

MEDICAL NEWS

News in Brief

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WHEEL-CHAIR BOUND VIETNAM VET UNCOVERS MULTIMILLION DOLLAR MEDICAID FRAUD

TUCKERTON, N.J. — A wheelchair-bound Vietnam veteran with muscular dystrophy, from New Jersey, was enjoying his \$15 million whistleblower reward Wednesday, after he uncovered a multimillion dollar medical aid fraud.

Richard West, 63, of Tuckerton, first found his Medicaid benefits were wrongly maxed out in 2004 during a visit to the dentist and spent the past seven years investigating the scam, the New York Post reported.

Following the dentist visit, West returned home and examined his own records, when he found Maxim Healthcare -- the agency that provides his health aides -- had billed the government for care he never got, including visits from nurses he never met.

After spending months trying to get government officials to investigate the scam, he hired a lawyer and filed a federal lawsuit. His efforts resulted in the largest financial settlement in home healthcare fraud history.

West said, "From my wheelchair, on a ventilator and oxygen, I have spent the last seven years in this fight. Sometimes, the good guy wins."

"The more I uncovered, the more pissed off I got that someone was making money

on my disability. It's people like me that will keep these big companies honest," he added.

Maxim -- which has 300 offices in 40 states across the US -- was found to have made \$61 million from phony reimbursements.

The company agreed to pay \$121.5 million in reimbursements and penalties for the fake Medicaid claims and \$8.4 million to the Veterans Administration. It was also fined \$20 million.

West received \$15 million for his efforts, as under federal law he was entitled to a percentage of the cash the company was ordered to pay back. He said he will spend his new millions on a new van, home improvements and donations to charities for the disabled.



(U.S. Navy photos by Mass Communication Specialist 1st Class Anastasia Puscian/Released)

Above: Naval Medical Center San Diego (NMCS D) staff watch a timeline video on the terrorist attacks on Sept. 11, 2001 during NMCS D's 9/11 Remembrance ceremony.



Right: Naval Medical Center San Diego (NMCS D) Command Chaplain, Capt. Robert McClanahan gives the invocation during NMCS D's 9/11 Remembrance ceremony.



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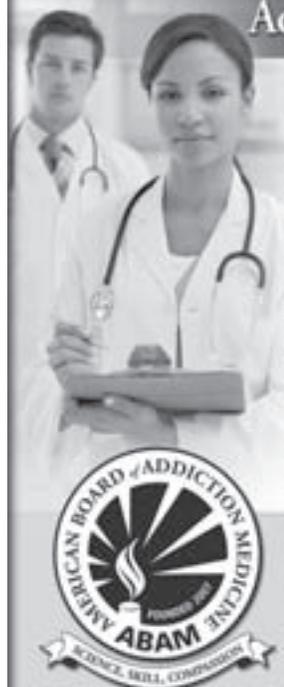
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October is Breast Cancer Awareness Month



WRAIR's malaria vaccine shows encouraging results in human trial

In a step towards development of a malaria vaccine, the Walter Reed Army Institute for Research, the United States Army Medical Materiel Development Activity, GlaxoSmithKline Biologicals, the University of Maryland School of Medicine and University of Bamako located in Mali, West Africa, have published the results of a Phase 2b human trial using the Apical Membrane Antigen-1 (FMP2.1) protein vaccine in the *New England Journal of Medicine*.

The FMP2.1 vaccine, co-developed by WRAIR scientists, Dr. Sheetij Dutta and Dr. David Lanar, targets the most deadly malaria parasite, *P. falciparum*, which is a leading cause of infant mor-

tality in sub-Saharan Africa and tropical regions of the world. This vaccine has been extensively tested for safety in previous human trials in the United States and in Mali. The published study was designed to determine the efficacy of the WRAIR FMP2.1 vaccine in combination with the GlaxoSmithKline Biologicals adjuvant AS02A, in a target population of 400 children living in an endemic area of Mali.

Although this FMP2.1/AS02A vaccine failed to prevent malaria in the vaccinated volunteers, it did successfully reduce clinical malaria caused by a parasite strain from which the vaccine was derived. "There was a wide variety of malaria parasite strains in the test area,

and the observed strain-specific protection is very encouraging for researchers developing a second-generation vaccine that can neutralize all *P. falciparum* strains," said Dr. Dutta at WRAIR.

The trial was conducted under the joint leadership of Dr. Mahamadou Thera of the University of Bamako, Dr. Chris Plowe from the University of Maryland's Center for Vaccine Development and Dr. Gray Heppner formerly at WRAIR. Oversight for clinical monitoring, protocol review and case report form review were provided by the Division of Regulated Affairs and Compliance at USAMMDA. USAMMDA also served as the sponsor of the investigational new drug. The National Institute

for Allergy and Infectious Diseases supported the trial through a grant to the University of Maryland School of Medicine. Additional funding for the trial was provided by the U.S. Agency for International Development's Malaria Vaccine Program, which also supported the development of the vaccine at WRAIR.

Col. Chris Ockenhouse, director of the Malaria Vaccine Development Program at WRAIR said, "This study is the pivotal foundation for an improved vaccine to prevent clinical malaria in children, and WRAIR is excited to continue to support the development of a second-generation vaccine."

