

from the
Executive Director



Jacqueline
Rychnovsky, PhD,
RN, CPNP, FAANP

Captain (ret.), Nurse
Corps, US Navy

Excited to Take the Reins

Just over three years ago, on April 13, 2017, my Change of Command ceremony as the Commanding Officer of the Naval Medical Research Center in Silver Spring, Maryland occurred. On that day, after 27 years of active duty service as a Navy Nurse Corps Officer, I hung up my uniform for the last time and transitioned to a new career in management at a nursing association of which I had been a member for years. I have learned so much during these past three years while sitting on the other side of the table, letting go of my uniformed life while embracing a fascinating new role as an association leader. One thing I learned early on is that there is an association for everything, including an association for association professionals!

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COA/COF Gains New Executive Director

by RADM Sven Rodenbeck (ret.), ScD, PE; CAPT Karen Munoz, RN, BSN, MS

On April 24 the leadership of COA and COF jointly announced that Jacqueline Rychnovsky, PhD, CAPT, USN, Ret., had been selected as the Executive Director of the Commissioned Officers Association of the United States Public Health Service (COA) and the Commissioned Officers Foundation for the Advancement of Public Health (COF). CAPT Rychnovsky succeeds Colonel James T. Currie, PhD, USA, Ret., who in May 2019 announced his intent to retire. CAPT Rychnovsky was selected by a joint COA/COF Search Committee after a rigorous and extensive nationwide search.

Dr. Rychnovsky received her Master of Science in Nursing from the University of Florida and her Doctor of Philosophy in Clinical Nursing Research from the University of San Diego. Her professional experience includes more than thirty years in a variety of sectors, including leadership of national healthcare advocacy, healthcare organizations, and service in the United States Navy. Prior to accepting the position with COA/COF, she served as the Vice President, Research, Policy & Strategic Initiatives for the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN).

CAPT Rychnovsky started her career in the Navy as a nurse and held positions of increasing authority and responsibility, including Assistant Director, Nurse Corps Policy and Practice for the U.S. Navy Bureau of Medicine and Surgery; legislative fellow in the office of Sen. Daniel K. Inouye (D-HI); Chief Operating Officer at Naval Hospital Yokosuka, Japan; and Chief Executive Officer of both the Naval Health Research Center in San Diego and the Naval Medical Research Center in Silver Spring, MD. She retired from the Navy in 2017 after a distinguished and groundbreaking career.

"I'm looking forward to this incredible opportunity to further the mission of the COA/COF and build upon the great work of my predecessors" said Rychnovsky. "The thing I've missed the most since retiring from the Navy is not working side-by-side with fellow uniformed officers. It will be an honor to serve in this capacity."

"I am so pleased to be succeeded by someone with such a stellar background as CAPT Rychnovsky," said Col. Currie. "I'm confident she will do an outstanding job as the COA/COF Executive Director, and I wish her the greatest success in the years to come."

The Board of Trustees of the COF and the Board of Directors of the COA, on behalf of its members, expressed their deepest appreciation and gratitude to Col. (Ret.) Currie for his six years of dedicated service and extraordinary accomplishment as Executive Director of both organizations. We look forward to continued success, said the COA/COF leadership, under CAPT Rychnovsky's leadership in our mission of advancing the cause of public health and fulfilling the promise of the Commissioned Corps of the USPHS as America's frontline uniformed service safeguarding and promoting our nation's health.

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Legislative Update Rethinking COA's Legislative Affairs Committee

by Judy Rensberger

For all of the fifteen years I have worked for COA, we have had a Legislative Affairs Committee. Formerly called the Legislation and Benefits Committee, it always has been COA's largest and most active committee. It has been blessed with very capable leadership (most recently, CAPT Paul "P.J." Jung) and very engaged members. Major legislative victories have included a successful campaign to convince Congress to approve GI Bill transferability for USPHS officers, who were left out of the original legislation. Most recently, Congress has authorized a USPHS Ready Reserve. That happened when the COA-backed USPHS Ready Reserve proposal was incorporated into the massive legislation known as the CARES Act and passed at the end of March (see Frontline for April 2020).

Next Up

We have thanked everyone, and we have taken a leisurely victory lap. So, what is next? Now may be the best possible time to take a hard look at the Committee and its operation and see if we can find ways to improve our game, extend our reach, and enhance our impact – while at the same time promoting the implementation of a USPHS Ready Reserve sooner rather than later.

Please share your thoughts with us if you have served on COA's Legislative Affairs Committee recently or at any time in the past. We are especially interested in hearing from you if you have, in addition, deployed in response to COVID-19 or any other major public health disaster.

Authorization v. Implementation

A USPHS Ready Reserve that is "authorized" does not necessarily mean one that will be implemented any time soon. Implementation is the next challenge, and yet it's something over which COA has no real leverage. We understand the USPHS Ready Reserve will likely be comprised of 2,500 officers. We have no details regarding a timetable, no sense that the matter is now under active discussion anywhere. But we also have no reason to believe that ADM Brett Giroir, Assistant Secretary for Health, is not genuinely eager to see the USPHS Ready Reserve become a reality. He has supported the concept from the get-go. He fully understands the need. But, realistically speaking, how much is likely to be accomplished in the context of a nation that is essentially shut down because of a highly infectious disease that virtually no one had heard of just six months ago?

CGA Pistol Coaching as a US Public Health Service Officer and Coast Guard Dental Officer



Cadets run through an air pistol practice match.

by LCDR Kindel Kaelke, *Coast Guard Academy Dentist*

Serving in the United States Public Health Service Commissioned Corps provides many unique paths. As a clinician, there is the opportunity to serve in urban, rural, vastly rural, and in one very distinctive academic setting. This academic setting is the US Coast Guard Academy (USCGA) in New London, CT. There are several ways to become involved with the community as an officer, and due to this location's unique combination of academic institution and active duty Coast Guard unit, there are several opportunities only available there.

Daily, U.S. Public Health Service (USPHS) officers serve in clinical roles fulfilling cadet and active duty members' dental, medical, and behavioral health needs. What officers learn upon attending a new officer orientation meeting with CAPT Vann, Assistant Superintendent, is that in addition to clinical roles, there is also the ability to be a visual example of what an officer should be. In addition to behavior and dress, there are many ways to get involved with the students. One such way that PHS Dental Officer, LCDR Kindel Kaelke, has chosen to be involved is volunteering to be the Assistant Coach for the Varsity Pistol & Rifle Team for the 2019-2020 school year.

