Imaging Technology Gives a Look Inside
On Sunday, Nov. 11, we honor America’s Veterans as a nation.

Here at NWIHCS, we have the privilege and opportunity to honor them every day. We do that through exceptional customer service, high-quality health care, and compassionate interactions that demonstrate our respect for their service.

At NWIHCS, we have systematically been focusing on improvement of our performance over the past several years. This improved performance honors Veterans by focusing on our mission to honor America’s Veterans by providing exceptional health care that improves their health and well-being.

I encourage you to take time to thank Veterans for their service and their sacrifice. As we celebrate Veterans Day, together, let’s use our considerable ingenuity to continue to think of ways to improve what we do for Veterans. Pick one action that you can do to improve the service to Veterans.

And to all of our employees who served in our armed forces, Thank you for your service!

Marci Mylan, Ph.D., MHA | Director
FACT: EACH YEAR, VA’S SPECIALIZED HOMELESSNESS PROGRAMS PROVIDE HEALTH CARE TO ALMOST 150,000 HOMELESS VETERANS AND OTHER SERVICES TO MORE THAN 112,000 VETERANS.

I’ve always liked working with people, and I really believe that Veterans are especially worth supporting. They have put a lot on the line; and we, as a society, have a responsibility to them. Veterans have sacrificed heavily for our country, our freedoms and the democratic ideals we all stand for. I like working here and knowing that what I’m doing has an impact.”

Paul West, IT specialist

Vet Centers: A Crucial Resource Outside of VA Medical Centers

Imaging Technology Improves Picture of Veterans' Diseases

Community Collaborates to Help End Veteran Homelessness

The Omaha VA Says Goodbye to a Chaplain and a Friend

VA Views | Patient-Centered Care Grapevine
**meet desiree kochen**

HUD/VASH Housing Specialist
Mental Health | Omaha VAMC

Q: How long have you worked at the VA?

Q: What does your job entail?
A: I work with the Homeless Veterans Program. When Veterans join the program, I help them to find a place to live in the community. I work with local property managers and housing agencies to find Veterans homes. Also, I work with their case managers to help them set up and get to appointments with other resources such as the food pantry and other available resources for the Veterans.

Q: What is your favorite thing about your job?
A: Being able to place Veterans in their own place: getting them to sign that lease and seeing the joy it gives them to have their own space and their own stuff.

Q: When not at work, where can you be found?
A: I have five kids, so I’m at home. They keep me busy, between music lessons, soccer games and whatever sports they are in that season.

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**American Indian Heritage Month**

The Department of Veterans Affairs proudly joins the nation in observing American Indian Heritage Month during November. According to the 2000 U.S. Census, there are nearly 2.5 million American Indians in this country. Their rich history speaks to Americans through the names of the nation’s cities, lakes and rivers; the magnificent ruins of ancient communities; and most important, the lives of the people who retain the cultural, spiritual, linguistic and kinship bonds that have existed for millennia.

**American Indians who have served in the armed forces:**
Approximately 12,000 served in the U.S. military during World War I. More than 44,000—of a population of less than 350,000 Native Americans—served in European and Pacific war theaters between 1941 and 1945. Approximately 42,000 American Indians, 90 percent of them volunteers, fought in Vietnam.

**Medal of Honor Recipient**
Jack C. Montgomery, a Cherokee from Oklahoma, and a first lieutenant with the 45th Infantry Division Thunderbirds. On Feb. 22, 1944, near Padiglione, Italy, Montgomery’s rifle platoon was under fire by three echelons of enemy forces. He single-handedly attacked all three positions, taking prisoners in the process. As a result of his courage, Montgomery’s actions demoralized the enemy and inspired his men to defeat the Axis troops.

160,471 The number of American Indian and Alaska native Veterans of the U.S. armed forces.

29 percent Percentage of American Indians and Alaska natives 5 and older who spoke a language other than English at home.

