



# Diving Medicine Ten Foot Stop Newsletter

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## [February 15, 2004 Newsletter](#)

\*This material should not be used as a basis for treatment decisions, and is not a substitute for professional consultation and/or peer reviewed medical literature.

[Newsletter Archives](#) (All previous newsletters, pdf)

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## Note from Scubadoc

### Diving Medical Examiners Web Page

Last week we sent our main mailing list a request for qualified physicians to add their names to our new web page, [Diving Medical Examiners](#), that lists physicians who state they are qualified to perform 'pre certification' and diving accident 'return to diving' medical exams. I was quite gratified by the response. The list is growing daily and hopefully, we can get contact source information to divers who don't know where to turn for medical advice.

Let me know if you or any of your associates would like to be listed as a qualified DME. Physicians boarded in Undersea and Undersea and Hyperbaric Medicine are particularly equipped for this endeavor. "Fitness to Dive" courses given by David Elliott, Fred Bove, DAN, UHMS and NOAA are examples of qualifying training for inclusion on the list.

Here is a letter about 'Fitness to Dive' from Dr. Omar Sanchez in Argentina:

Dear Scubadoc,

Fit to dive ( FTD ) is a hot topic also in these latitudes. Habitually we must "to fight" with physician, about light asthmatics but with recent crisis or over-medicated, and neurologists authorizing epileptics to dive. Comments like: is only a Petit Mal !!!, or shallow dives...why not???, are common. Underestimating therefore the risk of conscience disorder underwater, the rigidity of the Boyles's law and the enormous pressure at only 3 msw ( 10 fsw ). Here many physician authorize the diving mixing concepts. One good treadmill or to compete in marathons does not qualify to dive. And this nonsingle by the diver security, also his buddy and the rest of the crew, many rescues have finished with more than one injured .

Asthmatic and epileptics usually are the most controversial in unfit case, something similar I see in the Scubaboard-forum.

Until year 2001 the local coastguard regulated **all** the recreational diving. The previous medical examination demanded a EKG and a EEG, renewable every 5 years, every 3 years from age = 41 to age < 50, and annually thereafter. Something similar to the BSAC standars until year 2.000. Although these norms are no longer valid it is the methodology that I advise to our students. Lamentably the globalización has arrived and a self-made health questionnaire is the new standard, and thus many psychiatric patients respond ( and sign) ... OK...OK.

I'm making a free work about dive medicine for the next **Emergency Medicine Congress**


<http://congresosae.tripod.com.ar/SAEsede.htm> and FTD is a key topic.

One good article about FTD available at :

[www.mja.com.au/public/issues/171\\_11\\_061299/simpson/simpson.html](http://www.mja.com.au/public/issues/171_11_061299/simpson/simpson.html) And many publications ( some controversial ) about FTD in recreational diving, military diving and caisson workers at: **The European Committee for Hyperbaric Medicine - October 2.003:**

[www.cccmh.com/GENEVA/ECHM-GENEVA.htm](http://www.cccmh.com/GENEVA/ECHM-GENEVA.htm) From Buenos Aires: thanks for your work.

Omar Sanchez, MD.

 **Bleomycin** is used to treat several types of cancer, including cervix and uterus cancer, head and neck cancer, testicle and penile cancer, and certain types of lymphoma. It is often used in the treatment of cancers in young men - who frequently wish to participate in scuba diving. Our question of the day advises an oncologist in this regard.

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## '?' Question of the Week



### Bleomycin and Diving?

#### Question:

I am an oncologist in Switzerland and I am treating a lot of young patients with testicular cancer or lymphoma with bleomycin containing chemotherapy regimen.

There is always some uncertainty about diving in this population (after finishing chemotherapy) since bleomycin has some lung toxicity and in the anaesthetic literature there is evidence that high oxygen pressure in these patients can be a problem. Since they are luckily mostly treated in curative intent we would like to know what your experiences are.

What would you recommend? May they dive normally or just in a certain deepness or with a certain equipment.

Unfortunately I am an absolute ignorant when diving is concerned, so I would hope you have some help for us!

