



VA MID-ATLANTIC HEALTH CARE NETWORK - VISN SIX

Vol. 1, No. 4

"Excellent Care – Earned by Veterans – Delivered Here"

Voices of VISN 6

Official news from around *your* VISN

Feb. 10, 2011

Robeson County CBOC Enhances Access For Vets

By Ed Drohan
Fayetteville VAMC public affairs

Despite cold and rainy weather, more than 75 people came out Feb. 4 to see a new era of VA health care begin in southern North Carolina.

Fayetteville VAMC's new Robeson County Community Based Outpatient Clinic was officially dedicated during a ribbon cutting ceremony at the new facility. VA Mid-Atlantic Health Care Network (VISN 6) Director Daniel Hoffmann and Fayetteville VAMC Director Elizabeth Goolsby presided over the ceremony.

The 5,500 square foot facility currently offers primary care and will soon include mental health services and home-based primary care

specialists who will be able to offer services to homebound Veterans within 50 miles of the clinic. When fully staffed, the clinic will employ 23 people.

In addition to bringing health care to Veterans in a three county area, the Pembroke, N.C. facility also ushers in a new era of health care operations for the Fayetteville VAMC.

The clinic is operating under the new Patient Aligned Care Team system, wherein each Veteran is assigned to a team that includes a provider, registered nurse, licensed practical nurse and a medical administration specialist.

The new system will allow each Veteran more access to

[Continued on Pg 2](#)



Brad Garner
VISN 6 Network Director Dan Hoffmann and Fayetteville VAMC Director Betty Goolsby officially open the Robeson County CBOC.

Network Priority: Tackle C&P Exam Backlog

VISN 6 public affairs

The VA Mid-Atlantic Health Care Network has set aside three one-week sessions beginning in March to address the growing backlog of Compensation and Pension exams.

Like most areas of the country, medical centers throughout the network are experiencing a formidable backlog of C&P exams. These exams are used by VBA to determine levels of disability and appropriate compensation due to medical conditions associated with military service.

"Our charge is service to Veterans and we intend to meet our commitment with all of the resources we have," said VA Mid-Atlantic Health Care Network (VISN 6) Director Daniel Hoffmann. "My intention is to continue the effort until the number of Veterans waiting more than 30 days for an exam

is zero."

Medical centers throughout the network are rescheduling a large number of non-emergent appointments March 7-11, April 11-15 and May 9-13 to focus on C&P exams. Staff at each facility are reviewing appointment rosters to prioritize appointments according to urgency.

At the same time, Veterans awaiting C&P exams are being contacted by telephone to schedule appointments and medical center staff are planning for increased ancillary support from areas such as the laboratory and X-Ray clinics.

There are many contributing factors for the backlog, including the recent approval of the new presumptive conditions tied to Agent Orange. This ruling alone enabled more than 200,000 Veterans nationwide to open new claims and required VBA to re-adjudicate previous-

ly denied claims for Ischemic Heart Disease, Parkinson's Disease, Hairy Cell or other B-cell Leukemias.

Additionally, VA efforts in transparency continue to make it easier for Veterans to learn about issues they may address through the claims process which can now be accomplished online. Closer to home, the Mid-Atlantic region, and North Carolina in particular, have experienced sustained and dramatic Veteran population growth often tied to the fact that this region is home to some of America's largest military installations.

Regardless of reason, the VA Mid-Atlantic Health Care Network is laying the ground work for a "C&P Blitz" according to Robin Ward, the network C&P/IDES Administrative Director. "It's a huge undertaking,

[Continued on Pg 2](#)

Inside in Brief

Pg 3 Beckley VAMC celebrates 60 years of service to the Veteran community.

Pg 4 Richmond VAMC pioneers non-invasive brain stimulation.

Pg 5 Teleretinal imaging helps preserve vision health & Telehealth offers options.

Pg 6 Hampton VAMC expands services for female Veterans.

Pg 7 Presidents' Day & Care-giver support line ready to take your calls.

Pg 8 NASCAR drivers and pit crew visit Veterans at Salisbury VAMC.

Pg 10 Renewable energy sources being investigated for potential at VISN 6.

Pg 12 VISN 6 Sites of Care with addresses and phone numbers for each location.

From the Director

Optimism Abounds Through Innovative Health Care, Pgms

Here we are, already one-third of the way through the fiscal year. The network continues to grow in the number of Veterans enrolled as well as in the number of facilities and locations available to provide care. I'm optimistic that this growth will continue for the foreseeable future; however, this optimism is balanced with my concern for the growth in dollars required to sustain all that we are doing.

We are committed to providing high-quality health care, so it is imperative that we use all the tools available to do so as effectively and efficiently as possible. I've asked my staff to look hard at all their programs to ensure we find ways to meet the needs of our Veterans today and in the future. I am highly encouraged with the ongoing development of technology which will play an ever-growing role in helping providers monitor and manage health care. Additionally, with technology such as that used in our various telehealth programs, we are able to reach out and provide care closer to where Veterans live, and in many cases, directly into their homes.

As you read on Page 1, our efforts to bring VA health care closer to home continue to bear fruit. The new CBOC in Robeson County, N.C., is up and running, as is the CBOC in Greenbrier County, West Virginia, and it won't be long before we open the new CBOC in Wytheville, Virginia. Additionally, contracts have been signed to lease space for VA-operated dialysis clinics in Raleigh and Fayetteville.

While I address this subject last, it is with the thought that



most people retain more of the last item discussed. Compensation and Pension exams are, and have been, one of my top priorities. During 2010, we hired additional providers throughout the network to respond to the projected need. Also on Page 1 you may have read that a combination of factors brought us to the point where no matter how fast we work, we continue to receive more requests for exams each month than we can complete in a timely fashion solely using C&P designated providers.

To turn this around, the network will spend a week each in March, April and May focused on performing these exams. The exams will not be hurried. They will be quality exams, performed to the best of our ability, with each being thoroughly reviewed prior to handing off to VBA. It is our hope and design that with this VISN-level focused effort, we will be able to break the backlog of C&P exams to better serve our Veterans.

Sincerely, Dan Hoffmann

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 or call 919-956-5541.