LCDR Kaelke reported to the US Coast Guard Academy in July

2019. Prior to her arrival, she had practiced in a Community Health Center in the greater Kansas City area. While the facility was a rotation site for the local dental and hygiene schools, it was not located in an academic setting. Being an Assistant Coach for the Coast Guard Academy's Rifle & Pistol Team has been a tremendous personal and professional development opportunity.

While LCDR Kaelke had no prior experience with competitive pistol shooting, she had been a competitive athlete, so she discussed with head coach Richard Hawkins the idea of being present to talk through mental aspects of competition. Coach Hawkins agreed to take on LCDR Kaelke, and then the real learning about shooting began. From day one, it was easy to see the camaraderie and family-like atmosphere of the team. Many cadets came from competitive shooting clubs in their home state and specifically chose the Coast Guard Academy for its shooting program. Two members are Olympic hopefuls and will leave a lasting legacy for the USCGA community.

The USCGA team and operates and trains as a single unit, never failing to assist each other, regardless of being a beginner or at the Olympic level. Demonstrating genuine esprit de corps, the team work ethic continued outside the range door. The team was in constant contact to help one another during academic

see **PISTOL** continued on page 18



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May COA Board Chair

Recording this Moment in History



by CAPT Karen Munoz, RN, BSN, MS

We are living in an unprecedented time. Obviously, there have been other public health crises throughout the last 100 years, but none have been so widespread and so global, and never has a crisis occurred during a time of such boundless interconnectedness. Social media and technology give us 24/7 access to each other, albeit from afar. However, this also means that much of the documentation of this crisis will be in an electronic format.

You may know that the U.S. Public Health Service used to have a full-time historian, John Parascandola. This position has not existed since he retired from service. So, I have a challenge for each of you to make sure this time in history is not forgotten. It is up to us to record and remember this moment in history. Make sure the role of the Public Health Service and your individual contribution is not forgotten.

Thirty years from now your children and grandchildren may be hearing stories about your deployment in the spring of 2020. Fifty years from now, it may be your grandchildren or great grandchildren who will be hearing stories about the pandemic of 2020 and their relative's role in that historical event. (If yours is anything like my family, the stories may even evolve into some tall tales!)

Write it down. Keep a journal of your experiences, your thoughts, or your contributions. Print out some of those cell phone photos that you have captured. Save a few newspaper clippings. If you

have published anything, print it out and file it with your treasured papers. If you make a homemade mask, then save it in a treasure box (wash it of course!). What is happening now will perhaps be in a museum, alongside photos and artifacts from the Civil War or WWII. Help preserve some of these memories for future generations. Stay safe and stay well.

COA asked members for their thoughts and feeling about this pandemic. Here are some of their responses:

"It is so surreal. It's like a sci-fi movie, but it is real life. And we are the good guys."

"I'm scared, but I also know that my training and my tools and my team will help protect me if have to go into a hot-zone."

"I'm cautiously optimistic that the pandemic is improving. I think the biggest lesson learned is that we much act quickly and prepare for the next pandemic, even when all appears well in our communities"

"The COVID-19 pandemic is truly a silent war and true to the PHS March, "In the silent war against disease, no truce is ever seen." So...we Fight!"

"It is incredible to see my leadership on the TV every day. I can't say much about the briefings in general, but our leaders are well-spoken, smart, and doing an awesome job representing us!"

"I hope that our legislators finally realize that they have to fund public health, because this can crush us like no bomb ever could."

DoD Interdisciplinary Presentation at 2020 BOP Rehabilitation Service Symposium

by LT Courtney Wood, MEd, CCC-SLP

The Federal Bureau of Prisons (BOP) hosted its annual National Rehabilitation Service Symposium on February 26, 2020, in Aurora, CO. During this conference, USPHS therapy officers and civilian providers assigned to the Department of Defense (DoD) Warrior Recovery Center (WRC) at Fort Carson in Colorado Springs, CO, and USPHS therapy officers and civilian providers assigned to the BOP shared therapeutic approaches for the traumatic brain injury (TBI) population. This collaboration between agencies provided great insights into best practices for the TBI population.

According to the Centers for Disease Control and Prevention (CDC), up to 87% of inmates have experienced a concussion or TBI. Furthermore, the prison population who experienced concussive events also show signs and symptoms of depression, anxiety, substance use disorders, attention deficits, memory deficits, difficulty with emotional regulation, and suicidal ideations. When interacting with this at-risk population, each professional is best served by maintaining essential education and best practices for successful outcomes.

The USPHS therapy officers, as well as the civilian providers who are a part the WRC rehabilitation team, are specialists in TBI and post-concussive



Ms. Kathleen Sanders, MT-BC; LCDR Selena Bobula, DPT, NCS, OCS; LT Courtney Wood, MEd, CCC-SLP; CAPT Alicia Souvignier, DPT, GCS; Mrs. Erin Salazar, LCSW; and LCDR Narisa Tappitake, MOTR/L, CHT, CLC in front of the National Corrections Academy in Aurora, Colorado.

rehabilitation. In a day-long presentation at the BOP National Rehabilitation Services Symposium, WRC professionals presented the "Interdisciplinary Treatment Program for Concussive Patients." The WRC team of both USPHS officers and civilian providers delivered a full spectrum of education and training of rehabilitation services for the TBI population, such as physical therapy, occupational therapy, cognitive-communication therapy, behavioral health services, music therapy, and sleep hygiene. Likewise, the WRC's in-depth instruction about the interdisciplinary approach to intensive outpatient group therapy.

Throughout the day, each USPHS therapy officer and civilian provider assigned to the WRC provided evidence of best practices in their specialty. During this presentation, all professionals were able to collaborate as a team to best address the needs of at-risk populations and were able to contribute to advancing the health and safety of the nation.

References

Traumatic brain injury in prisons and jails: An unrecognized problem (2020). Centers for Disease Control. Retrieved from https://www.cdc.gov/traumaticbraininjury/pdf/Prisoner_TBI_Prof-a.pdf

COVID-19 and The Bucket List

James R. Minor, CAPT, USPHS, Retired

The novel Coronavirus-19 pandemic has changed life as we know it, especially for those of us who have devoted our entire professional careers to “promoting, protecting, and advancing” the public health and well-being of our nation and our world.

