

The Mold that Changed the World



Real-life public health experts join the cast of theater professionals to perform *The Mold That Changed the World* (Photo: Robin Mair)

by CAPT Elissa Meites, MD, MPH

Antimicrobial resistance (AR), which caused more than 1.2 million deaths in 2019, is ranked by the World Health Organization as one of humanity's top 10 global public health threats. AR is considered a complex problem that requires creative solutions to communicate and collaborate across disciplines.

USPHS officers stand ready to respond when their skills are needed to address urgent public health issues. In August 2022, a casting call was issued for "scientists or health professionals who can sing" to perform alongside a professional cast, acrobats, and a 5-piece band in a full-length musical about AR. CAPT Elissa Meites, a senior medical officer

at the Centers for Disease Control and Prevention (CDC), has been singing with the USPHS Music Ensemble since 2017. When the call came to participate in this unique project, CAPT Meites drew upon her deployment experience (her bag was already packed) and headed to the theater.

The show tells the history of the Nobel Prize-winning physician Alexander Fleming and the accidental discovery of penicillin from mold, with 17 songs, including "Penicillium notatum," "The Lancet," and "Wonder Drug." In addition to learning the music and lyrics, volunteers — 19 from CDC — spent evenings and weekends practicing acting, choreography, and quick costume changes for scenes set in a war hospital, a laboratory, a

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from the
Executive
Director



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

The week prior to Thanksgiving I traveled to Washington, DC to attend an in-person Executive Session of the Military Health System (MHS) Military Service Organization (MSO)/Veteran Service Organization (VSO) quarterly meeting with Lieutenant General Ronald Place, Director of the Defense Health Agency (DHA). This meeting was special for several reasons. Due to the pandemic, these meetings have been conducted remotely over the past two years. It was nice to show in person, shake hands with fellow MSO/VSO leaders who might have only met each other through video, engage in a bit of chit-chat, and forge friendships. This gathering was also important as an opportunity to thank LTG Place for his selfless service as he looks toward retirement. Being the Defense Health Agency Director is a heavy lift. The DHA Director "directs the execution of ten joint shared services to include the TRICARE health plan, pharmacy, health information technology, research & acquisition, education & training, public health, medical logistics, facility management, budget

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Raising Awareness, Increasing Access Part 2

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

Osteoporosis is condition that affects the women of the Catawba community. Bones stop growing in length in the early 20's, which is referred to as peak bone mass.¹ Once an individual reaches this peak, they start to lose bone mass that is not replaced. This bone loss can lead to osteopenia, which can then progress to osteoporosis. Over time, the bone left behind becomes brittle and more likely to break. In the United States, it is estimated that about 54 million people have osteoporosis.³ Osteoporosis can occur in both men and women, but women are four times more likely to develop the condition than men. After age 50, one-in-two women and one-in-four men will have an osteoporosis-related fracture in their lifetime.¹

Due to the lack of attention, osteoporosis is often called the 'silent disease' and is responsible for more than two million fractures each year, a number that continues to grow. Most people who suffer from this condition are not aware until they have a broken bone and, even then, 80 percent still do not receive definitive diagnoses or treatments.¹ Early diagnosis is important because one broken bone increases the risk of suffering additional broken bones. These events can result in long-term, life-changing disabilities and loss of independence. The long-term loss of independence and mobility can put physical, emotional, and financial strain on patients, their relatives, and their friends. The United States Preventative Service Task Force (USPSTF) recommends screening for osteoporosis with bone measurement testing to prevent osteoporotic fractures in women 65 years and older and postmenopausal women

younger than 65 years at increased risk of osteoporosis.

Treatments can slow the rate of bone loss if an individual has osteoporosis, thus reducing risk of bone fractures before they happen. There are steps a patient can take to prevent osteoporosis from ever occurring. This includes weight-bearing exercises and diet. If a patient progresses to osteoporosis, clinical treatments, such as oral and injectable regimens, are recommended. While researching this condition, it was noted that there is a significant economic burden associated with fractures, including a high total all-cause cost-of-care. Screening costs roughly \$200, while the cost of total care for a fracture related to osteoporosis is \$30,000, with a net out-of-pocket cost to the patient of \$3,000.³ Given the option, a patient would prefer to have access to early screening than to spend \$3,000 for an initial and possibly subsequent fractures.³ At the start of 2022, the CSU ran a report which identified about 165 patients meeting criteria for screening of osteoporosis. To date the CSU have increased screening by approximately 20 percent from a baseline of zero. As a result of increased screening at the CSU, we are improving the management and reducing the healthcare cost of osteoporosis.

References

1. *About osteoporosis: International osteoporosis foundation*. IOF International Osteoporosis Foundation. (n.d.). Retrieved October 1, 2022, from https://www.osteoporosis.foundation/patients/about-osteoporosis?utm_source=Enigma&utm_medium=cpc&gclid=EAlaQobChMioPaziriL-AIVGcLCBBODDww5EAAYiAAEQLvu_D_BwE
2. *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/>
3. Setareh A. Williams, P. D. B. C. (n.d.). *Economic burden of osteoporotic fractures in US managed care enrollees*. AJMC. Retrieved October 1, 2022, from <https://www.ajmc.com/view/economic-burden-of-osteoporotic-fractures-in-us-managed-care-enrollees>



USPHS Officers Aim High With Support at Joint Base Andrews Air Show

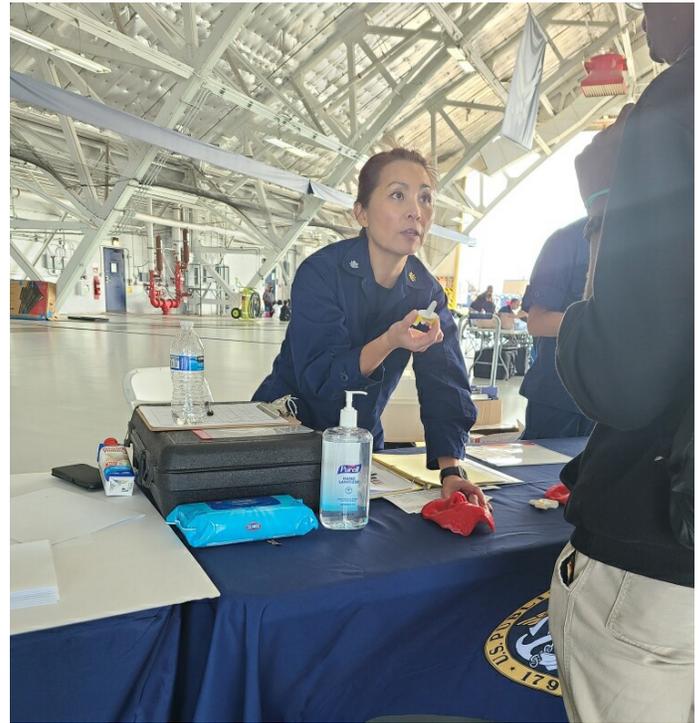
by LCDR Abbas Bandukwala, CDR Leo Angelo Gumapas, CDR Praveen K.C., CAPT David Harvey