Daniel F. Hoffmann, Network Director
Augustin Davila, Deputy Network Director
Mark Shelhorse M.D., Chief Medical Officer
Bruce Sprecher, Director, Public Affairs
Steve Wilkins, Network Public Affairs
Patrick W. Schuetz, Newsletter Editor



VA
HEALTH
CARE

Defining
EXCELLENCE
in the 21st Century

Ribbon Cutting continued from Pg 1

his team through face-to-face, group, telephone or – once online later this year, through MyHealthVet, secure messaging. It will also allow patients and family members more say in their treatment plan and access to more timely appointments.

“New clinics like this make all the difference for Veterans who live long distances from our medical centers and who can reasonably be serviced for their primary physical and mental health needs,” Hoffmann said.

“The Robeson County Community Based Outpatient Clinic becomes the network’s 20th outpatient clinic,” he added. “It will bring VA care to an estimated 2,400 Veterans residing in Robeson and Bladen counties, and even some from South Carolina’s Dillon County.”

According to Hoffmann, the new clinic joins a growing presence of VA sites of care.

“I’m happy to share that on the near horizon for North Carolina’s Veterans are clinics like this one in Elizabeth City

and Goldsboro,” Hoffmann said. “These will be followed by super clinics in Wilmington and Greenville, and even larger Health Care Centers in Fayetteville, Charlotte and the Winston-Salem area. In all, over the next three to four years, this Network will add more than 1 million square feet of well-deserved health care space for Veterans residing in North Carolina.”

Veteran Ronald Brooks, a local resident who attended the ribbon cutting ceremony, said he was excited about the new clinic.

“I’ve been going to Durham for years now, but this will be so much nicer,” Brooks said. “I’m going to try and get transferred here since it’s so much closer.”

U.S. Representative Mike McIntyre toured the facility shortly after the ceremony and spoke with both staff members and Veterans. He said he was impressed with the facility and happy for the Veterans in the area.

“This has been a long time coming,” he said.

C&P Exams continued from Pg 1

but leadership has stepped way outside the box and is providing total support to make this happen.”

Veterans can expect to spend an average of four hours completing the exam. Representatives from Veterans Service Organizations will be on hand to assist Veterans with other issues they may have and to help them learn more about VA benefits.

The completed exams will be forwarded to the appropriate Veterans Benefits Administration Regional Offices in Roanoke, VA; Winston-Salem, N.C., or Huntington, W. VA, where specialists will make determinations and mail notifications to the Veterans.

Veterans or family members with questions about claims should call 1(800) 827-1000, or log on to www.va.gov.

EXCELLENT SERVICE

Earned by Veterans. Delivered Here.

VA Mid-Atlantic Health Care Network VISN 6

60th Anniversary Marks Long Service To Community

By Debbie Voloski
Beckley VAMC public affairs

The Beckley VAMC opened its doors to the Veteran population March 1, 1951. The medical center was built on a 25 acre tract of land, purchased from Beaver Coal Company in February 1948 for \$22,128. That same spring, a hill was cleared and leveled, and in June 1949, the Southeastern Construction Company laid the foundation. Construction began and in December 1950 the hospital was completed at a cost of \$6.5 million. The medical center was dedicated as a 214-bed general medicine and surgery hospital on December 16, 1950.

There were 286 employees during the medical center's first year of operation, and the operating budget was approximately \$1,200,000.

Sixty years later, the medical center sits on 36.4 acres of land and is comprised of twelve buildings. Beckley VAMC is now a 40-bed general medical and surgical facility with a 50-bed community living center.

It serves Veterans in 11 counties in southern West Virginia and today employs 749 with a total operating budget of \$100 million.

The medical center is part of the Department of Veterans Affairs Mid-Atlantic Health Care Network (VISN 6), which includes facilities in North Carolina, Virginia, and West Virginia. The medical center opened its first community based outpatient clinic in Greenbrier County, West Virginia on January 18, 2011. It also supports two Veterans Outreach Centers – one in Beckley and the other in Princeton, West Virginia.

The medical center has been led by 11 directors, the first being George F. Swanson. On April 13, 2008, Karin L. McGraw, MSN, FACHE, took the helm and continues to serve as the medical center's director.

"While we have had face-lifts and programmatic changes over the years, our mission has not changed. We exist to care for Veterans, and it is with great pride that I can



Artists rendering of the Beckley VAMC, originally published in the *Raleigh Register* – now the *Register-Herald*, as it appeared in 1951.

say that I continue to pledge to do whatever it takes to serve our Veterans with kindness, compassion, and caring and to work diligently to assure that our services are here for them when the need arises." states McGraw.

March 1, 2011 represents a very special day not only for the Beckley VAMC but

for Veterans and staff alike. It symbolizes 60 years of continuous health care service to those who have borne the battle.

A reception will be held March 1 at 2 p.m. in the auditorium of the medical center. All Veterans, staff, former staff, and the community are invited.

Newly Renovated Patriot Café Opened

By Debbie Voloski
Beckley VAMC public affairs

James Vaughan, Chief, Food Specialist for the Veterans Canteen Service, along with other VA Central Office staff, were on hand to join in the celebration of the grand opening of the VCS Patriot Café # 517, Jan. 20 at the Beckley VAMC. The newly renovated café offers a new hot bar menu and a variety of specialty items including a garden gourmet and deli serving custom made sub sandwiches, wraps, and mini pizzas. The café serves more than 400 meals per day.

"The Beckley staff is excited about the new menu selection and the nice atmosphere in the dining area" stated Ruth Bowe, Associate Chief of Beckley VAMC Veterans Canteen Service.



Debbie Voloski

James Vaughan (right) and Beckley staff members wait patiently as Karin McGraw, Beckley VAMC Director, and Ruth Bowe, Associate Chief for the Canteen Service, cut the ribbon officially opening the VCS Patriot Café 517.

Greenbrier County CBOC Open For Business

The Greenbrier County Community Based Outpatient Clinic opened Jan. 18. The clinic, located in the Greenbrier Valley Airport Industrial Park in Maxwelton, provides primary care and mental health services for Veterans residing in Greenbrier, Monroe, Pocahontas, and Summers counties, W. Va. and Alleghany County, Va. The clinic is open 8 a.m. to 4:30 p.m. Monday through Friday. Veterans with questions regarding eligibility or enrollment at the Greenbrier County CBOC should contact James Nelson, CBOC Practice Manager, at (304) 497-3900.

