

**Norfolk**

**VIRGINIA**



# NORFOLK MRC NEWS

September 2013

## FAST FORWARD TO FALL

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### ***Contact NMRC:***

Linda Botts  
830 Southampton Ave.  
Norfolk, VA 23510  
NorfolkMRC  
[@vdh.virginia.gov](mailto:@vdh.virginia.gov)  
(O) 757-683-2760  
(F) 757-683-2753

Hard to believe, but summer is unofficially over in just a few days. In VDH, our fiscal year starts July 1st, and we typically see a lot of changes in programs and policy in summertime as we wrap up one year and start a new one. Thus, I have some items I want to update/share with you regarding some of these changes:

∞ All nurses, both staff and volunteer, are required to complete immunization training modules from the CDC in order to provide immunizations from now on. This information has already been sent to the nurses, and I extend my thanks to them for working on it; some of you have already completed it (see p. 4).

∞ NDPH has instituted a dress code for all staff. Volunteers will have a “lite” version of this code; basically common sense dress to appropriately represent the health department and the MRC unit. The dress code will be mailed out to everyone within the next few weeks.

∞ I am attaching a copy of the VDH Code of Ethics. This is for your information only, but should help inform you as you represent the department and unit in various activities.



Now that I’ve gotten all of that out of the way, let’s switch gears into Fall. Homeless Connect will be a regional exercise (participation will meet your exercise requirement) with several of the MRC units across Hampton Roads, where we’ll be testing some new procedures for onsite badging and credentialing. Planning will commence in October; the City has rescheduled the date to January 15, 2014. The department is working to schedule a POD (Points of Dispensing) exercise this fall, so look for more information to come with that (participation will meet your exercise requirement). The EMS Symposium would like us to come back for a second day in November to do some health screenings with the EMS providers (the first day we help NDPH provide flu shots), so I am gathering information on that. And work continues on the MRC Nurse assessment training.

Busy times...thank you for your commitment to the Norfolk MRC!

*Homeless  
Connect  
Donations Update*

Please keep collecting those bags, backpacks, and duffle bags. Here is where we are for the Homeless Connect event. Please email me with what you get or have and I'll add the items to the spreadsheet. Thank you to Peggy Troyer and Renee Genora for their donations this week!  
~Ann Straus

Items still needed for the hygiene packs are:

- combs 142
- razors 48
- tissue 66
- toothbrush 150
- shampoo 126
- toothpaste 35
- vaseline/lotion 75
- deodorant 77
- wetwipes 147
- Bags/  
Backpacks 103

Thank you for your support!

**When is a diagnosis of cancer not a cause for treatment?**

With the development of new technologies in cancer screening, abnormal cells that look like cancer, or appear to resemble premalignant conditions, are being detected and diagnosed as cancer. Some of these lesions would never cause any harm or develop into tumors. Because doctors are often not sure whether abnormal lesions will become malignant, they tend to respond with aggressive treatment at great physical and psychological pain and risk to the patient. A refined definition of cancer and improved understanding of screening results will facilitate an individualized approach to treatment.

Since doctors do not yet have a clear way to tell the difference between benign or slow-growing tumors and aggressive diseases, they feel compelled to biopsy, remove and treat. It is estimated that sixty percent of abnormal conditions in the prostate should be watched instead of treated. About a third of women with localized breast cancer have tumors that would not likely bother them. Better tests and research currently under development will help doctors differentiate abnormal conditions that warrant treatment from those that should be monitored, or are incidental findings of minimal concern. This will save people needless treatment, complications of treatment, and anxiety (Parker-Pope, 2013).

Dr. Otis Brawley, the chief medical officer for the American Cancer Society said, "The impetus behind the call for change is a growing concern

among doctors, scientists, and patient advocates that hundreds of thousands of men and women are undergoing needless and sometimes disfiguring and harmful treatments for premalignant and cancerous lesions that are so slow growing they are unlikely to ever cause harm" (NPR News, 2013).

The National Cancer Institute is proposing a new definition of cancer that would be more narrow than current standards. They hope this will minimize anxiety and unnecessary treatments.

People are being over-diagnosed and over-treated for incidental findings detected during medical scans. The current direction is towards individualized medicine where recommendations will be tailored following consideration of a person's risk factors and genetics as well as screening results. In the spectrum of abnormal findings we will be able to determine harmful from benign, and avoid unnecessary treatments and the risks associated with treatment. ~Lisa Bilion, NMRC Volunteer

NPR News. (2013). Will Changing Cancer Terminology Change Treatment? Retrieved from <http://www.npr.org/templates/story/story.php?storyId=209843351>

Parker-Pope, T. (2013). Experts call for changes to definition of 'cancer'. The New York Times News Service Retrieved from <http://www.theglobeandmail.com/news/world/experts-call-for-changes-to-definition-of-cancer/article13495110/>

Disclaimer: This information is not advice, and should not be treated as such. If you have any specific questions about any medical matter, please consult your healthcare provider.

## Upcoming Training and Activities

### **SEPTEMBER—NATIONAL PREPAREDNESS MONTH**

9/2 Memorial Day; NDPH/NMRC offices closed.

9/12 Epidemiology for Non-Epidemiologists: An Epidemiologist's Toolkit (videoconference), 9:00-10:30A. Norfolk Health Department.

9/12 Zombie Preparedness in Norfolk.

9/18 VVHS Drill—your participation is required! See sidebar this page.