The U.S. Air Force celebrated its 75th Anniversary during the 2022 Joint Base Andrews (JBA) Air Show from September 16-18, 2022 with high-ranking officials within Department of Defense and Congress in attendance. In recognition of the Society of American Military Engineers (SAME) National Centennial Celebration, the SAME Washington DC Post celebrated engineering achievements to promote Science, Technology, Engineering, Arts, Math and Medical (STEAM-M) during the JBA biennial Air Show. Working with SAME, the Engineering Professional Advisory Committee (EPAC) led efforts to organize three interactive activities appropriate for kindergarten and first through 12th Grade (K-12) youth and their families that demonstrated engineering principles and its role in improving public health. The stations were a bike that generated electricity to power a stereo, a naloxone demonstration using an EPAC designed 3D printed mask, and water distribution demonstration illustrating water hydraulics concepts through adjusting various valves. Forty-nine PHS Officers volunteered to demonstrate these stations and interact with the families and school classes in attendance. Over 50,000 individuals attended the event over the three-day period, creating an ideal venue for promoting the Public Health Service and to provide public health education.

Each event not only showcased an important public health lesson, but also displayed how Commissioned Corps engineers contribute to the PHS mission. The water supply and distribution exhibit illustrated water hydraulic concepts by demonstrating how water friction and elevation difference influence water flows within a water distribution system. These principles are used by PHS Engineers assigned to the National Park Service and Indian Health Service, where they are responsible for planning, designing, constructing, and administering water and wastewater systems.

Another station that was very popular was the bike that generated electricity, which was used to power a stereo playing music. Students and adults alike all wanted to generate the most power measured in watts. It was entertaining to watch everyone wait in line and then have their turn on the bike. Students and adults observed that the maximum power that was able to be generated was limited by the maximum bike speed. The exhibit taught students the importance of exercise, how electricity can be generated, and how much electricity is needed to run specific appliances.

The last exhibit was an important display on the current opioid crisis. PHS Officers partnered with the Maryland Department of Health to present on the opioid overdose epidemic in Maryland and how to save a life using Naloxone. Organizing naloxone training can raise awareness within a local community on how to save a life from a suspected opioid overdose. PHS Engineers



CDR Michelle Tsai explains how to use Naloxone to save an individual's life from suspected opioid overdose on an USPHS Engineered designed 3D printed mask at the USPHS STEAM-M booth at Joint Base Andrews during the 75th Anniversary of the Air Force on September 16, 2022.

developed a cost-effective alternative to the training masks using a 3D printed version. The cost-effective alternative increases accessibility for communities who want to organize naloxone trainings. The naloxone training mask 3D print file can be found on the National Institutes of Health 3D Print Exchange.

Forty-nine officers from eight different categories enthusiastically participated in the event, volunteering 138 hours in total three days. Officers were able to interact with the 1,952 students and parents who came to the event. Five months of planning was necessary to prepare for this event, including assembling standard operating procedures, completing the exhibitor application, acquiring materials, and recruiting volunteers. In addition, pamphlets for each station and an OASH Communications approved USPHS Engineering Category Information Card to inform the public on USPHS opportunities were drafted. The dedication, professionalism, and willingness of these 49 officers to go serve, without a doubt, resulted in not only a successful event, but also the advancement of the USPHS mission while highlighting public health and engineering concepts. Their involvement in this event helped promote the role of engineering and the connection to public health. The event also served to highlight the opportunities that exist for engineers and other categories within the USPHS.

The EPAC thanks the volunteers for their commitment of their time and resources for making this event possible.

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Adopt-a-Highway Cleaning Event Returns After Two-Year Pause Due to COVID-19

by LCDR Briana Rider, PharmD, CPPS, NHDP-BC, CHEC, LCDR Abbas Bandukwala, LCDR Oliver Ou, PhD, FAC-COR II, LCDR Cynthia Chennault, RDH, BSDH, MPH, and LCDR Jennie Eng, RDH, BSDH

Each year, officers of the U.S. Public Health Service (USPHS), many of whom are members of the D.C. Commissioned Officers Association (DC-COA), take to the streets to clean the one mile stretch of highway (New Hampshire Ave, Silver Spring, MD) in front of the U.S. Food and Drug Administration (FDA) headquarters (White Oak campus) as part of the Maryland Adopt-a-Highway initiative. The Adopt-a-Highway initiative supports the Surgeon General's National Prevention Strategy's strategic direction of healthy and safe community environments. The initiative lets community groups show their pride and keep the roadways litter-free. The goal is to have litter removed from roadways before it clogs storm drains or reaches local streams. Removing the litter enhances the experience for pedestrians and drivers, both residents and visitors. More importantly, it helps maintain a healthy and safe environment because every piece of litter that ends up in our waterways can pollute the natural environment.

This year's event took place after a two-year hiatus due to the COVID-19 pandemic and associated safety precautions. When the event resumed in May 2022, officers faced the daunting task of cleaning the trash that accumulated over the past three years. Having a clean, up-kept neighborhood benefits all members of the community. During the summer, everyone enjoys spending more time outdoors and enjoying their natural surroundings. Removing trash and tidying up a neighborhood can have a big impact on the community, as well as the environment. Besides being an eyesore, litter can disrupt the ecosystem and attract many different insects and rodents—some of which can be vectors for disease. This can be harmful to animals or children who might pick up trash, step on it, or even ingest it.

To accomplish their goal of creating a healthy and safe natural environment, volunteers met



Adopt-A-Highway Initiative at the FDA White Oak Campus 2022

monthly from May to October 2022. During this timeframe, fourteen different officers from three different agencies and six categories participated in the initiative. In addition to making an impact in the community, the bonds created were a pivotal part of the experience. LCDR Jennie Eng reflected on her experience participating in the June and July events:

"I have participated in COA's adopt a highway clean-up for numerous years now, from the dry geographic landscapes of Arizona to the lush and urban community of White Oak. Being one of the first volunteers back in action around the White Oak campus due to the pandemic, I ended up with a trash bag weighing triple of what was the norm. If my calculations are serving me correctly, there are usually 6 clean up events placed on the calendar annually and there was a pause on in-person events for roughly 2+ years, so this effort was 12 times the lift of a normal volunteer event. Nevertheless, it was done, and the camaraderie made was priceless. Every volunteer event had a group of different volunteers. This made meeting new officers very easy. I was happy to be participating back in person. If only trash would virtually disappear; doubtful though."

