



VA MID-ATLANTIC HEALTH CARE NETWORK • VISN 6

Vol. 3, No. 11

“Excellent Care – Earned by Veterans – Delivered Here”

Voices of VISN 6

Official news from around *your* VISN

August 31, 2013

Providing The Very Best Care For The Very Worst Injuries

In front of a standing room only crowd, VA Mid-Atlantic Health Care Network Director Dan Hoffmann and other officials ceremoniously opened an expanded Polytrauma Inpatient Treatment Unit (PITU) at the Richmond VAMC Aug. 22.

Polytrauma involves injuries to multiple body parts or organ systems often causing long term impairments and functional disabilities. Some of the most common injuries may include traumatic brain injury, spinal cord injury, traumatic amputations and PTSD.

During the ceremony, Hoffmann explained the significance of the PITU to an audience, comprised of medical center staff, VA and local officials and public supporters, who came to see the newly ex-

panded unit unveiled.

“From its conception, this clinic was designed to provide world-class care. In essence, our work here is to provide the very best care for those who have sustained the very worst injuries,” he said. “Cutting the ribbon on the expanded inpatient polytrauma treatment wing is a momentous occasion for many reasons, but foremost in my mind is the fact that we have just expanded access to critical care for some of our most severely affected Veterans,” Hoffman added.

The mother of one of those Veterans, Laurie Rogers, shared how comprehensive polytrauma care has made a critical difference in the life of

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Mary Beatty-Brooks

David Rogers and his mother Laurie prepare to cut the ribbon, along with Dr. Ajit Pai and Dan Hoffmann, while John Brandecker and Dr. Shane McNamee look on.

Bomb Scare Highlights Patient Safety

By Michael Maddox
Salisbury VAMC public affairs

In the early morning hours of Aug. 8, a bomb threat was called into the Salisbury VAMC - setting in motion the evacuation of the main hospital and the response of many local agencies.

Following the 3:30 a.m. call, the medical center staff immediately activated the facility’s emergency operations plan, which included evacuating five intensive care and 29 medical-surgical patients from Building 2. The staff and patients were evacuated to the campus gym. Salisbury Police and the Rowan County Sheriff’s Office responded to search the building using bomb sniffing dogs. VA Police conducted a room-by-room search of the building finding nothing.

The call was made by a person who claimed he was unhappy that his relative was de-



Luke Thompson

Patients at the Salisbury VAMC were relocated to the medical center’s gymnasium during the bomb threat Aug. 8 while Building 2 was searched for possible explosive devices.

nied service connected benefits from VBA. While the caller was concerned for his family member, he probably gave no thought to the danger he put so many other Veterans in.

“It’s truly a shame that someone took out their frustration in a manner which put so many other Veterans in harm’s

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VISN-Wide Accomplishments Enhance Quality Of Care

I hope everyone had a safe and enjoyable holiday.

August was an amazing month for our network. What we accomplished should bring great dividends to Veterans throughout the region for years to come.

The Polytrauma ribbon cutting story just scratches the surface on the real value of this clinic. You'll see that I refer to it as a location for "the best care for those who have sustained the worst injuries." Our team in Richmond has created an environment of care for polytrauma patients that sets the standard in VA, and I'll venture to say in the country. The doctors, staff, engineers and builders have produced a state of the art, one-stop shop for polytrauma care and rehabilitation.

It will always be sad that this type of care is required, but servicemembers being injured is a fact of life and I am just so proud that when that happens, we have the best possible resources under one roof to help them return to the highest quality of life possible.

Another very important accomplishment has been the community mental health summits. Teams from six of the eight medical centers have hosted their events with the last two taking place this month. You'll read Dr. Buyck's article which gives an overview of the summits. Without having all the feedback yet, I can tell you that within this last 30 days, our clinicians and staff have met more community mental health providers than ever before. As a result of these summits, VA providers and their civilian counterparts have bridged many of the gaps which may have taken place in the past. We have established new understandings and laid the foundation for critical collaboration which will be put to use providing this very important piece of a Veterans' health well-being.

At the same time, our Homeless teams have been out meeting with their counterparts as well and I can tell you that we continue to find new and innovative ways to help Veterans and their families get off the street and back on their feet. Together, with community support, we are well on our way to helping bring this issue to a close.

In this issue, you'll also read about birthday cakes and our first four-legged super star. While neither of these may show up on a quality of care rating scale, what they both contribute significantly to is the happiness of those we care for. The payback in the joy and happiness a slice of birthday cake or the companionship of a dog is too good to ignore. We will continue to pursue these opportunities to bring whatever joy we can to those who depend on us for their care.

Finally, I'd like to congratulate all the graduates of this year's Leadership Development Institute. LDI is a highly-competitive program designed to foster leadership development throughout our VISN in employees who have been identified by their supervisors as future leaders. Congrats to you all.

Sincerely,
Dan Hoffmann



Best Care continued from Pg 1

her son, Sr. Airman David Rogers.

"When counting the cost of going to war, we must take into account all the costs in resources, time, and perhaps the most difficult to predict, the cost in terms of human lives. The most obvious price is paid when a service member loses his or her life," she said. "Great prices are also paid by those who are inflicted with a treatable injury or disease. The cost gets harder to see when it comes to nearly unpredictable injuries like traumatic brain injury and post-traumatic stress disorder."

Rogers went on to explain how her son had been seriously injured in a car accident four years ago, sustaining multiple injuries, to include a severe traumatic brain injury. She said that when her son, who had once aspired to follow in the footsteps of Chuck Yeager, an Air Force test pilot who was the first person to go faster than the speed of sound, was fully conscious, he asked the question, "What do I do now?"

"I answered his question. I told him that he was still a hero, but his service to his country would take a different path," she said. "Through the Polytrauma unit and with his cooperation, he was going to break down barriers and help them discover how to make the lives of men and women coming out of the battlefield so much better than they could possibly have been without his work. In my eyes he was now a test pilot."

And thanks to the Polytrauma rehabilitation team, David is pushing ahead and breaking new ground, just like his hero, every day.

"Only a few weeks ago he was paired up with a shiny blue walker. As he easily stretched his arms and legs out to stand and grabbed the handles, words from my childhood echoed in my mind, 'One small step for man; one giant leap for mankind.' David continues to this day to change the future with the help of the Polytrauma rehabilitation team," said Rogers.

Making sure Veterans like David are given the best opportunities to recover and succeed is a team effort, said Hoffman.