8.6 million The projected population of American Indians and Alaska natives, including those of more than one race, on July 1, 2050. They would comprise 2 percent of the total population.

For more information visit www.diversity.va.gov/programs/na.aspx.

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**November 2012**

**The Link**
Computer Security: EVERY VA EMPLOYEE’S JOB

Computer security is a serious matter at the Department of Veterans Affairs. Employees are not only responsible for protecting their own information, they are responsible for keeping Veterans’ information safe. Consequently, the VA requires all new employees to attend a training orientation about computer safety. During the training, new employees are taught best practices and informed about the risks involved with computer use.

As technologies advance and software evolves, it is especially important for VA employees to keep up with the latest security measures, said Lawrence Green, information security officer for VA NWIHCS, and Region 2, VISN 23. Employees are required to keep current with training through the VA Talent Management System. It’s a continuous education process.

Lawrence Green, ISO | VA NWIHCS

As part of the efforts to keep information secure, the Department of Homeland Security issued a directive for all federal employees to obtain and use a Personal Identity Verification (PIV) card to log into their work computers. This process ensures only the employees have access to their information; it also streamlines the login process, said Gino Rodegheir, VA NWIHCS Police Services security assistant.

The PIV cards require new employees to pass background checks. Soon, the only way employees will be able to logon to a government computer will be using a PIV card. Rodegheir issues PIV cards to employees and encourages them to become familiar with the process.

Do:
• Logoff before you leave any computer
• Turn off the wireless network on your personal equipment
• Protect sensitive information
• Respect privacy
• Use VA resources for official purposes
• Back up your data
• Become alert to potential abuses and fraud
• Report suspicious activity immediately

Do Not:
• Connect personal computing equipment to the VA network
• Share your access codes and passwords
• Use someone else’s access codes and passwords
• Use or download unapproved software
• Eat or drink around computer equipment
• Abuse government resources
• Attempt to bypass log-on procedures

For more information, visit the VA Office of Information Security webpage at www.ois.oit.va.gov/helpful_resources.asp.

(continued on page 15)
The U.S. Department of Veterans Affairs Vet Centers were established in the wake of the Vietnam War. During that time, many Vietnam Veterans didn’t get the hero’s welcome after returning from war. In 1979, Congress established the centers to respond to the Vietnam Veterans who were having difficulties readjusting to life after their service.

There are more than 300 Vet Centers in the United States and surrounding countries, and 47 centers in Region 2, including a center in Omaha and Lincoln, Neb.

The centers’ mission is to provide readjustment counseling for all combat Veterans and their families: this includes individual, marriage and family counseling. Vet Centers also host group meetings for Veterans to find support in those with similar backgrounds. Vet Centers also provide bereavement counseling for families who lost a Servicemember while on active duty.

OMAHA VET CENTER

The Omaha Vet Center has served Veterans for more than 40 years. During fiscal year 2012, the staff saw 218 unique clients, of which 124 were new, for a total of 1,423 visits.

The center opened its doors Oct. 16 at a new location at 3047 S. 72nd St.

“We needed more space, our staff was expanding.”

Ed Licht, team leader | Omaha Vet Center

The new location is centrally located off of Interstate 80. This gives easier access to Veterans in Sarpy County, he said. The additional space allows for two group rooms and the ability for Veterans to bring their entire family.

Robert Forsman, a U.S. Navy Veteran, has been going to the Omaha Vet Center once a week for more than a year. He has seen counselors and attended group therapy sessions for Post-Traumatic Stress Disorder and depression. Forsman said he is happy with the new location.

“It feels more professional; it looks nice, it’s brighter, more inviting and easier to find,” Forsman said.

Left: Carrie Anderson, LMFT, LMHP (right) talks to Georgina Hansen a U.S. Army Veteran at the Omaha Vet Center.

