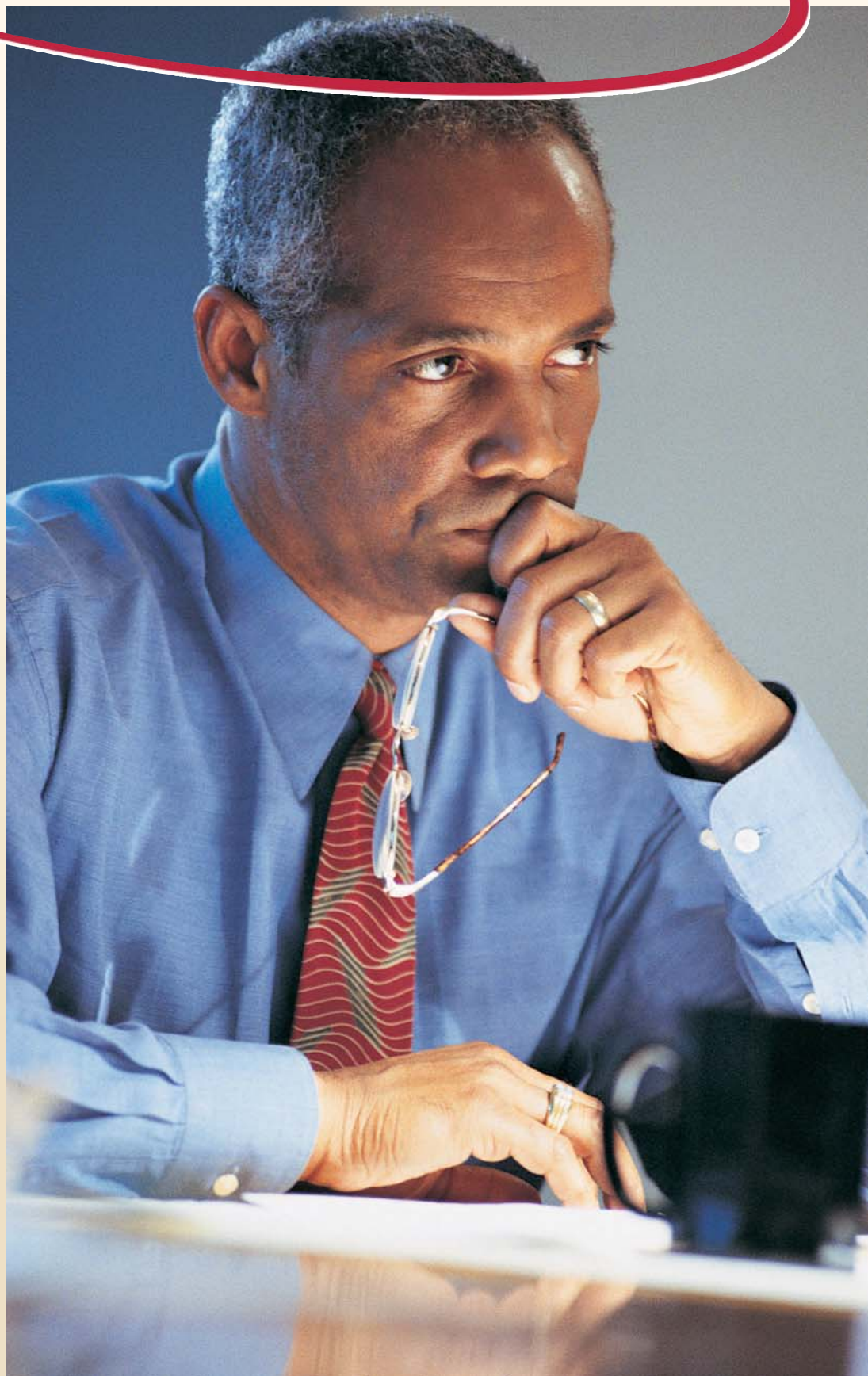
Veterans'
Health Matters

Fall 2004

The Wellness Magazine
from the VA
Sierra Pacific Network



Help for Trauma Survivors

Unseen Wounds

Benefits Deadline Nears

Network Contacts

Expanded Ex-POW Benefits

Network Highlights

A Less Visible Wound

Occasionally, someone asks, "Why do we need a separate health care system for veterans?" One of the answers to this question is that veterans have special health care needs as a result of their service and deserve a health care system that will meet these needs.

