COA Frontline

COA Receiving Annual Award Nominations

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2022 COA Photo Contest Winners

by LCDR Carla Chase, CCC-SLP.D. & LT Christine Nappa, LCSW, BCD

For the past two months, the national COA Communications and Public Relations Committee (CPRC) has been preparing for the 2nd Annual COA Photo Contest. This photo contest is a great way to engage our community of Public Health Service (PHS) officers. Whether they are amateur cell phone photographers or trained professionals, officers found ways to capture memorable moments in public health that inspire us all. This photo contest that has proven to be an amazing way to shine a light on talented officers across the Commissioned Corps. Each photo created beautiful, engaging content through their digital images and drew inquisitiveness across the CPRC as the judges chose the winners.

This year, we had 23 photos submitted and the competition was steep. All of the images were captivating; themes ranged from yoga, holding puppies, and leaps of excitement to action shots of officers hard at work, and many more. Selecting the winners was no easy task. The judges were captivated by the officers on deployments, delighted by the photos of officers staying physically active, and fascinated by the stunning horizons featured in some officers' backgrounds. After much deliberation, the judges were most enchanted by the photo entitled "Good to Go!" which illustrated in January 2021, CDR George Chow, an HSO IT Officer, deployed to a field hospital where he provided on-site, hands-on IT support with setting up the National Disaster Medical System Information Technology

Good to Go! In January 2021, CDR George Chow, a HSO IT Officer, deployed to a field hospital where he provided on-site, hands-on IT support with setting up the NDMS EMR system. He also provided non-IT support/logistics support with transporting and staging medical equipment at the field hospital. Semper Gumby!

(NDMS IT) Electronic Medical Record (EMR) system. He also provided non-IT support/logistics support with transporting and staging medical equipment at the field hospital. Semper Gumby! The judges expressed that this photo revealed a positive attitude in the service of health.

The 2nd place photo contest winner won over the judges with the reminder that we are all human and have to stop and catch some rest so when it's time to go, we'll be ready for the mission. LCDR Mirabelle Adamu and LT Danielle Eustace, enroute to deployment on the long journey to American Samoa displayed what many of

see **PHOTOS** continued on page 9

from the Executive Director

Jacqueline Rychnovsky,
PhD, FAANP, CAE
Captain (Ret.), Nurse Corps, US Navy

To the one-quarter of COA members who are Veterans, and the remaining seventy-five percent who will become Veterans upon their retirement or transition from active-duty service, Happy Veterans Day! One hundred and three years ago in the year 1919, the 28th President of the United States, Woodrow Wilson, proclaimed November 11 as the first commemoration of Armistice Day. In 1954, legislation was passed to expand the day to honor American veterans of all wars. Later in 1954, President Dwight D. Eisenhower issued the first "Veterans Day Proclamation" which stated, "In order to insure proper and widespread observance of this anniversary, all veterans, all veterans' organizations, and the entire citizenry will wish to join hands in the common purpose." Today, Veterans Day is celebrated on November 11th of each year to honor all of America's veterans for their patriotism, love of country, and willingness to serve and sacrifice for the common good.

A few weeks ago, I received a piece of mail from the Department of Veterans Affairs (VA). The envelope contained an invitation to participate in the VA Million Veteran

see **EXECUTIVE DIRECTOR** on page 22

COA Member Benefits

Capitol Hill Representation
Efforts on Capitol Hill continually support all Commissioned Corps officers – active, former, reserve, and retired

Local Representation
COA Local Branches provide venues for meeting fellow officers and a forum for the discussion of issues within the Commissioned Corps

Newsletter
Newsletter reports on monthly activities and items of interest of COA and the USPHS Commissioned Corps

Ribbon
Authorized to be worn on the PHS uniform by members in good standing when attending COA functions

Insurance Programs
Low-cost insurance programs that may continue as long as your membership in COA remains current

USF Online Programs
Discounted degree and certificate programs like PhD, DrPH, MPH, MSPH, and MHA

NYMC Online MPH
50 percent discount for the online MPH and certificate programs

Scholarship Programs
College scholarships for children, grandchildren, and spouses of COA members and high school seniors

The Ohio State University
In-state tuition for graduate nursing and certification programs

CPH Exam Discount
Deep member discount and free study guide for Certified in Public Health (CPH) Exam

COMMISSIONED OFFICERS ASSOCIATION OF THE U.S. PUBLIC HEALTH SERVICE

Legislative Update
A Reflection On Our Fight for Leave

by LCDR Christopher Mendoza-Truong, Pharm.D., USPHS Chair, Legislative Affairs Committee

There are many instances in which the strength of the cumulative strategy has meant the difference between success and failure. History is abundant with examples in which a comparatively weak sequential strategy was enabled to reach victory by virtue of the strength of the cumulative strategy behind it. The Yorktown Campaign, the Peninsula Campaign in Portugal, our own Civil War and World War I are a few that come to mind. When it comes to the COA legislative efforts, we recognize the existence and the power of these cumulative strategies and integrate them more carefully into our basic plans, study them more closely and direct our energy at the main objective to achieve success for the USPHS uniformed officers that we represent.

Based on the impact of COVID-19 and service member's ability to take leave during the national emergency, active-duty uniformed service members were allowed to carry over no more than 120 days starting March 11, 2020. This allowance was supposed to have an expiration date of 09/30/2022, but had since been written into law for service members of the armed forces to permanently carry over 120 days of leave, leaving out officers of the USPHS Commissioned Corps and NOAA Commissioned Corps due to the verbiage of "armed forces" versus "uniformed services." COA fought tirelessly and strategically to include language in the PREVENTS Pandemic Act that would permanently fix the leave carry over to reflect parity with the other uniformed services to be able to accumulate annual leave of no more than 120 days for any active duty USPHS Commissioned Corps officer or officer of the Ready Reserve Corps. When it was introduced in the Senate on March 25, 2022, we remained optimistic that swift action would occur, but months passed by without any movement and in a blink, we were at the cusp of the closing of FY 2022. With the assistance of our government relations firm, Taylor Strategies, COA was able to temporarily fix the expiring leave for USPHS Commissioned Corps Officers as we have no so in the past Continuing Resolutions. Yet, our fight for parity is still not over and a permanent fix for expiring leave for USPHS officers remains one of the major legislative priorities for COA.

We are more than confident that our cumulative strategy to a permanent fix for expiring leave will reach victory in the future. COA's strategic success in the future may be measured by the skill with which we are able to balance our cumulative efforts toward the most effective and least costly attainment

see **LEGISLATIVE** *continued on page 23*

D.C. COA Leadership Retreat – A Model for Other Branches

by LT Christine Nappa, LCSW, BCD

The District of Columbia (D.C.) branch of the Commissioned Officers Association (COA) Leadership Retreat was held on August 26, 2022 in Silver Spring, MD to kick off the new operational year. It was a huge success among attendees who described the retreat as fun, productive, and refreshing. The retreat was held at the U.S. Food and Drug Administration (FDA) White Oak Campus and included 29 members of the D.C. COA leadership team, a near-100% turnout. This was the first scheduled in-person leadership meeting since before the pandemic and a welcomed departure from the stresses of COVID-19, deployments, and everyday life.

D.C. COA officers gather at the leadership retreat aboard FDA's White Oak Campus on August 26, 2022.