Above: The Mobile Vet Center was available for counseling outside of the Pershing Center in Lincoln, Neb., during the Stand Down Oct. 11.
Lincoln Vet Center

The Lincoln Vet Center is located in a mini mall at 3119 O St., Suite A. During 2012, the staff saw 372 unique clients, of which 157 were new for a total of 3,531 visits.

In January 2009, Lincoln acquired a Mobile Vet Center – it looks like a recreational vehicle – they use it for outreach. The mobile center allows Veterans access to services in unique settings such as stand downs, fairs and other community events.

“It’s a good way to get the Veterans (services) and to help them recognize that there are services available at the VA.”

LeRoy Schoen, team leader | Lincoln Vet Center

Vet Centers vs. VA Medical Centers

Nine of the 14 employees at the Lincoln and Omaha Vet Centers are Veterans.

“Because I am a Veteran, I can look at (Veterans) and know we have a common bond. They’ve gone through a lot,” Licht said.

Vet Centers offer many of the same counseling services as VA medical centers, with a few differences. The wait times are sometimes shorter and the environment is close-knit.

“It’s more personal and you get to know who you’re talking to,” Forsman said.

Also, the centers can provide an additional sense of privacy that some Veterans may desire. Although the centers are part of the VA, visits and information shared there by Veterans during readjustment counseling is not shared with the VAMC without the client’s consent.

“We emphasize the confidentiality nature of our work. Unless the client wants us to give their records to someone else, we don’t release them.”

LeRoy Schoen

Georgina Hansen, a U.S. Army Veteran, was referred to the Omaha Vet Center by her therapist at the Omaha VAMC. Hansen not only visits the center for her scheduled appointments, she calls there when she has questions.

All war zone Veterans are eligible to use the services at Vet Centers. Veterans do not have to be service connected to use the Vet Center. All they need is copy of their DD 214 to prove eligibility.

Combat Call Center

1-877-WAR-VETS is a confidential call center available 24 hours a day for combat Veterans and their families to talk about their military experience or any other issue they are facing in their readjustment to civilian life. The staff is comprised of combat Veterans from several eras, as well as family members of combat Veterans.

Area Vet Centers

Omaha Vet Center

Phone: 402-346-6735 or 877-927-8387

Lincoln Vet Center

Phone: 402-476-9736 or 877-927-8387

Hours are 8 a.m. to 4:30 p.m. Monday through Friday, except federal holidays

For more information about Vet Centers, including locations and services, visit www.vetcenter.va.gov.
To the untrained eye, the images appear like an undefined mass with various light and dark shapes. To radiologists, the view helps give physicians a clearer picture of a potentially diseased organ or internal damage.

“Through imaging, we help clinicians figure out what might be wrong with patients.”

Dr. Erin Masada, Radiologist | Lincoln CBOC

Medical imaging includes many processes that provide a view inside the human body. Many people are familiar with X-rays, ultrasound, and magnetic resonance imaging; however, there are other technologies NWIHCS uses including computed tomography, fluoroscopy and nuclear medicine.

Masada said imaging services narrows the diagnoses to a specific issue physicians cannot confirm without looking inside the body.

“Sometimes a clinician will call and ask what tests we should run based upon the patient’s symptoms,” she said. “We are consultants to the physicians by suggesting the right imaging tests.

William Peters, a 61-year-old U.S. Navy Veteran, recently had his annual physical with his physician, Patricia Cronin, M.D., at the Grand Island VA clinic. The laboratory tests indicated his liver enzymes appeared higher than normal. Consequently, Cronin sent Peters to the Grand Island VA imaging department for an ultrasound.

Carrie Hansen, a Grand Island VA sonographer, used ultrasound to take pictures of Peters’ liver to look for abnormalities that might indicate why his enzymes were elevated. The ultrasound emits sound waves into the tissues and reflects an image into the monitor.

“We look at the structure of the liver. We make sure we don’t see anything abnormal, and see if we can see a cause why the liver enzymes might be elevated.”