In 1981 I was a pharmacist PHS commissioned officer transferred from the USPHS Hospital in Seattle, WA, to the National Institutes of Health, where I was on the leading edge of the domestic and global HIV/AIDS pandemic. I was assigned as the Clinical Pharmacy Practitioner to the Intramural Research Program of NIAID, under the leadership, and mentorship, of Dr. Anthony Fauci. As we all grapple with the current COVID-19 pandemic, I have been reflecting on the parallels between then and now—the biomedical/scientific, societal, and geo-political challenges we all are facing and working through together.

During one of my recent late-night musings, I reflected on the movie *The Bucket List*, in which actors Jack Nicholson and Morgan Freeman portray two terminally ill men who leave a cancer ward and embark on a road trip. They each have a list of things they want to do before they die. After originally seeing that movie, I created a Bucket List of my own, and I maintain this list to this day.

Most of the items on my “Bucket List” remain private, but I’d like to share two of them. At the top of that list was my personal goal of climbing to the peak of the Grand Tetons, the magnificent mountain range in the Northern Rockies of Wyoming, where our oldest son Jeremy lives. Understanding the physiological demands of physical exertion at altitude, and the challenges of technical rock climbing required for the final ascent of the Grand Teton (13,700 feet above sea level), I trained hard for almost a year before embarking on this adventure.

In August 2007, my son and I set out. We were joined on this two-day climb by one

of our son’s local friends, an experienced mountain-climbing guide. My training paid off, and Day One of the climb was strenuous, but uneventful. We bivouacked overnight at 10,000 feet and arose at 4:00 the next morning for the final ascent. Setting out in total darkness, our path illuminated by headlamps, we reached the saddle between the South Teton and the Grand Teton, at approximately 12,000 feet, just before sunrise.

At that elevation and on these peaks, you can look westward into Idaho. In the distance, we saw an approaching thunderstorm, bringing heavy rainclouds, thunder, and lightning. At that point, our guide, Brian, looked at me and said, “Mr. Minor, I know how much this climb means to you and Jeremy, but that’s a dangerous storm heading our way and we really shouldn’t continue going up.” I replied, “Brian, I know that being this high with all this gear makes us human lightning rods, so don’t feel bad. You don’t have to tell me more than once that we need to turn back.” As we rested a few moments before turning downwards, I looked in awe through the early-dawn sunlight at the peak of “The Grand,” which loomed about 1,000 feet above our heads. I thought to myself, “Here we are, so very close, and yet so far away. Maybe we’ll be back, maybe not. In any event, I know you’ll still be here.”

So, I surrendered unfulfilled Quest Number 1 on my Bucket List to an “Act of God.” And who knows, maybe I/we will make it back for a second attempt, someday.

Back to my Bucket List. Another of my very special quests, which was both personal and professional in nature, would have occurred this June in Phoenix. On Category Day of our 55th Annual US Public Health Service Scientific and Training Symposium, the paper I submitted for presentation to the pharmacist category would have marked my fiftieth consecutive podium presentation before my category at our annual flagship conference of the Commissioned Corps.

But with the emergence of COVID-19, #50 for me was not to be.

This, by my choice, would have been my final Category Day presentation. The time has come for me to step down now and yield the podium to our cadre of excellent, superbly-qualified junior officers and others, allowing them to share their amazing individual and collective projects and initiatives which advance public health and contribute to the important work of the pharmacy category and the Commissioned Corps.

I strongly encourage all junior and mid-career officers to make time along your career path to share your work and best practices with your peers, both as oral presentations to garner public speaking experience at professional meetings, and as written manuscripts submitted for publication in peer-reviewed professional publications. You can and should do this!

The pandemic certainly altered our complex planning efforts for the 2020 Symposium, as it has altered the lives of everyone affiliated with the Commissioned Corps. Our Symposium was rightly cancelled and has now been rescheduled for June 21-24, 2021, at the Phoenix Renaissance Resort and Hotel.

Though COVID-19 caused us to set aside for now the innumerable man-hours of programmatic and logistical planning for our 2020 Scientific and Training Symposium in Phoenix, all is not completely lost. We can now consider the completely new educational content that will be forthcoming from those of our officers who deployed into the eye of the COVID-19 storm, across our nation and elsewhere. In a major show of professional partnership with our foundation and financial support for our annual Symposium, many who had registered to be 2020 conference exhibitors and sponsors have already transferred their registrations to 2021.

This gives me hope that our 2021 Symposium will be the biggest and best yet. I would encourage officers across all our categories, active duty and retired, to

see **BUCKET** continued on page 7

RADM (Dr.) Blue Spruce Wins Award

by COL James T. Currie, PhD, Colonel, USA (ret.)

COA is pleased to announce that long-time member RADM (Ret.) George Blue Spruce, Jr., DDS has been named the 2021 recipient of the “Lifetime Achievement Award” by the Josiah Macy Jr. Foundation.

The citation to accompany the award stated:

“George Blue Spruce, Jr., DDS, MPH, the first Native American Dentist in the United States, realizes that as a trailblazer he bears the responsibility of illuminating the health professions pathway for American Indian children who are unaware the path exists. He has dared American Indian children to become a dentist, and his unique leadership has left a legacy promoting social mission in health professions education.”

The award will be presented at the Beyond Flexner 2021 Conference in Phoenix, AZ,

at a special recognition event the evening of April 26, 2021. The Josiah Macy Jr. Foundation Awards recognize outstanding leadership in promoting social mission in health professions education. Social mission is defined as activities or initiatives that teach, model, or improve community engagement, diversity, disparities reduction, value-based care, or engagement with the social determinants of health. Social mission enhancement means making programs not only better, but fairer.

RADM (Ret.) Blue Spruce has been recognized as the country’s first American Indian dentist. He was also the first American Indian dentist to receive an MPH degree. He is a member of the Ohkay-Owingeh and Laguna tribes of New Mexico.

RADM (Ret.) Blue Spruce was born and raised at the Santa Fe Indian School. He graduated in 1949 from Saint Michael’s High School in Santa Fe. The U.S. Navy



paid for his dental education, and he was commissioned as a Navy dentist. He served as dentist for the crew of the USS Nautilus, the first nuclear-powered submarine.