"The best rehabilitation treatment is inexorably linked with research findings. I'm proud to be affiliated and closely linked to VCU's Center for Rehabilitation Sciences and Engineering and the Richmond Defense and Veterans Brain Injury Consortium," he said. "Together, our resources are channeled into this critical program and these efforts have produced many significant results like the Polytrauma Family Care map which really opened the doors to the families and caregivers."

"It is also important to mention our direct ties with the Department of Defense," Hoffman added. "While DOD does the best they can to protect our men and women who are serving America, we know that there are those who will be hurt, and when that happens, you can count on the fact that together, this VA medical center, DOD, and the VCU team are in lock step to deliver the right care at the right time."

Richmond VAMC has been developing a world-class polytrauma system of care since 2006. The unit is one of five VA polytrauma centers, nationally. When the second and final phase of the \$8.5 million project is completed, the PITU will be 28,000 square feet and have 20 inpatient rooms. In addition to new patient rooms, the facility has four epilepsy monitoring beds, a rehabilitation gymnasium and the Polytrauma Neuroscience Center of Excellence.

Voices of VISN 6 is published monthly by VA Mid-Atlantic Health Care Network.

Questions or comments about the newsletter, e-mail Bruce Sprecher@va.gov or call 919-956-5541.



Excellent Care — Earned by Veterans — Delivered Here
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VA
HEALTH
CARE

Defining
EXCELLENCE
in the 21st Century

Doctor Brings Prestigious Surgical Career, Veteran Leadership

Dr. Gregory A. Antoine assumed the position of Chief of Staff for the Fayetteville VAMC, Aug. 13.

“Dr. Antoine brings a Veterans perspective to health care,” said Elizabeth Goolsby, Fayetteville VAMC director. “We are delighted to welcome a highly experienced Veteran to the medical center’s senior leadership team. His wealth of experience in the private and public sector, along with a background in business will add further depth to the clinical care provided.”

Antoine is from Boston, Massachusetts where he previously served as the Chief Plastic Surgeon at Boston University School of Medicine. Antoine is board certi-



Dr. Gregory A. Antoine

fied in Otolaryngology and Plastic Surgery. Throughout his medical career, he has extensive experience in surgical specialties to include Microvascular, Craniomaxillofacial and Cosmetic surgery.

Antoine completed medical school at the State University of New York at the Buffalo School of Medicine and Biomedical Sciences in Buffalo, NY. He completed residency at Walter Reed Army Medical Center and Georgetown University Medical Center in Washington, D.C. His post residency included Fellowship in Craniomaxillofacial Surgery at the Eastern Virginia Graduate School of Medicine in Norfolk, Va., and Fellowship in Hand and Microvascular surgery at the Minnesota Microsurgical Institute in Minneapolis, Minn.

“I look forward to providing leadership to ensure exceptional health care is delivered to our Veterans by engaged collaborative teams for years to come.”

Antoine is a Veteran with 24 years of service, including service in the Naval Reserves, Navy and Army Medical Corps.

Salisbury VAMC Welcomes Nurse To Patient Care Services

Garett Schreier, MSN, RN, was appointed as the Associate Director of Patient Care Services/Executive Nurse at the Salisbury VAMC, Aug. 11.

“I’m thrilled to have Garett join our team. Nursing is such a vital component of every single aspect of the care we provide. It was crucial that we find the right person for the job, and I believe we have found that person in Garett,” said Kaye Green, Salisbury VAMC director. “He brings with him a wealth of knowledge and experience and he will be a great complement to the entire Salisbury community.”

Most recently, Schreier served as the Director of Quality Management at the Lebanon VA Medical Center, Lebanon, Penn. Prior to this role, he served as the Deputy Nurse Executive there. Previously, Schreier worked at the VA Central Office supporting the implementation of the Caregiver Support Legislation. He has also been an Associate Chief of Nursing Service for Geriatrics and Ex-

tended Care, Acute Care, and Mental Health.

Schreier is a Navy Veteran, first serving as a Fleet Marine Force Navy Corpsman and later commissioned as a Nurse Corps Officer. Schreier holds a Master’s of Science in Nursing from the University of Phoenix and Bachelor of Nursing from York College of Pennsylvania.

“As a Veteran, I have a vested interest in ensuring Veterans receive the highest levels of compassionate and quality of care available. I consider it a true honor to work in a role that allows me to lead the Nurses providing their care,” he said.



Garett Schreier, MSN, RN



2013 LDI Graduates

Debra Whisenant	Asheville VAMC
Nina Zacharewich	Asheville MACPAC
Tonya Patterson	Beckley VAMC
Conley White	Beckley VAMC
Jamie Brown	Durham VAMC
Veronica Haubert	Durham VAMC
Nathalie Kean	Durham VAMC
Rizwana Rehman	Durham VAMC
Theresa Stevens	Durham VAMC
LaDonna Thomas	Durham VAMC
Kenya Graham	Fayetteville VAMC
Richard Phillips	Fayetteville VAMC

Susan Smith	Smith
Tracy Adjip	Adjip
Jeannine Boyd	Boyd
Randall Crowder	Crowder
Kathleen Decker	Decker
Anna Howell	Howell
Kevin Miller	Miller
Charlee Redick	Redick
Mary Truss	Truss
Tamara Williams	Williams
Colleen Ewing	Ewing
Carol Foote	Foote
Brenda Long	Long

Fayetteville VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Hampton VAMC
Richmond VAMC
Richmond VAMC
Richmond VAMC

Gary Pond
Karmen Purdel
Charlotte Watts
Eric Carpenter
David Eliason
Joyce Johnston
Deidre Keeling - Willis
Angela Musick
Alice Solaya
Shannon Starkey-Muse
Donitta Gillespie-Gray
Kris Kirwan
Kathryn Johnson

Richmond VAMC
Richmond VAMC
Richmond VAMC
Salem VAMC
Salem VAMC
Salem VAMC
Salem VAMC
Salem VAMC
Salem VAMC
Salem VAMC
Salisbury VAMC
Salisbury VAMC
Winston Salem VAMC

VISN Partners With Community To Enhance Mental Health Care

By David Buyck, PhD.
VISN 6, Director, Mental Health Integration

Honoring Veterans and those who have made sacrifices for the greater good is an important pillar of a strong, healthy community. Our history holds many examples of ways our communities show gratitude and respect to Veterans for their sacrifices in serving our country. This legacy dates back even before the founding of the United States of America.

For example, the Sioux Native American Tribe had a profoundly moving tradition of decorating the wounds of warriors. The Sioux sewed openings into garments making battle scars visible every day to all members of the community, for the rest of the warrior's life. In fact, each day, members of the community would apply fresh war paint to the battle scars as an enduring sign of the community's respect and gratitude for the warrior's service and sacrifice.