An example of such a special need is Post-Traumatic Stress Disorder—or PTSD. PTSD occurs in some people following the experience or witnessing of life-threatening events, such as military combat. The disorder includes both biological changes and psychological symptoms. A great source for more information about PTSD is the National Center for PTSD web site, "ncptsd.org."

Compared to other injuries like an injured knee or scar, PTSD is not always visible. Indeed, patients and their families may not be aware that the PTSD is present. PTSD is also complicated because it frequently occurs with related disorders such as depression and substance abuse.

As you can see in the articles below, all of the VA facilities in the Network have active PTSD programs that include outreach, education, assessment and treatment. Treatment consists of both counseling and medication options. There are even inpatient programs in some locations.

VA is expecting a significant number of veterans returning from Iraq and Afghanistan to develop PTSD. Already, VA facilities in the Network have seen and are treating veterans from Operation Iraqi Freedom and Operation Enduring Freedom.

In response to an expected demand for PTSD services, we are increasing our capacity and expanding our access. VA is already the world leader in PTSD research, but we will continue to invest resources to find better ways to prevent, diagnose and treat PTSD.

In these ways, we will ensure VA is ready to meet the special needs of veterans. This is our core mission and the reason why the VA health care system exists.

Robert L. Wiebe, M.D., M.B.A
Director, VA Sierra Pacific Network

San Francisco VA Medical Center: PTSD Care for the Newest Veterans

The SFVAMC Post Traumatic Stress Disorder (PTSD) program is one of the original PTSD clinical teams established by the VA in 1988. Our program specializes in outpatient treatment of veterans with PTSD related to combat, combat support, combat training, or sexual abuse or harassment in the course of active duty military service. The program's clinical services are organized along a stage-oriented model of treatment. This model represents a best-practice model for outpatient programs and has been adopted by other PTSD clinical teams across the nation. Our PTSD program is one of two programs nationwide to be designated by the VA Undersecretary for Health as a PTSD Clinical Program of Excellence.

Our PTSD program has expanded services through specialized treatment at our Community Based Outpatient Clinics in Santa Rosa, Ukiah, Eureka, and downtown San Francisco. This network of quality care is maintained through standardized assessment and treatment methods and is supported and coordinated through regular consultation.

The care of veterans returning from Iraq and Afghanistan is a top priority for our PTSD program. We provide returning soldiers with comprehensive PTSD services that include: outreach and education; triage; psychological evaluations and assessments; individual, group, couples and family therapy; and medication treatment. Our program's treatment emphasizes normalizing stress reactions to war-zone exposure, healthy adaptation, rehabilitation, resilience and coping skills training. The PTSD staff believes it is essential to provide early help to prevent development of chronic stress symptoms with dysfunctional behavioral responses to stress.

For help with PTSD, please call 415-221-4810 extension 2511.

*Veterans' HealthMatters is intended to provide supplemental health information. Individuals should consult their primary care provider before pursuing any treatment alternatives. You may visit our web site at the following address: **www.visn21.med.va.gov.***

Palo Alto System Offers PTSD and Substance Abuse Counseling

Caring for dedicated veterans who turn to VA for help defines our core mission at VA and the Palo Alto Health Care System (VAPAHCS). Recently, the New England Journal of Medicine reported that veterans returning from Iraq and Afghanistan have a significant risk of developing mental health problems. VAPAHCS does everything possible to ensure comprehensive mental health care is available and accessible for all veterans.

VAPAHCS offers outpatient and inpatient Post Traumatic Stress Disorder (PTSD) and substance abuse counseling and is proud of its award-winning National Center for PTSD, viewed as a world leader in PTSD research. The Center trains health care and related personnel in diagnosis and treatment of PTSD.

Various programs offered at the Center focus on underserved or minority populations such as African Americans, Hispanics and Native Americans. A specialized PTSD inpatient treatment unit serves female veterans (see page 4).