#### Answer:

**Hello Dr. :**

**I have had no experience with divers after treatment with bleomycin - but have dealt with patients (surgical) who required very careful monitoring of the FIO<sub>2</sub> during anesthesia. As you are familiar with the sensitivity to elevated O<sub>2</sub> levels in these patients, you know that in patients who have received bleomycin lung damage can occur at lower concentrations that are usually considered safe.**

**I am not aware of any studies about scuba diving while on or after taking bleomycin. There is one report in the Netherlands Journal of Medicine that describes advice given a scuba diver after treatment. 'Bleomycin and scuba diving: to dive or not to dive?', by G. Huls and D. ten Bokkel Huinink in the Netherlands Journal of Medicine, 2003, November 2003 , Vol . 6 1 , No. 11, 388**

**There are several problems that come to mind about the patient diving after bleomycin.**

**First, diving may be particularly hazardous for post-bleomycin patients because of increased risk of oxygen toxicity in their lungs due to high oxygen partial pressure. The partial pressure of inspired oxygen is a function of the depth of the dive. When a scuba diver breathes compressed air (21% oxygen at the surface) at a depth of 29.7 meters (approx. 90 ft depth) of seawater, the partial pressure is 0.84 atmosphere or the equivalent to breathing 84% oxygen on the surface.**

**Secondly, the treatment of most scuba diving accidents (decompression sickness, barotrauma with gas embolism or drowning entails the use of 100% oxygen, initially by the first-responder at sea level pressure and then by the hyperbaricist. We would have a dilemma as this necessary recompression with the use of periods of 100% oxygen might be harmful to the bleomycin treated diver.**

**Thirdly, we have the pulmonary changes that have taken place from the drug (fibrosis, 30%), increasing the risk of pulmonary barotrauma and possible gas embolism. (No reports, to my knowledge).**

**I would recommend that divers who have been treated with bleomycin not dive at all and if they choose to dive with full knowledge of the risks involved that they not use 'nitrox' in any of it's configurations as the percentage of O2 is 32, 36 and as much as 40 percent of the breathing mixture.**

**I hope that this has answered your questions!**

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## You Are The Diving Medical Officer




What is this injury?

- a. coral scrapes
- b. DCS
- c. Severe allergic reaction to neoprene rubber accelerators
- d. Dermatitis factitia
- e. Chironex injury

Answer below

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## Hyperbaric Oxygenation

 Qualified chamber information can be obtained by calling  
DAN at +1-919-684-8111 (DAN America);  
DAN Latin America +1-267-520-1507 ;  
DAN Europe +41-1-1414 ;  
DAN Japan +81-3-3812-4999 ;  
DAN South Africa 0800-020-111 ;  
DES within Australia 1-800-088-200 ;  
DES New Zealand +64-9-445-8454 ;  
Singapore +65-750-5546 ;  
DAN Philippines +63-2-815-9911;  
DAN Malaysia +05-930-4114

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A good article about the **effects of drugs on diving and hyperbarics** in 'Immersed'.  
<http://snipurl.com/4i5u>

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**Hyperoxia, reactive oxygen species, and hyperventilation: oxygen**  
sensitivity of brain stem neurons.  
<http://snipurl.com/4950>

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**Oxygen-sensing neurons** in the central nervous system.  
<http://snipurl.com/3p3l>

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 Buhlmann and the DECOCALC program.

We had a question as to the location of the above program(s).

This is what we could find:

The Buhlmann altitude and sea level tables are on our web page at <http://www.scuba-doc.com/flyafdv.html> . and can be downloaded.

The material that you are seeking may be located at this web page:  
<http://www.gap-software.com/library/decolessons.pdf>.

If you would like HTML instead of pdf, the URL is at <http://snipurl.com/4d47>

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Decompression sickness **risk reduced by native intestinal flora** in pigs after H2 dives.  
Undersea Hyperb Med. 2001 Summer;28(2):89-97.  
<http://snipurl.com/494v>

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Inactivation of human muscle Na<sup>+</sup>-K<sup>+</sup>-ATPase in vitro during prolonged exercise is increased with hypoxia.  
<http://snipurl.com/494y>

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Does **sports activity enhance the risk of sudden death** in adolescents and young adults?  
Related Links  
<http://snipurl.com/495b>

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**Magnesium infusion to treat Irukandji syndrome**  
Michael A Corkeron  
<http://snipurl.com/4i5m>

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**Effects of hyperbaric and hyperoxic conditions on the disposition of drugs:** theoretical considerations and a review of the literature.  
<http://snipurl.com/4i5z>  
Related Articles  
<http://snipurl.com/4i61>

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**Fathoms Magazine**  
<http://www.fathomspub.com/>

Fred Garth and Bret Gilliam join up for some interesting articles in this magazine.

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**Dental Concerns ??** See our web page for excellent material by our Dental Consultant, Dr. Larry Stein.  
<http://www.scuba-doc.com/dentprbs.html>

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## Support these sites that support us!!

"[Diving and Subaquatic Medicine](#)", Edmonds, Lowry, Pennefeather and Walker.