In July, VA began organizing community mental health summits to promote awareness and utilization of VA and community mental health resources. The summits' goals are to help Veterans access the fullest range of VA and community mental health services, and build healthy communities for Veterans and their families.

To date, six of eight VISN 6 medical centers, in collaboration with Duke University and the VISN-6 Mental Illness Research, Education and Clinical Center have hosted mental health community summits. The two remaining summits will be held on Sept. 5 and Sept. 14 in Hampton, Va., and Fayetteville, N.C.

Attendance has been strong with between 45-100 community participants per meeting. The meetings have successfully brought together mental health specialists, government officials, and Veter-



Scott Pittillo

A community group discusses mental health issues during the Asheville VAMC Mental Health Summit.

ans service organizations. The summits have strengthened existing collaborations among community and VA stakeholders and facilitated new ones.

The summits have borne significant fruit in allowing community and VA providers to build relationships that will make it easier

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VA Partners With Western North Carolina County Health Depts.

By Scott Pittillo and Edwina Gray-Wright

With a population of about 20,000 people, Shelby is the largest town in Cleveland County North Carolina. It is a largely rural region with the closest VA health care facility being the Rutherfordton CBOC about 40 minutes away. The closest VA Medical Center is in Asheville about an hour and twenty minutes away. For former Marine John Mancuso and his wife, Mary, who live just outside of Shelby, this wasn't an issue because John's new patient exam was with VA Nurse Practitioner Betty White at the Cleveland County Health Department.

Veterans who have enrolled through the Rural Health team from the Asheville VAMC now have an added option to schedule their new patient exam at selected local health departments as a part of a new concept named Integrated Adaptive Community Collaborative of Enhanced Support Services (I-ACCESS).

The new service is part of an agreement between the Asheville VAMC and county health departments that allows VA health care providers to use space in county health departments to perform new patient exams. VISN 6 is partnering with county health departments as a means to create new access points and shorten the time between enrollment and a person's new patient exam. Additionally, these new access points will reduce travel time for many Veterans. The exams include a basic physical, health history and blood work.

Asheville VAMC's Nurse Practitioner and Learning Resources Chief Charles Cooley, who has been overseeing Rural Health's progression from the start, said Rural Health has been working toward this since the program began in 2010.

"These agreements are the first of their kind in the VA medical system and target Veterans living in rural areas who historically have been underserved. Many Veterans enrolling in the VA



Scott Pittillo

Former Marine John Mancusco is examined by VA Nurse Practitioner Betty White at the Cleveland County Health Department in Shelby N.C..

health care system for the first time have not had primary care in years and often aren't aware of chronic medical conditions they may have developed such as diabetes or high blood pressure," said Cooley. "Many people put these basic exams off because of time, inconvenience and cost. If we can make it easier for Veterans to have their first appointment and increase awareness of how to

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2013 VA Sustainability Achievement Awards Announced

The 2013 VA Sustainability Achievement Awards were recently announced, and the Fayetteville and Hampton VAMCs were among the five winners.

Fayetteville VAMC was recognized in the Energy Efficiency category for Energy and Water Efficiency Improvements.

"The combined efforts of support from the VISN and our energy conservation team were vital in securing construction funding to upgrade our infrastructure and implement energy efficient programs," said Elizabeth Goolsby, Fayetteville VAMC director. "This is another step forward in ensuring we deliver renewable and sustainable energy at all sites of care for future generations of America's Veterans."



Courtesy Photo
Energy Efficiency award for Energy & Water Efficiency Improvements, Fayetteville VA Medical Center.

According to Sam Smith, Fayetteville VAMC energy manager, energy saving programs and ongoing construction projects since 2003 led to the success of Fayetteville VAMC in achieving a 28 percent decrease in energy use and a 36 percent decrease in water consumption.

"The combination of energy savings initiatives lowered the annual utility bill for the medical center by \$250,000 dollars, despite adding space and new services for Veterans health care," said Smith.

The award nomination included eight campus buildings previously certified as "sustainable" under the Green Building Initiative's Green Globes rating system. This helped VA nationwide meet sustainable building requirements.

"To manage energy usage and exceed standards, advanced metering systems were installed in all high-energy use buildings on campus," said Shelley Reeder, Fayetteville VAMC green environmental systems coordinator.

Smith and Reeder worked together to review construction and renovation plans to improve facility energy requirements that adhere to the VISN 6 minimum energy standards and meet the U.S. Department of Energy's Building Energy Codes.

"Through our dynamic energy and water conservation programs, the medical center exceeded the federally mandated water reduction goal and made significant progress towards the energy reduction goal of 30 percent by 2015," said Smith. "In 2012, we reduced energy consumption by 14 percent and water usage by 5 percent as compared to the previous year."

According to James Galkowski, Fayetteville VAMC associate director, new energy efficient space planned for the 250,000 square foot Fayetteville Health Care Center and the 32,000 square foot Community Living Center is expected to exceed the energy conservation and water reduction goal set for 2015.

Future plans for sustainable energy systems will meet the President's Climate Action Plan using solar power, an ethanol (E-85) fueling station and a new Energy Saving Performance Contract to implement additional energy conservation measures.

Mark Hudson, VISN 6 energy manager, said Fayetteville VAMC is leading the way in regards to energy efficiency.

"The Fayetteville energy program is one of the more vibrant programs within VISN 6, and their energy manager, works well with all departments to achieve the energy goals required by both law and executive order," Hudson said.

Hampton VAMC was recognized in the category of Waste Minimization/Pollution Prevention for results from its Solid Waste Diversion program.

The Hampton VAMC's recycling program diverted 87 percent of its waste stream from landfills and reduced its disposal cost by nearly \$25,000 in fiscal year 2012. Most of that waste was sent to the nearby Langley NASA Municipal Waste Steam Power Plant. Of the 2 million pounds of waste recycled at the VA facility, 1.2 million pounds were diverted and used by NASA to generate renewable energy for their campus. This project was recognized for its cross-agency collaboration as well as the Hampton VAMC's commitment to sustainable operations.

Hudson said the Solid Waste Diversion program being used at the Hampton VAMC helps the environment in several ways.

"Hampton's waste diversion is especially critical, since that annual 1.2 million pounds of trash that would normally go to a landfill, is diverted to produce electric power at the NASA facility," he said. "This not only saves landfill space, but also conserves other natural resources that would have otherwise been consumed to produce the electricity."