Of course, safety of event participants was the high priority. A safety brief was conducted prior to each event. As the event sponsor, DC-COA provided volunteers with gloves,

pick-up sticks, safety vests, hand sanitizer, first aid kits, and trash bags. After each event, volunteers gathered at the FDA visitor parking lot to debrief, relax, and enjoy healthy refreshments, also courtesy of DC-COA.

This initiative increased visibility of the USPHS within the community. Two signs bearing the name of the USPHS permanently mark the beginning and end of the one mile stretch of New Hampshire Avenue that the service has adopted. The sign provided great visibility for the Corps to over 10,000 motorists daily. The initiative also encouraged volunteers to get outside and get steps in while helping their environment and community.

Overall, the 2022 operational year was a great success with an estimated 25 bags (250 lbs) of trash and debris removed from the environment, and we can't wait until next year. A special thanks to the following USPHS officers who participated:

Event Leads: LCDRs Abbas Bandukwala, Briana Rider*

Volunteers: CAPT Isatu Bah; CDRs Carla Burch, Shannon Hill and Candice Cottle-Delisle; LCDRs Jennie Eng, Samuel Motto, Oliver Ou, April Bowen Worsley, Cynthia Chennault**, Valeria Moore, Steven Yang; LT Jian (Yin) Leo

*ASPR; **HRSA; all others-FDA



This Time Must Be Different

by RDML Steve Solomon, USPHS (Ret.)
Immediate Past President, PHS
Commissioned Officers Foundation
Chair, COF Resource Development
Committee

The dictionary defines *nepenthe* as “a drug or drink used by the ancients to bring forgetfulness of sorrow or trouble.” In Homer’s *Odyssey*, Helen slips this potion into the wine drunk by veterans of the Trojan War to ease their grief for their lost comrades. In our time, despite the losses caused by the COVID-19 pandemic in the U.S. and around the world, our elected leaders, the media, and the public don’t seem to need any magic elixirs to forget their promises to support improvements and adequate funding for the nation’s public health system.

During the course of the pandemic, we all saw the commitment of public health and healthcare professionals as they did their jobs with admirable dedication. We also saw how their efforts were hindered by a system with inadequate disease surveillance, a disorganized and poorly coordinated network for transmitting information and communicating vital messages to the public, tremendous variability in the capacities of state and local health departments, and the effects of persistent inequities in health outcomes associated with the social determinants of health.

“The pandemic exposed these fundamental weaknesses of the U.S. approach to public

health and highlighted the urgent need for the nation to do much better.” So states the Commonwealth Fund report, *Meeting America’s Public Health Challenge*, (<https://www.commonwealthfund.org/publications/fund-reports/2022/jun/meeting-americas-public-health-challenge>). That report is one of many books, articles, and reviews highlighting a litany of problems caused by structural inadequacies in the public health and healthcare systems. Such reports have been a staple of discussion in the professional world for over four decades, but the pandemic focused a spotlight on those weaknesses that spread that knowledge more widely.

But Congress, it seems, may have moved on. The PREVENT Pandemics Act was introduced last March with an energetic press release, and while it contains only some of the measures needed to address public health needs, it is a start. However, with only a few working days left in the 117th Congress, that bill has not yet been acted upon by the full Senate. The Senate did, however, find time in November to pass a resolution to end the pandemic-related public health emergency declaration, contrary to the wishes of the administration.

And while there has been ongoing discussion in the general media about the possibility of a seasonal surge in COVID cases during the winter months, and a debate about what actions should be taken to forestall it, there appears to have been much less recent discussion of the

underlying problems that have historically caused the U.S. to lag behind other wealthy countries in a variety of health metrics and which clearly contributed to our poorer performance in battling COVID (<https://jamanetwork.com/journals/jama/fullarticle/2798990>).

The Commonwealth Fund report and the library-full collection of several decades worth of written material documenting the unmet needs of the U.S. public health system make many important recommendations. These recommendations often revolve around critical issues such as greater support for the public health workforce, improved surveillance using state-of-the-art technology, better coordination among federal agencies and between the federal government and state and local health departments, and a national effort to address the social determinants of health and the inequities in health outcomes among different communities.

Ultimately, these reports lead to the conclusion that the United States needs a true national public health system, one that is highly responsive and well-coordinated, with a workforce composed of world-class professionals committed to life-long careers in public health. Such a system would feature a strong commitment to providing public health and clinical care to communities poorly served by the current healthcare delivery system with a highly integrated workforce representing all the

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Nursing and Modernization – The Way Forward

by LT Tessa Fletcher DNP, APRN, PMHNP, CAPT Beverly Dandridge MSN, FNP, MSAJS, and LCDR Erica Stoll MSB, APRN, FNP-BC

The Maryland Nurses Association's (MNA's) 119th Annual Conference was held in person at the Maritime Conference Center in Linthicum, MD October 6-7, 2022 after a two-year pause due to COVID-19. "The primary purpose of MNA is to provide direction and a voice for the nursing profession in Maryland."

MNA adopted the acronym RISE (Revitalize, Inspire, Succeed, Evolve)

for this year's conference, embracing the present state of nursing resilience, education, licensure, and workforce. Session topics highlighted the changing professional landscape and the need to change the narrative, provide support to lower the cost of education and increase educators' salaries.

Attendees were encouraged to submit ideas that support the retention of nurses and foster autonomy by increasing compact licenses in states that do not currently participate. Compact state nursing licenses give the ability to practice in other states that are part of the interstate agreement. In addition, the encouragement of legislative representation to support compact licensure for Advanced Registered Nurse Practitioners (ARNPs) and other licensed personnel who are part of the patient care team (e.g., therapists



CAPT Beverly Dandridge, LCDR Erica Stoll, LT Lorna Benoit, and LT Tessa Fletcher stand with the PHERS poster during the Maryland Nurses Association's 119th Annual Conference in Linthicum, MD in October 2022.

and physician assistants) was echoed throughout several sessions. Compact licensure improves the workforce by allowing movement across state borders. It particularly benefits relocated military spouses, increases patient-provider choices, enhances access in rural and underserved areas, and reduces barriers to telehealth.

During the conference, PHS officers attended sessions as members of MNA, led poster presentations on the Public Health Emergency Response Strike Team (PHERST) and Transthyretin Amyloidosis Cardiomyopathy (ATTR-CM), and worked to actively recruit new PHS nurse officers. LCDR Erica Stoll and LT Tessa Fletcher shared information on nursing opportunities within PHS, including Regular Active Duty, PHERST, and Ready Reserve. CAPT Beverly Dandridge

facilitated a poster presentation on ATTR-CM, during which she highlighted the importance of training providers to understand how clinical indicators combined with advancement in research yield early and accurate diagnosis and treatment planning.