[Undercurrent](#)

[Underwater Times](#) - Jeff Dudas

Eddie Rhodes at [Diverlink](#)

## Mailbox Potpourri

### From the UHMS

TO ALL UHMS MEMBERS

The 2004 Annual Scientific Meeting "CALL FOR ABSTRACTS" Deadline date for Submission has been EXTENDED to Tuesday, February 24, 2004 (9 a.m.). For information and online submission go to the following website: <http://iceaustralia.com/uhms2004/>

If you have any questions, please contact me.

Lisa  
UHMS

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### Question: Ill-feeling after Nitrox dives

I have been diving Nitrox for the past six months. I have had no issues diving on air or lesser mixes of Nitrox. However, I have recently been diving with 38-40% Nitrox and it appears to correlate with an increasing feeling of being unwell as the dive progresses. An unsettled stomach and general feeling of nausea. This has occurred in both warm and cold water and I was well within the maximum depth limits and the CNS loading was only in the 5 or 10% region. One of my dive buddies has a vague memory of someone stating that this is known and may be related to an individual's physiology not tolerating the higher O<sub>2</sub> %. Is this a known symptom and if so please can you direct me to more background reading/papers in order that I may investigate further. Thanks

Answer:

*"Answers to questions are offered as information only and not as medical diagnosis or advice and should always be used in conjunction with advice from your personal diving physician. Given our inability to*



*examine you and without the findings of your doctors it's impossible to offer a personal answer that's entirely accurate."*

Dear Stephen,

The symptoms which you are attributing to diving with higher oxygen-content Nitrox mixes (although reportedly within "maximum depth limits" for the Nitrox mix) are not classical for oxygen toxicity. Other than convulsions (seizures) the following are those usually described for oxygen toxicity (from the US Navy Diving Manual, Revision 4):

**Symptoms of CNS Oxygen Toxicity.** The most serious direct consequence of oxygen toxicity is convulsions. Sometimes recognition of early symptoms may provide sufficient warning to permit reduction in oxygen partial pressure and prevent the onset of more serious symptoms. The warning symptoms most often encountered also may be remembered by the mnemonic VENTIDC:

**V:** Visual symptoms: Tunnel vision, a decrease in diver's peripheral vision, and other symptoms, such as blurred vision, may occur.

**E:** Ear symptoms. Tinnitus, any sound perceived by the ears but not resulting from an external stimulus, may resemble bells ringing, roaring, or a machinery-like pulsing sound.

**N:** Nausea or spasmodic vomiting. These symptoms may be intermittent.

**T:** Twitching and tingling symptoms. Any of the small facial muscles, lips, or muscles of the extremities may be affected. These are the most frequent and clearest symptoms.

**I:** Irritability: Any change in the diver's mental status including confusion, agitation, and anxiety.

**D:** Dizziness. Symptoms include clumsiness, incoordination, and unusual fatigue.

**C:** Convulsions. The first sign of CNS oxygen toxicity may be a convulsion that occurs with little or no warning.

Symptoms may not always appear and most are not exclusively symptoms of oxygen toxicity. Twitching is perhaps the clearest warning of oxygen toxicity, but it may occur late, if at all. The appearance of any one of these symptoms usually represents a bodily signal of distress of some kind and should be heeded.

Certainly the symptoms you describe could fall within the "nausea" described above. You didn't mention your pO<sub>2</sub> at maximum depth. While many training agencies have taught 1.4 to 1.6 as the "maximum" allowed, most mixed gas divers restrict planned maximum pO<sub>2</sub> to 1.2.

An individual diver's susceptibility to oxygen toxicity varies, both between individuals and in the same individual from time to time, but overall risk of CNS Oxygen toxicity appears directly related to the partial pressure of the oxygen and time of exposure at that partial pressure. In addition, the body can tolerate a higher pO<sub>2</sub> at rest (like during decompression) than it can during the active phase of a dive.



Part of the reason for this is that increased carbon dioxide retention (such as with exercise, "skip" breathing, or inadequate equipment) can enhance the sensitivity to oxygen.

My recommendation would be that you restrict your maximum pO<sub>2</sub> to 1.2 (if you are not doing that already) and see what effect that has on these symptoms.

Please let us know what effect limiting you maximum pO<sub>2</sub> has on your symptoms.

Sincerely,

**Martin M. Quigley, MD, FACOG**

PS. For additional reading, Dr. Clark has an excellent (but scholarly) chapter on Oxygen Toxicity in Bennett and Elliott's *The Physiology and Medicine of Diving* and the NOAA Diving Manual extensively discusses Nitrox diving and various aspects of oxygen toxicity.

