot be handled without a care provider administering treatment. It can save them gas and time. Most importantly, it means they have a huge part in preserving their own quality of life and living up to the Telehealth motto: "My Life, My Health, My Choices" which promotes self management among Veterans and caregivers/family members.

## All VISN 6 Medical Centers "Go for the Gold" in Patient Safety

By Mary Tatum  
VISN 6 Patient Safety Officer

All eight VISN 6 medical centers recently received the 2010 Root Cause Analysis (RCA) Cornerstone Gold Award from VA's National Center for Patient Safety. VISN 6 is one of only two networks in VA in which 100 percent of the facilities earned the gold award, the highest RCA recognition presented by VA.

"These awards reaffirm the commitment of VISN 6's employees to providing safe and high quality care. The systems put in place as a result of RCA's facilitate the provision of safe care for our Veterans," said VISN 6 Network Director Dan Hoffmann.

The award is presented for exceeding standards in conducting root cause analyses,

a process of looking at events that have caused actual harm or have the potential to result in harm to patients.

Because people on the frontline are usually in the best position to identify issues and solutions, interdisciplinary RCA teams at VA health care facilities formulate solutions, test, implement, and measure outcomes in order to improve patient safety.

The goal of a Root Cause Analysis is to find out:

- what happened,
- why it happened and
- what can be done to prevent it from happening again.

Because our Culture of Safety is based on prevention, not punishment, the RCA serves as a tool for identifying prevention strategies. It is part of our effort to build a culture of safety and move beyond the



**Steve Wilkins**  
*Durham VAMC patient safety managers and the medical center director accept the Cornerstone Gold Award for 2010. All VISN 6 medical centers earned this recognition.*

culture of blame. In Root Cause Analysis, basic and contributing causes are discovered in a process similar to diagnosis of disease - with the goal always in

mind of preventing recurrence. The teams help determine changes that need to be made to systems and identify strategies to reduce risk of harm.

# VISN 6 Sites of Care

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

**Beckley VAMC**  
200 Veterans Avenue  
Beckley, WV 25801  
304-255-2121, 877-902-5142  
<http://www.beckley.va.gov/>

**Beckley Vet Center**  
1000 Johnstown Road  
Beckley, WV 25801  
304-252-8220  
<http://www2.va.gov/directory/guide/facility.asp?ID=5634>

**Charlotte Vet Center**  
2114 Ben Craig Dr.  
Charlotte, NC 28262  
704-549-8025  
<http://www2.va.gov/directory/guide/facility.asp?ID=485>

**Charlotte CBOC**  
8601 University East Drive  
Charlotte, NC 28213  
<http://www.salisbury.va.gov/visitors/charlotte.asp>

**Charlottesville CBOC**  
650 Peter Jefferson Pkwy  
Charlottesville, VA 22911  
434-293-3890  
<http://www.richmond.va.gov/visitors/charlottesville.asp>

**Danville CBOC**  
705 Piney Forest Rd.  
Danville, VA 24540  
434-710-4210  
<http://www.salem.va.gov/visitors/Danville.asp>

**Durham VAMC**  
508 Fulton St.  
Durham, NC 27705  
919-286-0411, 888-878-6890  
<http://www.durham.va.gov/>

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

**Fayetteville VAMC**  
2300 Ramsey St.  
Fayetteville, NC 28301  
910-488-2120, 800-771-6106  
<http://www.fayettevillenc.va.gov/index.asp>

**Fayetteville Vet Center**  
4140 Ramsey St.  
Fayetteville, NC 28311  
910-488-6252  
<http://www2.va.gov/directory/guide/facility.asp?ID=486&dnum=All&stateid=NC&v=1>

**Franklin CBOC**  
647 Wayah St.  
Franklin, NC 28734-3390  
828-369-1781  
<http://www.asheville.va.gov/visitors/franklin.asp>

**Fredricksburg CBOC**  
1965 Jefferson Davis Highway  
Fredericksburg, VA 22401  
540-370-4468  
<http://www.richmond.va.gov/visitors/fredricksburg.asp>

**Greensboro Vet Center**  
2009 S. Elm-Eugene St.  
Greensboro, NC 27406  
336-333-5366  
<http://www2.va.gov/directory/guide/facility.asp?ID=719&dnum=All&stateid=NC&v=1>

**Greenbrier County CBOC**  
804 Industrial Park Rd.  
Maxwelton, WV 24957  
304-497-3900

**Greenville CBOC**  
800 Moye Blvd.  
Greenville, NC 27858  
252-830-2149

<http://www.durham.va.gov/visitors/greenville.asp>

**Greenville Vet Center**  
1021 W.H. Smith Blvd.  
Greenville, NC 27834  
252-355-7920  
<http://www2.va.gov/directory/guide/facility.asp?ID=720&dnum=All&stateid=NC&v=1>