As MNA and PHS both focus on the way forward, their organizational challenges and modernization goals are paralleled: addressing the diverse representation of specialties and training with a commitment to developing innovative leaders within their professions; acknowledging an ongoing need to advance health equity through diversity and inclusion; adopting new technology to maintain safety for providers and patients; improving behavioral health support for patients and caregivers; and utilizing global health initiatives.

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different categories of health professionals. This system would view health defense for the U.S. population as a matter of national security and have at its core a health defense force operating as a military service, addressing the epidemic and endemic health problems undermining the social, economic, and political welfare of our country.

Obviously, we have the foundation of such a system in the Commissioned Corps of the U.S. Public Health Service. The Public Health Corps should be better supported, better funded and bigger, and it needs to become fully recognized as the extraordinary and unique resource it is. That is why the Commissioned Officers Foundation will be leading an effort to make the Corps visible, starting with the PBS documentary *Invisible Corps: In the Service of Health*,

and a campaign to educate elected leaders, media representatives and the public about the history of the Corps and how a strengthened Corps would serve as the basis for a new, revitalized and far more effective national public health system.

To be successful, we will need your support. We especially will need the support of retired officers. While our active-duty colleagues, through their work, show every day the value of the Corps and the dedication of its officers, their voices are constrained by their current service. We must not allow the forgetfulness that has always followed public health emergencies to erode support for a new public health system in the United States. Those of us who know the Corps so well and have the freedom to speak out must lead. We can make a difference, and, in that way, our service continues.

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The Role of a Physical Therapist on a Multidisciplinary Team for the Treatment of Childhood Obesity

by Kayla Meeks Dewitt, PT, DPT, TPS, CFPS
Chickasaw Nation Department of Health

Most people only think of physical therapy as part of a rehabilitative treatment regimen related to surgery or injury. However, physical therapy is much more and can include prevention, research and health promotion. Physical therapy is a critical component to a team-based approach to the management of pediatric obesity. To meet the specific needs of a pediatric obesity patient and maximize effectiveness of treatment, a multidisciplinary team is imperative and physical therapists can largely impact the care and treatment needs of patients by providing a more comprehensive assessment and prescribe clinically effective exercise interventions¹.

Thirty-five percent of children and adolescents ages 2-19 in the U.S. are now classified as overweight or obese². Within the Chickasaw Nation, one in three children are considered overweight or obese by the age of 2. This prevalence increases to 50% as children move into adolescence. These trends continue into adulthood with up to 85% of adults from 45-55 years of age being classified as obese. The Centers for Disease Control and Prevention released a study at the end of 2021 that indicated a 3-4% weight gain across the pediatric population during the recent pandemic³. Our data systems show an increase of about 6% in Chickasaw Nation Department of Health (CNDH) patients within this age group during this time period. It is imperative to understand that obesity is a multifaceted disease with most contributing factors being outside our patients' control. This is why it is so important to develop a team-based approach for obesity management.

In 2015, CNDH began Empowered Living and in 2022, Empowered Living established a full-time pediatric obesity management team consisting of a pediatrician, a psychologist, a medical family therapist, a dietitian and a physical therapist. The Empowered Living clinic within the Chickasaw Nation offers children and teens specialized services and resources to assist them in achieving healthy lifestyle goals. Empowered Living provides patients with knowledge, guidance and support. Family members are encouraged to engage in healthy choices and activities to support the child, and to develop a healthy family. Each Empowered Living clinic patient receives a medical evaluation, nutritional counseling, a physical activity assessment and behavioral health counseling.

For each patient, the Empowered Living Team reviews care plans and goals as a team prior to patient visits. This allows for addressing concerns from multiple angles and helps our team reinforce patient goals.

As the lead physical therapist for Empowered Living, my job is to incorporate health promotion, wellness, and fitness and prevention strategies into treatment plans. When treating pediatric obesity patients for obesity I like to focus on the following key actions: pointing out the influence of physical activity on health and development; assessing physical activity and sedentary behaviors at every visit; informing patients of recommended guidelines for physical activity; encouraging patients to reduce daily sedentary behaviors; and encouraging goal setting and providing support for the patient and family.

The physical therapy evaluation includes an interview to identify the following: health risk factors; child and family goals and resources; determine typical physical activity levels; general health of child and family; and identify child and parent willingness or readiness to make health changes. Motivational interviewing is a helpful tool that is used to help patients and families think about an outcome that's meaningful to them and to choose a change related to that outcome.

Encouraging patients to reduce daily sedentary behaviors and increase physical activity levels can be difficult, but is an important part of treating childhood obesity. In turn, patients will begin to see positive effects on high blood pressure, liver function, insulin sensitivity, and cardiovascular disease.

A team-based approach to pediatric obesity management can be applied in diverse practice settings and can be helpful through facilitating change toward a healthier lifestyle. As a physical therapist on a multidisciplinary team, I hope to have a profound effect on patients' lives by helping them achieve fitness goals, regain or maintain their independence, and lead active lives.

References

1. Grossman DC, Bibbins-Domingo K, Curry SJ, et al. Screening for obesity in children and adolescents. *JAMA*. 2017;317(23):2417. doi:10.1001/jama.2017.6803
2. Hales CM, Fryar CD, Carroll M.D., et al. Trends in obesity and severe obesity prevalence in US youth and adults by sex and age, 2007-2008 to 2015-2016. *JAMA*. 2018;319:1723-1725.
3. Lange S. J. Kompaniyets L. Freedman D. S. Kraus E. M. Porter R. Blanck H. M. Goodman A. B. & DNP3. (2021). Longitudinal trends in body mass index before and during the covid-19 pandemic among persons aged 2-19 years - United States 2018-2020. *Mmwr. Morbidity and Mortality Weekly Report* 1278-1283. <https://doi.org/10.15585/mmwr.mm7037a3>
4. Miller WR, Rollnick S. *Motivational Interviewing: Helping People Change*. New York, NY: Guilford Press; 2013.
5. Taylor ED, Theim KR, Mirch MC, et al. Orthopedic complications of overweight in children and adolescents. *Pediatrics*. 2006;117(6):2167-2174. doi:10.1542/peds.2005-1832

COA Receiving 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.

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Local Branch Leader of the Year Award (active local branch executive committee member). Recognizes excellence in contributions to the COA local branch, service to the association, and to the members thereof.

Learn More

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 Friday, January 20, at 5 PM Eastern.