The three-hour long retreat kicked off with light refreshments and a welcome message, emphasizing the importance of social cohesion, vice individual overachievement, as a means to organizational success. The retreat then moved into several icebreakers and team building activities aimed at establishing rapport and fostering a sense of camaraderie amongst the group. The retreat closed out with an in-depth, fruitful brainstorming session. The officers broke into four groups and each group came up with new project ideas for D.C. COA in the coming year. Afterwards, they got back together to share their ideas and further build on each other's ideas. The brainstorming activity cultivated at least 20 new ideas for D.C. COA to explore, including small group workshops, meet-and-greet events, socials, a mentorship program involving retirees, scholarship programs for D.C. COA members, and many others.

When asked what their favorite part of the retreat was, a common answer was not just the opportunity to meet and work alongside new people, but also the chance to laugh and have fun at an in-person social event, something that has lacked for many of us for the past two-and-a-half years. CDR Cathleen Davies, D.C. COA Chair of the Recreation and Networking Committee, stated that it was a great way to free-flow ideas, find common themes, and get together with other officers to share goals and unwind.

The first step to enhancing D.C. COA is to come together and determine what can be done as an organization, according to CAPT Juliette Taylor, D.C. COA's Branch President. She went on to say the leadership retreat afforded time to "share a vision and a purpose–from there, we build out." There was overwhelming enthusiasm among participants about the leadership retreat as an opportunity to discuss future planning for D.C. COA and, as CAPT Taylor put it, to "rebuild the social fabric," having the chance to experience fellowship with other officers again. LCDR Scott Steffen, D.C. COA's Branch Executive Secretary, said it was a success that people are already looking forward to planning future retreats. He claimed it was a "huge return on investment" due to the low cost of it all. D.C. COA secured a free venue, had light refreshments and snacks, and came up with a wealth of new ideas for the future of D.C. COA.

Credit for coordinating the leadership retreat goes to the following: CAPT Juliette Taylor, CDR Hien Albright, CDR Cathleen Davies, CDR Javier Muniz, CDR Bic Nguyen, CDR David Schwab, LCDR Loan Chin, and LCDR Scott Steffen. If you are interested in facilitating a leadership retreat for your local COA branch and would like information on the event coordination and organization process, please reach out to D.C. COA leadership at dccoaemail@gmail.com.

USPHS and Sister Services Collaborate to Train and Provide Care

by LCDR Erin Heap RDH, BSDH, PHDHP and LCDR Valerie Favela RDH, BSDH, MPH

For a second year, the United States Public Health Service (USPHS) Commissioned Corps participated in Innovative Readiness Training (IRT) medical missions to increase deployment readiness while providing vital services to American communities through civil-military partnerships. The IRT provides real-life training to service members within a positive learning environment while delivering incidental benefits to communities at no-cost to the patient. Services provided included optometry, health exams, dental, psychology, veterinary care, and public health education.

In May, an IRT, fondly named Artic Care 2022, was held on Kodiak Island, Alaska. Kodiak Island is the second largest island in the U.S. spanning 3,588 square miles with over 170 miles of coast line. Many areas on the island are only accessible in good weather by boat, airplane, or helicopter. The island of Kodiak provides particularly unique and challenging elements that make the training particularly valuable for the military. Approximately 13,000 people live in the main city of Kodiak or one of the six remote villages on the island.

Nineteen USPHS Commissioned Corps officers from several disciplines were selected to serve at Arctic Care 2022, including active duty, ready reserve, and Public Health Emergency Response Strike Team (PHERST) officers. Artic Care 2022 was led by the U.S. Army Reserve in partnership with the Kodiak Area Native Association (KANA) and encompassed 247 service members from the U.S. Marine Corps Reserve, U.S. Navy Reserve, Army National Guard, Air National Guard, U.S. Coast Guard (USCG), and the USPHS Commissioned Corps. USCG Base Kodiak provided their tarmac for teams to fly via helicopter to the remote villages. Medical operations were staged at seven geographically-separated locations on Kodiak Island. Servicemembers were divided into five teams based on needs of the populations they were to be serving. Service members had to be Semper Gumby as each team had challenges in setups, materials, and timing.

Arctic Care 2022 provided care to 2,195 patients with 6,129 procedures completed, and a fair market value of $503,581. USPHS officers' main duty was to provide clinical care to the Kodiak population but their service did not end there. A USPHS Veterinarian and Physical Therapy officer each gave educational presentations to service members to enhance patient and self-care knowledge. A USPHS Dental Hygiene officer spoke to a group of students in the village of Port Lions regarding dental care and careers in the USPHS Commissioned Corps. A USPHS Veterinarian officer helped cross-train medical technicians serving as veterinarian technicians on vaccination and grooming techniques. USPHS Dental Hygiene officers worked alongside newly assigned dental technicians delivering hands-on training in infection control, sterilization, dental materials, dental instruments, and dental procedure assistance. Officers participating in future IRTs should consider preparing presentations and sharing training opportunities/needs with other service members, as this is encouraged throughout the mission.

USPHS officers and members of the Army National Guard pose together after a successful joint Innovative Readiness Training (IRT) exercise on Kodiak Island, Alaska in May 2022.

While in Kodiak, service members were able to learn of the strong native history, cultural practices, religions, and a bit of the language from several different federally recognized Alaskan Native tribes. We had the opportunity to visit the Alutiiq Museum and Fort Abercrombie State Historic Park. It is imperative, while working with different populations, to take time to understand and study the culture. We attended the Alutiiq Nation May Festival at Near Island where we were delighted with native dancing, singing, ceremonial clothing, games, food, and art. Learning and participating in cultural activities helps to build rapport and trust, improving the relationship between providers and patients and, ultimately, allowing for optimal outcomes. The people of Kodiak were more than happy to share with us their favorite beaches for finding sea glass, hiking trails, and museums. They were excited for us to take part in what they get to experience all the time!

For many, the opportunity to work beside, and network with, other USPHS officers and service members from other uniformed services was the highlight of the mission. As USPHS officers, the collaboration allowed us to educate other branches on our service, while making a name for ourselves as "America's Health Responders." Overall, the success of Arctic Care 2022 joined several branches of the uniformed services and provided collaboration between sister services that do not often cross paths.

COA Accepting Award Nominations

The COA Awards Committee welcomes nominations for the following awards:

Health Leader of the Year

Recognizes civilians, retired active duty, or active-duty service members who have made notable contributions to the health of the nation.

Local Branch of the Year

Recognizes the exceptional accomplishments of COA Local Branches. Each year, a Large Local Branch (60 members or more) and a Small Local Branch (fewer than 60 members) are recognized for their well-deserved efforts.

Civilian Outstanding Support of the USPHS

Presented to those civilian (individuals and/or groups) who have distinguished themselves in service to the Commissioned Corps.

Retiree of the Year

Recognizes excellence in continued service and contributions beyond active duty or government civilian service to the Association, PHS Commissioned Officers Foundation, and to the members of COA Local Branches.

Local Branch Member of Year Award

Recognizes excellence in contributions to the COA local branch, service to the association, and to the members thereof.

Local Branch Leader of the Year Award

Recognizes excellence in contributions by a local branch executive committee member to the COA local branch, service to the association, and to the members thereof.

Apply Online

If you would like to nominate an officer or need more information, please visit the COA Website under the Awards menu. The deadline to submit nominations is Monday, January 20, 2023 at 5 PM Eastern.

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Give Yourself Permission to Take Annual Leave

by CDR Kristie Purdy, MS, RDN/LD, BC-ADM, CDCES

Chair, COA Board of Directors

For three consecutive years (2020, 2021, and 2022), COA has advocated on our behalf to assist officers with the issue of expiring leave. COA solicited the services of an outside firm and held multiple meetings with committee staff to influence the decision-making process to extend our expiring leave. Once again, COA's efforts were a success! On September 30, 2022, the President signed the "Continuing Appropriations and Ukraine Supplemental Appropriations Act, 2023," allowing PHS officers to carry over more than 60 days of leave into FY 2023.