"Projects that improve and protect the environment are a priority for us and we will continue to explore opportunities to help the surrounding community while serving America's Veterans," said Mike Dunfee, Hampton VAMC director.

The VA Sustainability Achievement Awards are a national program which recognizes innovative, cost-effective efforts at VA facilities to improve sustainability performance in alternative fuel/fuel conservation in transportation, electronic stewardship, energy efficiency, environmental management systems, green purchasing, recycling, renewable energy, sustainable design, waste minimization/pollution prevention, and water conservation.

For more information about the VA Sustainability Achievement Awards, visit their website at www.green.va.gov/awards/sustainability.asp.



Courtesy Photo
Waste Minimization/Pollution Prevention Award for Solid Waste Diversion Program, Hampton VA Medical Center



Happy 66th Birthday USAF Sept. 18, 1947 – Sept. 18, 2013

President Harry S. Truman approved the National Security Act of 1947 and issued Executive Order 9877, which outlined the duties of the three services. The new National Military Establishment came into being on Sept. 17, 1947, with James Forrestal being sworn in as Secretary of the new Office of the Secretary of Defense. The United States Air Force was established on Sept. 18, 1947, with the swearing in of W. Stuart Symington as the first Secretary of the Air Force and the transfer of air activities from the Army.

Hospice Service Dog Ready For Full-Time Duty

By Michael Maddox
Salisbury VAMC public affairs

SALISBURY, N.C. – When you enter Liberty Lane, Salisbury VAMC’s hospice house, one of the first staff members you may meet greets you wearing a patch on her uniform that says, “I’m friendly. Please pet me.” Seeing anyone wearing a patch like that would be a strange site, but Semper Fi isn’t your normal staff member.

Fi is a two-year-old therapy dog that works at the hospice house. After nearly a year of training and working part-time at hospice, Fi is now ready to become a full-time staff member of the facility.



“It’s a big step for the VA, to have an off-leash dog. It surprised me – it’s like a dream come true. I didn’t think I would see it in my lifetime,” said Nina Dix, Fi’s owner, trainer and VA volunteer.

The lab/beagle mix will spend her weekdays at the hospice house, and go home on weekends with her primary care taker, Melanie Foster, hospice program support assistant. Fi has a kennel at the hospice house, which should be completed soon, equipped with an automatic door to go out and use the restroom, and the plan is to kennel her from 10 p.m. to 8 a.m.

Foster said that after researching the lifespan of therapy dogs, it was decided Fi would need time away from the facility because it’s better for their mental well-being if they are not “working” 24/7.

“With the nature of a hospice environment, people die here and naturally there is grieving. Going home with me will keep her around life, love and action,” said Foster.

“She will still go home with Melanie on weekends. Her house is full of children, love – everything that Fi needs for with a well-rounded life,” added Dix.

Having that downtime is also good for Fi because while being petted and visiting patients may not sound like work to a human, but it can be exhausting for a therapy animal, said Dix.

“When I first starting bringing her for the whole day, she got so tired because of constant stimulation. She would be exhausted,” said Dix. “So it took a couple of weeks to get her to be able to stay more than one day without being zonked out. She didn’t feel like there was a place where she could go rest. In her world, it really is



Michael Maddox

James Landers, a patient at Hospice and an Army retiree, enjoys spending a little time with Semper Fi, Salisbury VAMC Hospice therapy animal.

work – enjoyable, but work.”

Fi has run of the “house” when she is at work. She can freely visit patients and rest when she needs it, but she also knows some areas are off limits because they are marked small flags.

Dix said she came up with the flag marker idea because as patients come and go, off-limit areas can change, and the flags can be added or removed. There are also flags to keep Fi from entering the kitchen area.

James Landers, a hospice patient and an Army retiree, said he enjoys his visits with Fi.

“She comes by every once and a while and sees me. She likes to come in and lay at my feet and I rub her,” said the Griffin, Ga. native. “I figure everyone has owned a dog at one time or another when you were young and it’s been years since I owned one, but it makes a difference in my day when she visits me.”

Dix said making that difference is what the program is all about.

“I’ve done pet therapy for years. It’s different for different people. Some people it brings back different memories and the company of the dog they lost. Others, they still get enjoyment out of it because it’s unconditional love,” she said. “What’s not to love about a dog sitting there looking at you, thinking you’re the world? Dogs give that to everybody. But it’s really cool when you can give that to Veterans because they’ve done so much for us.”

Mental Health continued from Pg 4

for Veterans to access needed mental health services whether coming from a community provider to the VA or vice-versa.

Each of our summits has focused on small-group breakout sessions that allow community and VA providers, Veterans, and government officials to spend valuable, focused in-person time discussing patient care scenarios and brainstorming ways to enhance communication, access to mental health care, and continuity of care for Veterans and their families.

Workgroups produced solution-focused recommendations with action plans that include timelines and schedules for follow-up meetings. In an era of email and digital communication, the face-to-face element appeared to be very important. Many participants commented that meeting one another in person has helped build important bridges that exceed what could be accomplished

over email or by telephone.

In 1863, President Lincoln expressed America’s gratitude to Veterans by providing enduring benefits and services to them. Two years later, in his second inaugural address, Lincoln called upon our nation “to care for him who shall have borne the battle and for his widow, and his orphan.” These words, on the heels of the Civil War served to inspire a divided nation to band together as a community with a shared goal of caring for its Veterans and their families.

The mental health summits carry on this tradition of respect and gratitude through service to Veterans, not just as single organization, but as an entire community. The summits are a solid step toward expanding and synchronizing the continuum of mental health care available to Veterans and their families.

New Food Choices Offered To Veterans At Richmond VAMC

By Richmond VAMC public affairs

Richmond VAMC is continuously making strides to enhance food services for Veterans on their road to recovery. Chief of Nutrition and Food Service, Dr. Laura Nihan discussed how the team is creating more choices for patients.

After arriving in 2012, Nihan analyzed and surveyed the food delivered to patients and listened to their feedback.

“Even though all foods that we serve to our patients met nutritional regulations and standards, it was evident a wider array of fruit choices would be enjoyable,” she said.

Patients’ meals now include grapes, melons, cantaloupe, strawberries and other fruits which were new additions to the menus.

“We have also included training time with professional chefs to teach our cooks new techniques, and we have purchased new equipment that allows us to serve foods that we could not serve before such as homemade muffins and breads,” said Nihan. “We have seen more patient satisfaction with the new food choices.”