**Hamlet CBOC**  
100 Jefferson Street  
Hamlet, NC 28345  
910-582-3536  
<http://www.fayettevillenc.va.gov/visitors/hamlet.asp>

**Hampton VAMC**  
100 Emancipation Dr.  
Hampton, VA 23667  
757-722-9961, 888-869-9060  
<http://www.hampton.va.gov/>

**Hickory CBOC**  
2440 Century Place, SE  
Hickory, NC 28602  
828-431-5600  
<http://www.salisbury.va.gov/visitors/hickory.asp>

**Hillandale Rd. Annex**  
1824 Hillandale Road  
Durham, North Carolina 27705  
919-383-6107  
<http://www.durham.va.gov/visitors/hillandale.asp>

**Jacksonville CBOC**  
241 Freedom Way  
Midway Park, NC 28544  
910-353-6406, 910-353-6406  
<http://www.fayettevillenc.va.gov/visitors/jacksonville.asp>

**Lynchburg CBOC**  
1600 Lakeside Drive  
Lynchburg, VA 24501  
434-316-5000  
<http://www.salem.va.gov/visitors/lynchburg.asp>

**Morehead City CBOC**  
5420 U.S. 70  
Morehead City, NC 28557  
252-240-2349  
<http://www.durham.va.gov/visitors/morehead.asp>

**Norfolk Vet Center**  
1711 Church Street  
Norfolk, VA 23504  
757-623-7584  
<http://www2.va.gov/directory/guide/facility.asp?id=403>

**Princeton Vet Center**  
905 Mercer Street  
Princeton, WV 24740  
304-425-5653  
<http://www2.va.gov/directory/guide/keystaff.cfm?id=400>

**Raleigh CBOC**  
3305 Sungate Blvd.  
Raleigh, NC 27610  
919-212-0129  
<http://www.durham.va.gov/visitors/raleigh.asp>

**Raleigh II CBOC**  
3040 Hammond Business Place  
Raleigh, NC 27603  
919-899-6259  
<http://www.durham.va.gov/visitors/raleighII.asp>

**Raleigh Vet Center**  
1649 Old Louisburg Rd.  
Raleigh, NC 27604  
919-856-4616  
<http://www2.va.gov/directory/guide/facility.asp?ID=5442&dnum=All&stateid=NC&v=1>

**Richmond VAMC**  
1201 Broad Rock Blvd.  
Richmond, VA 23249  
804-675-5000, 800-784-8381  
<http://www.richmond.va.gov/>

**Roanoke Vet Center**  
350 Albemarle Ave., SW  
Roanoke, VA 24016  
540-342-9726  
<http://www2.va.gov/directory/guide/facility.asp?ID=405>

**Robeson County CBOC**  
139 Three Hunts Drive  
Pembroke, NC 28372  
910-521-8452

**Rutherford County CBOC**  
374 Charlotte Rd.  
Rutherfordton, NC 28139  
828-288-2780  
<http://www.asheville.va.gov/visitors/rutherfordton.asp>

**Salem VAMC**  
1970 Roanoke Blvd.  
Salem, VA 24153  
540-982-2463, 888-982-2463  
<http://www.salem.va.gov/>

**Salisbury VAMC**  
1601 Brenner Ave.  
Salisbury, NC 28144  
704-638-9000, 800-469-8262  
<http://www.salisbury.va.gov/>

**Tazewell CBOC**  
123 Ben Bolt Ave.  
Tazewell, VA 24651  
276-988-2526  
<http://www.salem.va.gov/visitors/tazewell.asp>

**Virginia Beach CBOC**  
244 Clearfield Avenue  
Virginia Beach, Virginia  
757-722-9961, ext. 1900  
<http://www.hampton.va.gov/visitors/cboc.asp>

**Wilmington CBOC**  
736 Medical Center Drive  
Wilmington, NC 28401  
910-763-5979  
<http://www.fayettevillenc.va.gov/visitors/wilmington.asp>

**Winston-Salem CBOC**  
190 Kimel Park Drive  
Winston-Salem, NC 27103  
336-768-3296  
<http://www.salisbury.va.gov/visitors/winstonsalem.asp>

**Winston-Salem Annex**  
2101 Peters Creek Parkway  
Winston-Salem, NC 27127  
336-761-5300  
<http://www.salisbury.va.gov/visitors/winstonsalem.asp>