Carrie Hansen, sonographer | Grand Island CBOC

Technicians have specific lists of images called protocols they take based upon the specific exam. However, if technicians see something suspicious on the monitor during the exam, Hansen said they will capture
Carrie Hansen, a sonographer, checks Veteran William Peters’ liver using an ultrasound at the Grand Island VA imaging department.

“We can tell them that based upon what we see that it is most-likely ‘A,’ ‘B’ or ‘C. They can then order additional laboratory tests to confirm, if necessary.”

Dr. Erin Masada

A newer radiology subspecialty uses less-invasive techniques to help physicians better diagnose and treat patients. Interventional radiology uses minimally invasive procedures with equipment including X-rays, CT, ultrasound and MRIs to obtain images to direct instruments including catheters or radio contrast agents.

“To recognize a pulmonary embolism previously took two hours. With our new CT scanner, it takes 30 seconds,” said Bill Boyd, NWIHCS Imaging Services supervisor. “It affords the radiologist the opportunity to give a diagnosis to the ordering clinician immediately.”

Boyd said an important imaging specialty NWIHCS has upgraded recently is nuclear medicine. This uses radiopharmaceutical isotopes administered intravenously or orally into the patient that can be localized to specific organs. The external nuclear medicine equipment captures and forms images from radiation emitted by what was injected into the body and uptaken by patients’ organs.

NWIHCS’s newer nuclear medicine equipment includes a Positron Emission Tomography camera and Single Photon Emission Computed Tomography scanners.

“Nuclear medicine explores new ways to extend people’s lives. It allows for better and earlier detection of diseases.”

Bill Boyd, Imaging Services supervisor | VA NWIHCS

“This technology is exciting, because it was not well utilized or available 10 to 12 years ago.”

Technology also allows NWIHCS to provide more imaging services away from the Omaha VA Medical Center at Lincoln and Grand Island CBOCs. Digital imaging allows technicians at these two sites to perform tests and send them immediately over computers to a radiologist who is located in Lincoln or Omaha.

Grand Island does not have a radiologist assigned. Technologists like Joy Quinn operate the imaging equipment for tests on the patients there, but she sends the digital images to Lincoln or Omaha to read. On a recent day, Quinn obtained images using a CT scanner on a Veteran who fell to help determine if he had internal head bleeding.

Although Lincoln and Grand Island VA clinics don’t have as much redundant imaging equipment as the Omaha VAMC, Grand Island has in-house CT scanning, ultrasound,
Secretary of Veterans Affairs

The U.S. Department of Veterans Affairs estimates there are about 76,000 homeless Veterans nationally, down from about 135,000 in 2009. Although the numbers are about 30 percent fewer than 2009, there are about 500 homeless Veterans in Omaha on any given night.

Omaha took a major step toward reaching the VA Secretary’s goal with the ground breaking for Victory Apartments Oct. 12. When it opens in August 2013, the 80 apartment units will provide Omaha-area homeless Veterans permanent supportive housing.

“It’s a tiny, tiny thank you to our Veterans,” said Thomas McLeay, vice president and general counsel for the housing developer and owner, America First Real Estate Group, during the ground breaking event.

The apartments are for homeless Veterans who are eligible for VA health care benefits through the use of Section 8 housing choice vouchers, which are administered by the U.S. Department of Housing and Urban Development, said Linda Twomey, VA Nebraska-Western Iowa Health Care System mental health specialty programs director. The vouchers provide the maximum housing assistance minus 30 percent of the Veteran’s adjusted monthly income.

VA will lease about 10,000 square feet on the second floor and relocate services that include primary and mental health care, vocational rehabilitation, substance abuse and dependency prevention and treatment; and a community resource and referral center. The idea is to co-locate VA services in the same building as the apartments so the Veterans have easy access.

The genesis for the development occurred when Al Washko, the immediate former director of the VA NWIHCS, approached Mike Yanney, founder and chairman emeritus, Burlington Capital Group, about a public-private partnership. America First Real Estate Group is a subsidiary of BCG. Washko said the development came to fruition because of the commitment of community leaders like Yanney and his group.