*Writer's Credentials: Board Certified in Obstetrics and Gynecology and Reproductive Endocrinology. Trained in Diving and Hyperbaric Medicine by NOAA and UHMS. Current PADI Instructor. Certified Cave and Trimix Diver. Faculty Member at DAN's 2001 Dive Medicine Course.*

Related links

<http://www.scuba-doc.com/oxtox.html>

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From Jeff Stone, MD

Our group is looking to add another physician. thank you for looking at this

## PHYSICIAN POSITION PROFILE

LOCATION: North Dallas at Presbyterian Hospital and downtown Dallas at Methodist Medical Center. With a population of approximately 1 million the community enjoys the benefits of a big city. The metropolitan area surrounding Dallas is approximately 3 million. Our location provides you easy access to the east Texas piney woods where you will find excellent camping, hiking and fishing. Dallas also has the Worlds busiest airport located approximately 30 minutes from town, providing direct nonstop flights to most U.S. cities and many foreign locations. The metropolitan area has all there is for a metropolitan area to offer including theaters, museums, national sports arenas, zoos and worship facilities of most denominations. The schools offer low pupil/teacher ratios. There are many colleges and universities in the area as well as technical schools.

**PROFESSIONAL OPPORTUNITY:** We have a clinically hospital based practice that continues to increase in patient volume yearly. Our growing practice encompasses patients with chronic non-healing wounds, many of whom are at high risk for amputation. Although our practice is mainly clinical, many research opportunities abound through our affiliation with the University of Texas Southwestern Medical Center.

We use an aggressive and comprehensive wound management program which includes the use of hyperbaric oxygen. We are the referral center for the Diver's Alert network and the poison control center.

The multiplace hyperbaric chamber is located at the Institute for Exercise and Environmental Medicine (IEEM). The IEEM is a 40,000 ft<sup>2</sup> research and clinical facility devoted to exploring and defining the limits to human functional capacity in health and disease. It contains five major laboratories, with office space to support clinical and administrative activities.

Our hyperbaric chamber, is a triple lock, multiplace hyper-hypobaric chamber, nine feet in diameter by 40 feet long, weighing 69,000 pounds and is capable of being pressurized to a depth of 165 fsw (6 ATA) or an altitude of 100,000 feet.

Our monoplace chamber's are located at Methodist Medical Center This 478-bed teaching and referral hospital has been in operation since 1927 and today provides a variety of exceptional clinical programs and services, including multi-organ transplantation, cardiology, oncology and physical rehabilitation services, maternity, neonatology and emergency/trauma care.

**COMPENSATION PACKAGE:** Our first year's salary is an attractive base guarantee with an opportunity for bonus potential. The bonus potential will be based on the candidate's ability to appeal to patients and deliver quality care. For the right candidate, we are prepared to provide a moving expense advance and sign-on bonus. Fringe benefits the first year may include paid professional liability insurance, health insurance, continued medical education, vacation and professional dues allowance. After the first year, the physician will enjoy a profit sharing plan.

**ADDITIONAL INFORMATION:** For additional information contact:

Dr. Jeff Stone  
Limbsalvagecentre  
5481 Blair Rd.  
Dallas, TX. 75231  
[WWW.Wound.com](http://WWW.Wound.com)

Office 214 265-9408  
Fax: 469-374-9018  
Email [jstone@wound.com](mailto:jstone@wound.com)


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Daryl Werner, MD relates that Orange County Wound and Hyperbaric in Santa Ana CA is moving to suite #100 in the same building. Our first HBO chamber should be working in a week or so!

Thanks,  
Darryl Werner, MD  
Orange County Wound and Hyperbaric  
720 N. Tustin Ave, #200  
Santa Ana, CA 92705  
T 714 973 8777  
F 714 973 8778


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## Meetings, Conferences and Course

 Courses added to the UHMS web site include 'Medical Assessment for Fitness to Dive'  
<http://www.uhms.org/Courses/Courses.htm>

 Meetings, courses and conferences on our web site  
<http://scuba-doc.com/meetcrse.html>

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 **UHMS Gulf Coast Chapter Annual Scientific Meeting**  
**Conjoint with the UHMS Associates and the Baromedical Nurses Association**  
August 5-7, 2004  
Westin Galleria Hotel  
Dallas, Texas

For Information please see the Gulf Coast Chapter web site at

<http://www.uhms.org/Chapters/GCC/index.htm> or call Matt Schweyer by phone at 214-820-4400 or by email at [mattsch@baylorhealth.edu](mailto:mattsch@baylorhealth.edu).