The National Center for PTSD, together with the DoD, developed clinical practice guidelines to manage traumatic stress. The guidelines pool DoD and VA expertise to build a joint assessment and treatment program coordinating primary and mental health care. The goal: to manage or prevent acute and chronic PTSD.

VAPAHCS already sees PTSD in veterans of Operations Iraqi Freedom and Enduring Freedom and expects to see increasing numbers in the future due to the delayed onset of PTSD. VAPAHCS continues to work with the DoD to help veterans transit from military duty to a happy and fruitful life.

VA Sierra Nevada Health Care System (VASNHCS): Reaching Out to Homeless Veterans

VASNHCS provides quality inpatient and outpatient services to veterans of all eras. Key to the delivery of care is finding veterans who are not likely to access services and who are unaware of their benefits. The Health Care for Homeless Veterans program reaches out to such veterans.

Specially trained social workers, Paula Rowles and Susie Spotted Horse, can be seen regularly in the Nevada desert, local food lines and shelters. Critical to their success is developing rapport and trust among the homeless veterans they hope to assist.

While they provide assistance with general medical and mental health issues, locating appropriate housing can be a juggling act. Now Rowles and Spotted Horse have a new resource – The Sierra Recovery Center. The Center received a grant through the Department of Veterans Affairs and can offer transitional housing to homeless veterans.

Contact The Health Care for Homeless Veterans program staff at (775) 328-1401, 328-1803 or 328-1761.

VA Central California Health Care System: PTSD Mental Health Services are a Priority

At the VACCHCS, caring for the new veterans from Operations Iraqi Freedom and Enduring Freedom is an utmost priority. The Operations in Iraq and Afghanistan have resulted in considerable risks of mental health problems including: Post Traumatic Stress Disorder (PTSD); major depression; substance abuse; impairment in social functioning and the ability to work; and the increased use of mental health care services.

Our mental health clinic has specialized group therapy and individual treatment programs. Intense outpatient treatment for veterans with substance abuse disorders is provided through our chemical dependency treatment program. The dual diagnosis treatment program provides long-term outpatient treatment for veterans with psychiatric and substance abuse disorders. VACCHCS has a joint mental and primary health care program addressing the needs of female veterans experiencing medical and psychiatric conditions with special emphasis on PTSD treatment and intervention.

The inpatient psychiatry unit at VACCHCS has been recently redesigned for short stay hospitalization. The unit plays a pivotal role in initiating and stabilizing treatment for veterans experiencing acute stress reactions or acute exacerbation of PTSD.

The Fresno Veteran Center is strategically located for close collaboration with the hospital, thus offering a unique opportunity to treat new veterans who receive specialized PTSD treatment.

VA Pacific Islands Health Care System's Trauma Stress Services

The VA Pacific Islands Health Care System (VAPIHCS) Traumatic Stress Recovery Program (TSRP) provides acute and limited long-term services to treat veterans with Post Traumatic Stress Disorder (PTSD). The TSRP seeks to maintain a close working relationship with the Substance Abuse Treatment Program, Tripler Army Medical Center, PTSD Residential Rehabilitation Program, and the Mental Health Clinic. The goal: to provide veterans – especially combat-zone veterans – high quality PTSD outpatient psychotherapy, counseling, consultation, and liaison services. Veterans from Iraq and Afghanistan receive top priority. VAPIHCS supports five clinics on the Islands, each having psychiatry, psychology and social work services.

The PTSD Residential Rehabilitation Program is a specialized treatment program designed for medically stable veterans who need more intensive treatment than outpatient treatment provides. Patients are admitted as part of a cohort group and treatment runs about nine weeks.

VAPIHCS offers various mental health programs for veterans with PTSD. One program is the Day Treatment Center Program, which has three levels of care and aftercare. The Veterans Improvement Program (VIP) is an independent, non-profit, self-help organization for veterans involved with the Day Treatment Center programs. The VIP provides disabled veterans with diverse and enriching opportunities encouraging socialization and integration into mainstream society. VAPIHCS continues to work with DoD to ensure the best possible mental health care is available to Iraq and Afghanistan veterans.

VA Northern California Health Care System – Mental Health Care for Veterans of Combat in Iraq and Afghanistan

The VA Northern California Health Care System (VANCHCS) is committed to providing high quality care to our nation's newest combat veterans. Our goal is to make it easy for veterans of Operations Iraqi Freedom (OIF) and Enduring Freedom (OEF) to obtain the health services they need.