(U.S.Navy Photo by Mass Communication Specialist 3rd class Samantha A.Lewis/HIPAA Complete)

Visit to the Zoo



Top left: Branden J. Sade, a pediatrics patient at Naval Medical Center San Diego (NMCSD), looks at a Double Yellow Headed Amazon Parrot named "Rio" held by Nicole Gossler from the San Diego Zoo. NMCSD hosts the San Diego Zoo throughout the year to help with patient recovery and raise morale. Other animals that visited include an African Hedgehog, a Tamandua, a European Rabbit and a Le Plata Three Banded Armadillo.

Bottom left: Anthony D. Escarregaa, a pediatrics patient at Naval Medical Center San Diego (NMCSD) pets a European Rabbit named "Leia" from the San Diego Zoo. NMCSD hosts the San Diego Zoo throughout the year to help with patient recovery and raise morale. Other animals that visited include an African Hedgehog, a Tamandua, and a Le Plata Three Banded Armadillo.



DoD receives FDA clearance for the JBAIDS: Influenza A/B detection kit and Influenza A subtyping kit

FORT DETRICK, MD. — The U.S. Army Medical Materiel Development Activity and the Chemical Biological Medical Systems Joint Project Management Office received FDA clearance of two integrated influenza A/B diagnostic tests for use by Department of Defense laboratories using the Joint Biological Agent Identification and Diagnostic System.

The Influenza A/B Detection Kit is used to test clinical samples for influenza A and influenza B viruses, two types of the virus that cause seasonal epidemic flu. The Influenza A Subtyping Kit will be used for the detection and differentiation of influenza subtypes A/H1, A/H3 and 2009 H1N1.

"These two influenza kits increase the DoD's readiness posture and testing capabilities for influenza and demonstrates CBMS's ability to develop diagnostic capabilities for emerging infectious diseases," said Col. Russell Coleman, USAMMDA commander. "The contributions and excellent teamwork among these agencies indicate the continued effort to address the National Strategy for Countering Biological Threats."

JBAIDS is a ruggedized diagnostic system that will provide medical professionals with a means of rapidly diagnosing infections in humans. The system will detect and diagnose both bacterial and viral diseases, including biological threat agents. More than 300 JBAIDS systems have been fielded to all Armed Services, including deployed units around the world.

Pinning Ceremony



Newly promoted chief petty officers (CPO) wait to be piped into the CPO mess during Naval Medical Center San Diego's (NMCS D) 2011 Chief Pinning ceremony. Ten Sailors were promoted to the rank of chief petty officer.



(U.S. Navy photo by Mass Communication Specialist 1st Class Anastasia Pusican/Released) Naval Medical Center San Diego (NMCS D), Command Master Chief Yenhung Duberek congratulates newly promoted Chief Hospital Corpsman Christine Semens after NMCS D's 2011 Chief Pinning ceremony. Ten Sailors were promoted to the rank of chief petty officer.



Newly promoted Chief Hospital Corpsman Norma Armendariz is congratulated after being pinned and covered during Naval Medical Center San Diego's (NMCS D) 2011 Chief Pinning ceremony. Ten Sailors were promoted to the rank of chief petty officer.



Above: Newly pinned Chief Petty Officers (CPO) are congratulated during Naval Medical Center San Diego's CPO pinning ceremony. Ten Sailors were promoted to the rank of chief petty officer during the ceremony.



Left: Naval Medical Center San Diego (NMCS D) Chief Hospital Corpsman Stephen Pierle is piped aboard the chief's mess during NMCS D's Chief Petty Officer pinning ceremony. Ten Sailors were promoted to the rank of Chief Petty Officer during the ceremony.

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Military retiree benefits vulnerable as congress struggles to cut debt

As Washington looks to squeeze savings from once-sacrosanct entitlements like Social Security and Medicare, another big social welfare system is growing as rapidly, but with far less scrutiny: the health and pension benefits of military retirees.

Military pensions and health care for active and retired troops now cost the government about \$100 billion a year, representing an expanding portion of both the Pentagon budget — about \$700 billion a year, including war costs — and the national debt, which together finance the programs.

Making even incremental reductions to military benefits is typically a doomed political venture, given the public's broad support for helping troops, the political potency of veterans groups and the fact that significant savings take years to appear.

But the intense push in Congress this year to reduce the debt and the possibility that the Pentagon might have to begin trimming core programs like weapons procurement, research, training and construction have suddenly made retiree benefits vulnerable, military officials and experts say.

And if Congress fails to adopt the deficit-reduction recommendations of a bipartisan joint Congressional committee this fall, the Defense Department will be required under debt ceiling legislation passed in August to find about \$900 billion in savings over the coming decade. Cuts that deep will almost certainly entail reducing personnel benefits for active and retired troops, Pentagon officials and analysts say.

"We've got to put everything on the table," Defense Secretary Leon E. Panetta said recently on PBS, acknowledging that he was looking at proposals to rein in pension costs.

Under the current rules, service members who retire after 20 years are eligible for pensions that pay half their salaries for life, indexed for inflation, even if they leave at age 38. They are also eligible for lifetime health insurance through the military's system, Tricare, at a small fraction of the cost of private insurance, prompting many working veterans to shun employer health plans in favor of military insurance.

Unfair and untenable?

Advocates of revamping the systems argue that they are not just fiscally untenable but also unfair.

The annual fee for Tricare Prime, an H.M.O.-like program for military retirees, is just \$460 for families and has not risen in years, even as health care costs have skyrocketed. Critics of the system say the contribution could be raised substantially and still be far lower than what civilians pay for employer-sponsored health plans, typically about \$4,000.