During his twenty-eight year career in the U.S. Public Health Service he was

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add an item to your own short-term Bucket List: Attend the 2021 USPHS Scientific and Training Symposium.”

My own Bucket List remains a living document, with its multiple existing quests. New quests come onto it and existing ones drop off as life goes on. I challenge all my fellow commissioned officers to create a Bucket List, if you haven’t already done so. Nurture it and watch it grow as you would any living thing, and let it become a guide for your personal and professional development.

The late Christopher Reeve (aka Superman) said it well: “Misfortune can force you into doing things you should be doing anyway. Lessons come from adversity. Anything can happen to anyone. You can find a new lease on life--more meaning than you thought possible in simple things. Let go. Live in the moment. Go forward.”

Good words to remember. Work hard every day to affect the quality, or maybe even the quantity, of life for just one person, and never forget the value of finding humor in every day, no matter how dark circumstances may appear.

Working together, we will get through this pandemic and be stronger for our efforts. In several ways, we will all see Phoenix rise again, from the ashes left behind in the heated and costly battle against COVID-19. And then we can all get back to the Bucket Lists of our individual lives.

“Live well and Prosper” is a good motto for all our Bucket Lists.

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Thank You, Colonel Currie

by COA Executive Committee

The Commissioned Officers Association of the USPHS and Commissioned Officers Foundation for the Advancement of Public Health mark the end of the tenure for outgoing Executive Director Colonel James Tyson Currie, U.S. Army Retired, who is retiring after six years at the helm of both organizations. Jim joined COA/COF in March of 2014 and has been a strong advocate and supporter of our members and uniformed service from the first day. He plans to spend the next stage of his life writing and traveling. The Boards of COA and COF are indebted to Jim for his leadership and wish him fair winds and following seas.

Jim Currie leaves behind a legacy of steadfast determination and unwavering support and defense of PHS that will not be forgotten. Jim once said, "He didn't fall in love with the Public Health Service because of what he read or heard about it, but once he met the officers, he was convinced." Jim learned of members' daily work and dedication to the PHS mission, carried out consistently throughout the federal government. Jim's tenacity and tremendous high regard for Commissioned Corps officers has resulted in some notable accomplishments through the years.

As Executive Director, Jim had a vision of increased recognition for PHS officers and achieving parity with our sister services. He built coalitions of support for members, which resulted in COA/COF becoming a permanent member of the Veterans Day National Committee and our yearly participation in Memorial Day and Veterans Day ceremonies at Arlington National Cemetery. Through his leadership within The Military Coalition, Jim was able to generate support for issues facing the Public Health Service. This led to significant accomplishments such as the recent reinstatement of the USPHS Reserve Corps, inclusion of the PHS in the Military Compensation and Retirement Modernization Commission, and defeated



the Office of Management and Budget's proposal to significantly cut the Commissioned Corps. Among his other accomplishments, Jim achieved discounts for us at Lowe's and Disney and advocated for pay and benefit parity with DoD. He fought for our inclusion in the Smithsonian's National Native American Veterans Memorial. Jim reduced costs of operating the association and increased revenue, protecting the future of the organization.

A line from the PHS March states "The Mission of our Service is known the world around." Through his advocacy, letter writing, and networking, Jim Currie helped to improve the recognition of PHS he envisioned. Please join me in a fond farewell to COA/COF's fearless front man. We will miss you Jim!

If you would like to pen a farewell or thank you letter for inclusion in a going away package for Colonel Currie, please mail it to:

COA Board Chair -
c/o Karen Munoz
PO Box 1063
Savage, MD 20763



USPHS Officer Leads Intranasal Naloxone Training to Hundreds

by y CDR Robert Boyle, PharmD, BCPS, NCPS

The Salt River Pima-Maricopa Indian Community (SRPMIC) held the StrongLife health screening and education event which included a mass intranasal naloxone training on January 11th, 2020. CDR Robert Boyle, PharmD, in collaboration with other clinic staff, trained over 450 people and dispensed over 280 intranasal naloxone kits to community members. This event was part of a multi-pronged effort to increase opiate safety in the community. Other efforts by this team to implement the Surgeon General's Advisory on naloxone include: mandatory naloxone prescriptions for all chronic opioid recipients, naloxone presentations to the Tribal Council, presentations and dispensing at caregivers conferences, participation in the "Not One More" campaign and utilizing guidelines as provided by the Indian Health Service (IHS) National Committee on Heroin Opioids and Pain Efforts (HOPE) and Pharmacist Opioid Overdose Response Training (POORT) Initiatives.

CDR Boyle utilized a group discussion model to lead the naloxone class. After participants had completed the other sections of the wellness fair, they were seated in rows in the pharmacy



CDR Robert Boyle teaching community members about intranasal naloxone

waiting area where they received their free naloxone kits on their chairs. As they watched a brief video on how to use intranasal naloxone, they were encouraged to open their naloxone boxes and become familiar with the contents inside. CDR Boyle and the team agreed that the best handout for the event would be the one that comes with the intranasal kit as this is the information end-users

would have at their fingertips. Following the video, the team provided a brief demonstration and then spent the rest of the time directly answering questions and having participants teach back what they had learned. The discussion was well received and there was an increase in community members presenting to the pharmacy requesting naloxone kits in the weeks thereafter.

SPRUCE from page 7

Director of Dental Programs at the U.S. Merchant Marine Academy and was a consultant to the World Health Organization. He ended his federal career as Regional Director of Indian Health Services for the forty-two tribes in Arizona, Utah, and Nevada.