While this is a huge win for COA and for USPHS officers, please don't allow COA's efforts to be in vain. COA fought for our leave – use it!

We're in the business of public health. We know the importance of work-life balance and how annual leave is vital to promoting good physical and mental health. Many of us even encourage our patients or colleagues to take annual leave. So why is it so hard for us to use leave ourselves?

We can come up with a multitude of excuses… "I've got too much going on," "the agency is counting on me to finish a project," "we're short staffed," "I may lose out on future opportunities," or "I don't want to return to a mountain of work." The list of excuses for not using earned leave can go on and on.

As PHS officers, we're immersed in a competitive environment. Competition is part of our promotion process. I understand why so many of us may feel we're losing out on an opportunity if we're away. However, I encourage you to take your mind off work, even for just a few days, and use the annual leave that you earned.

Need some science-based reasons to prove taking time off is beneficial? According to the American Psychological Association, taking time off benefits us through improved life satisfaction, increased physical improvements, reduces depression and anxiety, and it may increase productivity upon returning to work.

When you take your earned annual leave, try to unplug. The world has made it easier for us to stay connected. Information is available to us 24/7, even if we're out of the office. As such, many of us feel the guilt-induced urge to check our inbox while on leave. Consistently being in a work mindset may quickly lead to burnout without ever reaping the benefits of being on leave.

One of the reasons I enjoy going to the annual Scientific and Training Symposium is being surrounded by so many officers who are passionate about the work they do and living out the USPHS mission. There is a big difference between work being a passion or a burden. When taking time off, I encouraged you to truly take time off. Relax your body, relax your mind. Reconnect with friends, family, and reconnect with yourself. If you absolutely can't unplug, try to set limits on how much time you're engaged each day. Then step away and enjoy life!

Taking time off will help you avoid burnout and stay engaged. You may find you come back refreshed, rejuvenated, and ready to protect, promote, and advance the health and safety of the nation.

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PHOTOS from page 1

us have experienced on our way to helping others. This image shows the "hurry up and wait" part of most responses.

The 3rd place winner features CDR Kazu Okumura attending the California Hospital Association's Disaster Preparedness Conference. As Regional Emergency Coordinator for the Administration for Strategic Preparedness and Response, he developed relationships with state and territory public health and emergency management agencies to prepare for future disasters. He fascinated the judges with his eagerness to learn and his empathy of dogs, who also may need assistance during times of disasters.

Thank you to all the officers and participants who submitted photos for the 2nd Annual COA Photo Contest. Sharing our collective experiences as officers through photos is a critical way to boost morale and resiliency, demonstrate clinical skills, document our hard work, and inspire new methods of self-care. We certainly appreciate the form and feel of each and every photo, the techniques that were used, and the composition of the images. We believe all officers are winners as we show our pride in what we do as Public Health Service officers. We hope to see your photos in next year's contest. In Officio Salutis.

LCDR Mirabelle Adamu and LT Danielle Eustace en route to deployment on the long journey to American Samoa.

CDR Kazu Okumura attending the California Hospital Association's Disaster Preparedness Conference. As Regional Emergency Coordinator for the Administration for Strategic Preparedness and Response, he develops relationships with state and territory public health and emergency management agencies to prepare for future disasters.

2022 National Night Out D.C. Event

by LT David Chon and LT Kesia Purcell, MPH

According to Senator Kay Bailey Hutchinson, "The best way to build a safer community is to know your neighbors and your surroundings. National Night Out triumphs over a culture that isolates us from each other and allows us to rediscover our own communities." On the first Tuesday of every August, thousands of communities come together nationwide to promote and foster a positive police-community relationship during an event called National Night Out (NNO). This year, police departments, federal law enforcement agencies, local businesses, non-profit organizations, and thousands of residents participated in the event. This year, four (4) of our PHS Commissioned Corps junior officers (LCDR Candice Todd (OASH), LT Lorna Benoit (OASH), LT David Chon (FDA), LT Kesia Purcell (FDA)) participated in a NNO event held at Lincoln Park, Washington, D.C, to promote and represent the PHS chartered advisory group, "Prevention through Active Community Engagement (PACE) and its component, Surgeon General Education Team (SGET).

The DC Metro SGET is a team of PHS Officers trained to be subject matter experts on topics prioritized by the Office of the Surgeon General (OSG) to deliver evidenced-based educational lessons in our communities. The DC Metro SGET's goal for the event was to network with local partners, increase PHS visibility, and serve as recruiters for PHS. During the event, the junior officers joined senior officers, CDR Zanethia Eubanks (NOAA/SGET National Chair/Event Leader), CDR Kelly Fath (DOD), and CDR Gayle Tuckett (FDA), to connect with local residents and network with community leaders to learn about potential opportunities for the DC Metro SGET to best serve the community.

PHS Officers connected with more than 500 members and leaders of the community during the event. When asked what was memorable about the event, CDR Tuckett highlighted how we "increased visibility of the Corps, built professional connections, and fulfilled the mission of PACE through true community engagement." CDR Tuckett also recalled working with the event leader, CDR Zanethia Eubanks (NOAA), during the event to form a connection with a local organization to provide education on substance abuse and mental health topics. This was the first of many events DC Metro SGET has planned for this operational year. The DC Metro SGET looks forward to engaging with the DC community at similar events.

ARE YOU UP FOR THE CHALLENGE?

CHALLENGE COIN DESIGN CONTESTS

COA is hosting a contest for the design of the new COA coin

COF is hosting a contest for the design of the 2023 Symposium coin

YOUR DESIGN

Former COA Coin:

2022 Symposium Coin:

SUBMISSION GUIDELINES

Deadline: January 1, 2023
Email front and back designs to: dcorrigan@coausphs.org
Include: Full name; Please place "COA Coin Contest Submission" or "Symposium Coin Contest Submission" in the email subject line.
Submit designs in the following formats: JPG or PNG
Logos can be found here: https://tinyurl.com/coacofgraphics

Winners will be announced in the February 2023 issue of Frontline and in the monthly email update.
PRIZE: $50 Amazon gift card and COA embroidered polo shirt

Disclaimer The findings and conclusions of the article are those of the authors. They do not necessarily reflect those of the Commissioned Corps of the U.S. Public Health Service or the U.S. Department of Health and Human Services.

A Time for Giving

by LCDR Jaime Altman, MPA, BSN, RN and LCDR James Ireland, Pharm.D., M.S., BCPS, CPH, CMQ/OE

Deployments can be stressful. Deploying during the holiday season comes with its own unique set of stressors and challenges. For many, the most wonderful time of the year is typically celebrated with family and loved ones. We all look forward to the family traditions and routines that make these times so special. Unfortunately, holiday deployments disrupt our customary celebrations, which can make an already difficult time more emotional. However, being away from your family doesn't mean you have to celebrate alone. It's a time to manage your expectations, alter some family traditions, and even discover new and creative ways to make this time special.

We were deployed to the Yakama Indian Health Service Clinic in Toppenish, Washington in November and December of 2021. This was the first time we were both deployed during a major holiday - Thanksgiving. During the initial weeks, everyone talked about the upcoming holiday and seemed resigned to sitting alone in their hotel room over the long holiday weekend to catch up on some work. Everyone expressed some disappointment that they wouldn't be able to eat their favorite homemade cranberry sauce or sweet potato pie that is only made once a year or spend time with family and friends. However, as Thanksgiving approached, our officer-in-charge (OIC) proposed a team dinner to promote and support the importance of team comradery. Yet, there was one minor snag – every single restaurant was closed. We quickly adjusted our plans and decided to celebrate one day earlier. Celebrating Thanksgiving together created the perfect opportunity for the entire team to connect since we worked in different areas within the clinic. This feeling of togetherness and conversation bonded us as a team. It also soothed any feelings of loneliness or stress that any of us may have been feeling. Every team member expressed genuine appreciation for this unique opportunity to celebrate Thanksgiving together.