Richmond VAMC Pioneers Non-Invasive Brain Stimulation

VISN 6 public affairs

Some of the most advanced methods in brain diagnosis and treatment are being studied right here in VISN 6. Richmond VAMC is the first VAMC using navigated brain stimulation to evaluate brain functions.

Known as NBS, navigated brain stimulation uses magnetic energy pulses to activate cells in the primary motor cortex, a part of the brain that controls movement. By looking at the response to these pulses, doctors can map that part of the brain before operating on it. Before NBS, many doctors used a method requiring a craniotomy. NBS is non-invasive and requires no incision.

NBS is used with Magnetic Resonance Images (MRI) of the brain and electromyography responses that measure electrical impulses to show muscle responses to complete the brain mapping process. Surgeons use the NBS image during brain surgery as a guide. It helps them know very specifically where they are, making brain surgery safer for Veterans.

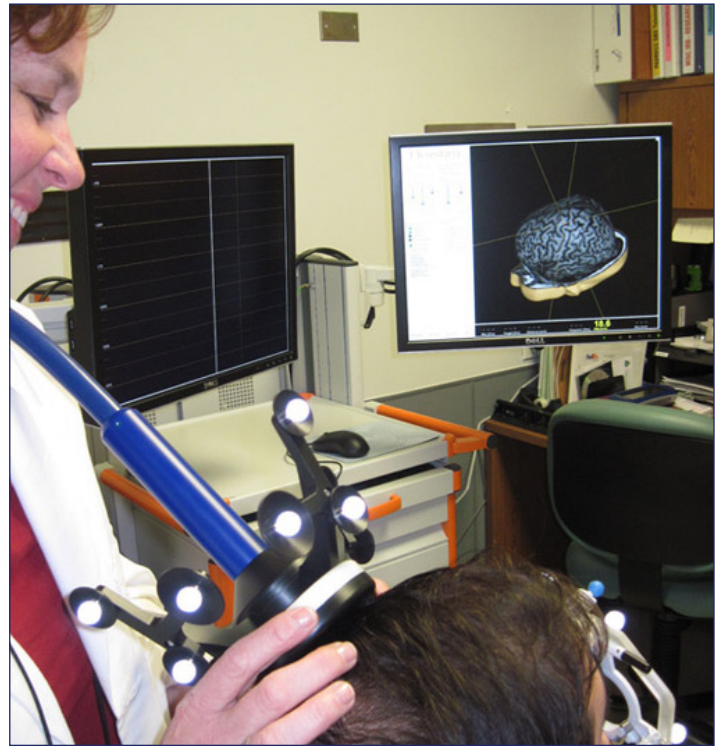
Using these methods will also enhance the study of conditions such as chronic or ongoing pain and the problems that patients with Parkinson's disease have with their speech. Dr.

Kathryn Holloway states, "The NBS is exciting because it is a new tool that can be applied to a wide variety of problems. We know from our work with deep brain stimulation that stimulation of the brain can help patients with neurologic disorders or brain disease." Holloway is Chief of Neurosurgery and Neurosurgery Director of the Parkinson's Disease Research Education and Clinical Center at the Richmond VAMC.

Parkinson's disease is second only to Alzheimer's disease among disorders that destroy the brain's ability to function properly. It affects motor skills and other functions and causes symptoms like tremors, rigidity, slow movement and unstable posture. Pope John Paul II, Muhammad Ali and Michael J. Fox are notable personalities who have been diagnosed with this disease.

Holloway has helped many patients with advanced Parkinson's using deep brain stimulation surgery to improve walking, tremor, and excess movements. She also plans to evaluate the effectiveness of NBS in treating Parkinson's related speech problems.

Chronic pain is a problem that affects many Veterans, not just patients with movement disorders. Spinal cord stimulators can help patients with arm and leg pain, but the treatment



Darlene Edwards

Miriam L. Hirsch, Neurosurgery Nurse Coordinator, maps a patient's motor cortex using a handheld coil. The mapping helps identify specific regions in the brain by eliciting responses from specific muscles.

of facial pain has been more difficult to manage. Holloway and her colleagues hope to discover if NBS usage can predict patient response for treatment of facial pain so that only those who respond will undergo surgery.

Holloway added that scientists have discovered that stimulation can be a powerful tool, suggesting, "The most exciting aspect of this technique is that it poses less risk to our patients. We have great hopes for the future."

Durham VA Selected As Vanguard Genetic Research Site

By Pete Tillman
Durham VAMC public affairs

The Durham VAMC is one of the first nine sites in the country to conduct what will become one of the largest research programs on genes and health in the United States. With an expected enrollment of one million Veterans, the Million Veteran Program, warmly known as MVP, began at Durham on Feb. 9.

Dr. William Yancy and a team of researchers will oversee the research here. They will work in conjunction with the VA's Boston and Connecticut Healthcare Systems to estab-

lish the invaluable national resource for future research. MVP will be launched nationally in phases with as many as 50 VA medical centers expected to participate over the next two years.

MVP is a national research initiative aimed at better understanding the effects that genes have on health and illness with the ultimate objective of improving Veterans' health care and Veterans' health for future generations.

An increasingly common way to gain knowledge in this area is to collect genetic samples and health information from large groups of people,

and then to conduct comparisons to learn which genes are linked to which health outcomes.

Participation in MVP is voluntary. By consenting to participate, Veterans allow secure access to VA and VA-linked medical information on an ongoing basis.

Veterans may also allow for future contact. Veterans who participate will help create one of the largest research databases of genetic, military exposure, and health information that may lead to new ways of preventing and treating illnesses in Veterans and all Americans.

Participating Veterans will provide a blood sample, which contains DNA and other molecules, and health information by completing a survey and allowing access to their medical record. Using the data collected, researchers will be able to study which genetic variations are associated with particular health issues.

As with all VA research, confidentiality and data security are the top priorities. A number of safeguards are in place to help ensure privacy and confidentiality for those who take part. To learn more, call 866-441-6075 or visit www.research.va.gov/mvp/.

Teleretinal Imaging Helps Preserve Vision Health

By Steve Wilkins
VISN 6 public affairs

“You don’t know what you’re missing,” goes the old adage. In the case of Diabetic Retinopathy, unless diabetic Veterans have their eyes checked, they may eventually miss a lot more than they planned.