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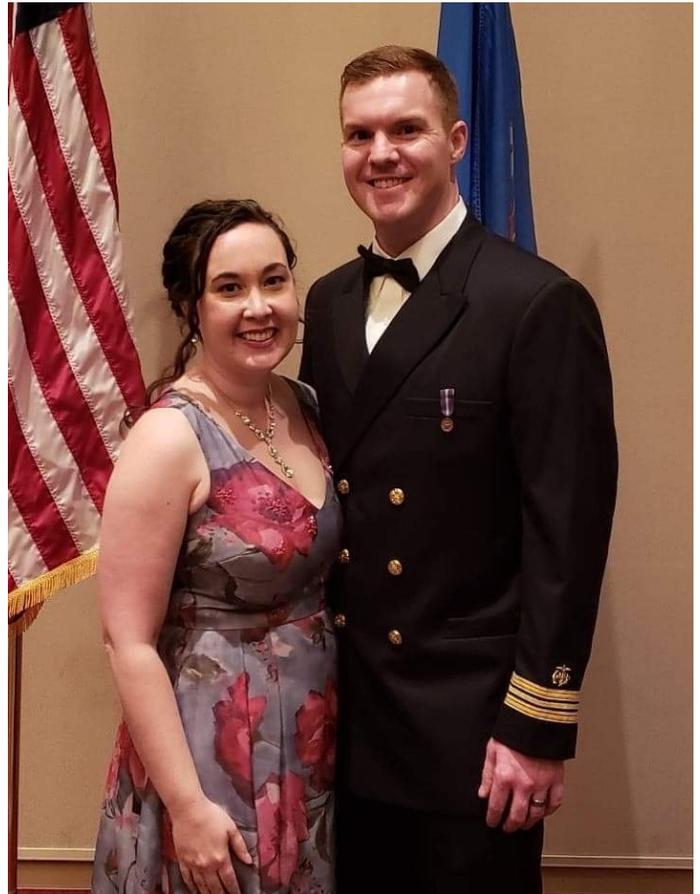
Carl Brandon Coats was born on July 25, 1986 to David Coats and Amy Abercrombie Coats in Tulsa, Oklahoma. Carl grew up in Salina, Oklahoma, where he enjoyed the outdoors with his younger brother, Joshua. Carl and Joshua loved getting into all kinds of mischief together as children. Many of Carl's favorite memories growing up were fishing with his grandpa, Pug.

Carl attended Southwestern Oklahoma State University College of Pharmacy (SWOSU). Carl met Rebekah Vermillion while at SWOSU and they were married on June 6, 2009. Carl earned his Doctor of Pharmacy in 2010. Following graduation, Carl commissioned as a Lieutenant in the United States Public Health Service (USPHS) and accepted a post-graduate pharmacy residency at Cherokee Nation W. W. Hastings Hospital in Tahlequah, OK. Carl was enthusiastic about serving the Cherokee Nation people.

During his residency year (2010-2011), Carl spearheaded the efforts to start a pharmacist-run intensive diabetes management service (IDMS). The IDMS success led to training program development and the IDMS model expanded across Cherokee Nation Health System. The IDMS has continued to grow since its implementation and expanded by using new technologies such as continuous glucose monitors with results presented at multiple national and international meetings. Carl's efforts earned him recognition as a subject matter expert by the Indian Health Service National Pharmacy Council Advancing Pharmacy Practice Committee with concurrence by the Oklahoma City Area Pharmacy Consultant.

Carl sustained his service with the USPHS and Cherokee people following residency. He was promoted to Lieutenant Commander in 2014. He expanded his education journey, becoming a Board-Certified Pharmacotherapy Specialist in 2018 and earning his Master's in Healthcare Administration from Oklahoma State University in 2019. Carl deployed as part of the disaster response for the 2017 hurricanes and earned the Crisis Response Service Award, Outstanding Unit Citation, and Field Medical Readiness Badge.

Carl was a perpetually positive person with a boisterous laugh, made everyone smile, and was known as the smartest person in the room. Even during chemotherapy treatments for lymphoma, Carl remained positive with an unwavering trust in Christ. He was the epitome of strength and service before self. Carl would connect remotely to process prescriptions during his chemotherapy treatments due to his strong desire to help. Carl also continued participation in the American Society of Health-System Pharmacists House of Delegates and attended meetings remotely and in-person between chemotherapy treatments.



Rebekah and LCDR Carl Coats at the Oklahoma City-area dining-out hosted by Green Country COA in 2018.

Carl was an avid outdoorsman with a love for hunting and fishing. He enjoyed various hunting trips to Alaska to hunt caribou, Colorado to hunt elk, and Oklahoma to hunt deer. Carl enjoyed sharing his love of the outdoors with his daughters Addi and Emmy. They loved to fish, camp in the backyard, and explore the woods together. Additionally, Carl enjoyed playing guitar in his free time and having his friends over to the house for music night and writing songs.

Carl is survived by his wife, Rebekah Coats, daughters Addison and Emilia Coats of Tahlequah, his father David Coats and wife Darla of Salina, his mother Amy Coats of Spavinaw, his brother Joshua Coats and wife Abigail and daughter Kaylee of Fairbanks, Alaska, and his maternal grandfather Floyd Abercrombie of Claremore.

Carl had a strong faith in his Lord and Savior and shared that faith with so many who will always remember him fondly. He will be greatly missed by all who knew him.

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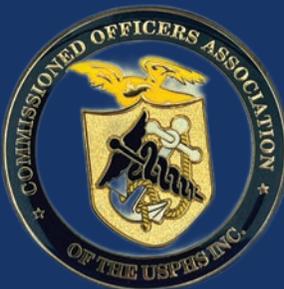
Include: Full name; Please place "COA Coin Contest Submission" or "Symposium Coin Contest Submission" in the email subject line.

Submit designs in the following formats: JPG or PNG

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Former COA Coin: 2022 Symposium Coin:



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

Telling Our Story

by LCDR James Gooch, MPH, REHS/RS

With the arrival of winter, I am again reminded why it is a great time of the year for reflection. Maybe it's the natural thing to do as you reach the end of the year. Maybe it's the cooler temperatures pushing me outdoors to stare longingly into the fire. Maybe it's because our service actually demands it—with the coinciding efforts of COERs and promotion packets occurring in November and December. Whatever the reason, I'm feeling reflective on who we are as a service.