RADM Blue Spruce retired in 1986. He founded the Society of American Indian

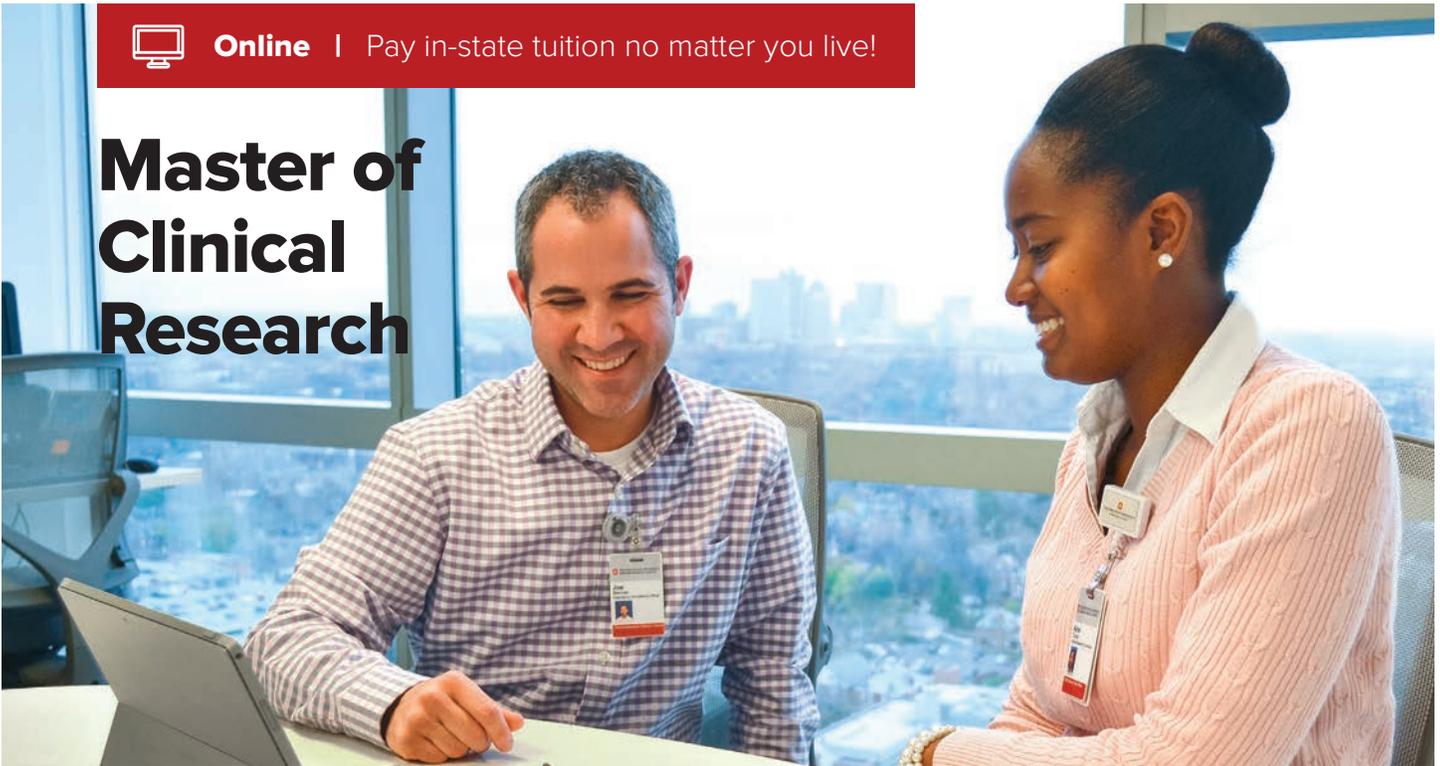
Dentists in 1990 and was President of the organization for sixteen years. He now serves as "President Emeritus." He is the Assistant Dean for American Indian Affairs at the Arizona School of Dentistry and Oral Health. He has been honored many times for his advocacy work on behalf of all American Indians, including being named Creighton University's "Alumni of the year" in 1984.





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current student**

Pandemic Adjustments: PHS Lecture at Connecticut College & Excellence in Public Health Service Award Recognition at Boston University School of Medicine Graduation

by CAPT Esan O. Simon, MD, MBA, FS, USPHS

As the world continues to grapple with the effects of the COVID-19 pandemic, many of our PHS colleagues are deployed or engaged in activities at their home agencies that directly contribute to the response. As this work continues, various downstream impacts from the pandemic have affected our daily lives, whether at work or at home. Social distancing requirements result in the increasing requirement to telework and adapt to new work environments. One such adaptation occurred on April 17, 2020, when U.S. Coast Guard Academy (<https://www.uscga.edu/>) Medical Director and PHS Physician CAPT Esan Simon presented a lecture at Connecticut College's PBH 201 Thematic Inquiry class (<https://www.conncoll.edu/at-a-glance>) on "The U.S. Public Health Service: Protecting, Promoting and Advancing the Health & Safety of Our Nation."

As part of the Connecticut College Pathway in Public Health integrated curriculum, class PBH 201 is a seminar-style course which introduces students to themes in public health through seminars and workshops with Connecticut College faculty, visiting faculty, and alumni. It provides students a broad understanding of the field of public health and helps students learn about opportunities for experiential learning at both local and global levels¹. Coordination for the PHS lecture was initiated in 2019, well before the pandemic, and the initial plan was for an in-person lecture with follow-up lunch and discussion with students. However, with pandemic adjustments in full effect at Connecticut College, students transitioned to distance learning almost two months prior to the presentation. The lecture was delivered via CISCO WEBEX to thirty-eight students around the country. Topics ranged from PHS history to mission, organizational structure, crisis response, and examples of departments and agencies to which PHS Officers are assigned. The ninety minute session concluded with a question-and-answer period with the students.

Ironically, that same day the Boston University School of Medicine (BUSM) held its graduation ceremony for fourth year medical students. Selected from some 100 medical school award nominees from around the country, the overall winner of the annual



CAPT Esan Simon Lecturing to Connecticut College Students

PHS Excellence in Public Health Service Award was a BUSM student. As the U.S. Coast Guard Academy in New London, CT, is only an hour-and-a-half from Boston, initial plans for an in-person award presentation and congratulations from Coast Guard Academy Medical Director CAPT Esan Simon were altered due to pandemic impacts. With the BUSM graduation proceeding in a virtual/hybrid format, a congratulatory recording was made for this well-deserving student and presented as one of the graduation activity's recognition events.

As effects from the COVID-19 pandemic will have an impact on us for an unknown period of time, PHS Officers can continue our mission of protecting, promoting, and advancing the health and safety of our nation in ways perhaps previously unexplored. Officers are encouraged to seek such opportunities.

Footnotes: 1. Accessed April 18, 2020 from: <http://conncoll.smartcatalogiq.com/en/2019-2020/Catalog/Majors-Minors-Center-Certificates-and-Integrative-Pathways/>

National Veteran's Golden Ages Games Visit Alaska

by LCDR Penelope Adams

For its 33rd year, the National Veteran's Golden Ages Games (NVGAG) came to Anchorage, AK, June 5-10 2019. What began in 1985, in Albany, GA, with 115 competitors has grown to 733 veteran athletes, from forty-seven states this year. Veterans need to be at least fifty-five years old and eligible for VA healthcare to participate in the NVGAG. The NVGAG are the largest multi-sport competition for this age- group of military veterans in the world.