Blood vessels in the back of the eye can be damaged by diabetes, eventually causing blindness. The condition can be detected with a simple eye exam, and then corrected. Since 2006, many Veterans have kept their sight using this relatively new VA eye-screening program.

Teleretinal Imaging, or TRI, uses a special camera to take pictures of the back of a patient’s eye without the need to dilate the pupil. The images are sent electronically to a centralized reading center at the Salisbury VAMC where an eye specialist examines them and provides results in about three days. Veterans can walk in to any VISN 6 VA facility without an appointment and be screened for TRI.

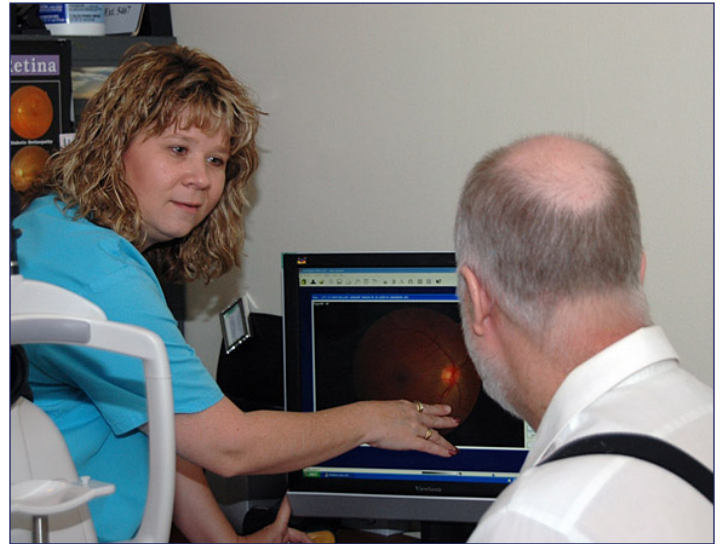
According to Matthew Huber, a TRI Imaging Care Coordinator at the Asheville VAMC, a patient recently came in for the screening and learned

first-hand about the risk to his eye sight when Huber took the necessary pictures. “The Veteran could see the damage to his eyes from multiple medical conditions, and saw that he needed to modify his lifestyle,” Huber said. On his next visit, the Veteran stopped to thank Huber, calling him his “hero.”

In addition to contributing to early detection, Veterans tend to keep their eye appointments more after their TRI visit. According to Rhonda Barnes-Bell, a TRI Imaging Care Coordinator at the Richmond VAMC, a recent patient satisfaction survey indicates “very positive results. Patients love the ability to walk in.”

Barnes-Bell also contends the process is not cumbersome. “It’s very smooth. Veterans walk in and say, “Ooh, let me go there!” There’s a no wait process, and it only takes ten minutes.” She said, “It is a quick way to make sure the eyes are okay, because the minute you’re diabetic, you’re at risk.”

Dr. Robert Morris, VISN Clinical Coordinator from Salisbury, added the convenience has paid off for several Veterans, saying, “I know we’ve caught a number of urgent findings, both diabetic and non-diabetic that required



Linnie Skidmore

TRI Imager Jennifer Strickland describes aspects of a retinal image that can be used in Teleretinal Imaging, a procedure used to screen diabetic patients for Diabetic Retinopathy, which can cause blindness.

quick intervention to prevent vision loss.”

It is important to remember that the process does not replace a full eye exam, but it does mean diabetics at risk of eye problems can be assessed easily and conveniently in a local clinic.

Mary Foster, Telehealth/Teleretinal Imaging Program Director offered, “With the tremendous success here screen-

ing for Diabetic Retinopathy, we are excited and look forward to a new pilot program the VISN will offer to screen Veterans for Macular Degeneration and Glaucoma. Foster completed the thought, adding, “We cannot place a price tag on the cost borne by someone who has lost their vision. It is critically important for us to embrace early screening and early detection.”

Telehealth Offers Health Care Options

Telehealth Mission: To provide the right care in the right place at the right time through the effective, cost-effective and appropriate use of health information and telecommunications technologies

Telehealth is a rapidly developing application of clinical medicine where medical information is transferred via telephone, the Internet or other networks for the purpose of monitoring health status, providing health education, consulting and sometimes to provide remote medical procedures or examinations via telemedicine. Telehealth can take place between providers and patients located in clinical settings as well as directly with patients in their homes. The Office of Telehealth Services uses health informat-

ics, disease management and telehealth technologies to improve the health of Veterans.

Telehealth programs include:

Clinical Video Telehealth is “real-time telehealth” where a telecommunications link allows for instantaneous, or synchronous, interaction between the patient and the provider

Care Coordination Home Telehealth is essentially “remote monitoring telehealth” where telehealth technologies are used to communicate health status and to capture and transmit data. Devices are placed into the homes of Veterans, typically, with chronic diseases

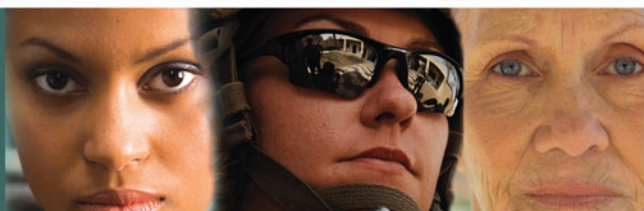


such as diabetes, heart failure and chronic pulmonary disease and are monitored by care coordinators.

Store-and-Forward Telehealth is where digital images, video, audio and clinical data are captured and “stored” then transmitted securely (“forwarded”) to a medical facility at another location where they are studied by relevant specialists.

WOMEN VETERANS HEALTH CARE

*You served, you deserve
★ the best care anywhere.*



Hampton VAMC Expands Services For Female Veterans

By Jennifer Askey
Hampton VAMC public affairs

The Hampton VAMC continues to expand its services to meet the needs of the growing enrollment of women Veterans.

Annette Dawson, the Women Veterans Program manager, said the number of women Hampton VAMC serves climbed from 6,000 in 2006 to more than 9,000 in 2010.

"The facility continues to add staff and services to keep pace with the demand," Dawson said. "This includes the addition of mammography services, which will be available on site with a state-of-the-art, digital mammography unit due to be up and running this fiscal year."