Early in my career, I used to get anxious in anticipation of having to explain the USPHS Commissioned Corps. As a very green junior officer, I had little uniformed experience to build my confidence or shared experience with other services. Every day, I experienced what seemed like the daunting task of walking to a federal building. I knew that, in addition to a series of "thank you for your service" comments, I would occasionally have to field even longer conversations. You know the ones... The endless discussions with bystanders, pedestrians, and people experiencing homelessness – the latter of which were often veterans themselves. I knew, as they did, the sight of a Naval officer in khakis walking along the sidewalk in the middle of Atlanta does demand some answers. Like, for starters "where is your ship?" Rightfully so, I would do my part and answer questions (the ship is in the dock, obviously). As a person who has never met a stranger, this could draw out the morning before work by sometimes a half-hour. Honestly, in the back of mind, I always did carry some uneasiness. What's the best response to a claim of stolen valor or a statement on the yellow berets of Vietnam? Thankfully, those conversations never came to be. And over time, my anxiety ebbed after a few occasions of walking this gauntlet on the daily. In fact, I got to know the regulars and looked forward to the morning greetings. Little did I know, but I was slowly and surely promoting the USPHS Commissioned Corps.

Unfortunately, this same explaining has often been required within my own agency. Many civilian supervisors and colleagues have confided in me that "they have a few questions." Usually sitting down over a cup of coffee to share some facts would be sufficient. Occasionally, I would call on reinforcements in the form of senior officers to back me up. Most of this banter was harmless, and simply curiosity by civilians. The harder explaining has always been the administrative

details of the Corps from supervisors, which can be quite challenging (thanks for the support Commissioned Corp Activities).

Looking back, it turns out all this explaining has been a great opportunity. It helped me to perfect my elevator pitch of the Corps. This pitch is of course an unwritten rite of passage for all Commissioned Corps officers. Whether it be with family, friends, or random new friends on the street- every officer must work up their own 60 second elevator pitch. I think we all find our material for this pitch in multiple attempts at explaining ourselves. In my case, I have expanded my repertoire to include a five-minute, 15-minute question/answer sessions, and recent 30-minute rant monologue. As we all come to discover at some point, this is a standard tool you must have in your back pockets for deployments, public transportation in uniform, holiday dinners, and non-uniformed colleagues.

Its tiring having to explain yourself – especially when the accomplishments of other services speak for themselves. Not us. We are different.

When we are successful, no one notices. In fact, I have recently decided to take this irony as a badge of honor – like an elite black ops team taking down terrorists. Well maybe not quite... When we do our best work, no one seems to notice (The Invisible Corps indeed). This is the nature of public health. And I am glad COA/COF is finally telling this story, our story. It's a long story, and one deserving of the trial and tribulations of this strange and wonderful service we call home. It's a story of inspiration, redemption, and hope. This is the story that continues in the hearts and minds of those that have served and those that continue to serve no matter the headwinds. It's one that inspires others toward a quiet, intense, and thankless service for the protection, promotion, and advancement of health.

And while next year we will reflect on our story together, let's not forget the story we are continuing to write today and tomorrow. The last few years have been challenging without a doubt- between the pandemic marathon, missions on the border, other disasters, modernization of our service, changes in leadership, and departures of really outstanding officers. But as is often the case, it takes fire to make steel. We are still here. We are still standing. And we will be stronger in the end. We get to be.

COA is writing this story, and we invite you to join us.

Assistant Secretary for Health, Admiral Levine Visits South Florida COA Local Branch

by LT Brittanie Butler, LCSW, BCD, CCHP-MH, MBA

COA officers, your fellow officer, LT Brittanie Butler, planned and organized a two-day visit to Miami, Florida by the Assistant Secretary of Health (ASH), Admiral Rachel L. Levine.

The visit followed an urgent email request for assistance sent directly to LT Butler, who was then serving as Secretary for the South Florida Commissioned Officers Association (SFLCOA). The email request for assistance was sent from a USPHS Director of CDC Commissioned Corps Activity/Commissioned Corps Liaison and specifically sought local Commissioned Corps officer volunteers to help with transportation of the Admiral Levine around Miami to her scheduled events on June 28th and June 29th. The request was also to secure officer volunteer(s) to coordinate

a meet-and-greet with local USPHS officers stationed in the Miami area.

Prior to this request, attempts to recruit other local officers for this task was unsuccessful. However, LT Butler enthusiastically accepted and fulfilled the request and represented USPHS and SFLCOA with pride.

LT Butler's swift email response to the request for assistance, and the subsequent call for, and gathering of available, hands-on deck (consisting of both junior officers and senior officers in leadership), was paramount to the successful execution of this mission.

LT Butler put in place a small task force of local officers within record turnaround time to successfully deliver on the urgent request for help in preparation for the dignitary visit.

see **LEVINE** continued on page 19



Assistant Secretary for Health, Admiral Rachel Levine with LT Brittanie Butler during her visit to South Florida.

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Officer Spotlight

LCDR Marie Jeoboam, MD, MS, FAAFP

by LT Samora Casimir, OTD, OTR/L and
LT Jamla Rizek, MBA, MSN, RN

LCDR Jeoboam has been at her current duty station, the Catawba Service Unit (CSU) of the Nashville Area for two years as the Clinical Director, serving a population of approximately 2,000 American Indians/Alaskan Native patients. During the COVID-19 pandemic, she has implemented numerous clinical strategies: blood pressure clinic, colorectal screening and the mobile lung and breast unit. As a result of her efforts, the clinic improved in its Government Performance and Results Act (GPRA) thus improving performance at the CSU. For meritorious service as the clinical director at the CSU, LCDR Jeoboam was awarded the Indian Health Service (IHS) Director's Award. As a commitment to the medical profession, she was also awarded with the Degree of Fellow by the American Academy of Family Physicians (AAFP) in September 2022 through enhancing her professional competence and quality of health care.

LCDR Jeoboam has implemented a new control substance agreement at the CSU, decreasing the number of patients receiving opioids by 80% in 2022, in line with the Surgeon General's initiative to help reduce the use of opioids and related substance abuse deaths. She serves as the Lab director of a Clinical Laboratory Improvement Amendments (CLIA) waved lab and directs her team to administer services to meet the patient's daily needs. She has initiated scheduling the mobile mammogram unit resulting in the completion of 55 mammograms leading to savings of \$7000, giving non-Catawba members an opportunity to get breast cancer screening with no cost to them during the months of May-July.

LCDR Jeoboam serves as lead and mentor for medical staff for all 5 IHS units located in the Northeastern and Southeastern states of the Nashville Area. She completed the required provider CME training to restart Hepatitis C program in partnership with Extension for Community Healthcare Outcomes



LCDR Marie Jeoboam, MD, MS, FAAFP

(ECHO) project to increase screening rates for at-risk population and provide treatment at the Catawba Service Unit. She also established an early reading literacy program called *Reach Out and Read* at the service unit to develop the literacy skills of children ages 6 months to 5 years old. She led the 2022 Surgeon General's Virtual 5K Run within her local COA area with a total of five PHS Officers and five civilians, thus supporting the USPHS commitment to promote health through fitness and overall wellness within her community.