Those critics also argue that under the current rules, 83 percent of former service members receive no pension payments at all — because only veterans with 20 years of service are eligible. Those with 5 or even 15 years are not, even if they did multiple combat tours. Such a structure would be illegal in the private sector, and a company that tried it could be penalized, experts say.

"It cries out for some rationalization," said Sylvester J. Schieber, a former chairman of the Social Security Advisory Board. "Why should we ask somebody to sustain a system that's unfair by any other measure in our society?"

But within military circles, and among many members of Congress, the benefits are considered untouchable. Veterans groups and military leaders argue that the system helps retain capable commissioned and noncommissioned officers.

GOP not always against entitlements

And having volunteered to put their lives at risk, those people deserve higher-quality benefits, support-

ers argue. The typical beneficiary, they add, is not a general but a retired noncommissioned officer, with an average pension of about \$26,000 a year.

"The whole reason military people are willing to pursue a career is because after 20, 30 years of extraordinary sacrifice, there is a package commensurate with that sacrifice upon leaving service," said Steven P. Strobridge, a retired Air Force colonel who is the director of government relations for the Military Officers Association of America, which is lobbying against changes to the benefits.

Exit from Iraq, Afghanistan

A wild-card factor in the debate is the withdrawal of American troops from Iraq and Afghanistan, which some experts say could avoid the stigma of cutting benefits while troops are at war.

"The fact that you are getting out of Iraq and Afghanistan does make it easier," said Lawrence J. Korb, a senior Pentagon official in the Reagan administration who was a co-author of a recent proposal for reducing the cost of military health care. "When the war in Iraq was in terrible shape, it was hard to get people to join the military, and no one wanted to touch any military benefits."

By far the most contentious proposal circulating in Washington is from a Pentagon advisory panel, the Defense Business Board. It would make the military pension system, a defined benefit plan, more like a 401(k) plan under which the Pentagon would make contributions to a service member's individual account; contributions by the troops themselves would be optional. Mr. Panetta has said that if adopted, the plan would not apply to current military personnel.

While health care costs for active and retired troops are growing faster, military pension costs are larger. Last year, for every dollar the Pentagon paid service members, it spent an additional \$1.36 for its military retirees, a much smaller group. Even in the troubled world of state and municipal pension funds, pensions almost never cost more than payrolls.

Citing the fiscal hazards and inequities of the system, the Defense Business Board proposal would allow soldiers with less than 20 years of service to leave with a small nest egg, provided they served a minimum length of time, three to five years. But it would prevent all retirees from receiving benefits until they were 60.

The business board says that its proposal would reduce the plan's total liabilities to \$1.8 trillion by 2034, from the \$2.7 trillion now projected — all without cutting benefits for current service members.

Steve Griffin of Tallahassee, Fla., is the type of soldier the defense board is trying to appeal to: a former captain who did two tours in Iraq, he left the Army in 2010 after five years of service and thus receives no pension.

'Retirement system now is fair'

Yet in a sign of the deep support for the existing system, Mr. Griffin says it should be left alone because it provides incentives for recruitment and rewards retirees who have endured great hardship.

"Yes, it would be nice for people like me," Mr. Griffin, 28, said of the proposal. "But I think the retirement system now is fair. We shouldn't take anything from it. If anything, we should add to it."

Much like in the debate over Social Security, questions about the sustainability of the military pension system abound.

Each year the Defense and Treasury Departments set aside more than \$75 billion to pay not only current and future benefits but also pensions for service many years in the past. But the retirement fund has not accumulated nearly enough money to cover its total

costs, with assets of \$278 billion at the end of 2009 and obligations of about \$1.4 trillion.

Obama to offer his own debt reduction package

The government tries to close the shortfall by simply issuing more Treasury securities each year, thereby adding to the nation's debt.

Given the political potency of veterans groups, it is unclear whether anyone in Congress will lead an effort to revamp the pension or retiree health systems.

But the debt ceiling agreement approved this summer by Congress, under which the Pentagon must find \$400 billion in reductions over the next 12 years, may force cuts once considered unthinkable. And if Congress does not adopt the recommendations of the bipartisan committee studying deficit reduction, the mandated reductions in Pentagon spending would more than double, to about \$900 billion, and fall on just about every category of defense spending.

Deficit hawks, led by Senator Tom Coburn, Republican of Oklahoma, have begun taking smaller steps, pushing for an array of cuts to military benefits, including ending subsidies for base commissaries and tightening disability compensation for diseases linked to Agent Orange.

But those trims are considered marginal compared with the deeper reductions many experts say are necessary to contain Pentagon spending.

"If the trend continues, it will call into question the military's ability to do other things, like buy equipment, do maintenance, train troops and equip them," said Nora Bensahel, a senior fellow at the Center for a New American Security, a nonprofit organization with ties to the Obama administration.

"At some point, the cost pressures by the retirement benefits will really start to impede military capabilities."

This article, "Military Health and Pension Benefits Could Face Cuts," first appeared in The New York Times.



(U.S. Air Force photo by Steve Pivnick)

Air Force surgeon general visits Keesler Hospital

Maj. (Dr.) Marie Han, left, 81st Aerospace Medicine Squadron flight medicine flight commander, shows Lt. Gen. (Dr.) Charles Green, Air Force surgeon general, a recent Keesler News article that described how Keesler flight surgeons have been assisting Columbus Air Force Base, Miss., as part of a unique physician exchange program. General Green visited the Keesler Hospital Aug. 29 while attending the Society of Air Force Clinical Surgeons Symposium at Biloxi's IP Casino Resort and Spa. Airman 1st Class Ashley Figueroa, a flight medicine flight medical technician, looks on.