The medical center is also piloting an Extended Hours Clinic.

"We're excited about the opportunity to provide these evening clinics," said Dr. Terri Lockhart, acting chief of Primary Care. "These clinics allow our Veterans to access primary care without concern of child care or having to take off work."

Lockhart pointed out that the facility is also implementing a new care model called Patient Aligned Care Team. This model provides comprehensive, gender specific, patient-centered care.

"With this initiative, patients are encouraged to take a more active role in their health-care," she said. "Research tells us that when patients take an

active role in their health care, the health outcomes are much better. PACT embodies this concept."

Construction is also underway to address Hampton's growing female population. Tony Curling, director of Environmental Management Services, explained that the medical center is planning a new Women's Clinic which is anticipated to open in 2012.

"It will allow for our women Veterans to receive comprehensive primary care with a 'one-stop-shop' care approach for both general medical conditions and gender-specific problems," Lockhart said.

Mental Health Chief Dr. Priscilla Hankins pointed out there will be one centralized

access for women Veterans to receive medical, rehabilitation and mental health care when the new clinic opens.

"Orientation for the programs and services for newly discharged service members will also be available in this area," Hankins said, adding this includes a Trauma Treatment Track in the Mental Health Services section of the new facility.

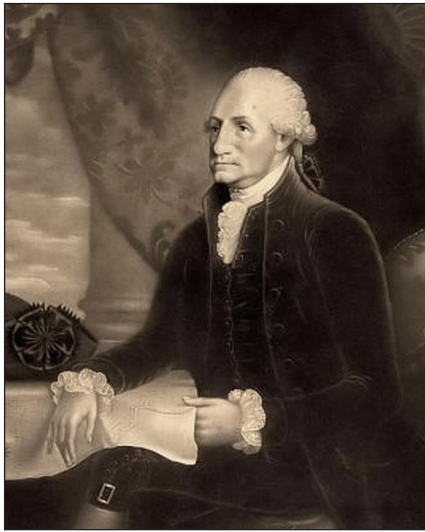
Hankins stated that the medical center offers a diverse spectrum of Mental Health services for women to include outpatient mental health treatment for depression, anxiety, PTSD and substance abuse, and residential care, which focuses on helping Veterans overcome homelessness and provides rehabilitation services.

Upcoming Outreach Events

Location	Event	Date	POC	Phone
Covington, VA	Rural Health	Feb. 11	Marian McConnell	540-855-3460
Lumberton, NC	Womens Health	Feb. 12	Kenya Graham	919-956-5541
Elizabeth City, NC	Rural Health	Feb. 12	James Coty	757-344-1320
Hickory, NC	Rural Health	Feb. 14	Edwina Gray-Wright	704-638-9000 x 4962
Williamsburg, VA	Rural Health	Feb. 14	James Coty	757-344-1320
Asheville, NC	Rural Health	Feb. 15	Scott Pittillo	828-298-7911 x 4337
Bastian, VA	Rural Health	Feb. 15	Marian McConnell	540-855-3460
Onley, VA	Rural Health	Feb. 15	James Coty	757-344-1320
Sylva, NC	Rural Health	Feb. 16	Scott Pittillo	828-298-7911 x 4337
Seymour Johnson AFB	Womens Health	Feb. 16	Kenya Graham	919-956-5541
Anson County, NC	Rural Health	Feb. 16	Dwight Holmes	704-638-9000 x 4962
Beckley, WV	Womens Health	Feb. 16	Kim Nugen	304-255-2121 x 4745
Norfolk, VA	Rural Health	Feb. 16	James Coty	757-344-1320
Moyock, NC	Rural health	Feb. 17	James Coty	757-344-1320
Virginia Tech	Womens Health	Feb. 17	Ruth Miller	919-491-9888
Lenoir, NC	Rural Health	Feb. 17	Scott Pittillo	828-298-7911 x 4337
Pulaski, VA	Rural Health	Feb. 18	Marian McConnell	540-855-3460
Upper Mattaponi Clinic	Rural Health	Feb. 21	Dez Scott	804-519-1511
Oteen, NC	Rural Health	Feb. 22	Scott Pittillo	828-298-7911 x 4337
Wytheville, VA	Rural Health	Feb. 22	Marian McConnell	540-855-3460
Ahoskie, NC	Rural Health	Feb. 22	James Coty	757-344-1320
Coinjock, NC	Rural Health	Feb. 23	James Coty	757-344-1320
Hendersonville, NC	Rural Health	Feb. 24	Scott Pittillo	828-298-7911 x 4337
Waynesboro, VA	Rural Health	Feb. 24	Marian McConnell	540-855-3460
Wilmington, NC	Rural Health	Feb. 24	Ed Drohan	910-488-2120 x 5991
Mecklenburg Cty, NC	Rural Health	Feb. 24	Dwight Holmes	704-638-9000 x 4962
Franklin, VA	Rural Health	Feb. 24	James Coty	757-344-1320
Dare, NC	Rural Health	Feb. 24	James Coty	757-344-1320

Visit your local VA medical center website for more events in your area.

Presidents' Day 2011



“The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional to how they perceive the Veterans of earlier wars were treated and appreciated by their nation.”

— President George Washington



With malice toward none; with charity for all; with firmness in the right, as God gives us to see the right, let us strive on to finish the work we are in; to bind up the nation's wounds; to care for him who shall have borne the battle, and for his widow, and his orphan—to do all which may achieve and cherish a just and lasting peace among ourselves, and with all nations.

— President Abraham Lincoln

Caregiver Support Line Ready To Answer Your Questions

The national VA Caregiver Support Line housed at the Canandaigua VAMC opened Feb. 1. This support line serves as a resource and referral center for caregivers, Veterans and others seeking caregiver information. It will also be available to respond to inquiries about the new caregiver benefits associated with Public Law 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010.

Caregivers are family members and loved ones who provide care for Veterans living with the effects of war, disability, chronic illness or aging. They deserve VA's highest level of support. Caregivers are the critical link to ensuring Veterans have the highest quality care and optimal wellness. VA values the sacrifices caregivers make to help Veterans remain at home and wants to ensure all caregivers feel supported and have trust in VA to assist them in their caregiving roles.