OBITUARIES



CAPT Edward Chahin, MD

Miami, FL - Captain Edward Ramon Chahin passed away unexpectedly on June 2, 2022. He was born in Bucaramanga, Colombia, on February 22, 1932 to Ramon and Sarita Chahin. Later, he attended medical school at National University of Colombia in Bogota, followed by a residency in Chicago, Illinois. On May 18, 1967,

Edward married the love of his life, Dixie Behrens. He went on to a surgical residency in Baltimore, Maryland with the U.S. Public Health Service. After residency, he was stationed in Nassau Bay

(Houston) working as a general surgeon at a hospital for Navy and Coast Guard seamen. Later, during the early 1980s, he was transferred to the Indian Health Service hospital in Ada, Oklahoma, where he became the Chief of Surgery at Chickasaw Nation Medical Center. In 2006, Edward retired with 32 years of military service.

Edward was preceded in death by his parents, a brother, Victor, and a son, Scott Edward. He is survived by his loving wife Dixie, his daughter Sara Mercer (Bart) and two granddaughters.

CAPT William Knestis

Seattle, WA – Captain William Ernest Knestis was born on October 2, 1934 and passed away on Sunday, June 12, 2022. He was 87.

see **OBITUARIES** continued on page 25

Strength In Numbers: COA's Advocacy Efforts With Coalition Support

by Dave Corrigan, COA Deputy Director

As the only organization to solely represent and advocate for USPHS Commissioned Corps Officers, COA has been successful with many efforts to obtain parity with the other uniformed services. We continue to fight for policy and legislative fixes to many issues important to our members. With that said, COA has a relatively small footprint in the legislative and advocacy space comparative to other Military and Veteran Service Organizations (MSO/VSO) and recognizes our limitations on some efforts. This is why COA has joined forces with other organizations in a number of coalitions.

First and foremost, COA is part of a large alliance called The Military Coalition (TMC). TMC is a group comprised of 35 military, veterans, and uniformed service organizations in a joint pursuit of representing the interests of all uniformed service members and their families to ensure the compensation and benefits they earned are protected. The idea is that each organization will have the support of the other organizations and their combined 5.5 million members to accomplish more than if they worked alone. COA has supported TMC efforts like advocating for the passing of the Honoring Our PACT Act. TMC has also supported COA efforts like

obtaining free passes to national parks. When advocating for an amendment in the Alexander Lofgren Veterans in Parks (VIP) Act, COA was able to present a letter of support by members of TMC to the Congressional legislators and committees we were working with.

Occasionally, COA comes across an elected official, committee, or staff member that may not see the USPHS as an equal to the armed forces. This is where the benefit of the coalition to COA becomes invaluable. The coalition provides the support of organizations that represent the armed forces to say that USPHS deserves all the benefits provided to the armed forces and service to our country should not be judged solely by whether someone carries a rifle in combat. COA has been able to build great relationships with other organizations through the coalition and its committees. COA sits on the TMC Personnel Committee, Veterans Committee, and Guard and Reserve Committee, which has been invaluable in advocating for the PHS Ready Reserve.

COA is also a member of the Toxic Exposures in the American Military (TEAM) Coalition. TEAM is a group of 30 veteran service organizations who collectively raise awareness, promote research, and draft legislation on the impact of toxic exposures. This

see **EFFORTS** continued on page 26



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Aurora Borealis Commissioned Officers Association Welcomed Rear Admiral Brandon Taylor to Alaska

by CDR Katie Jacques, PT, DPT, OCS, CAHA, CDR Jodi Sides, RN, BSN, MPH, IBCLC, ANLC, LT Alati Wasson, PT, DPT, OCS, COMT, CAPT Aimee Young, PharmD, BCPS, NCPS

Rear Admiral (RDML) Brandon Taylor arrived in Anchorage, Alaska (AK) on June 25th, 2022, on official business to visit Joint Based Elmendorf-Richardson (JBER). As the Director of Defense Health Agency (DHA) Public Health, RDML Taylor and his executive officer, Major (Maj.) Leah Chapman, traveled to visit JBER for an immersion into Air Force Public Health and Aerospace Medicine.

Before the official business started on Tuesday, the Aurora Borealis Commissioned Officers Association (COA) hosted an evening officer engagement social to welcome RDML Taylor to AK. Since RDML Taylor took leave in conjunction with his Temporary Duty (TDY) trip, his wife, Jennifer, was able to join him and enjoy time at Aurora Borealis COA's gathering. The officers enjoyed a back yard barbeque in Eagle River, AK with the Taylors. It was fun to see the group engage with RDML Taylor, share Alaska fishing and hunting stories, share memories from deploying together, as well as learn about his roles as Director of Public Health.

Tuesday started LT Alati Wasson's time as aide-de-camp assigned to RDML Taylor. They met with JBER leadership to discuss the health priorities that are specific to the service members of Alaska. They also received a briefing regarding preventive health, observed an occupational health inspection in the area where they house the C-17, collected mosquitos with entomology officers, and conducted a tour of the aerospace medicine building.

On Wednesday, CDR Jodi Sides served as aide-de-camp. RDML Taylor continued his observation, this time of the process that occupational health officers use for inspection and documentation of health exposures to Department of Defense



Back row left to right: CDR Katie Jacques, RDML Brandon Taylor, LCDR Pam Finch, CDR Jodi Sides, CAPT Jake Malouf, CDR Weston Thompson, CAPT Aimee Young, CDR Brittany Keener, CDR Sherry Hammock, CDR Jill Gelviro, LT Alati Wasson, CAPT Della Cutchins, Courtney Awalt (UHSP Class of 2023), Lydia Braun (UHSP Class of 2023) Front row left to right: LT Katie Weathers, LCDR Sarah Lyrata, CAPT Kara King, CAPT Christina Eldridge, Amelia Andrei (UHSP Class of 2023), LCDR Maddy Mandap

personnel. During the two-day visit, both LT Wasson and CDR Sides were able to observe RDML Taylor's interactions with the DOD officers and servicemen. It was a great opportunity to see the different services combine their efforts to improve the health of their service members and establish consistency across the services.

Following official business, the Taylor's went fishing on Thursday evening out of Cooper Landing with Tim Jacques, CDR Jacques' husband, a guide friend, Carson Kent. They limited out with twelve salmon and observed multiple bald eagles. On Friday, CAPT Aimee Young and her husband, Jason, took the Taylor's on a personal flight tour. Jason flew them over the Turnagain Arm, through the Girdwood Valley and over the Knik glacier. It was a beautiful sunny day and the Taylor's thoroughly enjoyed their flight.