Veterans with specific health care needs are matched with appropriate providers and locations. We established an OIF/OEF Coordinator who can assist veterans in finding the VANCHCS facility closest to them to obtain the health care services they need.

VANCHCS is actively involved in outreach to OIF/OEF veterans. Currently we are corresponding with approximately 1,500 OIF/OEF veterans. To date, we have seen 165 OIF/OEF veterans, all requesting outpatient care. Requests for mental health services are the third most frequent request.

We offer mental health services at the following VANCHCS locations: Oakland Army Base, Martinez, Mare Island, Fairfield, Sacramento, Chico and Redding. Treatment for Post Traumatic Stress Disorder (PTSD) is available at all VANCHCS sites. We have a specialized PTSD Clinical Team at our Sacramento Mental Health Clinic.

Contact our OIF/OEF Outreach Coordinator, Ms. Monti Nagel, at (707) 437-1990.

National Program Serves Women Who Suffered Trauma

by Kerri Childress, Network 21 Communications Officer
Photos by Curt Campbell

"I'm a professional at isolation. After being assaulted and raped in the Army, I spent the next 25 years fighting demons and nightmares with psychiatric medications and numerous hospitalizations. I was afraid of everything. I moved every year thinking the next place would be better – but it never worked because wherever I went, there I was."

A Vietnam-era Army veteran, Debra Jean (DJ) is a graduate of VA's Women's Trauma Recovery Program (WTRP) at the Palo Alto Health Care System's Menlo Park (Calif.) Division. The program was initially designed to treat women with PTSD, but more often than not the women who come here were sexually assaulted during their military service and suffer what is now referred to as Military Sexual Trauma (MST).

"For 25 years I suffered alone," says DJ. "I had barely gone out of my house the six years prior to entering the WTRP. I was ready to get better and this program gave me the courage and the tools to do that. My only regret is that I didn't know about it years ago – so much of my life has been wasted."

The WTRP staff is trying to reach out to women who can benefit from this 60-day residential program for women veterans who are coping with the aftermath of trauma. Women come into the intense group therapy program in classes, or cohorts, that work together; some can't handle the intensity and can't continue, but many of these come back for a second try and finish successfully.

"The program is not for everyone," says Darrah Westrup, PhD, who oversees the WTRP along with Gloria Grace, a social worker and the Program Coordinator. "The interpersonal demands pose a challenge to women who have been extremely isolated and find it difficult to trust others. If we could just reach these women early in their trauma years, we could save them so much pain," she said with a sigh.

Above: Air Force veteran Joann, 22, is one of the youngest women to go through the Women's Trauma Recovery Program. Having suffered alone and turned to alcohol, she said, "If you had known me before [treatment at the WTRP], you wouldn't think I was the same person. When my former doctor saw me recently, she said, 'You look great. You look connected.'"

One such veteran is 22-year-old Joann, who was sexually assaulted while in Luxemburg when she was serving with the Air Force in Germany. "Nights were bad. I was afraid to go to sleep because of the nightmares, but I was so tired all I wanted to do was to go to sleep. So I started drinking myself to sleep," she said shaking her head.

Joann found out about the residential program after working with the staff as an outpatient mental health patient. The outpatient program was good – just not enough.

"If you had known me before [treatment

Left: The Women's Trauma Recovery Program is located on the serene campus of the VA at Menlo Park, Calif., a division of the VA Palo Alto Health Care System. It affords women privacy and an opportunity to interact and heal.

Above: Social Worker Gloria Grace, program director for the Women's Trauma Recovery Program, leads a group counseling session. "Despite the adversity in these women's lives, they readily offer support and guidance to the "band of sisters" who follow them. It's both humbling and awe-inspiring," said Grace.

at the WTRP], you wouldn't think I was the same person. When my former doctor saw me recently, she said, 'You look great. This is the first time in a year I've seen you look connected.'"