Nine different sports venues around Anchorage were used, with 1,298 volunteers contributing 17,723 hours of time. Events included: air pistol, air rifle, badminton (singles and doubles), basketball (3- on-3, free throw), blind disc golf, bocchia (singles and doubles), bowling, cycling, field events (discus, javelin, shot put), golf, horseshoes, nine ball, pickle ball, power walk, shuffleboard, swimming, table tennis and track. This year's exhibition event(s) were corn hole and chess.

CDR Rick deHoop and LCDR Penelope Adams, members of the Aurora Borealis COA, were two of the volunteers. Both participated as roving medical volunteers at several events (golf, pickle ball, bocchia, ping pong, shuffleboard). LCDR Adams said one of the best parts of being a volunteer was getting to play some of the games with the veterans between competitions. "One of the veterans taught a group of us how to play bocchia. I also had the

see **ALASKA** continued on page 13



A highlight during the golf event was the release of a rehabilitated eagle before play started.



On behalf of each of the attorneys and staff of the Law Offices of David P. Sheldon, PLLC

We wish to thank each and every member of the United States Public Health Service.

Your commitment to keeping all Americans safe has never meant more.

We are blessed to have such wonderful, dedicated officers who have one goal and that is to serve this great Nation honorably—and you have done that each and every day.

We are truly grateful for your dedication to your duties.

Thank you.

*Attorneys Shannon James & David P. Sheldon
& the Law Offices of David P. Sheldon, PLLC
Washington, DC*

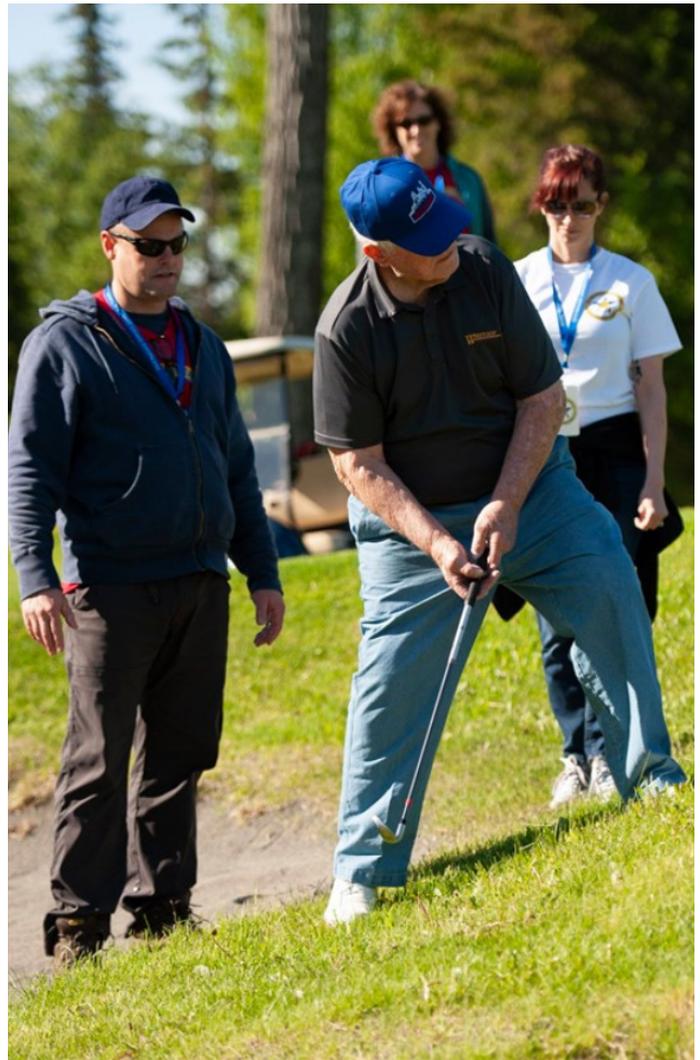
ALASKA from page 12

opportunity to play ping-pong with a veteran in a wheelchair. To get the true experience he suggested I sit in a chair to play.”

CDR deHoop said, “As a former active duty Marine and current officer in the USPHS, it was an honor to provide medical support for a WWII Marine hero as he navigated the golf course. The 2019 National Veterans Golden Age Games were an inspiring and unique opportunity to serve those who have provided our country with the many freedoms we enjoy today.”

Over the years, competitive events at the National Veterans Golden Age Games have been adapted to meet specific needs of the participants. Since many veterans face medical challenges, events were added for those who use wheelchairs and those with visual impairments. With participants having varying degrees of physical conditioning, motor and cognitive skills, basic competition rules have been adapted. This allows non-ambulatory and visually impaired veterans to participate in separate divisions where needed and with ambulatory and sighted veterans when possible. There are eight age categories and three divisions: ambulatory, visually impaired, and wheelchair. The oldest participant this year was 101 years old.

Every year the NVGAG are held in a different city with a new hosting VA medical facility. This year the National Veterans Golden Age Games were to be held in Madison, WI, from June 22-27, 2020. With concern for the health, safety, and well-being of vulnerable populations, like older veterans and those with underlying medical conditions, as identified by the Centers for Disease Control and Prevention, the VA has made the decision to cancel the 2020 games. You can check the website <https://www.blogs.va.gov/nvspse/national-veterans-golden-age-games/> for updates on ways you can volunteer at the 2021 National Veterans Golden Age Games.



CDR Rick deHoop and LCDR Penelope Adams assist a golfer along the course



Dependent Scholarship Call for Applications

**The application portal opens on June 15.
Deadline of July 19.**

Children, grandchildren, and spouses of COA members who are registered students for undergraduate or graduate study in the United States are encouraged to apply for the COF Dependent Scholarship Program.

Applicants will be asked to submit a one-page essay addressing what they intend to accomplish with their degrees and how their area of focus may relate to any of the PHS professional categories.