Healthy fresh foods are important for patients and are a significant part of recovery, both nutritionally and emotionally, said Nihan. Sometimes something a little sweet can also enhance patient recovery, she added.



Mary Betty-Brooks
Tracy Trueheart, Food Service Worker serves a piece of birthday cake to a Veteran.



Mary Betty-Brooks
Healthy fresh foods are important for patients and are a significant part of recovery, both nutritionally and emotionally.

“Veterans now have an opportunity to enjoy McGuire’s ice cream social. The event has been so popular – being able to enjoy ice cream, plus root beer floats and parfaits with fruit,” said Nihan. “The root beer floats will be low in sugar so it will not affect their dietary needs. This is a great opportunity for our patients to feel like a kid again.”

“We are also providing cakes to patients on their birthday. In the past it has not been done,” she said. “It is nice for them to receive something on their birthday.”

Nihan said the medical center is always interested in how to improve the Veteran’s experience and provide them with excellent service.

“These steps make a difference to the patient. It’s about taking the next step to make things better,” she said.

Nihan noted she is receiving positive responses for the new meals delivered to patients and she is always interested in suggestions for additional improvements.

North Carolina continued from Pg 4

prevent future health issues, we can impact many common health conditions before they become severe.”

The convenience was especially important for the Mancuso family. The Mancusos own a small business and Mrs. Mancuso had taken off work to bring her husband to the appointment.

“You don’t know how much we appreciate this – this is great,” said Mrs. Mancuso. “I was afraid I was going to have to take the whole day off because my husband is currently staying in rehabilitative care and needs someone with him.”

For patients enrolled through Asheville’s Rural Health team, once the new patient exam is complete, they are assigned to a permanent VA primary care doctor in Asheville, Franklin, or Rutherfordton depending on where they live.

Asheville’s program is currently active in the counties of Avery, Burke, Cleveland, Graham, Haywood, Henderson, Madison, Mitchell, Swain and Yancey. Pending counties include Cherokee, Jackson, McDowell and Transylvania.

The Salisbury VAMC is right behind Asheville as it prepares to open service locations in Guilford and Anson counties with several others in the discussion stages.

Edwina Gray-Wright, Salisbury VAMC’s Rural Health Integrator program manager, said starting I-ACCESS in these counties is just the beginning of something everyone involved in can benefit from.

“With the implementation of I-ACCESS, community agencies across the western region of North Carolina will have the opportunity to become an I-ACCESS site for VHA services. These sites will afford newly enrolled Veterans initial exams, educational opportunities, follow up tele-health services, and a wealth of VHA services in one location in their local community,” she said. “Local community representatives may also find the answer to some of the questions regarding VHA services for their local customers.”

Veterans must submit an application for VA Health Care Enrollment to their local Rural Health program and be eligible for VA health care to be eligible for the new service. Exams are by appointment only.

Veterans in western North Carolina interested in learning more about enrollment and the I-ACCESS program should call Shawn Butler in Asheville at 828-298-7911, extension 4346, or Edwina Gray-Wright in Salisbury at 704-638-9000, extension 4958/4960.

National POW/MIA Recognition Day

The 2013 National POW/MIA Recognition Day poster honors those still missing from our Nation's past wars and conflicts and those who made the ultimate sacrifice and whose remains have not yet been recovered and returned home. The Poster depicts the Missing Man Table and there is special significance to each item that is displayed.

Set for four, the missing personnel from the Army, Marine Corps, Navy, and Air Force are represented at the table. The round table shows everlasting concern. The table cloth is white symbolizing the purity of the servicemen's motives when answering the call to duty. A single red rose is displayed in a vase as a reminder of the life of each of the missing and their loved ones and friends who keep the faith while seeking answers. The vase is tied with a red ribbon symbolizing the continued determination to account for them. A slice of lemon is a reminder of the bitter fate of those captured and missing in a foreign land. The salt symbolizes the tears shed by those missing and their families who long for answers to end years of uncertainty. The lighted candle reflects hope for their return to their families and our Nation. The inverted glass symbolizes the servicemen's inability to share an evening toast. The chairs are empty; they are missing.

National POW/MIA Recognition Day is held each year on the third Friday in September. On September 20, 2013, ceremonies will be held across the country to commemorate the sacrifices of the missing servicemen and their families. For additional information about National POW/MIA Recognition Day, visit the Defense POW/Missing Personnel website at www.dtic.mil/dpmo.

Unaccounted for from Past Conflicts						
	WWII	Korean War	Cold War	Vietnam War	Iraq & Other Conflicts	Total
Total MIA	*73,661	*7,907	126	1,645	6	83,345



VWWP Staff Trains Virginia National Guard Family Programs Staff In ASIST

By Roger Schlimbach

SANDSTON, Va. – Members of the Virginia Wounded Warrior Program recently shared Applied Suicide Intervention Skills Training (ASIST) here with Family Assistance Specialists from the Virginia National Guard Family Assistance Centers, chaplains, and Family Readiness Support assistants.

Attendees of the training included staff from Fort Belvoir, Martinsville, Fort Monroe, Fort Pickett, Langley Air Force Base, Staunton, Fredericksburg and Warrenton.

Though they came from different locations, each one's primary duty is to work with military service members and their families as a part of the Virginia National Guard Family Programs staff.

Ben Shaw, a Veteran peer specialist, explained why this training is so important for suicide intervention and prevention.

"I believe they are at the front lines for the Virginia National Guard community. They're certainly available to answer questions and make recommendations and referrals, but they are more accurately described as complex problem solvers," he said. "Who better to equip with some suicide first-aid skills?"

The training took place over two days in which the group was broken into smaller focus groups where they participated in an array of hands-on activities designed to help identify a person with suicidal tendencies, apply intervention techniques, and stabilize the situation.

"ASIST is an exhausting undertaking for the instructors, but I believe it's easily eclipsed by the reward of watching participants make connections, gain confidence, and return to their positions significantly better armed for any interaction involving a person at risk for suicide," said Shaw.

Brandi Jancaitis, director for Veteran Housing Development, is no stranger to the intricacies and stress of leading ASIST training. Both she and Shaw have participated in and facilitated multi-

ple ASIST events. She said her first training left her feeling, "more ready, willing and able to intervene with someone at risk of suicide."

Shortly after her first training, Jancaitis used what she had learned when a National Guardsman called her explaining he was holding a loaded firearm and informed her he planned to commit suicide.

Using the Suicide Intervention Model provided by ASIST, she was able to follow the steps to defuse the situation - beginning with asking the question, "Why are you thinking about killing yourself?"