Caring for a Veteran?
Call VA's Caregiver Support Line for help toll-free:

1-855-260-3274
Monday - Friday, 8:00 am - 11:00 pm ET
Saturday, 10:30 am - 6:00 pm ET

VA Caregiver Support PROGRAM

Department of Veterans Affairs

The National Caregiver Support Line is open Monday through Friday, 8 a.m. - 11 p.m. and Saturday 10:30 a.m. - 6 p.m. Eastern Time. The National Caregiver Support Line Toll-Free number is 1-855-260-3274.

For more information, please see VA's updated caregiver web-site: www.caregiver.va.gov.

NASCAR Drivers, Pit Crew Visit Salisbury VAMC

By Carol Waters
Salisbury VAMC public affairs

Patients at the Salisbury VAMC were treated to a special visit from members of the Richard Childress Racing team Jan. 21. Drivers Austin Dillon, Ty Dillon and Joey Coulter, and the Cheerios/Hamburger Helper Chevrolet Pit Crew for Clint Boyer's No. 33 race car, signed autographs and visited with Veterans in the Community Living Center and the Hospice Unit.

Austin Dillon, rookie of the year in his division, drives the No. 3 Bass Pro Shops Chevrolet Silverado in the Camping World Truck Series. His younger brother Ty Dillon is the driver for the No. 41 car in ARCA Racing Series.

The brothers are the grandsons of NASCAR legend Richard Childress. Ty selected the number 41 as a tribute to his grandfather, who raced the number at Bowman Grey Stadium in Winston-Salem, N.C., during his years as a driver. Joey Coulter was recently signed by RCR on Nov. 30, 2010 to drive in the 2011 Camping World Truck Series.

Members of the Cheerios/Hamburger Helper Chevrolet Pit Crew included Matt Kreuter, Dustin Necaise, Aus-

tin Craven, Bryan Smith, and Nick Terry. Following the autograph session, the drivers and members of the Pit Crew ate lunch with Veterans and then visited with patients in the wards and hospice unit who were unable to attend the autograph session.

It was during Nick Terry's visit with patient Crawford J. Ferguson, III that he learned of the Veteran's heroics in World War II and saw his numerous medals displayed on the wall – the American Distinguished Flying Cross, Purple Heart, four air medals and four battle stars. He also holds France's Legion of Honor medal. Terry, being so moved by the heroism of Crawford, removed his signature red and yellow shirt and presented it to him.

As the drivers and members of the Pit Crew visited with patients, they learned of the distinguished military service of the Veterans and many of their personal stories. As they said goodbye to each Veteran, they expressed appreciation for their service to the country and wished them well.

The visit was organized by the Salisbury VAMC rural health team, and received media coverage by The Salisbury Post and WBTV Channel 3 (CBS affiliate, Charlotte).



Luke Thompson
Nick Terry (center) presents Veteran Crawford J. Ferguson, III with his signature red and yellow shirt as Matt Kreuter looks on.

Salem VAMC Wins Integrated Ethics Award

By Marian McConnell
Salem VAMC public affairs

The "Ask Ethel" ethics program has garnered the Salem VAMC a National Center for Ethics in Health Care award of \$7,000. Salem was one of seven sites selected out of 35 proposals submitted. The award will be used to benefit all VISN 6 medical centers by the promotion and integration of "Ask Ethel" or similar programs.

The Salem team developed this preventive ethics project to address appropriate boundaries between employees and trainees, employees and patients, and appropriate conduct in general. The team developed a vehicle for educating staff on proper boundaries that would not only be easily recognizable, but would also be an approachable venue for employees to ask questions anonymously.

Although all medical centers address proper boundaries in a variety of training environments, the Salem team has had great success by providing real life scenarios and specific examples with "Ask Ethel."

"Ask Ethel" answers questions submitted by employees to the ethics committee. The committee answers the questions by posting the information in the hospital's monthly newsletter, in the weekly bulletin and via the Ethics folder on the internal shared drive.

"Ask Ethel" has been shown to address the gap as evidenced by an increased number of calls coming into the ethics office asking boundary related questions. Staff now recognizes the "Ask Ethel" logo and report having discussions on their units about the question of the month. Ethics committee members have also been invited to speak to employees to provide additional education on ethics issues.



Luke Thompson
Seated Left to Right: Drivers Austin Dillon, Ty Dillon and Joey Coulter; Back Row Left to Right: Matt Kreuter, Austin Craven, Dustin Necaise, Bryan Smith, and Nick Terry.

Final Korean Agent Orange Regulation Published

WASHINGTON – Veterans exposed to herbicides while serving along the demilitarized zone (DMZ) in Korea will have an easier path to access quality health care and benefits under a Department of Veterans Affairs (VA) final regulation that will expand the dates when illnesses caused by herbicide exposure can be presumed to be related to Agent Orange.

“VA’s primary mission is to be an advocate for Veterans,” said Secretary of Veterans Affairs Eric K. Shinseki. “With this new regulation VA has cleared a path for more Veterans who served in the demilitarized zone in Korea to receive access to our quality health care and disability benefits for exposure to Agent Orange.”

Under the final regulation published today in the Federal Register, VA will presume herbicide exposure for any Veteran who served between April 1, 1968, and Aug. 31, 1971, in a unit determined by VA and the Department of Defense (DoD) to have operated in an area in or near the Korean DMZ in which herbicides were applied.

Previously, VA recognized that Agent Orange exposure could only be conceded to Veterans who served in certain units along the Korean DMZ between April 1968 and July 1969.

In practical terms, eligible Veterans who have specific illnesses VA presumes to be associated with herbicide exposure

do not have to prove an association between their illness and their military service. This “presumption” simplifies and speeds up the application process for benefits and ensures that Veterans receive the benefits they deserve.

Click on these links to learn about Veterans’ diseases associated with Agent Orange exposure at www.publichealth.va.gov/exposures/agentorange/diseases.asp and birth defects in children of Vietnam-era Veterans at www.publichealth.va.gov/exposures/agentorange/birth_defects.asp.

VA encourages Veterans with covered service in Korea who have medical conditions that may be related to Agent Orange to submit their applications for access to VA health care and compensation as soon as possible so the agency can begin processing their claims.