Women come to the program from all ages and walks of life. Most arrive after or on the brink of emotional disaster and must share with each other secrets that many of them have held inside for decades. For more information about the inpatient and outpatient program visit: *http://www.womenvetsptsd.va.gov.*

Healing the Unseen Wounds

Wounds of the mind and heart can be as serious as physical wounds but often remain unseen. Services offered at local VA hospitals and clinics help treat unseen disorders such as military-related psychological or sexual trauma. One such condition is Post Traumatic Stress Disorder (PTSD).

According to VA's My Health*e*Vet website *(www.myhealth.va.gov)*, "PTSD is an anxiety disorder that can develop after exposure to a terrifying or scary event or experience – sometimes weeks or months after the event." Symptoms may include one or more of the following: flashback episodes, nightmares, inability to sleep, being easily irritated, having angry outbursts, and feelings of loneliness. According to the National Institute of Mental Health (NIMH), about 30% of the men and women who have spent time in war zones experience PTSD. But PTSD is not limited to those who have served in war zones. NIMH estimates that about 3.6% of U.S. adults ages 18 to 54 have PTSD during the course of a given year following exposure to a traumatic event.

Today, when veterans first present for care, VA medical centers routinely screen every one of them (including those of past wars) for PTSD and military-related sexual trauma. "Assessing war-related or military sexual trauma is now part of our initial primary care screening process," says Dr. Steven Silver, a Vietnam combat veteran and director of the PTSD program at the Coatesville, Pennsylvania VAMC. Veterans who need help with such conditions can then obtain assistance at their local VAMC or at other locations.

In addition to receiving care for these conditions at VA medical centers, veterans may obtain treatment for PTSD and military-related sexual trauma at specific community-based outpatient clinics. VA Palo Alto offers a 60-day inpatient program for women who have suffered trauma (see story on page 4).

Since 1979, the VA Readjustment Counseling Service – through its more than 200 storefront Vet Centers – has provided counseling for war-related psychological or sexual trauma to veterans (and their family members) who have served in any war or in any area during a period of armed hostility.

Increased coordination between VA and the Department of Defense (DoD) is also assisting today's veterans in their readjustment to civilian life. For example, VA social workers at the Walter Reed Army Medical Center in Washington, DC, and the Bethesda Naval Medical Center in Maryland are helping returning veterans arrange for care at their local VAMC before they ever leave the hospital. "The VA today probably has a more wide-ranging array of services for returning veterans than at any time in its history," says Silver. "This makes the transition much easier for the veterans and their families."

Cooperation between VA and DoD has also led to a joint study of war reactions and their treatment. "The result," says Silver, "is we now know that this isn't something you 'just have to live with.' There is hope, because that trauma can be treated effectively."

For more information about treatment for any military-related psychological or sexual trauma, check with your VA primary care provider.

VISN 21 Employees Help Floridians Recover from Hurricanes

More than 25 employees from the northern California region joined hundreds of Department of Veterans Affairs (VA) employees from around the country who volunteered to assist Florida communities damaged by Hurricane Frances.

Many employees, representing clinical, engineering, safety, security, logistics and administrative skills, were deployed to areas to assist not only VA hospitals but also wherever they were needed.

During the storms, 100 mph winds whipped rain horizontally at buildings. At the West Palm Beach VA, water started pouring in and crews with wet vacuums were dispatched to fight the deluge coming in the building. Ted Spencer, a VA Palo Alto Health Care System (VAPAHCS) carpenter, headed out to West Palm Beach to lend a hand in the massive task of repairing buildings and facilities.

"There was so much destruction!" said Scott Crawford, a VAPAHCS nurse who was in Pensacola, Florida, and Mobile, Alabama, for two weeks. "I worked in a private hospital ER and we were seeing anywhere from 200-400 patients a day. I was working with VA nurses from Colorado, Lexington, Arizona and East Texas. We were a great team."

According to Rae Denison, who helped coordinate VISN 21's volunteer efforts, "There were a couple of things that everyone who came back agreed upon. Although the days were long and often exhausting, they felt truly appreciated and proud they worked for VA."

"I worked from 7 p.m. to 7 a.m. in a busy emergency room," said Fresno VA nurse Jim Boyle. "Our patients ranged from a 4-day-old infant to a 92-year-old man who had badly injured himself falling off his ladder while making repairs on his roof. It was not unusual to have all 27 beds filled and 50 people in the waiting room."