“I have not seen a community like Omaha that has a philanthropic, unselfish infrastructure that I’ve found here. That infrastructure picked us up when we were having major difficulties carrying out this project.”

Al Washko, former director of VA NWIHCS
Yanney’s staff eventually found the empty building at 9th and Dorcas in south Omaha, that was previously the six-story Our Lady of Victory Wing of the former St. Joseph Hospital. The building was owned by Grace University. When completed, the apartment development will have cost about $16 million.

Grace University will also lease 11,000 square feet on the first floor to house its clinical graduate program and counseling center.

“It fits with our institution’s mission. It’s a solution to a formidable social problem.”

James Eckman, President Emeritus | Grace University

A former homeless Veteran, who served in Operation Iraqi Freedom, told the audience when McLeay said this development is just a tiny thing, he was wrong.

“It’s not a tiny thing,” said Brandon MacLean. “It’s so huge.”

MacLean left the U.S. Army two years ago, “on cloud nine,” he said. He faced unexpected challenges that resulted in him becoming homeless. The construction company he started fell apart, resulting in lost income, and he had to sell all he owned to survive. He lost his girlfriend, and he was dealing with post-traumatic stress and a minor traumatic brain disorder.

“I lost everything that was on my back,” he said.

He found help through Mike Johnson, an NWIHCS homeless outreach employee, who was brutally honest with MacLean, and told him to “be a man and admit defeat.”

“Everything went up from there. I found shelter, comfort, and the ability to know I was not alone,” MacLean said.

His story’s message was simple; because of people like Johnson, VA homeless support programs, and community help, MacLean said two years later, he’s the proud owner of an apartment and car.

“For us as a community in Omaha alone to step up and give this opportunity to Veterans is remarkable.”

Brandon MacLean, U.S. Army Veteran

Marci Mylan, Ph.D., the VA NWIHCS director, said Victory Apartments “represents the best of what Secretary Shinseki has asked of us.”

“Public-private partnerships require the patience of Job. You really have to work hard to get them done,” Mylan said. “Thank you so much for the care of our ‘national treasures,’ which are our Veterans.”

An architect’s rendering shows the anticipated finished appearance of Victory Apartments.

Graphic Courtesy of America First Real Estate Group
Chaplain John Besancon retired at the end of September after 13 years of service at the VA medical center in Omaha, Neb.

Besancon grew up on a farm in Kansas. His father served in the U.S. Army during World War II. His parents divorced when he was very young, and he was raised by his mother and his grandparents.

The decision to become a minister did not come easily to Besancon, he said.

"Initially, I was going to be a mad chemist," he said. "But I did feel a call to ministry."

Besancon said he was not sure of the idea of being called directly by God to the ministry. However, he had a lot of support from his church and ministers who had been encouraging him since high school.

“They saw in me things that I didn’t see in me,” Besancon said.

Besancon was ordained as a minister at 25 years old. His work in ministry moved him from Kansas to South Dakota to Missouri, and then to San Francisco, Calif., for a seminary. He earned a Master of Sacred Theology from Dubuque, Iowa, and a Master in Counseling from University of Nebraska, Omaha.

In 1984, he became a pastor at Westminster Presbyterian Church in Omaha, where he stayed for 23 years. He began working part time as a contract chaplain for Chaplain Ernest Gutha at the Omaha VAMC in 1999. When Gutha retired five years ago, he began working full time.

Chaplain Shane Van Dorin worked with Besancon for five years.

"He has a real genuine heart for Veterans and doing what he can to care for them."

Shane Van Dorin, chaplain | Omaha VAMC

Since 2003, Besancon has worked with spirituality groups for patients on the 11th floor who are being treated for substance abuse.

“Spirituality is a very real part of addictions treatment,” he said.