### Praxis Pre-Course

Integrating Advanced Wound Care Technology and HBO

August 4, 2004

Westin Galleria Hotel

Brochure available at <http://www.uhms.org/Chapters/GCC/index.htm> under Chapter Meetings

or call Sherrill White at (281) 686-1563

### UHMS Post Course

Preparing for an Accreditation Survey

August 8, 2004

Westin Galleria Hotel

Brochure available at <http://www.uhms.org/Chapters/GCC/index.htm> under Chapter Meetings

Or contact Tom Workman at [uhmsqara@aol.com](mailto:uhmsqara@aol.com)

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## Preliminary Notice, SPUMS Meeting

### SPUMS 2004

#### Annual Scientific Meeting

Noumea -New Caledonia

Venue - Le Meridien Noumea

May 30th – June 6th 2004

Dr Guy Williams

P.O. Box 190

Red Hill South, Victoria, 3937 AUSTRALIA

Tel +61 3 59811555

Fax +61 3 59812213

[guyw@surf.net.au](mailto:guyw@surf.net.au)

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## Undersea and Hyperbaric Medical Society Annual Scientific Meeting 2004

The Undersea and Hyperbaric Medical Society (UHMS) are holding their 2004 Annual Scientific Meeting in Sydney from Tuesday 25th May to Saturday 29th May 2004.

The Hyperbaric Technical Nurses Association (HTNA) Conference will run concurrently with the UHMS Annual Scientific Meeting on Thursday 27th May 2004.

The Meeting is being held at the Four Seasons Hotel Sydney – formerly known as The Regent, superbly situated right in Sydney Harbour historic Rocks area. The Four Seasons Hotel Sydney is only a short walk from Sydney's major shopping and business districts and affords dramatic views of the famous Opera House and Sydney Harbour Bridge.

The Conference Program will feature a number of outstanding local and international speakers, concurrent sessions, poster presentations and site visits around the Sydney area. The Conference attracts researchers and practitioners from all around Australia and overseas and provides a wonderful opportunity to meet and extend contacts.

For more information on the UHMS Annual Scientific Meeting or the HTNA Conference, please visit the conference website [www.iceaustralia.com/uhms2004](http://www.iceaustralia.com/uhms2004) or contact the conference organizer ICE Australia on (+61-2) 9544 9134 or email: [uhms@iceaustralia.com](mailto:uhms@iceaustralia.com)

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## HAB2004 Conference

"We have just completed an extensive research on the internet to identify the appropriate portals to disseminate information regarding the HAB2004 Conference that we are hosting, in November 2004 in Cape Town, South Africa. Your list/website was one of those that we felt would be a suitable channel to disseminate this information.

I apologise if you get this email twice but your site might have been listed under various keywords on more than one occasion.

We would therefore kindly request that you either add the link <http://www.botany.uwc.ac.za/pssa/> to your website and/or post the following notice to your list/members or under events, calendars or to relevant departments.

### 11th International Conference on Harmful Algae Blooms

14-19 November 2004

Cape Town International Convention Centre

Cape Town, South Africa

[aecon.e@mweb.co.za](mailto:aecon.e@mweb.co.za)

[www.botany.uwc.ac.za/pssa](http://www.botany.uwc.ac.za/pssa)

Harmful algae and their toxins pose a growing global problem for human health, aquaculture, fisheries, seafood trade, tourism and recreation, and the aquatic environment at a time when human reliance on coastal zones for food, recreation and commerce is expanding. The conference will provide a broad forum for phycologists, microbiologists, toxicologists, physiologists, molecular biologists, aquatic biologists and managers to address and exchange research findings and perspectives concerning all aspects of toxic and harmful algae.

HAB2004 will be held on 14-19 November 2004 at the Cape Town International Convention Centre, hosted by the Phycological Society of Southern Africa. The venue for the conference is on the foreshore side of the main city centre and very close to the city centre and the V&A Waterfront area.

The International Conference on Harmful Algae is held every two years under the auspices of ISSHA. This is the first time that it will take place in Africa and is a distinct honour for Cape Town and South Africa. Cape Town is a truly beautiful city with so much to offer visitors."

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## Humor

**Here's one for the day after Valentine's Day:**

THESE ARE ENTRIES TO A WASHINGTON POST COMPETITION  
ASKING FOR A RHYME WITH THE MOST ROMANTIC FIRST LINE,  
BUT THE LEAST ROMANTIC SECOND LINE:

Love may be beautiful, love may be bliss  
But I only slept with you cause I was pissed.