Elena Eaton, another nurse from Fresno VA was sent to Miami and found herself assigned to the Spinal Cord Injury Unit. The staff was warm, welcoming and appreciative, as were the patients, she said. "Patients just couldn't believe that I had traveled all the way from California to lend a helping hand. But I felt blessed to have had this opportunity," said Eaton.

Among the national support of the Federal Emergency Management Agency, VA deployed four teams to the area. Each consisted of 15 nurses, one pharmacist, one area emergency manager, one driver and one administrative clerk. Four VA emergency managers in Miami coordinated their activities.

"Hundreds of our dedicated VA employees went directly to stricken areas to help with relief efforts," said Secretary of Veterans Affairs Anthony Principi. "Individually and in teams, VA people performed an important part of our mission by providing emergency aid to communities hit by natural disasters."

You may contact the following mental health professionals for more information:

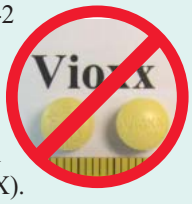
VA Central California Health Care System	
Mental Health Service	(559) 228-5336
VA Medical & Regional Office Center	
Honolulu – Dr. Matthew Ikeda	(808) 433-0627
VA Northern California Health Care System	
Martinez Outpatient Clinic	(925) 372-2105
Oakland Mental Health Clinic (Oakland Army Base)	(510) 587-3400
Redding Outpatient Clinic	(530) 226-7675
Sacramento Mental Health Clinic	(916) 366-5433
VA Palo Alto Health Care System	
National Center for PTSD	(650) 493-5000 ext 27777
VA Sierra Nevada Health Care System	
Mental Health Primary Care (Green) Team	(775) 328-1476
VA Medical Center San Francisco Mental Health	
Central Access Team	(415) 750-6674

Vioxx® Removed from the Worldwide Market

by Northern California Health Care System Pharmacists Joy Meier and Cherie Villon

On September 30th, Merck, the manufacturer of rofecoxib or Vioxx®, announced they would no longer sell Vioxx®. Therefore, the VA will no longer provide this drug.

Vioxx® is a member of a class of drugs called selective COX-2 Inhibitors. These drugs are used for arthritis pain and menstrual cycle cramps. In the VA, use of these drugs is limited to patients who have these conditions and are also at a high risk for stomach bleeding.



The decision by Merck to remove Vioxx® was based on results from a study called APPROVe (Adenomatous Polyp Prevention on VIOXX). In APPROVe, 2,600 patients with colorectal adenomas polyps, a form of early colon cancer, were studied to see if Vioxx® prevented colon cancer. Patients given Vioxx® had a higher risk of heart attacks and stroke than patients not on Vioxx®. This occurred mostly after being on it for 18 months. Because of this higher risk of heart attack or stroke, Merck decided they would no longer sell the drug.

Veterans who have received prescriptions from the VA for Vioxx® were sent letters telling them about this change. VA pharmacists and doctors are working together to determine the best replacement drug for each patient. The VA is asking veterans to return any unused supplies of Vioxx® to the VA pharmacy. If you have any questions about this, please contact your local VA doctor or pharmacist.

Some Survivors of Veterans Face Deadline for Restored Benefit

The Department of Veterans Affairs (VA) wants to ensure that surviving spouses of deceased veterans are aware of an approaching deadline that may affect entitlement to Dependency and Indemnity Compensation (DIC) benefits.

Last year, President Bush signed Public Law 108-183, the "Veterans Benefits Act of 2003," which restores entitlement to DIC and related home loan and education benefits for surviving spouses who remarry on or after their 57th birthdays.

VA officials are concerned that surviving spouses may not be aware of this change in law or may overlook this benefit if their subsequent marriages have not ended.

Generally, VA pays DIC to the surviving spouses of military servicemembers who die while on active duty and to surviving spouses of veterans when death resulted from service-related causes.

The basic monthly rate is $967 and is increased if the surviving spouse has dependents, is housebound, or meets criteria common to those who need a home aide. There are additional payments for dependent children. Parents who were dependent upon the servicemember's income also may qualify for DIC.