Steve Watkins, a U.S. Marine Corps Veteran, has known Besancon since 2009. Watkins said he believes spirituality is an important part of substance-abuse treatment.

“Talking to the chaplain helped remind me of the things I used to value,” Watkins said. “When an alcoholic, or a person addicted to drugs comes back to reality and decides to get help, they will be thankful when a chaplain is available to help them.”

Besancon’s mission at the Omaha VAMC included overcoming the challenges involved with reaching a variety of people with different backgrounds and educational levels while remaining relevant for that broad spectrum of people.

Employees hosted a farewell event for Besancon Sept. 27. Along with employees, Veterans attended the (continued on page 15)
On Veterans Day, we are given an opportunity to reflect on our mission to care for our nation’s Veterans by providing health care that is personalized, proactive and patient-driven. This patient-centered approach ensures the Veteran will be the captain of his or her health care team by recognizing they are the experts regarding their individual health status and desired health outcomes.

We accomplish this by being present for the Veteran and making a personal connection with them. This can be as simple as making eye contact and saying hello as we pass anyone in the hall or step onto the elevator, assisting patients and visitors in finding a clinic or unfamiliar part of the medical center and walking with them to that location rather than pointing and giving verbal directions.

Veterans and their families may not remember us by name, but they will certainly remember how we made them feel when we welcomed them into our medical center or outpatient clinics.

When we include Veterans and their families as an active member of their health care, we empower them to become informed, to share their desires, and ultimately we create that personalized, proactive and patient-driven plan of care.

This Veterans Day, as we remember those who have served us, let’s make a commitment to continue to provide the best in quality care, safety and service. We are the right choice for Veterans because we care.

The Patient-Centered Care Grapevine is a feature to highlight activities and training. Watch the Daily Briefs and the Intranet for this logo.
Hello
Sept. 9 to Oct. 6
Anthony Agnes,
Nurse Executive’s Office
Jerry Bockoven,
Mental Health
James Brown,
Primary Care and Specialty Medicine
Kathleen Byorth,
Mental Health
Wallace Carter,
Environmental Management Service
Susan Clemons,
Mental Health
Laura Cornelius,
Mental Health
Steven Davis,
Mental Health
Julia Delcour,
Primary Care and Specialty Medicine
Joyce Gradoville,
Primary Care and Specialty Medicine
Joyce Gradel,
Primary Care and Specialty Medicine
Michelle Hough,
Mental Health
Yvonne Howland,
Surgery
Mac Mclaughlin,
Primary Care and Specialty Medicine
Daniel Loge,
Environmental Management Service
William Myers,
Environmental Management Service
Shannon Nelson,
Grand Island Police
Fred Pecha,
Environmental Management Service
Thomas Price,
Biomedical Engineering
Stephanie Rainge,
Mental Health
Kristin Uher,
Nurse Executive’s Office
Nancy Willcockson,
Mental Health

Goodbye
Jamie Brandt,
Surgery
Janna Cornelius,
Grand Island Prosthetics
Joyce Gradel,
Primary Care and Specialty Medicine
Melissa Galvan,
Surgery
Justin Maltagliati,
Grand Island Police
Patricia Moffatt,
Nurse Executive’s Office
Deborah O’Reilly,
Surgery
Shannon Parkison,
Veterans Canteen Service
Melissa Peterson,
Mental Health
Sandra Plantenga,
Primary Care and Specialty Medicine
Henry Schaben,
Information Technology
Theresa Soucy,
Primary Care and Specialty Medicine
Amanda Weber,
Human Resources
Susan Wilson,
Primary Care and Specialty Medicine

Events
what’s going on?