Unexpected opportunities may present themselves as well. Our team was invited to Thanksgiving dinner by a clinic employee. A couple of us accepted the invitation and spent a wonderful Thanksgiving evening with people we didn't even know. This employee and her family generously opened their home to us and treated us like part of their family. We thoroughly enjoyed the amazing food and wonderful company! We even got to hear some amazing stories from Granny about her time travelling throughout the world and the opportunity she had to dance on stage with Bob Marley and the Wailers!

A few of us spent Thanksgiving hiking the Cowiche Canyon trails. Although this was a less traditional way of celebrating, it provided the perfect opportunity to self-reflect and appreciate what makes this time so special. Exercise is one of the fastest and most effective ways to improve your mood. Consider asking a teammate to go on a walk or run to help maintain or boost your holiday spirit and support your mental wellbeing.

Engaging in cheerful celebrations with your team certainly lifts your spirits and creates new and important memories. However, keep in mind, being away from your family doesn't mean you have to miss out. With the help of technology, there are many fun and interactive ways to still be included in the celebration at home. Consider being on a video chat at the dinner table or opening gifts together.

The new on-call schedule system provides an opportunity to plan ahead and create new traditions. Similar to our Thanksgiving dinner, you too can celebrate early. If you know you are going to be away during an important time, then celebrate whenever you choose. Remember, however you choose to celebrate the holidays is most important, not when.

Spending a holiday away from your family and loved ones can be challenging. However, there are many opportunities during this time to create new and wonderful memories. Admittedly, many holiday memories become obscured over time. However, the memories gained from being deployed this past Thanksgiving holiday will be vividly remembered for a lifetime.

The CFC is a great way for USPHS Commissioned Officers to support causes near and dear to our hearts. *We can donate to the CFC, via the CFC Giving webpage, (https://cfcgiving.opm.gov/welcome) through January 14, 2023.*

Using CFC code 42884, please pledge a donation to the PHS Commissioned Officers Foundation for the Advancement of Public Health.

Why? Because the PHS Commissioned Officers Foundation has stepped up its programs to "advance public health for a healthier nation." Our PHS Commissioned Officers Foundation is committed to the advancement of public health & the development of public health Leaders. Our PHS COF supports:

BARCLAY-GIEL SEED GRANTS: We provide over $100,000 each year to fund public health grants in communities around the country.

USPHS SCIENTIFIC & TRAINING SYMPOSIUM: The annual conference continues to offer free continuing education credits and many opportunities to network with fellow USPHS officers while learning about advances in the field of public health.

JOAG/COF KOOP SPEAKER SERIES: We work closely with JOAG officers to host a series of talks with researchers and community-based organizations regarding a range of public health topics.

RDML MISHOE 'BELIEVE' DIVERSITY SCHOLARSHIPS: COF provides grants to high school seniors pursuing health sciences and public health collegiate studies.

COA FAMILY MEMBER SCHOLARSHIPS: Scholarships for family member of COA members.

RADM MICHAEL FELLOWSHIP: Scholarships for junior officers serving in the USPHS Commissioned Corps.

PHS & COA LOCAL BRANCH REQUESTS: COF provides grants for a range of Local Branch programs like run/walk fundraisers to health education events.

Please remember CFC code 42884 on the CFC Webpage: https://cfcgiving.opm.gov/welcome

Include 42884 in your pledges. Your generous donation will support COF to advance public health for a healthier nation.

Thank you!

Member Spotlight

LCDR Edward D. Amores, MD, MBA, CAQ-SM, FACEP

by LT Kim E. Eisberg, MCE, PMP

LCDR Edward Amores recently became a lifetime member of the Commissioned Officers Association (COA) with the goal of understanding more about USPHS, United States Coast Guard (USCG), and COA. He will be the next Senior Medical Executive at the Samuel J. Call Health Services Center, the largest health care facility for the United States Coast Guard (USCG), located in Cape May, New Jersey. While LCDR Amores is new to the United States Public Health Service (USPHS), his medical career began in 2000 after he graduated from Queens College, City University of New York (CUNY) with a B.S. in Psychology. He then attended The College of Physicians and Surgeons at Columbia University, earning a Doctor of Medicine (M.D.) in 2004, followed by completion of a residency program in emergency medicine (EM) in 2008 and a fellowship in Primary Care Sports Medicine in 2009.

Before seeking his undergraduate degree, LCDR Amores served with the USCG at Air Station Brooklyn for four years with the goal of serving his country and earning the G.I. Bill. The Cape May Clinic is on the same USCG base where LCDR Amores attended boot camp at 18 years of age. He described one of the most rewarding experiences since joining the USPHS as the opportunity to work at the Samuel J. Call Health Services Center, returning as a medical officer to serve USCG recruits at the site where he attended recruit training years ago.

LCDR Amores learned of the USPHS in December 2020 while deployed as an Auxiliary Medical Officer to the USCG Headquarters clinic in Washington, D.C. As a volunteer, he performed periodic health assessments on active-duty service members. This deployment provided LCDR Amores the opportunity to work alongside active duty USCG and USPHS medical personnel, gaining an understanding of what a career in the USPHS would look like for a medical officer. Nearly two years after this deployment, LCDR Amores attended Officer Basic Course (OBC) 138/11, where he was the graduation speaker, and was commissioned as a medical officer. When asked what recommendations he has for officers who may be faced with a similar deployment and challenge, LCDR Amores encouraged officers to remain flexible, pointing out that USPHS officers are known for their problem-solving skills and can always find a way to add, rather than to subtract, from a situation.

During the COVID-19 pandemic, LCDR Amores served on the forwardmost area of the front lines, in New York City's battle against COVID-19. He reported that serving on the frontlines "was and is the closest thing to battle most physicians and other health care professionals will ever see," a feeling many USPHS officers can relate to.

When asked what resiliency as a USPHS officer means to him, LCDR Amores responded with: "Resiliency to me is flexibility. It is the ability to bring solutions instead of problems to the forefront, and to adapt to situations as necessary, to make the best of any situation." He has also learned over the course of his career that effective leadership is an active, hands-on, busy role - never passive.

LCDR Edward D. Amores, MD, MBA, CAQ-SM, FACEP

LCDR Amores' advice for students or young professionals considering a career in the medical field or in the USPHS: be confident that your desire to have a career in the medical field is above all other options and seek experience and exposure to reinforce that desire. He also shares that "a career in medicine is a wonderful career choice for those who desire it from deep within, but not for those whose motivations come from external sources." He concluded his advice by recommending that those who value service to others above all else should consider a career serving with the USPHS.

Though he is new to COA, LCDR Amores is already seeking opportunities to serve as a branch officer. LCDR Amores' long-term goals as a USPHS officer include serving at the flag officer level, should his career take him there, while serving as a USPHS Medical Officer.

LCDR Amores' parting advice for other officers is the advice he gives himself: "If you believe, then you can achieve". He also shared that he is honored to be serving alongside each and every USPHS officer all enlisted and commissioned USCG personnel.