Asking this question opened the caller up to explaining his current situation, and from there Jancaitis was able to engage the caller - delaying him from going through with his plan. This allowed her to intervene, and at the same time, contact emergency services to ensure there would be someone safely with him when she hung up.

Jancaitis' efforts possibly saved the life of the guardsman, and she believes that without ASIST this situation likely could have played out much worse.

Shaw and Jancaitis have both took part in "Train the Trainer" courses with funding from the Virginia Department of Health. As a result, they have led the entire VWWP staff through ASIST in 2012 – making them better equipped to handle any potential suicidal situations involving a Veteran or a family member of a veteran. VWWP requires all of its employees to become certified in ASIST.

If you would like more information about upcoming trainings or would like to talk to someone about setting up a training for your organization or National Guard Family Support Center, contact the VWWP's Central Office at 877-285-1299 and press "1."

For more information on the Virginia Wounded Warrior Program, visit www.wearevirginia veterans.org.

Bomb Scare continued from Pg 1

way. This was an unconscionable act that really could have had far-reaching negative consequences for many families. Regardless of the extra work the dedicated nurses, clinicians and staff had to take on, the real threat was to the most vulnerable patients who should never be taken from the highest environment of care and exposed to additional potential life-threatening situations,” said Kaye Green, Salisbury VAMC director.

Because of the bomb threat, surgeries were cancelled and delayed and the hospital was forced to turn away Veterans coming for routine appointments until officials could ensure their safety. During the evacuation, the operating room and the surgical specialty clinics in Building 2 were also closed. The staff in these areas went to the staging area to help with patient care, supplies, and the organization of the area.

Ensuring patient care didn't suffer during the evacuation was a team effort, said Lisa Kelly, Salisbury VAMC chief nurse for Acute Care.

“The bomb threat presented a complex set of issues that required staff to move efficiently and effectively to maintain the safety of Veterans, staff and visitors. The entire staff pitched in and demonstrated teamwork, attending to needs and providing care and comfort. Twenty-nine medical-surgical patients were moved to and from our staging area and five patients in the ICU were moved from the critical care environment to other area hospitals



Luke Thompson

A Salisbury VAMC staff member checks on a patient after being relocated to the medical center's gymnasium during the bomb threat Aug. 8. Patients were moved back to Building 2 once the all-clear was given by officials.



Luke Thompson

ACLS (Advanced Cardiovascular Life Support) ambulances prepare to transport ICU patient from Salisbury VAMC's Building 2 to hospitals in the community during the bomb threat Aug. 8.

at VA expense by Advanced Cardiovascular Life Support ambulances,” said Kelly.

“The manpower requirement in moving ICU patients is intense requiring that we go to a one-on-one nurse to patient ratio. But of most concern is that moving ICU patients requires we disconnect them from the elaborate and sophisticated life support systems located in the ICU and connect them to battery operated basic monitoring devices,” said Mary Foster, former ICU Nurse Practitioner. “We're also concerned about moving them from an environment of secure, tightly controlled oversight to that of a more primitive transient level of care and the potential exposure to airborne infections moving from a closed sanitary environment to that of an open potentially compromised setting.”

“This was a monumental effort in a short period of time, but the Salisbury staff worked together to meet our Veterans' needs,” added Green.



VA on the road

Tony Fisher, Veteran liaison for Salisbury VAMC, and Edwina Gray-Wright, Salisbury VAMC's Rural Health Integrator program manager, listen as Senator Kay Hagan speaks to Veterans at an eBenefits Assistance event Aug. 22 at Guilford Technical Community College in Jamestown, N.C. During the event, VBA representatives conducted a question and answer session with Veterans, and the Rural Health team educated Veterans one-on-one about eligibility requirements and helped Veterans enroll for VA healthcare benefits.

Michael Maddox

NASDVA Joins Effort Aimed At Promoting Use Of Fully Developed Claims

The Department of Veterans Affairs welcomed the National Association of State Directors of Veterans Affairs (NASDVA) to the Fully Developed Claims (FDC) Community of Practice (CoP) Aug. 8.

The CoP was established in May to speed the processing of Veterans' disability compensation claims by promoting the early submission of all available evidence needed by VA to reach a disability rating decision. NASDVA joins Veteran Service Organizations, the American Legion and Disabled American Veterans, who are charter members of the community.

"We're thrilled NASDVA is part of the effort to increase the number of Veterans filing fully developed claims so that earned benefits can be delivered faster," said Under Secretary for Benefits Allison A. Hickey.

"State Veterans Affairs offices help many thousands of Veterans across the country each year to get the benefits they deserve, and their support is critical in meeting our goal of processing all claims within 125 days in 2015," she said.

Claims are considered "fully developed" when Veterans sub-

mit all available supporting evidence, such as private treatment records, at the time they first file a formal claim and certify they have no additional evidence to submit. VA can typically complete FDCs in half the time of traditionally filed claims.

VA announced that Veterans filing an FDC may be entitled to up to one year of retroactive disability benefits. The retroactive benefits, which are in effect Aug. 6, 2013, through Aug. 5, 2015, are a result of a comprehensive legislative package passed by Congress and signed into law by President Obama last year.

"I strongly encourage all states to embrace a claims culture that is centered on FDCs," said NASDVA President W. Clyde Marsh in a letter to members. "In order to make a huge impact on reducing the nation's claims backlog, it will take a collective effort with NASDVA, Veterans Service Organizations, the Veterans Benefits Administration and Veterans."

Veterans can learn more about disability benefits on the joint Department of Defense-VA web portal eBenefits at www.ebenefits.va.gov. You can find out more information about FDCs at www.benefits.va.gov/fdc.

W&M's Puller Clinic Joins Fully Developed Claims Community Of Practice

The VA welcomed William & Mary Law School's Lewis B. Puller, Jr. Veterans Benefits Clinic to the Fully Developed Claims (FDC) Community of Practice Aug. 21. The Puller Clinic is the first law school clinic in the nation to join the FDC Community of Practice.

The FDC Community of Practice was established in May to promote the submission of FDCs and speed the processing of Veterans' disability compensation claims by providing all available evidence needed by VA to reach a disability rating decision. The Puller Clinic joins VSOs, the American Legion and the DAV, and the National Association of State Directors of Veterans Affairs, who are current members of the Community.

"We're delighted to have the Puller Clinic join the effort to increase the number of Veterans filing fully developed claims," said Under Secretary for Benefits Allison A. Hickey. "It's indicative of the expanding national partnership assisting in the timely delivery of Veterans benefits."