I thought that I could love no other.  
Until, that is, I met your brother.

Roses are red, violets are blue, sugar is sweet, and so are you.  
But the roses are wilting, the violets are dead, the sugar bowl's  
empty and so is your head.

Of loving beauty you float with grace,  
If only you could hide your face.

Kind, intelligent, loving and hot;  
This describes everything you are not.

I want to feel your sweet embrace.  
But don't take that paper bag off of your face.

My darling, my lover, my beautiful wife:  
Marrying you screwed up my life.

I see your face when I am dreaming.  
That's why I always wake up screaming.

My love, you take my breath away.  
What have you stepped in to smell this way?

My feelings for you no words can tell,  
Except for maybe "go to hell."

What inspired this amorous rhyme?  
Two parts vodka, one part lime.

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The CIA had an opening for an assassin. After all of the background checks, interviews, and testing were done there were three finalists... two men and a woman.

For the final test, the CIA agents took one of the men to a large metal door and handed him a gun. "We must know that you will follow your instructions, no matter what the circumstances. Inside this room, you will find your wife sitting in a chair. Kill Her!!!" The man said, "You can't be serious. I could never shoot my wife."

The agent said, "Then you're not the right man for this job."

The second man was given the same instructions. He took the gun and went into the room. All was quiet for about five minutes. Then the man came out with tears in his eyes. "I tried, but I can't kill my wife"

The agent said, "You don't have what it takes. Take your wife and go home."

Finally, it was the woman's turn. She was given the same instructions, to kill her husband. She took the gun and went into the room. Shots were heard, one shot after another. They heard screaming, crashing, banging on the walls. After a few minutes, all was quiet. The door opened slowly and there stood the woman. She wiped the sweat from her brow, and said, "This gun is



loaded with blanks. I had to beat him to death with the chair."

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The following are all replies that British women have put on Child Support Agency forms in the section for listing father's details: These are genuine excerpts from the forms.

01. Regarding the identity of the father of my twins, child A was fathered by Jim Munson. I am unsure as to the identity of the father of child B, but I believe that he was conceived on the same night.

02. I am unsure as to the identity of the father of my child as I was being sick out of a window when taken unexpectedly from behind. I can provide you with a list of names of men that I think were at the party if this helps.

> > >

03. I do not know the name of the father of my little girl. She was conceived at a party at 3600 Grand avenue where I had unprotected sex with a man I met that night. I do remember that the sex was so good that I fainted. If you do manage to track down the father can you send me his phone number? Thanks.

04. I don't know the identity of the father of my daughter. He drives a BMW that now has a hole made by my stiletto in one of the door panels. Perhaps you can contact BMW service stations in this area and see if he's had it replaced.

05. I have never had sex with a man. I am awaiting a letter from the Pope confirming that my son's conception was immaculate and that he is Christ risen again.

06. I cannot tell you the name of child A's dad as he informs me that to do so would blow his cover and that would have cataclysmic implications for the British economy. I am torn between doing right by you and right by the country. Please advise.

07. I do not know who the father of my child was as all squaddies look the same to me. I can confirm that he wore a Royal Green Jacket.

08. Peter Smith is the father of child A. If you do catch up with him can you ask him what he did with my AC/DC CDs?

09. From the dates it seems that my daughter was conceived at Euro Disney maybe it really is the Magic Kingdom.

10. So much about that night is a blur. The only thing that I remember for sure is Delia Smith did a program about eggs earlier in the evening. If I'd have stayed in and watched more TV rather than going to the party at 146 Miller Drive, mine might have remained

unfertilized.

11. I am unsure as to the identity of the father of my baby, after all when you eat a can of beans you can't be sure which one made you fart.

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## Long but worthwhile

Two cars were waiting at a stoplight. The light turned green, but the man didn't notice it. A woman in the car behind him is watching traffic pass around them. The woman begins pounding on her steering wheel and yelling at the man to move. The man doesn't move.

The woman is going ballistic inside her car, ranting and raving at the man, pounding on her steering wheel and dash.

The light turns yellow and the woman begins to blow the car horn, flips him off, and screams profanity and curses at the man.

The man, looks up, sees the yellow light and accelerates through the intersection just as the light turns red.

The woman is beside herself, screaming in frustration as she misses her chance to get through the intersection. As she is still in mid-rant she hears a tap on her window and looks up into the barrel of a gun held by a very serious looking policeman.