OBITUARIES

CAPT Dorothy Reese Bloomfield

Bethesda, MD – CAPT Dorothy Bloomfield was born on October 13, 1920 and passed away at her home in Bethesda on February 9, 2022. She commissioned in the U.S. Public Health Service in 1947 after completing a bachelor's degree at Temple University and a Master's in Public Health from Yale. Early in her career, she was involved in tuberculosis research on the Navajo Indian Reservation. After being assigned to the State Department in Vietnam, she returned to the US and became a consultant in the Division of Nursing in the USPHS. After retiring from USPHS in 1977, she became a consultant in the Office of Academic Affairs of the Department of Veterans Affairs. She retired from the VA in 1985. She was preceded in death by her first husband, Everette Dixie Reese, who was killed in Vietnam in 1955. She was also preceded in death by her second husband, Arthur Bloomfield. She is survived by her son, Alan Reese and his wife, Dana Smith of Memphis, TN and several nieces and nephews.

CDR George J. Butler - Life Member

George Joseph Butler died on March 18, 2022, in Mesquite, NV. George was born in San Francisco, CA on June 21, 1931. He graduated from St. Ignatius Preparatory School and then enlisted in the U.S. Air Force. In the Air Force, he joined the Aviation Cadets and became a Radar Intercept Officer, thus igniting his love of flying.

After the Air Force, George received his Bachelor of Science and Master's degrees in Public Health & Sanitation Safety Engineering. He then served in the U.S. Public Health Service for 15 years, where he attained the rank of Commander. After leaving the USPHS, George began his own consulting firm.

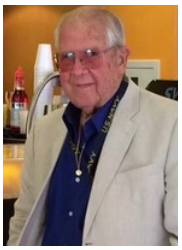
George married Virginia Gilbert in 1954 and had 3 children: Leslie, Tracy & Greg. In 1981, he met Catherine (Kitti) Lorenzo, his best friend, confidante and adventure companion. They were married 31 years. George loved to travel, fly single and twin engine airplanes and made many friends during his 90 years.

In lieu of flowers, the family suggests a donation to the American Lung Association or charity of choice.

CAPT William David Compton

After a long battle with pancreatic cancer, Captain William David Compton, USPHS, Ret. passed away on April 14, 2022. On December 10, 1947, David was born in Anadarko, OK, to William J. and Kathryn J. Compton of Gracemont, OK. He was a 1966 graduate of Gracemont High School. He married Mary Ann Kobza of Anadarko, OK, on May 23, 1970. A few weeks later, he graduated from Southwestern Oklahoma State University in Weatherford, OK. David served in the US Navy from (1970-to 1976) and was stationed in the Philippines during the Vietnam War as a cryptologic technician. David received a Master's of Public Health from the University of Oklahoma in 1976. He then began a 26-year career (1977-2003) as a commissioned officer in the US Public Health Service, serving for the Indian Health Service in Wewoka, OK; Ada, OK; Phoenix, AZ; and Aberdeen, SD.

David is survived by his wife of 51 years, Mary Ann of Denison, TX; son Major Matthew Compton, USAF, and his wife Elisa of San Antonio, TX; daughter Laura, of Kalispell, MT; and son Richard, of Denison, TX. In lieu of flowers, two of David's favorite charities were Disabled American Veterans and American Red Cross.



CAPT Felix Albert Conte

January 7, 1921 - January 23, 2022

Felix Albert Conte, 101, of Delray Beach, Florida passed away Sunday, January 23rd of natural causes.

Felix was born in Naples, Italy to Elisa and Pasquale Conte. He was the oldest of three children. In 1928, at age 7, Felix and his family left Italy and arrived in Boston, MA.

At age 19, when WWII started, he joined the Navy. At 24, he completed his degree, and married Frances Spuria. He and Frances moved to San Francisco, California where their three children were born (Carolyn, Richard, and Janet) and Felix joined the Unites States Public Health Service as a Pharmacist.

Felix retired as a Captain in the USHPS but was always pursuing his love of the sea. He was Commodore of several yacht clubs. Felix was highly active in his church, St. Vincent Ferrer Catholic Church and the Knights of Columbus. He was part of the neighborhood Community Board and was an active part of their community. On March 8, 2021, Barbara died and Felix continued to keep his routine of life going with the help of his children.

CAPT Cecilia Catherine Doak - Life Member

Carlsbad, California - Cecilia Catherine Doak passed away on August, 1 2022 at the age of 99. Cecilia was born on November 22. 1922.

CAPT Carl M. Leventhal, M.D.

Carl M. Leventhal, M.D., died peacefully on Wednesday, February 2, 2022, at the age of 88. He was born in 1933 in the Bronx, NY to Anna and Isidor Leventhal. He graduated from the Fieldston School, Harvard University (A.B. 1954), and the University of Rochester School of Medicine.

After completing his training and meeting his wife in the Boston area, he moved his young family to Maryland in 1964 and had a distinguished career at the National Institutes of Health, the Food and Drug Administration, and the White House Office of Science

see **OBITUARIES** *continued on page 18*

Studying Global Health with the Uniformed Services University for Health Sciences

by CDR Mary Thoennes RPh, BCACP, CDCES

The Uniformed Services University for Health Sciences (USUHS) offers a distance learning graduate certificate in Global Health and Global Health Engagement (GH). Kickbush describes global health as 'those health issues that transcend national boundaries and governments and call for actions on the global forces that determine the health of people'.1 The GH courses at USUHS focuses on the way uniformed service members deliver health care in the GH setting - both in disaster and non-disaster situations.

The USUHS GH program is accredited, and the credits can be transferred to other educational institutions. Students earn a graduate certificate after successfully completing 15 credit hours. There is no set time frame to complete the coursework for a certificate. Applications open in February 2023 with a start date in August 2023.

There is no tuition for qualified students, however some classes may require students to buy or borrow books. The only prerequisite of the GH program is a completed Bachelor of Science degree. The GH program admits a maximum of 200 students per year and is open to US uniformed service members, US government agency employees, and military officers from partner nations including Australia and the United Kingdom. Active duty and reserve officers are given priority, while employees from USAID, DHHS, and the Department of State may apply.

I started the GH courses in 2017 to determine if I could keep up with the vigorous pace of a distance learning program while working full time. Most classes run for 11 weeks, with no classes offered in summer. There are usually a few classes offered each session, although I only took one class at a time. The first 2 classes, GH1 and GH2, should be taken sequentially to

introduce the learner to the fundamentals of GH. The classes can be taken each quarter or you can take a break between classes. Some classes have mandatory weekly classes online for group discussion and questions, while other classes are asynchronous and rely on discussion boards and papers to fulfill class participation requirements.

Student cohorts are usually located on several continents. I met service members stationed around the world. Students had diverse experiences within the uniformed services, which lead to insightful discussion.

Class materials included mandatory readings and recorded lectures, while assignments included essays and classroom discussion (during class or via discussion boards). Some classes were heavy on reading, so I utilized audiobooks from the library whenever I could.

Class subjects included economics, Millennium Development Goals, ethics, abortion, and overseas labs. I learned the difference between medical missions and programs aimed to increase the capacity of health care in an given area. We discussed how other countries provide international medical interventions.

I enjoyed the sessions when we had guest speakers. We reviewed the use of medical missions with Robert Wilensky, the author of Military Medicine to Win Hearts and Minds: Aid to Civilians in the Vietnam War. With Nina Munk, the author of The Idealist: Jeffrey Sachs and the Quest to End Poverty we looked at the hard ethical questions about how the US government and private entities have used medical services to influence citizens in other countries vs providing humanitarian aid.