(U.S. Navy photos by Mass Communication Specialist Seaman Clay M. Whaley/HIPAA Completed)

Cartoonist visits Naval Medical Center

Stephen Silver, artist and character designer for Disney and Nickelodeon, draws Marine Lance Cpl. Jared Poppe a picture of Danny Phantom from a popular T.V. show on Nickelodeon during a visit to Naval Medical Center San Diego's (NMCS) Comprehensive Combat and Complex Casualty Care (C5) facility. Silver is one of four artists who visited NMCS to help raise morale of patients.

Army medicine seeks to ID, treat soldiers potentially exposed to rabies virus

By Army Medicine Public Affairs

A Fort Drum, N.Y. Soldier, who recently returned from Afghanistan, died from rabies after contracting the disease from a feral dog while deployed.

The Army has initiated an investigation to ensure that other service members who may have been exposed to rabies are identified and receive preventive treatment, if needed.

The Army Medical Department along with the Department of Defense (DOD), other uniformed services and the national Centers for Disease Control and Prevention are working together to expeditiously identify, evaluate and treat any service members, DOD civilians and contractors who may have been exposed to rabies while deployed. Individuals who have already been identified as being exposed to the disease while deployed are currently receiving appropriate evaluation and treatment.

The importance of receiving appropriate medical evaluation following contact with a feral/stray animal cannot be overstated. Rabies may not show any signs or symptoms in the infected animal until late in the disease, often just days before its death. The animal can, however, still spread the deadly virus while appearing completely normal.

The rabies virus is transmitted to humans by the saliva of infected animals through bite wounds, contact with mucous membranes or broken skin. Humans can become infected and harbor the virus for weeks to months, and in extremely rare cases, years before

becoming ill. During this incubation period, which averages between one and three months, rabies can be prevented with appropriate treatment, including a series of vaccinations. Once symptoms occur, however, death is almost always certain.

All previously deployed Service Members (Active or Reserve Component, as well as those recently discharged from military service); DOD civilians and contractors who have had contact with a feral/stray animal while deployed should be immediately evaluated by medical personnel. Army Medicine and the DOD are committed to ensuring that anyone who believes they may have been exposed while deployed is provided with appropriate medical evaluation and care.

The Army Medical Department and the DOD is dedicated to ensuring the health and well-being of all Service Members, DOD civilians and contractors.

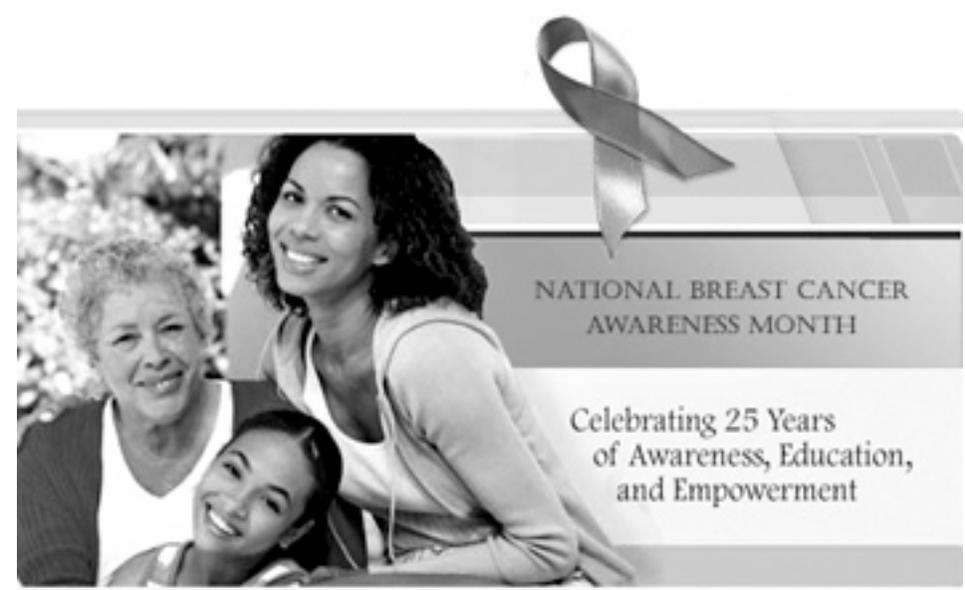
We ask the friends and families of those returning from a deployment after March 2010 to encourage anyone that may have been exposed to seek medical attention, even if no symptoms are readily apparent.

Call the Wounded Warrior & Family Hotline at 1-800-984-8523 (Stateside DSN: 421-3700 or Overseas DSN: 312-421-3700) for information on obtaining a medical evaluation and, if necessary, treatment.

Get more rabies information by visiting these Web sites: www.cdc.gov/rabies or <http://phc.amedd.army.mil/topics/discond/aid/Pages/Rabies.aspx>



Mike Rote, a staff artist for Bongo Comics, draws a picture of Electronics Technician 3rd Class Juarez Estrada as a Simpsons character in Naval Medical Center San Diego's (NMCS) Comprehensive Combat and Complex Casualty Care (C5) facility. Rote is one of four artists who visited NMCS to help raise morale of patients.



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(U.S. Air Force photo by Steve Pivnick)

Senior Airman Dudley Callahan, 81st Medical Operations Squadron, helps Staff Sgt. Adrienne Russell-George, 81st Force Support Squadron, maneuver through the traffic cones set up to simulate obstacles on the "drunk goggles" course.