<https://www.phscof.org/dependent-scholarship.html>

Making Sew Much of a Difference

Meet the PHS Mask Makers – Part 1

LCDR George Chow, Engineer, Virginia

After making masks for my family, neighbors and friends started to inquire. I did not realize how popular they would be. With the support of my wife, I figured it was a good way to pass time as we all followed the stay-at-home orders. I have made masks for anyone who has asked for them such as doctors, nurses, fellow veterans, and an Air Force Lieutenant Colonel who needed solid black ones for work. I feel proud using a skill my mom taught me. Providing masks to those who need them is a rewarding feeling.



LT Katherine Vodovoz, Pharmacist, New Mexico

I had rarely used my sewing machine beyond the occasional uniform patches for uniforms. In March, I dusted it off and made fabric masks for coworkers, family members, and my husband who is deployed aboard the USS Truman. At my facility, I have also had the opportunity to sew gowns from Tyvek to help increase our supply of personal protective equipment (PPE). Before I knew it, mask making became a creative outlet. Our hospital's Incident Command System held a mask competition. Shiprock is the site of a landmark monadnock, an isolated mountain. I channeled Vincent van Gogh to embroider Starry Shiprock, which won first place.



CDR Victoria Murray, Environmental Health Officer, Michigan

With an old sewing machine handy, I visited our local fabric store to get additional supplies prior to the stay-at-home orders being issued. I have been donating masks to essential workers, healthcare workers, the elderly, and children locally. My daughter and I are usually doing other crafts at this time of year but shifted gears to mentor others in making masks, sharing templates and best practices. I am thankful we can contribute, providing masks that allow people to leave their homes and buy food for their families.



CAPT Sarah Unthank, Environmental Health Officer, Ohio

As an industrial hygienist, I have spent my career helping to protect the health and safety of workers. So, when the news came out that healthcare professionals on the frontlines needed masks, I knew I needed to help. After donating masks to the Kentucky hospital where my sister is a nurse, I continued to produce them for friends, neighbors, and colleagues.



LCDR Joy Callaway, Nurse, Alaska

As a nurse, it was concerning to hear about the shortage of PPE for healthcare professionals. I had never sewn a mask before and remain a novice seamstress, but I thought I could follow in-structions and figure it out. I had to get a little creative with the different ties I was using, as sup-plies were limited. I ended up cutting elastic and using ribbon to make it work. I also bought pil-lowcases as fabric was difficult to find. The first people who received my masks were nurses I supervise for our home visit team. I eventually started sending them to family members like my mother and 93-year-old grandmother and some colleagues at Southcentral Foundation. I am glad to contribute a bit to protect others.



CAPT Kellie Thomas, Nurse, Minnesota

My Bernica sewing machine was inherited from my mother and is over 50 years old. I cherish the times I had with her, learning to sew the basics. I was eager to help when I heard about the Million Masks effort. As a nurse, I was amazed the CDC would recommend healthcare personnel wear bandanas. Given my experience in the ICU, I could imagine how people on the frontlines are feeling. I jumped in to contribute masks to a local hospital. I also wanted to ensure my family and friends, especially my 89-year-old stepfather, had masks for protection.



CAPT Christel Svingen, Pharmacist, Minnesota

Like others who enjoy sewing or quilting, I was grateful for an opportunity to help during this time of uncertainty. I made masks at home and measured fellow officers, sewing the elastic at work to ensure a better fit. It is wonderful to see the many different talents and skills of PHS officers be-ing utilized to creatively enhance resources, improve safety, and provide care to patients. Thank you to my fellow officers for al that you do, both in your normal work activities and the added challenges of serving during the COVID-19 pandemic.



LCDR Alexa Deptola, Engineer, Maryland

I have been a quilter for about 10 years, and I love to sew. I had stopped sewing for over a year after my machine died and I had to get a new one - it just was not the same. But, after reading a lot about PPE shortages and the potential impact of cloth masks for the public, I decided it was time to start sewing again. After a few weeks of sewing in my free time, I finished 100 masks to donate



see **SEWING** continued on page 18

Long-time COA Member Dies

Long-time COA member RADM (Ret.) Duane Frederick Alexander, M.D., died on February 16, 2020, of Alzheimer's disease. He lived in Shepherdstown, WV.

RADM Alexander was born in Baltimore and grew up in Annapolis. He received his undergraduate degree from Penn State University and his M.D. degree from the Johns Hopkins University. He began his career as a Commissioned Officer in the US Public Health Service at the National Institutes of Health in 1968 and served thirty-one years in the Commissioned Corps.

He was Director of the National Institute of Child Health and Human Development (NICHD) from 1986-2009, where he led efforts to improve the health of mothers and children. He served four years as the physician on staff of the federal commission that developed the U.S. regulations governing the protection of human research subjects. He served twelve years as the "U.S. Observer" to meetings of the Council of Europe's Committee on Bioethics. After he left NICHD in 2009, RADM Alexander joined NIH's Fogarty International Center, where he served as advisor to the director on global maternal and child health issues.

RADM Alexander was awarded the Surgeon General's Medallion, the American Medical Association's Nathan Davis Award for Outstanding Government Service and eight other awards for his public service in advancing maternal and child health.

He is survived by his wife Marianne; son Keith; daughter Kristin; three grandsons; and a brother, Arnold G. Alexander, M.D. A memorial service will be scheduled for him at the Shepherdstown (WV) Presbyterian Church.



LEGISLATIVE from page 2

Initial Thoughts

Downsize? Would it be useful to have a smaller committee, with members engaging more directly or more frequently with COA staff and with their own members of Congress? In other words, "leaner and meaner?"

Create a Steering Committee? The Nursing Community Coalition, with which COA is affiliated, has a membership of 63 nursing organizations. They meet monthly, but they work through a steering committee of fewer than a dozen volunteers. The steering committee conducts research on issues, develops positions, and helps staff draft letters and talking points.

Focus on Appropriations? COA's Legislative Affairs Committee might wish to become much more active with regard to the appropriations process, as many of COA's coalition partners have been doing. Years ago, when I first came on board, the thinking

seemed to be that the USPHS might be less vulnerable to budget cuts if it were hard to find in the massive federal budget.

Step up activity? As we all know, PHS officers cannot engage in many kinds of political activities. You cannot wear your uniform to political rallies or engage in other kinds of electioneering. You cannot chair a political campaign or lead a recall effort. You cannot petition a U.S. Senator or U.S. Representative who is not your own. You can, however, approach your own U.S. Senators and U.S. Representatives. During the battle for GI Bill transferability, many of our members did that, in letters, phone calls, and even face-to-face visits. It worked beautifully.