I cannot close without mentioning Dr. Bradley Boetig, the director of the GH studies. Dr. Boetig does an amazing job of encouraging class discussion and sharing diverse ideas. I remember a class session that looked at the slow uptake of golden rice by farmers in nations that routinely experience famine. Golden rice is a genetically modified, fortified crop that can prevent vitamin A deficiency, which can decrease morbidity and mortality and prevent blindness. Everyone in the class discussion supported the growth and consumption of golden rice. As a farm kid, I played devil's advocate for the duration of the discussion, providing insight into the autonomy of farmers. I also raised cultural concerns that may come into play when switching from local varieties of rice to the genetically modified golden rice.

I did enjoy learning about global health through USUHS's program and found the pacing appropriate for graduate studies. If you are interested in the program, contact the admissions office at USUHS or review the program information at:

https://medschool.usuhs.edu/pmb/education/global-health-distance-learning-program

1 Kickbush I. The need for a European strategy on global health. Scand J Public Health. 2006;34:561–5. [PubMed] [Google Scholar]

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Public Health Service Veterinarian Advances Readiness and Resiliency of NDMS Responders

by CDR Wanda Wilson Egbe DVM, MPH, Dipl. ACVPM

From August 23 - August 26, 2022, the Health and Human Services (HHS) Administration for Strategic Preparedness and Response's (ASPR) National Disaster Medical System (NDMS) held an in-person training summit. The NDMS is a coordinated network of 4,600 authorized intermittent federal employees organized into teams and trained to deploy in the event of a natural or manmade disaster, public health emergency, or large-scale special event. The training summit provided a comprehensive in-person training program to over 1,100 NDMS intermittent employees and other emergency support function (ESF) partners. After over two years of continuous responses to the COVID-19 Pandemic, the "back to basics" approach of the training ensured that the NDMS work-force can support health and medical challenges resulting from natural disasters (including infectious disease epidemics), technological catastrophies, terrorist attacks, and other extraordinary national events.

The summit tranings focused on teaching responders practical skills for operating in a deployment environment and hands-on familiarization activities using specialized deployment gear. The training courses included a "bootcamp" for new employees that described their roles and missions, aeromedial evacuation procedures that taught responders how to quickly and safely move critical patients to safe locations, medical and veterinary patient care, mortuary case management, public health, and leadership skills.

CDR Wanda Wilson Egbe, the program director of the NDMS National Veterinary Response Team (NVRT) led the development of the veterinary sessions that provided more than 30 contact hours of training, combined with hands-on skill stations on critical tasks and competencies needed to improve readiness and resiliency. Trainings included courses on large animal first-aid and technical rescue, infectious/zoonotic disease outbreak management, biosecurity in zoological facilities, canine decontamination techniques, and foreign animal disease response.

CDR Egbe conducted a tabletop exercise involving a zoonotic disease outbreak in a co-habitated shelter post-hurricane incident. The audience contained a mixture of veterinary, medical, and command staff and mortuary specialists. This collaborative approach was one of the highlights of the summit for CDR Egbe. "It was a great opportuntity to increase the knowledge of non-veterinary participants on the importance to taking a "One Health " approach to reponse on every mision. It was exciting to see my colleagues analyze a real-world scenario and exchange approaches to handling an infectious disease outbreak where animals may be the source of infection."

A student practices bandaging a horse's hind leg.

The NDMS training was sucessful and provided an opportunity to train and integrate federal public health and medical responders and elevate their preparedness and response acumen to best serve their local, state, regional, tribal and territorial, and federal partners in the event of an emergency.

OBITUARIES from page 14
and Technology Policy. He was predeceased by his spouse, Brigid G. Leventhal, M.D. He is survived by his children, George (Soraia) Leventhal, Sarah Roark, Dinah (Patrick Lacefield) Leventhal, and James (Karen Klier) Leventhal

In lieu of flowers, memorial contributions may be made to The Brigid G. Leventhal, M.D. Memorial Lectureship at The Johns Hopkins Kimmel Cancer Center.

CAPT George John Nemo

George John Nemo, PhD, passed away peacefully on Saturday night, March 19, 2022, surrounded by his loving family, at the age of 82. Born on January 3, 1940, George was a 1957 graduate of Donora High School in Pennsylvania and was a proud alum of St. Vincent College in Latrobe, Pennsylvania, where he is an Alumni of Distinction Award recipient. He went on to receive his doctorate from Catholic University in Washington, D.C., in Virology and Microbiology.

Dr. Nemo had a distinguished career as the Director of Blood Resources, National Heart, Lung and Blood Institute at the National Institutes of Health (NIH), where he authored numerous papers and received many prestigious awards.

He is survived by the love of his life and wife of 55 years, Mary Ellen, and their three daughters, Mary Ellen, Kary, and Christina.

In lieu of flowers, the family requests memorial donations in his memory go to the NIH Children's Inn at 7 West Drive, Bethesda, MD 20814 (www.childrensinn.org).

CAPT Jack Poland, MD – Life Member

Fort Collins - Jack passed from this life on February 18, 2022, at the age of 92. He is survived by his wife of 69 years, Sue Allen Poland, son Robert (Barbara), daughter Cindy Burnham (Bruce).

Jack Dean Poland was born on January 30, 1930, the third son born to Pinkney and Bessie (Hamm) Poland in their farmhouse near the small town of Isabel, Kansas. He grew up on that farm with his parents and brothers.

In 1941, Jack met Sue Allen at Harding University, and later married her while on leave from the Army on Christmas Eve, 1952. They were married 69 years. After his Army duty, Jack entered KU medical school. After medical school, Jack completed an Epidemic Intelligence Service (EIS) fellowship which set the course for the rest of his career.

In 1968 Jack and Sue moved to Ft Collins CO, where he would serve the remainder of his career as the Chief of CDC's Plague Lab. His scientific accomplishments there included elucidating the biology of Colorado Tick Fever, decreasing the incidence of human plague and evaluating the Japanese Encephalitis vaccine.

see **OBITUARIES** *continued on page 22*

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Spiritual Wellness

by LCDR Katrina Redman, MT, SPOC, M.Div., Chaplain (BGCT)

What is Hospitality?

It's November, and that means it is time to gather and feast with family and friends for Thanksgiving! But WHY?!? What good does it do for us to open our homes to loud travelers and rowdy kids?! Let's be honest, for many people it is a dreaded mandatory event that they want to avoid. So, how can we make it mean more to us?

The cornucopia is a common symbol used to represent Thanksgiving. It represents a curved, hollow goat's horn. Okay, why is it full of fruits and veggies? It is a symbol with origins in Greek Mythology. The ancient Greek god Zeus is sometimes called Zeus Xenios, and as a protector of travelers, he embodied the religious obligation to be hospitable to travelers. Mythology states that Kronus, Zeus' father, wanted to devour him (see how the Thanksgiving family drama started?). Zeus was hidden on Mount Ida and nourished with milk by the goat goddess, Almathea. Zeus accidentally broke off one of her horns and it became a never-ending supply of nourishment. That's why it is called the "horn of plenty" and it is used to symbolize a bountiful harvest to share with others. This is hospitality. Yes, drama started this, but love finished it.

That is the point of hospitality, love. Hospitality is the friendly and generous reception and entertainment of guests, visitors, and strangers. The mindset of hospitality is to make the guest feel wanted and appreciated. In other words, that their life has value and meaning. Spirituality is how we define our purpose, meaning, and value. Religion is how we practice that definition. When we show others that their life has purpose, meaning, or value, regardless of whether it matches our own, we show mercy, compassion, and love. We also show religious inclusivity. Isn't that beautiful! In other words, it demonstrates through our actions what loving our neighbors is all about.