Individuals can go to website at www.vba.va.gov/bln/21/AO/claimherbicide.htm to get a more complete understanding of how to file a claim, as well as what evidence is needed by VA to make a decision about disability compensation or survivors benefits.

Additional information about Agent Orange and VA’s services for Veterans exposed to the chemical is available at www.publichealth.va.gov/exposures/agentorange. The regulation is available on the Office of the Federal Register website at www.ofr.gov/.

VA Adds Chat Feature For Online Health Benefits App.

WASHINGTON – Veterans will find it easier and faster to apply for their health care benefits now that the Department of Veterans Affairs has enhanced and streamlined its online Form 10-10EZ, “Application for Health Benefits.”

“VA is committed to tapping into the best that technology has to offer to ensure Veterans receive the benefits they have earned,” said Secretary of Veterans Affairs Eric K. Shinseki. “We continue to look for new ways to improve access to care and benefits and engage Veterans.”

This revised online application now features a chat function which will allow Veterans to receive live assistance while they are filling out the form. Additional enhancements to the process include simplification of questions relating to military service in Southeast Asia during the Gulf and in the Vietnam wars. Several additional minor enhancements make the application easier and faster for Veterans to complete.

The 10-10EZ application is

divided into six different sets of information, including personal information, insurance information, employment, military service, and a financial assessment. Since November 2000, nearly 400,000 Veterans have already used the online 10-10EZ to start receiving health care benefits from VA.

Future enhancements to the online application will include a 10-10 EZR Health Benefits Renewal Form for Veterans to update their personal information and a special 10-10EZ designed specifically for demobilizing military service members.

Veterans may complete or download the 10-10EZ form at the VA health eligibility website at www.1010ez.med.va.gov/sec/vha/1010ez.

Veterans may also contact VA at 1 (877) 222-8387 (VETS), visit the VA health eligibility Web site at www.va.gov/healtheligibility or apply for health care benefits at any VA medical center at www2.va.gov/directory/guide/home.asp with the help of a VA health care eligibility specialist.

Notification Of Environmental Exposure Being Expanded

VA monitors numerous hazards in Iraq, Afghanistan, and other military installations that may potentially present health risks to service members and Veterans. In a letter to Regional offices in April 2010, VA noted, “It is imperative that regional office personnel are aware of these environmental health hazards and are well-trained to handle disability claims from Veterans based on exposure to them.”

Recognizing that not all Veterans may be aware of their exposure during service, VA is also providing information to clinicians about which Veterans may have been affected and when to ask about exposures.

Potential exposures for Veterans of Iraq and Afghanistan include burn pits; particulate matter; sulfur fires; and hexavalent chromium exposure at Qarmat ali Water treatment plant

in Basrah, Iraq in 2003. other potential exposures include contaminated drinking water at Camp Lejeune between 1953 to 1987 and Veterans exposed to pollutants from a waste incinerator near the naval air facility in Atsugi, Japan, from the early 1980s to 2001.

VA is working with DOD to identify and contact individuals who may have been exposed to specific environmental hazards while serving in the military. However, it may not be possible to identify all individuals due to the extent of some exposures. Veterans who believe they may have been exposed to one or more of these hazards are encouraged to contact their local VA Environmental Health coordinator or log on to www.publichealth.va.gov/exposures/coordinators.asp for more information.

RESEARCH STUDY

Spinal Cord Injury Exercise Laboratory Research Study

Exercise to Reduce Obesity in Spinal Cord Injury. Do you meet these criteria?

- 1-year post injury
- Willing to exercise 5 days per week
- Available for 5 consecutive months
- An interest improving your fitness and health

This research study is being conducted by Dr. David Gater to evaluate and compare the benefits of arm exercises vs. electrical stimulation cycling.

Compensation and lodging provided.

If interested, please contact: Chris Harnish, (804) 675-6200, Email: christopher.harnish@va.gov

VISN 6 Studies Renewable Energy For Options

By Mark Hudson
VISN 6 Energy Manager

The Department of Veterans Affairs is committed to improving the environment.

In support of ongoing renewable energy initiatives, VA has conducted studies evaluating the potential use of renewable fuels in energy plants supplying 38 VA medical centers around the country. VA selected these sites based on factors including availability of renewable fuels, energy plant characteristics and local utility rates.

The findings will help VA determine the ideal locations for renewably fueled energy plants, while ensuring cost savings in the long run.

Renewable fuels under consideration include methane gas from landfills (biogas) and agricultural waste such as decaying trees and landscape waste, scrap wood and wheat or corn stalks (biomass). Along with renewable fuels, the studies assessed the potential for updating VA's existing energy plants to incorporate combined heat and power, or cogeneration, technologies.

Cogeneration is an energy-efficient system that simultaneously produces electricity and steam, hot water or chilled water. VA already has a renewably fueled cogeneration system at the Mountain Home VAMC in Johnson City, Tenn. That medical center uses waste methane that is produced from a local municipal landfill.

Working with VA's National Energy Business Center, VISN 6 has planned and executed several renewable energy studies. The studies have included photovoltaic (PV)

electric production, wind power and biomass combined Heat and Power production (CHP). We are making great strides towards operating more energy efficient facilities, using more renewable energy, "greening" our vehicle fleets, and achieving other milestones on the path to environmental sustainability, and we are looking at all our systems to meet VA's goal of increasing renewable energy consumption 15 percent by 2013.

Current prescreening for PV use showed poor economic viability with initial paybacks of 90 years. However, the economic viability continues to improve and now stands at around 40 years, dropping as installation costs decrease. PV panels are evaluated in all cases of roof replacement, and especially for roofing projects facing the sun. Additionally, VISN 6 has a study planned to install a 1 MW PV system on top of an onsite landfill at the Salem VAMC. As this is undevelopable real-estate and not shaded, it is a perfect location for a PV electric generating station.

While the VISN continues to explore wind generated power, the site studies at both the Salem and Asheville VAMCs did not support wind generated electricity. Current technology requires about 14 MPH to start turning and a minimum of 8 MPH of sustained wind to keep the blades producing electricity. Studies at Salem demonstrated inconsistent and inadequate wind, while Asheville has issues which limit the installation of a wind tower. These wind generators

need space to erect the support column and turbine as well as a clearance zone in case of a catastrophic failure and to mitigate noise complaints. Asheville's weather also requires a certain amount of clearance around the turbine to prevent possible damage due to blades potentially "sloughing-off" ice.