Drunk driving simulation held as Keesler observes 'Recovery Month'

By Steve Pivnick

81st Medical Group Public Affairs

KEESLER AIR FORCE BASE, Miss. -- Members of Keesler's alcohol and drug abuse prevention and treatment program conducted a driving-under-

the-influence demonstration Sept. 15 as part of Recovery Month, observed during September.

Staff Sgt. Cecilia Cardenas, ADAPT noncommissioned officer-in-charge, explained, "Recovery Month promotes the societal benefits of treatment for

substance use and mental disorders, celebrates people in recovery, lauds the contributions of treatment providers and promotes the message that recovery in all its forms is possible. The observance spreads the positive message that behavioral health is essential to overall health, that prevention works, that treatment is effective and people can and do recover."

As part of the observance, Cardenas and Senior Airman Dudley Callahan set up ADAPT's "drunk goggles" demonstration in the pedestrian crosswalk in front of the Keesler base exchange.

They were joined by Bill McCoy, Keesler's Army and Air Force Exchange Service loss prevention manager, who coordinated the event with the exchange.

Cardenas said the goggles replicate a blood alcohol content of .08 or higher, which is legally drunk in most states.

"It simulates a decrease in reaction time, coordination, vision and alertness," she said. "As a result, participants are able to understand the dangers of getting behind the wheel after consuming alcohol."

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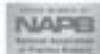
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Army Spouse and Retirees Smartcard Pilot

What is it?

The Army Spouse and Retiree Smartcard Pilot program will evaluate smartcard identity authentication as an alternative to username/password login to several Army and DOD websites. The pilot will analyze the card and reader distribution process, the user experience with card reader installation and the overall acceptance of the card as a replacement for username/password login.

Smartcards will not change participants' level of access; they will see the same information as before. The pilot is part of a larger initiative to secure sensitive data on Army private web servers, and to provide the spouse and retiree community with more secure access to online resources and personally identifiable information. The Army Chief Information Officer/G-6 Governance, Acquisition, and Chief Knowledge Office is executing the pilot with support from the Defense Manpower Data Center, Army Knowledge Online (AKO), Office of the Assistant Chief

of Staff for Installation Management/Installation Management Command, Army G-1 and TRICARE Management Activity.

What has the Army done?

CIO/G-6 introduced the pilot April 21, 2011, at the Installation Management Symposium in San Antonio, Texas. A proof of concept was executed July 18-29 at Fort Belvoir, Va., with 45 volunteers. A survey showed that a significant majority of volunteers rated the smartcard experience as positive. CIO/G-6 made minor service desk improvements to ensure an all-around positive pilot experience.

What continued efforts does the Army have planned for the future?

More than 500 spouses and retirees have registered for the pilot, which will run from Oct. 11, 2011, through March 30, 2012, at Fort Belvoir, Va., Fort Bragg, N.C., Fort Gordon, Ga., Fort Hood, Texas, and Fort Jackson, S.C. Volunteers (retired active duty/Army National Guard/Army Reserve and spouses) are still being accepted.



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Hospital acquires leading physical therapist

By Steve Pivnick
81st Medical Group Public Affairs

KEESLER AIR FORCE BASE, Miss. — The Keesler Hospital has gained a leading physical therapy researcher with the assignment of Lt. Col. John Childs to the 81st Surgical Operations Squadron's physical therapy department as director of musculoskeletal research. He is the first to hold this position at the Keesler Hospital. He also continues to serve as an associate professor in the U.S. Army-Baylor University doctoral program in physical therapy at Fort Sam Houston in San Antonio.

Childs, who came to Keesler in July from "Fort Sam's" Army Medical Department Center and School, was a 1994 distinguished graduate of the Air Force Academy where he received a bachelor's degree in biology. He also earned a master of physical therapy degree from U.S. Army-Baylor University in 1996, a master of business administration degree from the University of Arizona in 2000 and master's degree in musculoskeletal physical therapy from the University of Pittsburgh in 2002. In 2003, Colonel Childs received a doctorate in rehabilitation science degree from the University of Pittsburgh.

The colonel said that at Keesler, he'll "continue to lead, grow and manage a portfolio of military relevant research projects designed to improve the musculoskeletal health of our Airmen and military health system beneficiary population

across the Department of Defense."

For example, Childs leads a number of comparative effectiveness studies for conditions such as knee osteoarthritis and low back pain, two of the most common conditions experienced by MHS beneficiaries. Treating these conditions costs the MHS and VA billions of dollars annually in direct and indirect health-care costs and associated disability.

He's also enhancing the graduate medical education program in the Keesler Hospital's physical therapy clinic. This will provide cutting-edge clinical training to physical therapy students around the country who are attracted to Keesler to complete their internships because of the opportunity to be mentored by Childs and the highly-qualified clinical faculty he has recruited to join him.

He explained, "As a result, they'll be able to leverage the economies of scale that come with running a vibrant GME program, providing best-in-class clinical training and mentorship to their students while substantially reducing the dollars spent in physical therapy care that would otherwise have to be sent to the TRICARE network of civilian providers."

Childs has made many scientific presentations at national and international meetings. His research agenda is focused on injury prevention, the identification of subgroups of patients with musculoskeletal disorders, the development of clinical prediction rules to better inform diagnostic and treatment decision-making and comparative effectiveness research. He's



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(U.S. Air Force photo by Steve Pivnick)

Lt. Col. John Childs, 81st Surgical Operations Squadron, demonstrates spinal manipulation for acute lower back pain on simulated patient Kevin Wait, a physical therapy clinic staff physical therapist.

received numerous research grants from federal and professional funding agencies and has published more than 100 peer-reviewed manuscripts in leading scientific journals.