"This is a win-win-win: Veterans receive benefits to which they are entitled, the VA receives more claims that are accurate and complete, and William & Mary law students develop new skills as well as an appreciation for pro bono service," said Virginia Sen. Mark R. Warner. "I could not be more pleased with this significant announcement from the VA."

Claims are considered "fully developed" when Veterans submit all available supporting evidence, such as private treatment

records, at the time they first file a formal claim – and certify they have no additional evidence to submit. VA can typically complete FDCs in half the time of traditionally filed claims.

"I congratulate the Puller Clinic on their joining the FDC Community of Practice," said Will A. Gunn, VA's general counsel. "I'm optimistic that their example will encourage other institutions of higher learning to do the same."

VA is currently conducting workshops at its regional offices around the country to help Veteran advocates learn the importance of FDCs and how to help Veterans prepare them.

VA also recently announced that Veterans filing their first-ever compensation claims as FDCs may be entitled to up to one year of retroactive disability benefits.

The retroactive benefits, which are in effect Aug. 6, 2013, through Aug. 5, 2015, are a result of a comprehensive legislative package passed by Congress and signed into law by President Obama last year.



DoD, VA Establish Two Multi-Institutional Consortia To Research PTSD, TBI

In response to an Executive Order, DoD and VA have established two joint research consortia to research the diagnosis and treatment of post-traumatic stress disorder (PTSD) and mild traumatic brain injury (mTBI) over a five-year period.

"VA is proud to join with its partners in the federal government and the academic community to support the President's vision and invest in research that could lead to innovative, new treatments for TBI and PTSD," said Secretary of Veterans Affairs Eric K. Shinseki. "We must do all we can to deliver the high-quality care our Service members and Veterans have earned and deserve."

To improve prevention, diagnosis, and treatment of mental health conditions, the President directed the federal agencies to develop a coordinated National Research Action Plan. DOD, VA, the Department of Health and Human Services, and the Department of Education came forward with a wide-reaching plan to improve scientific understanding, effective treatment, and reduce

occurrences of Post-Traumatic Stress Disorder, Traumatic Brain Injury, co-occurring conditions and suicide.

The Consortium to Alleviate PTSD, a collaborative effort between the University of Texas Health Science Center – San Antonio, San Antonio Military Medical Center, and the Boston VA Medical Center, will attempt to develop the most effective diagnostic, prognostic, novel treatment, and rehabilitative strategies to treat acute PTSD and prevent chronic PTSD.

The Chronic Effects of Neurotrauma Consortium, a collaborative effort between Virginia Commonwealth University, the Uniformed Services University of the Health Sciences, and the Richmond VAMC, will examine the factors which influence the chronic effects of mTBI and common comorbidities to improve diagnostic and treatment options. A key point will be to further the understanding of the relationship between mTBI and neurodegenerative disease.

VA Reaches Out To Veterans About Affordable Care Act

WASHINGTON – The Department of Veterans Affairs is making sure Veterans know what the Affordable Care Act means for them and their families through a new website, www.va.gov/aca.

VA health care is acceptable coverage under the law, so there is nothing more to do for Veterans already enrolled in VA. They will see no change in their benefits or out-of-pocket costs when portions of the Affordable Care Act take effect next year.

The Affordable Care Act was created to expand access to coverage, reduce rising health care costs, and improve health care quality and care coordination. It also creates new coverage opportunities for uninsured Veterans and their families.

“VA wants all Veterans to receive health care that improves their health and well-being,” said Secretary of Veterans Affairs Eric K. Shinseki. “If you are not enrolled in VA health care, you can apply at any time.”

Veterans who are not currently enrolled in VA can apply for health care by visiting www.va.gov/healthbenefits/enroll, calling 1-877-222-VETS (8387), or visiting their local VA health care facility. Full details on eligibility are available at www.va.gov/opa/publications/benefits_book.

VA’s health care system for Veterans has no enrollment fee, no

monthly premiums and no deductibles. Most Veterans also have no out-of-pocket costs, though some may have small copayments for some health care or prescription drugs.

“VA will continue to provide Veterans with high quality, comprehensive health care and other benefits they have earned through their service,” said Dr. Robert Petzel, VA’s chief physician and undersecretary for health.

Most uninsured Veterans are eligible for VA health care. For those who are not eligible for VA care – such as Veterans’ family members – the law created a new Health Insurance Marketplace, a new way to shop for and purchase private health insurance. People who purchase insurance through the Marketplace may be able to lower the costs of their health insurance coverage by paying lower monthly premiums. For more information, visit www.healthcare.gov.

For information about VA health care and the Affordable Care Act, visit VA’s new website at www.va.gov/aca, or call 877-222-VETS (8387), Monday through Friday from 8 a.m. to 10 p.m. or Saturdays from 11 a.m. to 3 p.m., Eastern time. The new website includes a Health Benefits Explorer, where Veterans can learn about the benefits they can receive if they enroll in VA care.

Colleges, Universities Implement 8 Keys To Veterans’ Success

As part of the Obama administration’s efforts to foster post-secondary educational opportunities and dramatically improve employment outcomes for returning service members, the Department of Education and VA announced a challenge to education institutions to adopt best practices supporting educational success Aug. 12.

“We’re announcing what we call ‘8 Keys to Success’ – specific steps that schools can take to truly welcome and encourage our Veterans,” President Obama said. “And so far, more than 250 community colleges and universities have signed on, and today I’m calling on schools across America to join us in this effort. Let’s help our Veterans get that degree, get that credential and compete for the high-skilled jobs of tomorrow.”

The “8 Keys to Success” can aid Veterans in their effort to afford and complete their college degrees, certificates, industry-recognized credentials and licenses in preparation for jobs in high-growth sectors of the economy.

“This is a major step forward in the administration’s work to encourage institutions of higher education to support Veterans with access to the courses and resources they need to ensure that they graduate and get good jobs,” said U.S. Secretary of Education Arne Duncan.

The “8 Keys to Success” include the following:

- Create a culture of trust and connectedness across the campus community to promote well-being and success for Veterans.
- Ensure consistent and sustained support from campus leadership.
- Implement an early alert system to ensure all Veterans receive academic, career, and financial advice before challenges become overwhelming.
- Coordinate and centralize campus efforts for all Veterans,

together with the creation of a designated space.

- Collaborate with local communities and organizations, including government agencies, to align and coordinate various services for Veterans.

- Use a uniform set of data tools to collect and track information on Veterans, including demographics, retention and degree completion.