The Salem CHP was found to be marginal as well, and with the site geography, the process proved awkward for transporting either the biomass (wood chips) or municipal solid waste to the medical center. However, Salem will have its landfill evaluated this year for the possibility of burning vented methane gas to produce electricity for the facility. According to Salem's Energy Manager, Mr. Robert Rossbacher, burning methane combined with the proposed PV, has potential for producing nearly 2 MW at peak production, or just under 30 percent of the facilities electric demand.

VISN 6 continues to maximize the renewable projects that will prove not only viable, but increase the overall control of heating and air-conditioning systems within our buildings. Asheville and Hampton will have ground source heat pump studies performed this year, with Hampton's including using the Hampton Roads as its primary heat sink.

If truly viable and all the required permitting obtained, there is potential to save over 6 million gallons of water per year and reduce the air-conditioning load of the Hampton VAMC by 35 percent. Most people do not realize that with all the people, computers and equipment in today's health-care facilities, cooling is required throughout the year. These new systems can provide essentially "free cooling" during the fall, winter and early spring months.



A lot has changed in the last 140 years. When today's Hampton VAMC opened in 1871 as the Southern Branch National Home for Disabled Volunteer Soldiers, issues such as parking and telephones were non-existent, and the issue of energy consumption was far different. Even when the youngest medical center in the VISN, the Richmond VAMC opened its doors in 80s, energy needs were minimal compared to today's buildings filled with electronics. With medical center facilities ranging in age from a mere 30-years-old to a more mature 140-years of age, the maintenance, repair and modernization is a never ending process. Needless to say that energy consumption has changed and answering the call to ensure the network becomes more energy efficient in the future is a team of engineers led by Mark Hudson, the VISN 6 Energy Manager.

VISN 6 Facility Enhancements

Asheville VAMC

Renovation on the main Atrium, adding a third elevator and new stairwell, will be complete in March.

Installation of a new perimeter fence around the campus will be complete by the end of March.

Installation of a new telephone system will be complete by Feb. 25 and switched over after normal business hours. All existing telephones will be replaced by Feb. 28.

Beckley VAMC

Exterior lighting continues to be upgraded with energy efficient LED lighting. This project will continue through February due to inclement weather delays.

Replacement of the main elevators continues and should be complete in December 2011. Delays may be experienced as only one of the two elevators will be operating at any given time.

Durham VAMC

The new parking garage located adjacent to the current garage is expected to be complete this summer and will accommodate up to 400 vehicles.

The fire alarm system replacement should be completed by March. System testing and wall patch and paint maintenance will occur through February.

First floor Community Living Center room renovations have been completed. Construction on the second floor should be complete in March.

Fayetteville VAMC

Renovation of the A-Wing elevators is on track for completion in June.

The Emergency Room will be relocated to the former Alpha and Eagle Clinics area during renovation to increase ER capacity. The

outpatient check-in area will also be renovated for more patient privacy.

The Women Veterans Health Clinic has relocated to the former Tango Clinic on the first floor. Renovation of the current space will begin the second week of February.

Construction on the fifth floor Mental Health area has caused Mental Health Service Line staff to relocate to a new modular building on the campus.

Construction has begun on a Starbucks Coffee outlet in the basement near the outpatient entrance.

One lane of traffic will occasionally be closed in front of Bldgs. 4 and 5 while the sidewalk is being made handicap accessible.

Salem VAMC

The installation of shuttle bus shelters is scheduled for completion Feb. 28.

Replacement of the air conditioning, heating and humidity control systems in Bldg. 143 should be complete by the end of February.

Roofing on the east corridors of Bldgs. 74, 143 and 2A is being replaced through the spring and summer.

Salisbury VAMC

The Canteen Retail Store has been temporarily relocated to Bldg. 6 during the expansion project.

The front entrance of Bldg. 4 will be closed during the first floor renovation to expand the Mental Health clinic. Please use the entrance between Bldgs. 4 and 2 during construction. Valet service is in front of Bldg. 11.

The roadway around Bldg. 42 near the pond will be closed to through traffic for the first of three construction phases converting the CLC into a Long Term Care Center of Excellence.

VISN 6 Special Events

Beckley

The Beckley VAMC will celebrate its 60th Anniversary March 1 with a reception in the Auditorium at 2 p.m. All Veterans are invited to attend.

Durham

Registration is underway for the 65th annual BVL Bowling Tournament March 1-25. Register online at www.bowlforveterans.org.

Little Anthony and the Imperials Veterans Concert perform Feb. 13, from noon - 3 p.m. at Raleigh's Progress Energy Center for the Performing Arts.

Registration is underway for Team River Runner. TRR promotes health, healing, and new challenges for wounded Veterans. To register, contact Recreation Therapy at 919-286-0411 x 7719.

Fayetteville

A presentation addressing "What is Heart Disease" as part of American Heart Health Month is slated for Feb. 11 from 9:30 a.m.

- 11 a.m. in Bldg. 4, Room 120. For more information, visit www.fayettevillenc.va.gov/images/Red_Dress_Day.pdf

The Fayetteville VAMC Black History Month program is scheduled for Feb. 16 from noon - 1 p.m. in the third floor auditorium.

Fayetteville is sponsoring a Rural Health Awareness Day Feb. 25 from 11 a.m. - 1 p.m. in the third floor auditorium.

Salem

Kristy Suhr, Chief, Nutrition & Food Service and Registered Dietitian, will review heart-healthy diet choices for Veterans, visitors, and staff Feb. 14 in the main lobby from noon - 12:30 p.m.

Miss Virginia and a variety of other guests will participate in festivities for the National Salute to Hospitalized Veterans Feb. 17 in the Bldg 5 Auditorium from 1:30-2:30 p.m.

An employee talent show in support of Black History Month is scheduled for Feb. 25 from 2 - 3:30 p.m. in Bldg. 5.

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/fredericksburg.asp>

Greenbrier County CBOC
804 Industrial Park Rd.
Maxwelton, WV 24957
304-255-2121

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>

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>

Hillsville
702 Pine St.
Hillsville, VA 24343
276-779-4220
<http://www.salem.va.gov/visitors/hillsville.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>