A recent research award nomination noted Childs "has received more than \$6 million from federal and professional funding agencies, clearly placing him as a leader within the military health system for securing highly competitive medical research funding. Most importantly, (his) research portfolio targets the prevention, diagnosis and treatment of high-volume musculoskeletal conditions that significantly interfere with military readiness and represent an enormous source of unnecessary costs and disability within the MHS."

He's also a member of a University

of South Florida School of Physical Therapy research team recently awarded a more than \$1.5 million from the Department of Defense for two musculoskeletal research projects intended to help wounded warriors and veterans lead full, productive lives.

A USF news release said, "The award will fund two major studies -- one investigating whether a specific exercise training regimen may protect against low back injury in combat soldiers and the second evaluating the best prosthetic foot to accommodate soldiers and veterans with below-the-knee amputations who wish to return to active duty.

Childs and his wife, Amy, are both Air Force Academy graduates and are the parents of five children.

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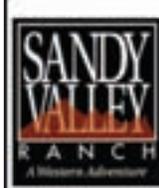


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Mental Health

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Mental Health

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Miscellaneous

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Miscellaneous

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EOE



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For questions please contact Sarah Gracey at 217-238-5721 or Lynette Ashmore at 217-238-5719 EOE

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Preparing for upcoming search and rescue qualification



Left: An air crewman off loads a mannequin for training without using a stretcher after an MH-60S Knight Hawk assigned to the "Blackjacks" of Helicopter Sea Combat Squadron (HSC) 21 lands on the helicopter pad at Naval Medical Center San Diego. HSC-21, based out of Naval Air Station North Island, San Diego is preparing for an upcoming search and rescue qualification. NMCS D receives an average of 50 medical evacuations a month



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(U.S. Navy photo by Mass Communication Specialist Seaman Clay M. Whaley/Released) Air crewmen train on the proper procedures to carry and load a simulated injured mannequin on a MH-60S Knight Hawk assigned to the "Blackjacks" of Helicopter Sea Combat Squadron (HSC) 21 lands on the helicopter pad at Naval Medical Center San Diego (NMCS D). HSC-21, based out of Naval Air Station North Island, San Diego is preparing for an upcoming search and rescue qualification. NMCS D receives an average of 50 medical evacuations a month.

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PHYSICIAN

MCET Lufkin • Lufkin, Texas

Call 903-520-4710

Physician needed part-time 2-6 hours a week, at narcotic treatment program in Lufkin. Excellent pay, travel pay and malpractice included. Contact Edward 903-520-4710

Physician Assistant - CSSN, a five physician private practice in Las Vegas, seeks an exp. surgical PA. Cardio surgery & endo vein harvest exp. pref'd. Surgical call is required in rotation with other PAs. Exc. benefits.

Salary is commensurate with exp. Send CV to: hr@cvsurgnv.com, fax 702-731-4992 or contact Judy Montgomery at 702-737-3808 ext. 134. www.cvsurgnv.com

**White Eagle Health Center
Ponca City, OK**

FAMILY PHYSICIAN

Needed for Out Patient Facility. Oklahoma License/DEA with no restrictions.
Hrs: M-F 8-4:30 pm no on call, nights or weekends. Sign on bonus. Paid Holidays/ Benefits. Moving allowance based on location. Salary negotiable.

If you are interested in this position call (580) 765-2501 x2223 or send resumes to: angela.thornton@ihs.gov, or mail to: 200 White Eagle Dr., Ponca City, Ok 74601

Physician Opportunities

San Antonio, TX

Community Medicine Associates, Inc. (CMA) is a not-for-profit physician organization sponsored by University health System, presently staffing fifteen outpatient community health centers and five acute care clinics.

- Varied shifts (8, 10, or 12 hour)
 - Loan repayment eligibility
 - Light on-call duty by phone only
 - Competitive salaries & benefit package
 - Generous incentive program
 - CME allowance
 - Affordable medical, dental & vision insurance
 - Malpractice insurance (occurrence coverage)
- Contact Amy Hensz, 210-358-0546 phone, 210-368-4765 fax
or email amy.hensz@uhs-sa.com

Physicians

ENT • UROLOGY • ORTHOPAEDICS

Jennie Stuart Medical Center is a non-profit hospital located in Western KY. Hopkinsville is within one hour's drive to Nashville, TN, Paducah and Bowling Green, KY and only minutes away from the KY/Barkley Lakes Region. Practice options are employment or income guarantee packages.

Please contact **Teresa Bowers** at (270) 887-0334 or tbowers@jsmc.org.

FP Physicians & Psychiatrists

Glen Falls Hospital is the sole, comprehensive acute community hospital serving 255,000 people across a 3000 square mile region of Northeastern New York. Located near Saratoga Springs, Lake George and the Adirondacks. We are seeking Family Practice Physicians & Psychiatrists. Contact Julie Holsclaw at:

jholsclaw@glensfallshosp.org
518-926-1946

PHYSICIAN

The University of Wisconsin Stout is recruiting for Physician to join our team of professional medical staff. Clinic provides ambulatory medical care to a campus of over 9300 students. This is a 9 month position, no weekends, holiday, or on call duty. The Menomonie, WI community and surrounding area is home to abundant four season recreational opportunities.