Other suggestions? Please email suggestions to Judy Rensberger at jrensberger@coausphs.org. With the devastating coronavirus as a backdrop, public health and its practitioners need the strongest and most articulate voice possible.



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EXECUTIVE DIRECTOR from page 1

Fast forward to 2020. One thing I know in life is that you never know what the future will bring. This past February I began watching with worry, fascination and admiration for the thousands of uniformed officers supporting the unfolding pandemic, and felt the familiar tug we all experience when we want to help and support our fellow “shipmates”—to use a Navy term. When the opportunity presented itself to lead this amazing organization for which you are all members, I really could not say no.

A little bit about me, I joined the Navy in 1990 as a registered pediatric nurse with 9 years already under my belt, both on the inpatient and outpatient side. When I decided to join the Navy, I had a great job as a specialty clinic manager at Children’s Mercy Hospital in my hometown of Kansas City, Missouri. I met many educated and highly trained

colleagues, including physicians, physical therapists, occupational therapists, speech therapists, clinical psychologists, healthcare administrators, pharmacists, and clinical nurse specialists. They inspired me toward graduate level education, but with three small children I did not see how it would be possible. Through the Navy Nurse Corps graduate school programs (Duty Under Instruction) and on a leap of faith as I entered my third decade, I departed as a Lieutenant Junior Grade (O-2) to Newport, Rhode Island for six weeks of Officer Indoctrination School. Fast forward 27 years to my retirement (which went by in a flash!), I reflected back on the many opportunities the Navy provided me; I became a nurse practitioner, earned a doctoral degree, learned health policy with a fellowship on Capitol Hill, and had the opportunity to lead Navy Medicine’s Research and Development Enterprise.

My children are now grown, in their 30’s, and I have five grandchildren, a great-grandbaby, five grand dogs, and a grand cat. I enjoy reading, yard work, building puzzles, and immersing myself in my work. I want to thank many of you for your early and warm welcome to your association. The Selection Committee, the Board of Directors, Trustees, staff, and my predecessor COL Jim Currie have been nothing but gracious, extremely helpful, and very welcoming. I wish Fair Winds and Following Seas to COL Jim Currie, and a heartfelt congratulations on such a successful tenure at the helm of COA/COF. He’s left things in good order and I am excited to take the reins, dive in and fight for every right and benefit that you are entitled to as you serve, or have served, your country. Please reach out at any time at jrychnovsky@coausphs.org, and I look forward to meeting you in person when it is safe to do so.



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ADDRESSING THE UNIQUE NEEDS OF COMMISSIONED CORPS OFFICERS

PISTOL from page 3

and cadet life responsibilities. Based on their team unity and collaboration, it is not surprising that they are the defending National NRA Intercollegiate Pistol Champions.

To learn proper pistol shooting techniques, LCDR Kaelke obtained help and training from assistant coaches retired Master Chief Petty Officer Chuck Griffin and Gunner's Mate First Class Charlie Petrotto, recipient of the President's Hundred, a distinction meaning that he finished among the top 100 shooters at the Camp Perry [OH] National Pistol Matches. As the cadets were open to speaking with LCDR Kaelke about their shooting, goals, and techniques, getting to know the cadets on the team was the first step and proved to be an easy one. Based on this, LCDR Kaelke was able to work individually with cadets regarding their competitive process. With the goal of working with cadets to strengthen their mindset, she even worked with the behavioral health department to implement sports psychology techniques.

The ability to work with cadets in a different capacity than the assigned billet is a unique privilege as a PHS Officer assigned to the Coast Guard Academy. The experience of LCDR Kaelke shows that prior knowledge is not always mandatory. The only requirement is willingness to participate, learn, and engage with the cadets. One might even find something new about the Coast Guard in which to participate. LCDR Kaelke eventually was awarded the Coast Guard Marksmanship ribbon. This never would have happened had she not volunteered for this coaching role.



LCDR Kaelke and the Coast Guard Academy Pistol Team show off Kansas City spirit wear the week before the Super Bowl.

Coaching is one of many available ways to get involved with cadets and other departments at the US Coast Guard Academy. Involvement at the cadet level is not only rewarding but also lot of fun! If you take the time to see how you may be active in ways other than your assigned billet, you never know what you may find.

SEWING from page 14

to local organizations in need and another 50 for PHS Officers at Headquarters. I am grateful to have an opportunity to support the mission, and to be able to do so by rediscovering something I love.

LT Rachel Forche, Environmental Health Officer, Texas

On deployment, I was a Safety Officer by day and a Mask Maker by night. My grandmother taught me how to sew about 15 years ago, but I had not touched a sewing machine since then. When the pandemic started, I knew I needed to put my crafting skills to use and re-learn how to sew. I borrowed a friend's machine, purchased materials, watched countless YouTube tutorials, and got to work. So far, I have been able to provide a mask to everyone at my deployment site and to my family in Michigan, as both of my siblings contracted COVID-19. I have also shipped navy/black masks to PHS officers across the country. I plan to donate masks to places in need such as Scottish Rite Children's Hospital in Dallas, TX, and Shepherd's Table, a soup kitchen and social services organization in Silver Spring, MD. Though sewing masks can be exhausting at times, I plan to continue making them as long as necessary to play my small part in protecting the public health of our nation.



LCDR Jen Manning, Therapist, Navajo Nation

I started making masks out of necessity. We had a critical shortage and our facility was brain-storming options to protect ourselves if we completely exhausted the supply. After exhausting work weeks, I had one day off and spent it researching designs and patterns. It made me feel like I had a little more control over what was happening around me. I enjoy sewing. It did not feel like work and was extremely rewarding.



LCDR Diane Moore Richardson, Health Services Officer, Maryland

I had not sewn since eighth grade home economics class, but I knew I wanted to help my family and friends who are essential employees or suffered from compromised immune systems. My best friend in Chicago started making some amazing masks, so I asked her to help me get start-ed and select a sewing machine. Once I started, fellow officers, friends, family, and strangers, as far away as Texas, started requesting them. When I go to Walter Reed Hospital for my medical appointments, I take a stack of homemade masks to pass out to medical providers and fellow patients. It has been truly rewarding to do something meaningful during this time of social dis-tancing and uncertainty. I use different patterns and fabrics to make attractive masks for people of all ages. We might as well embrace the new public health fashion because it could very well save your life.



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