Under previous law, surviving spouses who remarried were not eligible for DIC unless their marriages ended at which time they could apply for reinstatement of benefits.

Under the new law, surviving spouses who remarried after age 57 and before Dec. 16, 2003, have a limited time to apply for restoration of DIC.

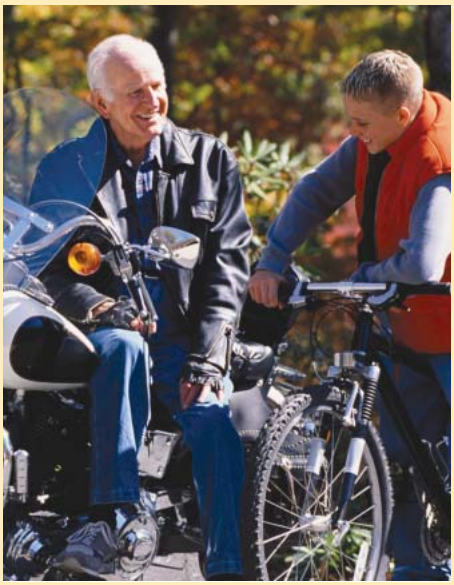
They have one year from the date the new law was enacted (Dec. 16, 2003) to apply for restoration of benefits. If VA receives the application later than Dec. 15, 2004, restoration of DIC must be denied.

The one-year application period does not apply to other surviving spouses whose remarriage on or after attaining age 57 followed enactment of the law.

For more information on restoration of DIC, call VA's toll free number at 1-800-827-1000 or visit the nearest VA regional office. Office locations can be found in the blue pages of local telephone directories.

People who are hearing impaired should call VA at 1-800-829-4833 by use of a telecommunications device for the deaf (TDD).

More information on benefits and services is available at VA's Internet Web site *www.va.gov.*



Administration Expands Benefits for Ex-POWs

Continuing its commitment to former prisoners of war, Secretary of Veterans Affairs Anthony J. Principi announced that the Bush Administration will expand benefits to all former POWs with strokes and common heart diseases.

"This is an issue that has been studied and debated too long," Principi said. "We have scientific studies supporting the association of these illnesses to the military service of our former POWs."

The secretary, who oversees the operations of the Department of Veterans Affairs (VA), announced the new benefits in a speech at a national convention of the American Ex-Prisoners of War.

The Administration's decision benefits former POWs with strokes and most heart diseases. Those veterans will be automatically eligible for disability compensation for those common ailments, and their spouses and dependents will be eligible for service-connected survivors' benefits if these diseases contribute to the death of a former POW.

In September 2003, Principi launched a nationwide outreach effort to identify and provide benefits to the estimated 11,000 former POWs who were not receiving VA disability compensation or other services. There are about 35,000 living ex-POWs.

The secretary also has urged Congress to change federal law that required that former POWs must be detained for at least 30 days to qualify for the full range of POW benefits.

The Administration's new decision will add to the list of 16 medical problems that VA presumes to be linked to the military service of former POWs. The new rules took effect in October 2004.

Where to find us!

VA MEDICAL CENTER SAN FRANCISCO

4150 Clement Street
San Francisco, CA 94121-1598
(415) 221-4810

VA EUREKA OPC
714 F Street
Eureka, CA 95501
(707) 442-5335

VA SANTA ROSA OPC
3315 Chanate Road
Santa Rosa, CA 95404
(707) 570-3855

VA 13TH & MISSION CLINIC
205 13th Street, Suite 2150
San Francisco, CA 94103
(415) 551-7300