Send Application to: Janice Lawrence Ramaeker, 103 1st Avenue West, Menomonie WI 54751.
Send Electronic transmission of application to: ramaekerj@uwstout.edu.
Please call 715-232-2114 or visit: <http://www.uwstout.edu/geninfo/empop.html> for more information.
UW-Stout is an EO/AA Employer.
Employment contingent upon passing a criminal background check.

**MAINE COAST
PHYSICIAN OPPORTUNITIES**

*Live & Work Where Others
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Located directly on the shore in Rockport, Maine, Pen Bay Medical Center has opportunities for BC/BE physicians in the following areas:

- Hospitalist
- Pediatrics
- Adult & Child Psychiatry

Coastal Maine offers safe communities, great schools, a wide array of rich cultural opportunities, and some of the most spectacular natural beauty and outdoor recreation found anywhere. Competitive salary, comprehensive benefits, loan repayment & relocation allowance.

Forward CV & confidential inquiries to:

John Bragg
Director, Physician Recruitment
jbragg@penbayhealthcare.org
or call (207) 596-8214

Physicians

HOSPITALIST

San Francisco Bay Area

Marin Hospitalist Medical Group seeks full, part-time BC/BE (Internal Medicine) Physicians for block schedule daytime and Nocturnist inpatient positions at Marin General Hospital (a 234 bed community hospital 20 minutes north of San Francisco). Excellent opportunity to join well-established hospitalist program with strong subspecialty support. Competitive compensation package.

Interested individual may contact:

Jennifer Chursin-Meier

Marin Hospitalist Medical Group

Office: (415-925-7545)

Fax: (415-925-7008)

E-mail: chursij@maringeneral.org

EMERGENCY MEDICINE

Full-time and part-time physicians needed to staff Emergency Department at VA Medical Center in Biloxi, Mississippi. Must be ABEM or AOBEM board certified. Prefer physicians who live in or would relocate to Mississippi Gulf Coast area. Group has held contract since 2000.

Please contact

Ms. Sylvia Cusimano

at 504-366-7638 or

scusimano@newsouth.net

HELP US EMPOWER OTHERS! Rural Health Clinic in Tutwiler, MS (90 miles south of Memphis). Join a GP & Family NP with a support staff of 30, in-house lab & XR & EMR. NW MS Regional Med Center (166 beds) is 15 mi. north (Clarksdale). We have a small (3-10 in-pts) hospital practice, about 40 nursing home patients & also make occasional house calls.

Sr. Anne Brooks, DO at 662-902-4292.

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Physicians

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US Med Urgent Care is opening a new urgent care center at 1245 Kuala Street, Pearl City, Hawaii. Our mission is to provide fast, friendly family care to Pearl City and surrounding communities. We are interviewing experienced family medicine, emergency medicine, Med-Ped physicians and mid-level practitioners. We offer competitive salary, benefits and malpractice insurance.

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Email CV and availability to: mkelly@pearlcityurgentcare.com

Primary Care Physician

We are seeking a Primary Care physician to join an established practice in Tappahannock, VA. The practice has a certified NP and call schedule is very flexible. Be a part of a major health system and practice quality medicine near a 67 bed community hospital and multi-specialty clinic. Tappahannock is a semi-rural tidewater community located on the Rappahannock River close to the Chesapeake Bay. Tappahannock is only an hour from Richmond, VA and is part of Essex County with a population of 11,000. As one of the oldest towns in VA, Tappahannock is brimming with history and charm.

Erin Victoria Elliot, CMSR: 800-327-1585
email: erin@mdrsearch.com

**ARE YOU A PHYSICIAN LOOKING FOR
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We have a need for a full time Physician and offering a very competitive salary in our small and growing community of Hemphill, Texas. We have two established family practice clinics, one in Hemphill and one in Pineland Texas. These clinics are presently staffed with one family practice physician (very close to retirement) and two nurse practitioners with other support staff. Hemphill is situated between Sam Rayburn Reservoir and Lake Toledo Bend in the Sabine National Forrest, a paradise for outdoor activities.

If this change of life interests you, please call
David Bartholdi at 409-383-4466, **Melda Bartholdi** at 409-383-3823 (cell),
or e-mail to: dbartholdi@tmehealthgroup.com



University Hospital

PHYSICIAN, FAMILY MEDICINE or MEDS/PEDS

Bilingual English/Spanish - Camden, NJ or English/Korean-Cherry Hill, NJ

The Cooper University Hospital is currently the clinical campus of The University of Medicine and Dentistry/Robert Wood Johnson Medical School. We are seeking 2 full-time (Mon-Fri) Family Medicine or Meds/Peds Physicians to join our team. The Department of Family & Community Medicine serves eight different locations in southern New Jersey. With the anticipated opening of Cooper Medical School of Rowan University in the fall of 2012, the department fully expects to expand its community outreach and teaching. The 15 member physician team seeks to attract culturally and clinically diverse faculty of the highest caliber. Fluency in Spanish OR Korean is a must. Salary commensurate with experience, excellent benefits package, and continuing education programs. In addition to teaching clinical proficiency, the ideal candidate should be skilled in the scholarship of teaching and be able to work with students/residents/patients from various ethnic and cultural backgrounds. Qualified applicants please forward CV with complete confidentiality, emails encouraged, to: **Dyanne Westerberg, DO**, Chief, Dept. of Family and Community Medicine, Westerberg-Dyanne@Cooperhealth.edu, or

Cooper University Hospital

401 Haddon Ave, E&R Building, 2nd Fl., Camden, NJ 08103

EOE www.cooperhealth.org

Physicians

Inter I.D., Inc. is a 4-physician 100% Infectious Diseases private practice seeking BC/BE INFECTIOUS DISEASES PHYSICIAN. Our inpatient practice is solely at Saint Francis Hospital, a 918- bed hospital in Tulsa, Oklahoma that has been rated in the top 5% in clinical excellence by Health Grades. Further inquiries can be addressed to mail@interidtulsa.com.