Nov. 1
Urology Nurses and Associates Week
CFC Basket Raffle Drawing, Lincoln
CFC Hotdog Lunch and Raffle, Omaha
Federal Benefits Open Season Fair, Lincoln

Nov. 2
Volunteer Orientation, Omaha

Nov. 4
Daylight Saving Time ends

Nov. 4-10
Radiology Week

Nov. 5
Veterans Day Program, Lincoln
CFC Popcorn Sale and Raffle, Omaha

Nov. 6
Election Day
Federal Benefits Open Season Fair, Omaha

Nov. 8
Ancient Greeks, Modern Lives book group, Lincoln

Nov. 11
Veterans Day

Nov. 12
Federal holiday
Open Season for benefits begins

Nov. 14
Veterans Forum, Lincoln

Nov. 15
Federal Benefits Open Season Fair, Grand Island

Nov. 16
Volunteer Orientation

Nov. 17
Stand Down for Homeless Veterans, Omaha
Great American Smokeout

Nov. 22
Thanksgiving

Nov. 28
Ancient Greeks, Modern Lives Book Group, Lincoln

Nov. 30
Computer Security Day

For more information about VA NWIHC events, visit www.nebraska.va.gov.
Information Technology continued from page 5

“It provides a more secure workplace,” he said.

Threats to be aware of include identity theft and malicious software. Employees should not open any emails from unknown senders, should not attempt to download from websites that are not trusted and should always bring any suspicious occurrences to the attention of their Ol&IT team.

Information security officers work to keep people aware of their roles and responsibilities to safeguard Veterans’ information.

“...The biggest battle is that good security practice is inconvenient for people...”

Stephen Quinn, ISO, VA NWIHCS

Employees in all different job titles must take the time for precautions to best serve Veterans.

“If we can’t protect them after all they’ve done for us, I feel we’ve failed,” Green said. ①

Imaging Service continued from page 7

general radiology and a mobile MRI service three days per week. Lincoln has the same as Grand Island, plus a nuclear medicine service. The primary difference in services is that Omaha provides round-the-clock capability with an emergency department and surgery services.

Imaging is also training many of tomorrow’s technicians at the three locations through allied health student programs from the University of Nebraska Medical Center, Clarkson College and Methodist Hospital. NWIHCS imaging technologists train more than 70 students each year, Boyd said. The students learn imaging techniques, exam processes and equipment. NWIHCS provides advance training in CT, MRI and nuclear medicine. The Lincoln VA recently added Bryan Memorial students in ultrasonography.

Two major benefits of training affiliate medical students at the VA are that it reduces misperceptions about the quality of care at the VA, and it helped NWIHCS recruit many of these individuals for a career.

“There was often a perception that we didn’t have good imaging equipment,” Boyd said. “Students in our program see our great equipment and see how hard our staff here are working to provide quality care to our Veterans.”

Imaging staff are trying to change the perception that it is not an integral part of the whole patient-care process, Boyd said. Interdisciplinary communication with other specialties regarding procedures, recommendations on future imaging needed for Veterans and communicating this to patients is a critical element to a modern-day imaging service department. ①

Chaplain Besancon continued from page 12

event to say their goodbyes and offer their gratitude for his service. Near the end of the event, a gentleman handed Besancon a sheet of folded-up notebook paper and said, “Somebody dropped this.” While Besancon was home opening his cards and gifts, he unfolded the note and enclosed was a $20 bill with a note that read, “Saluting you” and the Veteran’s signature. This was perhaps the most memorable gift he received, Besancon said.

“I don’t expect great accolades or trumpets,” Besancon said. “Sometimes the simplest and the most unexpected things are also the most touching.” ①

VA Nebraska-Western Iowa Health Care System

STANDDOWN

for Homeless Veterans Eligible for VA Health Care

Saturday, November 17, 2012
Exhibition Hall at Civic Auditorium
(East Entrance to Civic Auditorium)
9 am – Noon
Registration Encouraged at Your Nearest VA Business Office

FREE Health Care and Other Services Offered
*No Alcohol, Drugs or Weapons Allowed

Sign Up to Volunteer:
Desiree Kochen, 402-210-0321 or Desiree.Kochen@va.gov
Leave message with the number in your group.