How can we apply this to our officership? Well, we show it by being a respectful guest when we go on deployments; we show it in how we welcome new officers to the Corps; and we also show it in how we treat each other by showing that we value and appreciate our fellow officers. May our Corps, our actions, and our words always demonstrate hospitality. Happy Thanksgiving, everyone!

Education: Hellenism

The modern practice of ancient Greek Mythology centered around polytheistic and animistic worship. Devotees worship divinities, spirits of nature, underworld deities, and heroes. Spiritual and physical ancestors are also greatly honored.

Spiritual Exercises

1. https://greekreporter.com/2022/08/21/philoxenia-the-ancient-roots-of-greek-hospitality/
2. Book: God's Welcome: Hospitality for a Gospel-Hungry World by Amy Oden
3. Article: https://www.researchgate.net/profile/Carol-King/publication/222115684_What_is_hospitality/links/59ecb65da6fdccef8b0dbd74/What-is-hospitality.pdf

Questions? Comments? Contact me at khredman@hotmail.com.

Member Spotlight: Distinguished Women in Pharmacy Recognition

by LCDR Carla Chase, CCC-SLP.D.

COA member and COF Board Trustee, retired Rear Admiral Pamela Schweitzer was nominated by a group of her peers and selected for the American Pharmacists Association (APhA) Women in Pharmacy Recognition Campaign award. She is now included in an APhA exhibit highlighting many firsts for women in field of pharmacy in the U.S. Her nominators labeled her as a leader in every professional role throughout her career, including becoming the first woman Chief Pharmacist Officer (CPO) in the history of U.S. Public Health Service (USPHS) Commissioned Corps. Throughout RDML Schweitzer's career, she made balancing family responsibilities with professional life a priority so that each complemented the other. She effectively developed working habits to support that balance in order to concentrate on doing the most impactful tasks in both environments. RDML Schweitzer has served within Indian Health Service (IHS), Centers for Medicare and Medicaid Services (CMS), the Veterans Health Administration (VHA), and now in the private sector. She continues to pursue opportunities where her work will improve health in our communities.

Early in her career, as noted by her peers, RDML Schweitzer helped jump start the careers of 170 residents by coordinating and streamlining IHS and Tribal pharmacy residency programs, over a 10-year period, as National IHS Pharmacy Residency Coordinator. To strengthen program and support stability, she organized IHS and Tribal Resident preceptors and coordinated training to meet APhA and ASHP residency accreditation requirements, performed on-site pre-accreditation checks, and prepared multiple project leaders to provide ongoing leadership and ensure program sustainability.

RDML Schweitzer was instrumental in using her knowledge of the VHA Electronic Health Record (EHR) and the VHA CMOP Program, which provided pharmaceutical care to rural remote hospitals and clinics, to facilitate drafting of an inter-agency agreement with the VHA to bring much-needed VA systems into the IHS in support of patient care. This innovation has dramatically improved access to medications for tribal communities.

At CMS, RDML Schweitzer used her project management skills to support implementation of the Affordable Care Act. She was also able to provide subject matter expertise in addressing pharmaceutical care. This included pharmacist reimbursement, opioid policies, drug pricing policies, operations, and systems.

RDML Schweitzer has always focused on her family through involvement in their activities and sharing family adventures by hiking, backpacking, mountain climbing, and traveling. As a direct result of her family activities, she became known as a 4-H community leader and trainer. She hosted international exchange students from the Ukraine, China, Germany, Sweden, and Brazil.

RDML Pam Schweitzer with CAPT (ret) Chris Watson (left) and former CPO, RDML (ret) Richard Church (right) in front of the APhA building on D.C. mall.

She has shared her skills through community organizations and served at community events on numerous occasions.

While serving as Pharmacy CPO, RDML Schweitzer saw the need to develop a way to prepare other women for leadership through a Women's Leadership Support Group (WSLG). This group provided a way for women to share critical information regarding promotions, home-work life balance, and advice for mothers to consider before making career changes. At her retirement ceremony, the WSLG honored RDML Schweitzer for her vision and for creating the first leadership support group aimed specifically at mentoring women within the USPHS.

As mentioned by her peers, RDML Schweitzer has a record of professional achievements at every level of service over her entire career. She has always been a keen observer identifying key areas where services for patients, communities, her profession, and public health could be improved. She embodied that in each of her service roles. She has effectively used her professional roles to influence, coordinate, and implement policy and practices across federal, state, tribal, academic, and professional organizational lines in support of delivery of pharmaceutical care to the public.

RDML Schweitzer has been a member of COA throughout her career. She retired in 2018 and has maintained her membership since. Although initially she was told to join, as a junior officer, she quickly realized it was the comradery, meeting her fellow officers, other category officers, and all of the Surgeon Generals that drove her to stay connected and be around our PHS family. When describing the privilege of having the opportunity to be a part of such a great team, RDML Schweitzer says "what an honor it is to work with so many amazing people who really want to change the world and improve public health."

Raising Awareness, Increasing Access Part 1

by LCDR Marie S. Jeoboam, MD, MS, FAAFP

It is no secret that lung cancer is the leading cause of cancer deaths in America. There is now hope. In recent years, a test known as a low dose computerized tomography (LDCT) scan has been used to study people at high risk of getting lung cancer. These people at higher risk include current smokers, former smokers, and those exposed to secondhand smoke. When screening occurs early and lung cancer is detected, it is more likely to be curable, thus reducing mortality rates. A LDCT scan is a special kind of X-ray that takes multiple pictures of the patient lying on a table that slides in and out of the machine. A computer then combines these images into a detailed picture of the lungs.

The only downside to getting a LDCT is the exposure of a very limited amount of radiation that is more than a chest x-ray but less than a standard CT scan. The United States Preventative Service Task Force (USPSTF) criterion for this elective procedure is age 50 to 80 years and individuals who have a 20 pack-year smoking history and who currently smoke or have quit within the past 15 years. During the COVID-19 pandemic, many elective procedures were put on hold, which has led to a substantial decline in cancer screening.

It is important to highlight the impactful programs being conducted at the Catawba Service Unit (CSU) in Rock Hill, SC. Among the 1,926-user population, 37.8 percent use tobacco products. Apart from serving the Catawba Tribe, the CSU provides services to members of another 100 different Tribal nations. These members are limited to access due to the structure of the Indian Health Service purchased/referred care system. However, by partnering with the Levine Cancer Institute in our local community, we can leverage resources that would otherwise be costly to those patients. Over the last 3 months, the clinical team has worked diligently to schedule patients for a mobile lung bus, resulting in 51 LDCT scans. This amounted to a total savings of $6,914.07. It is important to note that if lung cancer is caught prior to spreading, the likelihood of surviving 5 years or more increases to 60 percent. With this new screening tool, medicine has a fighting chance against lung cancer.

Charlotte Radiology's mobile mammography program provided 55 mammograms to the Catawba Tribe this past summer.

The CSU did not stop with lung cancer screenings, knowing that breast cancer impacts the Catawba Tribe and is the most common cancer in women in the United States. According to American Cancer Society, it was estimated in 2020, about 268,900 new cases of invasive (spread to surrounding breast tissue) breast cancer were diagnosed in women, with another 48,530 new cases of non-invasive (in situ) breast cancer. It was also estimated that about 43,350 women would die from breast cancer in 2020. The 5-year survival rate is 99 percent for 64 percent of breast cancer cases diagnosed at a localized stage. The USPSTF recommends biennial screening mammography for women aged 50 to 74 years.