Physician Opportunity

Join a thriving Occupational Med, Urgent Care and Pain Medicine practice located in sunny coastal Alabama. Employed position, M-F, no call or weekends. Competitive Compensation package. Please send CV to: coastalocmed@gulftel.com

The Greater Lawrence Family Health Center, 30 minutes north of Boston, has positions available for full-spectrum family medicine (including maternity and inpatient care) as well as offering outpatient-only practice. GLFHC provides innovative and comprehensive care to primarily low-income patients, and is home to a top-ranked Family Medicine residency with teaching opportunities. In addition, seeking urgent care (day and evening hours) and sports medicine fellowship trained faculty members. Spanish language skills for all positions highly desired but not essential. Please send CV and cover letter to Michelle Marion at: mmarion@glfhc.org or call us at: 978-689-6625.

Pediatric Emergency Medicine Physician
Established, democratic, physician managed group is seeking an FT BC/BE pediatric emergency medicine physician at MetroWest Medical Center's campus at Framingham Union Hospital; a community hospital in suburban Boston area. The ED has 12-hour pediatric emergency coverage from noon to midnight, 24 hr. pediatric hospitalists and an affiliation with Tufts Floating Hospital for Children in Boston, MA. We offer a flexible schedule, comfortable work environment and an excellent salary and benefit package.
E-mail: pedempaul@mac.com



FAMILY PRACTICE PHYSICIANS
Katahdin Valley Health Center located in beautiful Northern Maine is seeking Family Practice Physicians to staff two newly built Community Health Centers. Join this long-standing, financially stable FQHC in providing quality medical services to the people of this region. Generous compensation and benefits package! Contact Shelli LeFay. mlefay@kvhc.org or visit our website for more information www.kvhc.org

Physicians

Advocate Medical Group, currently has openings for the following physicians in Bloomington/ Normal, El Paso and Eureka, Illinois:
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Bloomington/Normal pop of 130,000, is located 2 hours south of Chicago, 3 hours from Indy and St Louis. El Paso & Eureka are rural communities with a population of 3,000.
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Cathy Hall Nottoli
Physician Recruiter
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PHYSICIAN OPPORTUNITY

Phoenix, AZ

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Currently, Tatum Highlands Medical Associates (THMA) is fully electronically integrated with state of the art technology. Billing is handled in-house, with a seasoned staff and a Certified Coder. A/R turnover is 2-3 weeks with an excellent collection ratio. THMA is very involved in a wide range of family practice services to include women's health, preventative medicine, geriatrics and urgent care. THMA partners with Clinical Research Associates and is currently involved with the following studies: Diabetes, Gout, ED, Hypertension, Hyperlipidemia, COPD, & Flu Vaccines. You can find out more about THMA from the website: www.tatummedical.com and you can check us out on Facebook under Tatum Highlands.

Please contact Kelly Chrisbacher, CMM, either by calling: 480-232-0087, or by e-mail at kelchris48@yahoo.com
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- UROLOGY



For more information, please contact: Mary Margaret Pratt,
Physician Recruiter, Mercy Physician Recruitment,
Phone: 479-314-7463, Email: mary.pratt@mercy.net

AA/EOE

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The Nurse Manager is responsible for planning, leading and organizing the 24 hour delivery of patient care on this unit. The ideal candidate will have previous NICU clinical nursing and management experience as well as an understanding of shared governance. BSN required by December 2012, MSN preferred. Current licensure as a Registered Professional Nurse in the state of Illinois is required.

Apply at Carlecareers.com.

EOE, M/F/D

Physicians

Physicians



K'ima:w Medical Center
Physician – Full Time
Salary DOE

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K'ima:w Medical Center
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For immediate consideration please contact Laura Myers at:
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Everything you have heard about West Virginia is true: The people are friendlier, we know our neighbors, the scenery is spectacular and doctors are still respected!

Parkersburg, West Virginia is located in the Mid-Ohio Valley region, on the border of West Virginia and Ohio. Camden Clark Medical Center is a 467 bed not for profit acute care system that serves a population of nearly 140,000. The hospital provides a broad range of services supported by advanced medical technology and a highly trained staff. Our medical staff is comprised of 221 physicians representing almost all specialties.

We are a family oriented community with a great public school system, low crime and low cost of living. Pittsburgh PA, Columbus OH, and Charleston WV are all within an easy drive of Parkersburg.

We are recruiting physicians for the specialties below. Our offers are very competitive and range from employment to income guarantees and include a sign on bonus. We also have a very attractive benefit package. You won't be disappointed!

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- OR Nurses
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For more information, contact: Sherry Keith
Camden Clark Medical Center, Parkersburg, WV
SKeith@ccmh.org
304.424.4382 (office), 304.424.4807 (fax)
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For Nursing Positions, contact:

Shellie Kriley

Shellie.Kriley@va.gov

303-750-7556

For other Positions, contact:

(303) 399-8020 ext: 2815

Apply online at:

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EOE - Hiring Veterans and non-Veterans



Dentists



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Endodontists - endo@dentaoffice.com.

Please call 215-550-7186

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*All inquiries are kept confidential.

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