The policeman tells her to shut off her car while keeping both hands in sight. She complies, speechless at what is happening. After she shuts off the engine, the policeman orders her to exit her car with her hands up. She gets out of the car and he orders her to turn and place her hands on her car then handcuffs her and takes her to the police station where she is searched, finger printed, photographed, booked and placed in a cell.

After a couple of hours, a policeman approaches the cell and opens the door for her. She is escorted back to the booking desk where the original officer is waiting with her personal effects and says, "I'm really sorry for this mistake. But you see, I pulled up behind your car while you were blowing your horn, flipping the guy off in front of you, and cussing a blue streak at him. I noticed the "Choose Life" license plate holder, the "What Would Jesus Do?" bumper sticker, the ! "Fol low Me to Sunday School" bumper sticker, and the chrome plated Christian fish emblem on the trunk...and I naturally assumed you had stolen the car."

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**Will Rogers**, who died in a plane crash with Wylie Post in 1935, was probably the greatest political sage this country has ever known.

1. Never slap a man who's chewing tobacco.

2. Never kick a cow chip on a hot day.

3. There are 2 theories to arguing with a woman...neither works.
4. Never miss a good chance to shut up.
5. Always drink upstream from the herd.
6. If you find yourself in a hole, stop digging.
7. The quickest way to double your money is to fold it and put it back in your pocket.
8. There are three kinds of men; The ones that learn by reading. The few who learn by observation. The rest of them have to pee on the electric fence.
9. Good judgment comes from experience, and a lot of that comes from bad judgment.
10. If you're riding' ahead of the herd, take a look back every now and then to make sure it's still there.
11. Lettin' the cat outta the bag is a whole lot easier'n puttin' it back.
12. AND FINALLY: After eating an entire bull, a mountain lion felt so good he started roaring. He kept it up until a hunter came along and shot him... The moral When you're full of bull, keep your mouth shut.

### **AND, ABOUT GROWING OLDER.....**

First, Eventually you will reach a point when you stop lying about your age and start bragging about it.

Second, The older we get, the fewer things seem worth waiting in line for.

Third, Some people try to turn back their odometers. Not me, I want people to know "why" I look this way. I've traveled a long way and some of the roads weren't paved.

Fourth, When you are dissatisfied and would like to go back to youth, think of Algebra.

Fifth, You know you are getting old when everything either dries up or leaks.

Sixth, I don't know how I got over the hill without getting to the top.

Seventh, One of the many things no one tells you about aging is that it is such a nice change from being young.

Eighth, One must wait until evening to see how splendid the day has been.

Ninth, Being young is beautiful, but being old is comfortable.

Tenth, Long ago when men cursed and beat the ground with sticks, it was called witchcraft. Today it's called golf.

And finally, If you don't learn to laugh at trouble, you won't have anything to laugh at when you are old.

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## Senior Dating

Mary and Edna, two widows, are talking.

Edna says, Mary, "That nice George Johnson asked me out for a date . . . I know you went out with him last week, and I wanted to talk with you about him before I give him my answer."

Mary replies, "Well . . . I'll tell you. He shows up at my apartment punctually at 7 PM. And dressed like such a gentleman in a fine suit. And he brings me such beautiful flowers! Then he takes me downstairs, and what's there but a beautiful car . . . a limousine, uniformed chauffeur and all. Then he takes me out for dinner. . marvelous dinner - lobster.

Then we go see a show . . let me tell you, Edna, I enjoyed it so much I could have just died from pleasure! So then we are coming back to my apartment and he turns into an ANIMAL. Completely crazy, he tears off my expensive new dress and has his way with me two times!"

Edna: "Goodness gracious! . . . so you are telling me I shouldn't go out with him?"

Mary: "No . . . I'm just saying, wear an old dress."

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## DOCTOR

Fred goes to a doctor and says, "Doc, I want to be castrated."

The doctor says, "Look, I don't know what kind of cult you're into or what your motives are, but I'm not going to do that sort of operation."

Fred replies, "Doc, I just want to be castrated and I'm a little embarrassed about talking about it, but I have \$5,000 cash right here. Will you do it?"

The doctor says, "Well, okay, I guess I could make this one exception. I don't understand it, but all right."

He puts Fred to sleep, does the operation and is waiting at the bedside when Fred wakes up. "Well, Doc, how'd it go?" Fred asks.

"It went fine, just fine. It's really not too difficult of an operation. As a matter of fact, \$5,000 is a lot to pay for such a simple task and I felt a little guilty about taking that much. So, while I was operating, I also noticed that you had never been circumcised, so I went ahead and did that, too. I think, it's really better for a man to be circumcised, and I hope you don't mind my..."