Half of women, 40 years and up, schedule annual mammograms; the other half do not. One of the primary reasons women delay mammograms is because they feel they cannot take time away from work, lack access to care, or have insurance coverage concerns. Understanding this, Charlotte Radiology's mobile mammography program brings early breast cancer detection to the workplace, local clinics, and other community venues, providing women with a more convenient option for annual screening mammography. The mobile breast center offers the same advanced 3-D imaging technology along with a staff of all-female certified technologists. In partnership with Levine Cancer Institute and the Atrium Health Foundation, Charlotte Radiology provides mobile breast center support for Levine Cancer Institute: Project PINK, a program that provides free annual screening mammograms and follow-up care for eligible uninsured/underinsured women in Rock Hill and the surrounding area. During the months of May through July, the mobile bus was scheduled at the CSU resulting in completion of 55 mammograms, which led to a savings of $5,971.90. These mobile bus events provided non-Catawba members an opportunity to get breast cancer screening at no cost to them. As a result of the ongoing efforts made by the CSU, the clinic was awarded the 2022 Community Partner Award in partnership with Levine Cancer Institute.

References

Breast cancer statistics: How common is breast cancer? American Cancer Society. (n.d.). Retrieved October 9, 2022, from https://www.cancer.org/cancer/breast-cancer/about/how-common-is-breast-cancer.html#:~:text=The%20American%20Cancer%20Society's%20estimates,will%20die%20from%20breast%20cancer.

Home Page: United States Preventive Services Taskforce. Home page | United States Preventive Services Taskforce. (n.d.). Retrieved October 1, 2022, from https://www.uspreventiveservicestaskforce.org/uspstf/

EXECUTIVE DIRECTOR from page 1

Program (MVP), a research study from the VA Office of Research and Development aimed to forecast health outcomes and improve treatments. The study will take a gene-based approach while factoring in exposure and lifestyle factors, combining them with genetic information. The VA knows that the civilian population has not been exposed, as we have, to the environmental, psychological, and physical challenges and threats to our bodies.

I was happy to be invited to participate in the study but was even more pleased when I saw the box that listed the branches of service to include the U.S. Public Health Service. So many times, when we hear about veteran's programs, they include only the Armed Forces. This is not true with the VA; they have been very inclusive.

In the newly implemented 2022-2028 VA Strategic Plan, veterans are defined as "individuals who have served in one of the eight uniformed services and meet the length of service and character of discharge requirements prescribed by law: Army; Marine Corps; Navy; Air Force; Space Force; Coast Guard; *some members of the Public Health Services* (sic) and the Commissioned Officer Corps of the National Oceanic and Atmospheric Administration (NOAA); as well as eligible members of the Reserve and National Guard components; and World War II Merchant Mariners." I immediately wondered what they meant by "some members of the Public Health Services (sic)," so I reached out to the VA Chief of Staff, Ms. Tanya Bradshear. Last week I was pleased to hear back from Dr. Justin L. Abold-LaBreche, Deputy Assistant Secretary for Planning and Performance Management, Office of Enterprise Integration at the VA. He apologized for both the confusing reference to "some members," and acknowledged the typographical error that resulted in the plural reference to the U.S. Public Health Service. He concluded his correspondence by saying:

"Thank you for your input on the VA Strategic Plan (and thank you for taking the time to read it so thoughtfully). We are making the corrections you noted – both with respect to the US Public Health Service (vs Services plural) and to improving the clarity with respect to acknowledging the Veteran status for former members of the USPHS. It may take up to a month for these changes to be reflected online due to the timeline for ensuring the updated document retains its accessibility features. I have written myself a reminder to reach back out to you when the updated document goes live"

COA is here for you, advocating on your behalf for parity. We do not want you to be the "Invisible Corps" any longer, and vow to chip away at inaccuracies and misconceptions, bit by bit. If you are a former or retired officer and have not yet applied for your Veterans ID card, I encourage you to do so. Hopefully, this card will help you access benefits and services that were created to thank you for your service while COA continues our advocacy for retirees to receive a DD214. To all Commissioned Corps officers, active-duty, reservists, and former and retired officers, thank you for your service. This holiday started as a day to reflect upon the heroism of those who died in our country's service. It is now a celebration to honor America's veterans for their patriotism, love of country, and willingness to serve and sacrifice for the common good.

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GILEAD

OBITUARIES from page 18

CAPT Joel J. Vernick

Annapolis, MD - Joel Vernick, 98, formerly of Garrett Park, MD, died on Sunday, June 19 at the Atria Manresa retirement community in Annapolis. Born on June 30, 1923 in Brooklyn, NY to the late Jack and Anna Vernick, Joel served in the U.S. Army during World War II. After the war, he earned a Master's Degree in social work and began a lengthy career as a child psychologist at the National Institute of Health in Bethesda, MD. Joel also worked in the antique clock field. He repaired clocks for the State Department, the White House, and thousands of others. In addition to his parents, Joel was preceded in death by his wife of 64 years, Joan D. Vernick. He is survived by his sons, Kenneth Vernick of Paris, France, Andrew Vernick of Arnold, MD and Lee Vernick of Portland, OR; and his grandchildren, Christopher, Justin, Noah, Meaghan, Gillian, Marina and Paloma. Interment, with military honors, will take place at Arlington National Cemetery at a later date.

PHS Commissioned Officers Foundation

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All other donations were made to the COF General Fund

We Welcome New Members of COA, October 1 - October 31, 2022

CAPT Bruce Bernard, *OH*
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LTJG Elena Navas, *AK*
LT Hannah Segaloff, *WI*
LCDR Jeffrey Welsh, *OK*
CDR Kellie Williams, *LA*
LCDR Steven Yang, *MD*

LEGISLATIVE from page 2
of our goals, and we will not rest until we bring parity of benefits to the officers of the USPHS Commissioned Corps.

FY 2023 Update

Below is a review of the current iteration of the National Defense Authorization Act for Fiscal Year 2023 that pertains to the USPHS Commissioned Corps.

1. SEC. 512. SELECTED RESERVE AND READY RESERVE: Order to Active Duty to Respond to a Significant Cyberincident.
   - In this section, the Secretary of Defense may, without the consent of the member affected, order any unit, and any member not assigned to a unit organized to serve as a unit, of the Selected Reserve or Individual Ready Reserve to active duty for a continuous period of not more than 365 days.
2. SEC. 705. STUDY ON PROVIDING BENEFITS UNDER TRICARE RESERVE SELECT AND TRICARE DENTAL PROGRAM TO MEMBERS OF THE SELECTED RESERVE AND THEIR DEPENDENTS.
   - In this section, the Secretary of Defense may conduct a study on the feasibility, potential cost effect to the budget of the Department of Defense, changes in out-of-pocket costs to beneficiaries, and effects on other federal programs of expanding eligibility for TRICARE Reserve Select and the TRICARE dental program.
3. SEC. 6039E. IMPROVED APPLICATION OF EMPLOYMENT AND REEMPLOYMENT RIGHTS OF ALL MEMBERS OF UNIFORMED SERVICES
   - This section amends Paragraph (5) of section 4303 of title 38, United States Code to include the USPHS Commissioned Corps
4. SEC. 601. TEMPORARY CONTINUATION OF BASIC ALLOWANCE FOR HOUSING FOR MEMBERS WHOSE SOLE DEPENDENT DIES WHILE RESIDING WITH THE MEMBER
   - This section amends Section 403 of title 37, United States Code to temporarily continue allowance for service members whose sole dependent dies while residing with the member. The amendment describes a member as a member of the uniformed services.

Congress will reconvene on November 14th and plans to vote on the NDAA before the end of the session in late December.

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