9/21 **EXERCISE** Norfolk Airport "Operation Shore Bird." This alert is now live and spots are filling quickly; please sign up via the alert link in VVHS.

9/21 Mass Casualty Incident (START) training, 9A-2P. Tidewater EMS Council, Chesapeake.

9/23 Psychological First Aid, 6:30-9:30P Norfolk Health Dept.

9/28 Illuminating Generations of Minority Health, Norfolk Health Dept. More information to come.

### **OCTOBER**

10/10 Epidemiology for the Non-Epidemiologist: Surveillance (videoconference), 9:00-10:30A. Norfolk Health Department.

10/14 Columbus Day, NDPH/NMRC offices closed.

### **NOVEMBER**

11/7 EMS Symposium. More information to come.

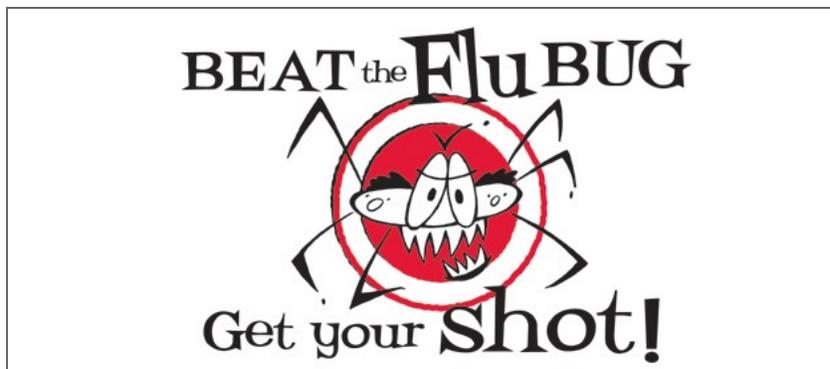
11/11 Veteran's Day, NDPH/NMRC offices closed.

11/14 Epidemiology for the Non-Epidemiologist: Epidemiology Applications (Videoconference), 9:00-10:30A. Norfolk Health Department.

11/27-11-29 Thanksgiving holiday, NDPH/NMRC offices closed.

*Please register for all activities through Linda unless noted otherwise.*

*Thank you!*



### ***VVHS Alert Drill***

Several times a year we do a specific drill to test out our VVHS system and to ensure that all volunteers understand how to respond via the alert system. Please respond—indicating whether you are available or not is now a measurement of volunteer participation on one of our major grant funding sources. A lack of response counts against us when it comes time to allocate money to our unit.

Therefore, please follow the directions given at the bottom of each alert to click into the link and select available or unavailable. If you have questions, please contact Linda.

*Thank you!*

## Volunteer Spotlight

It was an incredible month, and I am thankful for the support of so many volunteers who made it all happen:

**Thank you** to our new project leaders **Shatada Floyd-White** (Nursing Assessment), **Ken Hart** (Homeless Connect), **Ann Straus** (Homeless Connect Donations Guru), **Lisa Billow** (Recruitment and Newsletter Contributor), as well as **Tara Newcomb** (coordinating funding for enhanced training for the Mass Fatality Response Team). I am looking forward to working with each of you!

**nise Watson**, and **Susan Eilberg**. You guys were outstanding!



*(R to L) Jim, Chelsea, Leah, and Gavin work on their CPR technique, August 22nd*

**Thank you** to the many volunteers who took the time to participate in training (that's always time well spent)! Training opportunities offered this month included the NDPH nursing skills assessment, First Aid, CPR, and BLS. Congratulations to **Dorolyn Alper**, **Peggy Troyer**, **Sean Hess**, **Renee Genora**, **Shelia Allen**, **Holley Gagnon**, **Melissa Presnell**, **Annie Robertson**, **Ashley Forfa**, **Jolisa Parham**, **Ali Ahmed**, **Chelsea Robinson**, **Jim Weckerly**, **Gavin Lewis**, and **Leah Brown** for updating their skills and certifications!

**Thank you** to the troopers who covered the dental reception assignment for the past two weeks: **Mary Alexander**, **Tonya Faltz**, **Sean Hess**, **Brian Freeman**, **Tien Nguyen**, **Susan Eilberg**, and **Ken Hart**. Dr. Galloway was very appreciative of your assistance in the clinic, and it has prompted her to request the MRC again to provide coverage during a staffing transition this Fall.

*Thank You!*



*Top to bottom: Melissa and Kellei provide first aid and health education at the Lindenwood Reunion; Ashley, Holley and Shelia practice CPR; Jolisa shows off her infant CPR technique.*

**Thank you and Congratulations to Pam Hilbert, Renee Genora, and Peggy Troyer for completing their Nurse Immunization Modules!!**



*MRC Volunteers do the "Wobble" at the Lindenwood Reunion, August 3rd*

**Thank you** to the many volunteers who supported various health and safety events throughout the month—BP screenings; STD registration, phlebotomy, and screening; first aid; health education; and preparedness—we couldn't have done it without these volunteers: **Dean Withroder**, **Crystal Exhem**, **Susie Rodrick**, **Peggy Troyer**, **Alisha Anthony**, **Kellei Denson**, **Shatada Floyd-White**, **Renee Genora**, **Lamonica Holt**, **Tavia Petway**, **Melissa Presnell**, **Ann Straus**, **Earle Williams**, **Pam Hilbert**, **De-**