"Circumcised!" yells Fred. "That's the word!"

---

A small wild animal park acquired a very rare species of gorilla. Within a few weeks, the gorilla, who was a female, became very difficult to handle.

Upon examination, the park veterinarian determined the problem. The gorilla was in heat. To make matters worse, there was no male gorilla available.

Reflecting on their problem, the park administrator thought of Eddie Standen, a redneck part-time intern, who was responsible for cleaning the animal's cages. Eddie, like most rednecks, had little sense, but possessed ample ability to satisfy a female of any species.

The park administrator thought they might have a solution. Eddie was approached with a proposition.

Would he be willing to have sex with the gorilla for \$500.00? Eddie showed some interest, but said he would have to think the matter over carefully.

The following day, Eddie announced that he would accept their offer, but only under the following four conditions.

"First," he said, "I don't want to have to kiss her on the lips.."

The park administrator quickly agreed to this condition.

"Second," Eddie said, "You must never tell anyone about this." The park administrator again readily agreed to this condition.

"Third," Eddie said, "I want all the offspring to be raised Southern Baptist".

Once again the administrator agreed.

"And last of all," Eddie stated, "You've got to give me another week to come up with the \$500.00."

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## **Gas Station Promotion**

A gas station in "redneck country" was trying to increase its sales so the owner put up a sign saying "FREE SEX WITH FILLUP." Soon Bubba pulled

in, filled his tank, and then asked for his free sex.

The owner told him to pick a number from 1 to 10, and, if he guessed correctly, he would get his free sex. Bubba guessed 8 and the proprietor said, "No, but you were close. The number was 7. Sorry, no free sex this time, but maybe next time."

Some time thereafter Bubba and his friend, Billy Ray, pulled in again for a fill-up, and again Bubba asked for his free sex. The proprietor explained the same rules, and asked him to guess the correct number. Bubba guessed 2 this time and the proprietor said, "Sorry, it was 3. You were close, but no free sex this time."

As they were driving away, Bubba said to Billy Ray, "I think that game is rigged and he doesn't really give away free sex."

Billy Ray replied, "No tain't, Bubba! It's not rigged -- my wife won twiced last week."

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## Steady Diet?

A doctor was addressing a large audience in Tampa. "The material we put into our stomachs is enough to have killed most of us sitting here, years ago. Red meat is awful. Soft drinks corrode your stomach lining. Chinese food is loaded with MSG.

High fat diets can be disastrous, and none of us realizes the long-term harm caused by the germs in our drinking water. But there is one thing that is the most dangerous of all, and we all have -- or will -- eat it. Would anyone care to guess what food causes the most grief and suffering for years?"

After several seconds of quiet, a small 75-year-old man in the front row raised his hand and offered, "[W](#)edding cake?"

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## God Said

**God said, "Go down into that valley." And Adam said, "What's a valley?" and God explained it to him.**

**Then God said, "Cross the river" And Adam said "What's a river?" and God explained it to him.**

**And then God said, "Go over the hill." And Adam said, "What's a hill?" and God explained it to him.**

**Then God told Adam, "On the other side of the hill, you will find a cave," and Adam said, "what's a cave?" and God explained that to him.**

**"In the cave you will find a woman." And Adam said, "What's a woman?" So God explained that to him, and said, "I want you to reproduce."**

**And Adam said, "How do I do that?" So God explained it to him.**

**So off went Adam,  
down into the valley,  
across the river,  
and over the hill,  
and into the cave,  
and found the woman,  
and in about five minutes he was back.**

**God said angrily, "What is it now?"**

**And Adam said, "What's a headache?"**

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## **How To Clean Your Toilet**

1. Lift both lids on your toilet bowl and add a couple of capfuls of shampoo to the water.
2. Go to the other room where the cat is sleeping, pick it up and soothe it gently while you carry it to the bathroom.
3. In one smooth movement, put the cat in the toilet and close both lids (You may need to stand on the lid, afterwards). The cat will self agitate and make ample suds. (Never mind the noises that come from the toilet, the cat is actually enjoying this.)
4. Flush the toilet three or four times. (This provides a "power-wash" and "rinse")
5. Have someone open the closest door to the outside (Be sure that no one is between the toilet and the door.)
6. Stand behind the toilet and quickly lift both lids.
7. The cat will rocket out of the toilet and run outside where it will dry itself. After this procedure, both the toilet and the cat will be sparkling clean!

Sincerely, The Dog

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Let me know if you have any announcements, tips, links, articles or responses to any of the material in our newsletter.



Best regards for safe diving!

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