- Provide comprehensive professional development for faculty and staff on issues and challenges unique to Veterans.

- Develop systems that ensure sustainability of effective practices for Veterans.

“This commitment made by colleges and universities will help Veterans better transition from military service into the classroom, graduate, and find a good job to help strengthen our economy,” said Secretary of Veterans Affairs Eric K. Shinseki.

“Given the opportunity, Veterans will succeed because they possess exceptional character, team-building skills, discipline, and leadership,” he said.

The keys build on the administration’s work to provide Veterans and military families with a high-quality, affordable education. In April 2012, the President signed an Executive Order establishing the Principles of Excellence, which provide protections for our nation’s military, Veterans, and their families.

To further Veterans’ success in higher education and employment, the VA is also expanding its VetSuccess on Campus (VSOC) and Veterans Integration to Academic Leadership (VITAL) programs, which connect Veterans to VA resources. Thousands of colleges and universities are developing or expanding their Veterans Success Centers as a result of the VA’s VSOC and VITAL investments. VSOC is currently located at 32 campus sites in 16 states and is expanding to additional campuses in 2013.

New Director/Assistant Secretary For Veterans Affairs Appointed

North Carolina Governor Pat McCrory appointed Mr. Ilario Pantano as the new Director/Assistant Secretary for Veterans Affairs. Pantano is scheduled to start in his new position Sept. 5, 2013.

Pantano enlisted in the U.S. Marines at 17 and earned his first Combat Action Ribbon in Operation Desert Storm. Pantano served as an anti-tank gunner and later as a scout sniper sergeant while deployed in support of U.N. peacekeeping operations in ex-

Yugoslavia.

Pantano left the Marines to pursue a career in finance and media, but returned to the Corps as commissioned officer after Sept. 11, 2001. Pantano led a platoon of infantry Marines in the fight for Falluja, Iraq, and after receiving his second honorable discharge, he became a New Hanover County Sheriff’s Deputy. He later began volunteering as a chaplain and PTSD counselor, a role in which he still serves.

VISN 6 Sites of Care & VA Vet Centers

Albemarle POC
1845 W City Drive
Elizabeth City, NC 27909
252-331-2191

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

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

Brunswick Outreach Clinic
20 Medical Campus Drive
Supply, NC 28462
910-754-6141

Charlotte CBOC
8601 University East Drive
Charlotte, NC 28213
704-597-3500

Charlottesville CBOC
650 Peter Jefferson Pkwy
Charlottesville, VA 22911
434-293-3890

Danville CBOC
705 Piney Forest Rd.
Danville, VA 24540
434-710-4210

Durham VAMC
508 Fulton St.
Durham, NC 27705
919-286-0411, 888-878-6890
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
www.fayettevillenc.va.gov

Franklin CBOC
647 Wayah St.
Franklin, NC 28734-3390
828-369-1781

Fredricksburg CBOC
130 Executive Center Pkwy
Fredericksburg, VA 22401
540-370-4468

Goldsboro CBOC
2610 Hospital Road
Goldsboro, NC 27909
919-731-9766

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

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

Hamlet CBOC
100 Jefferson Street
Hamlet, NC 28345
910-582-3536

Hampton VAMC
100 Emancipation Dr.
Hampton, VA 23667
757-722-9961, 866-544-9961
www.hampton.va.gov/

Hickory CBOC
2440 Century Place, SE
Hickory, NC 28602
828-431-5600

Hillandale Rd. Annex
1824 Hillandale Road
Durham, North Carolina 27705
919-383-6107

Jacksonville CBOC
241 Freedom Way
Midway Park, NC 28544
910-353-6406

Lynchburg CBOC
1600 Lakeside Drive
Lynchburg, VA 24501
434-316-5000

Morehead City CBOC
5420 U.S. 70
Morehead City, NC 28557
252-240-2349

Raleigh CBOC
3305 Sungate Blvd.
Raleigh, NC 27610
919-212-0129

Raleigh II Annex
3040 Hammond Business Place
Raleigh, NC 27603
919-899-6259

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

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

Salem VAMC
1970 Roanoke Blvd.
Salem, VA 24153
540-982-2463, 888-982-2463
www.salem.va.gov/

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

Staunton CBOC
102 Business Way
Staunton, VA 24401
540-886-5777

Tazewell CBOC
123 Ben Bolt Ave.
Tazewell, VA 24651
276-988-2526

Village Green Annex
1991 Fordham Drive
Fayetteville, NC 28304
910-488-2120 ext. 4020,

Virginia Beach CBOC
244 Clearfield Avenue
Virginia Beach, VA
757-722-9961, ext. 1900

Wilmington HCC
1705 Gardner Rd.
Wilmington, NC 28405
910-343-5300

Winston-Salem CBOC
190 Kimel Park Drive
Winston-Salem, NC 27103
336-768-3296

Winston-Salem Annex
2101 Peters Creek Parkway
Winston-Salem, NC 27127
336-761-5300

Wytheville CBOC
165 Peppers Ferry Rd.
Wytheville, VA 24382-2363
276-223-5400

**VA Dialysis and
Blind Rehabilitation Clinics
at Brier Creek**
8081 Arco Corporate Drive
Raleigh, NC 27617
919-286-5220

VA Dialysis Clinic Fayetteville
2301 Robeson Street, Ste. 101
Fayetteville, NC 28305
910-483-9727

Beckley Vet Center
1000 Johnstown Road
Beckley, WV 25801
304-252-8220

Charlotte Vet Center
2114 Ben Craig Dr.
Charlotte, NC 28262
704-549-8025

Fayetteville Vet Center
4140 Ramsey St.
Fayetteville, NC 28311
910-488-6252

Greensboro Vet Center
2009 S. Elm-Eugene St.
Greensboro, NC 27406
336-333-5366

Greenville Vet Center
1021 W.H. Smith Blvd.
Greenville, NC 27834
252-355-7920

Jacksonville, N.C. Vet Center
110-A Branchwood Drive
Jacksonville, NC 28546
910-577-1100

Norfolk Vet Center
1711 Church Street
Norfolk, VA 23504
757-623-7584

Princeton Vet Center
905 Mercer Street
Princeton, WV 24740
304-425-5653

Raleigh Vet Center
1649 Old Louisburg Rd.
Raleigh, NC 27604
919-856-4616

Roanoke Vet Center
350 Albemarle Ave., SW
Roanoke, VA 24016
540-342-9726

Virginia Beach Vet Center
324 Southport Circle, Suite 102
Virginia Beach, VA, 23452
757-248-3665