VA UKIAH OPC
630 Kings Court
Ukiah, CA 95482
(707) 468-7700

VA PALO ALTO HEALTH CARE SYSTEM

3801 Miranda Avenue
Palo Alto, CA 94304-1290
(650) 493-5000

VA MENLO PARK DIVISION
795 Willow Road
Menlo Park, CA 94025
(650) 493-5000

VA LIVERMORE DIVISION
4951 Arroyo Road
Livermore, CA 94550
(925) 373-4700

VA CAPITOLA OPC
1350 N. 41st Street, Suite 102
Capitola, CA 95010
(831) 464-5519

VA STOCKTON OPC
500 W. Hospital Road
Stockton, CA 95231
(209) 946-3400

VA MODESTO OPC
1524 McHenry Blvd., Suite 315
Modesto, CA 95350
(209) 557-6200

VA MONTEREY OPC
3401 Engineer Lane
Seaside, CA 93955
(831) 883-3800

VA SAN JOSE OPC
80 Great Oaks Boulevard
San Jose, CA 95119
(408) 363-3011

VA SONORA OPC
19747 Greenley Road
Sonora, CA 95370
(209) 588-2600

VA NORTHERN CALIFORNIA HEALTH CARE SYSTEM

VA MARTINEZ OPC
150 Muir Road
Martinez, CA 94553
(925) 372-2000

VA MEDICAL CENTER SACRAMENTO
10535 Hospital Way
Mather, CA 95655-1200
(916) 366-5366

VA REDDING OPC
351 Hartnell Avenue
Redding, CA 96002
(530) 226-7555

VA CHICO OPC
280 Cohasset Road
Chico, CA 95926
(530) 879-5000

VA SACRAMENTO OPC
5342 Dudley Boulevard
McClellan Park, CA 95652-1074
(916) 561-7400

VA MARE ISLAND OPC
201 Walnut Avenue
Mare Island, CA 94592
(707) 562-8200

OAKLAND MENTAL HEALTH PROGRAM
Oakland Army Base
2505 West 14th Street
Oakland, CA 94607
(510) 587-3400

VA OAKLAND OPC
2221 Martin Luther King Jr. Way
Oakland, CA 94612
(510) 267-7800

VA FAIRFIELD OPC
103 Bodin Circle
Travis AFB, CA 94535
(707) 437-1800

VA CENTRAL CALIFORNIA HEALTH CARE SYSTEM

2615 E. Clinton Avenue
Fresno, CA 93703-2286
(559) 225-6100

VA SOUTH VALLEY OPC
1050 North Cherry Street
Tulare, CA 93274
(559) 684-8703

VA CASTLE OPC
3605 Hospital Road, Suite D
Atwater, CA 95301-5140
(209) 381-0105

VA SIERRA NEVADA HEALTH CARE SYSTEM

1000 Locust Street
Reno, NV 89502-2597
(775) 786-7200

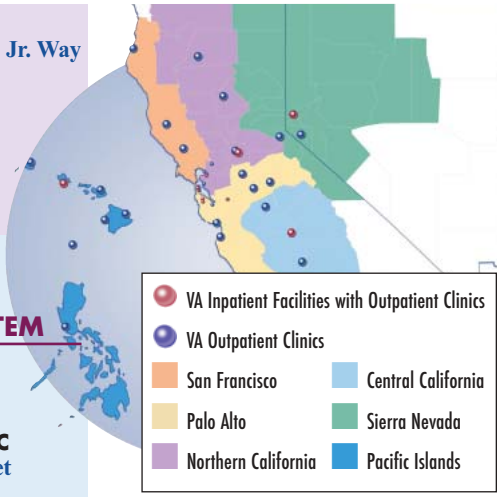
VA SIERRA FOOTHILLS OPC
3123 Professional Drive, Suite 250
Auburn, CA 95603
(530) 889-0872

VA CARSON VALLEY OPC
925 Ironwood Drive, Suite 2102
Minden, NV 89423
(888) 838-6256

VA PACIFIC ISLANDS HEALTH CARE SYSTEM

459 Patterson Road
Honolulu, HI 96819
(808) 433-1000

VA HILO PTSD RESIDENTIAL REHABILITATION PROGRAM
891 Ululani Street
Hilo, HI 96720
(808) 969-1684



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(808) 935-3781

VA KONA OPC
75-5995 Kuakini Hwy., Suite 413
Kailua-Kona, HI 96740
(808) 329-0774

VA KAUAI OPC
3367 Kuhio Hwy, Suite 200
Lihue, HI 96766
(808) 246-0497

VA GUAM CLINIC
US Naval Hospital
Wing E-200, Box 7608
Agana Heights, GU 96919
(671) 472-7250

VA REGIONAL OFFICE & OUTPATIENT CENTER MANILA

United States Department of Veterans Affairs
PSC 501
FPO, AP 96515-1100
(011) 632-523-6300

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