RDML Taylor took time to ensure that both LT Wasson and CDR Sides understood the discussions and implication of these process changes, both for the health of the services and individual service members. Through this visit, the admiral developed relationships and raised awareness of the United States Public Health Service with our sister services. Hearing how RDML Taylor progressed from a clinical Pharmacist in Indian Health Service to the Director, DHA Public Health was a testament to the growth of our service and the individual potential of each officer to make an impact on the national health stage. It was also a fun experience being able to show RDML Taylor and Mrs. Taylor a sneak-peak into what Alaska is all about!

Building Strategic Relationships Between the Commissioned Corps, Congress, and Health Policy

by LCDR Briana Rider, PharmD, FISMP, CPPS, NHDP-BC, CHEC

Congressional actions affect the budget, mission, structure, and strategic direction of the United States Public Health Service (USPHS) Commissioned Corps and the agencies for which they work. The origins of the USPHS Commissioned Corps dates to 1798 when the *Act for the Relief of Sick and Disabled Seamen* was signed into law. Over ninety years later, the USPHS Commissioned Corps was authorized as a Uniformed Service of the United States by an act of Congress. All USPHS Commissioned Corps authorities and entitlements are governed by statute. Today, the USPHS Commissioned Corps is governed primarily by the *Public Health Service Act*, or Title 42 of the U.S. Code. It is provisions within Title 42 that give the Secretary of the Department of Health and Human Services (HHS) the authority to deploy Public Health Service (PHS) officers to respond to public health needs. All PHS officers should be familiar with statutes that govern our service, particularly Title 42.

The USPHS Commissioned Corps has recognized the need to evolve the Services'

mission assignments and functions in step with the public health needs of the Nation and have begun modernizing the USPHS Commissioned Corps. The USPHS Commissioned Corps has proposed numerous legislative changes to continue modernizing the USPHS Commissioned Corps. To ensure the USPHS Commissioned Corps can effectuate these changes, the Service identified the need for a robust Commissioned Corps Legislative Liaison (CCLL) program. The USPHS Commissioned Corps' participation in the Georgetown University's Government Affairs Institute (GAI) Capitol Hill fellowship program arose from this need.

The CCLL program is on par with other services who have legislative liaison programs and PHS officers selected for the GAI Capitol Hill fellowship join service members from the United States Navy as they matriculate through the learning experience. The fellowship consists of a didactic portion including intensive orientation, periodic seminars, and advanced courses and workshops. Fellows also gain hands-on experience on Capitol Hill by serving in a full-time assignment on the staff of a member,



Left to Right: LCDR Briana Rider and Senator John Hickenlooper.

committee, or support agency of Congress in Washington, D.C.

Participation in the GAI fellowship program is a component of serving as a CCLL. CCLLs serve as the primary link between the USPHS Commissioned Corps and Departmental leadership and members of Congress on all Congressional matters of interest respective to the USPHS

see **POLICY** continued on page 25

New Retiree and Dependent ID Cards

by Dave Corrigan, COA Deputy Director

Are you a retiree or dependent who does not have a uniformed services ID card, or whose ID card does not have an expiration date? If so, now is your time to upgrade that ID card to the Next Generation Uniform Services Identification card. The new type of ID card has improved security features and will be the only form of retiree and dependent ID card accepted on military installations in the future. With that said, there is no need to panic – you have plenty of time.

The old ID cards, that have an expiration date, will be upgraded when it is time for the retiree or dependent to renew. If your old ID card does not have an expiration date, you have until 2026 to upgrade. After that, the old cards will no longer be accepted for benefits or access to military installations. COA recommends renewing and upgrading your ID as soon as it is convenient for you to avoid last-minute renewal delays that could put you past the upgrade deadline.

For those of you that live far away from an installation, this can become a hassle. Since you have a couple of years to make the

change, consider the next time you will be in an area closer to a military installation. Are you visiting family or friends for the holidays? Are you going on a vacation or work trip? Will you be near a military installation during any of these trips? We recommend you make this as least stress-inducing as possible.

Whether you live close to a large military installation or not, we recommend using the Rapids Site Locator (idco.dmdc.osd.mil/idco/locator) to find your closest ID card center and to make an appointment. Some sites have walk-in hours and do not require an appointment. However, active service members are prioritized and can quickly overwhelm availability of staff during walk-in hours. COA recommends calling the ID center at the number listed on the RAPIDS Site Locator to determine whether an appointment or walk-in slot is best for you and your plans.

As always, if you have any questions or concerns, please reach out to dcorrigan@coausphs.org.

A Thankful Time for Giving

by LT Samora Casimir, OTD, OTR/L and LT Jamla Rizek, MBA, MSN, RN

On Friday Nov. 11, 2022, LT Samora Casimir and LT Jamla Rizek spent their Veteran's Day holiday serving others in need in preparation for Thanksgiving. They volunteered at a local church in Germantown, MD to help feed over 400 families in need of food within the Montgomery County area.

Upon arrival, LTs Casimir and Rizek were tasked with bagging the large loads of crates of perishable food items which included: bundles of celery, apples, onions, oranges, and 5 lb. bags of potatoes. In total, 150 bags of fresh produce were filled. These bags were then carried to the auditorium of the church, which was set up as a food-distribution center in preparation for the families to pick up.

After completing that task, they worked together with other local volunteers and members of the church to organize an assembly line where the non-perishable foods would be placed in bags together to distribute. Some of the non-perishable food items included some of the Thanksgiving favorites like stuffing, cornbread, mac & cheese, rice, beans, and even boxed cake goods. There were also many canned vegetables and large cases of cereal that were assembled in the bags for distribution. Most of the food items were donated from a local Wegman's grocery store, including \$4000 worth of the produce.

In total, LT Casimir and LT Rizek assisted with arranging over 400 bags of food items to feed over 400 families in need. There was over \$30,000 of food and cash donations from the church members and other neighboring businesses.

Everyone worked tirelessly together as a team for a good cause. As Public Health Service Officers, LTs Casimir and Rizek initiated



LTs Jamla Rizek and Samora Casimir fill bags of food to be donated to families in need.

leadership in some tasks, forming an assembly line to make sure a smooth process of bagging the heavy items. They ensured safety of the volunteers so no one injured themselves carrying the heavy bags. This was truly a humbling experience, a great opportunity to volunteer, forge new friendships, and a thankful time for giving. At the end of the day, the true reward was serving those in need within the local community to make sure they had an enjoyable Thanksgiving holiday.

LEVINE from page 14

During the planning and preparation stages, LT Butler proved resilient in overcoming barriers that could have jeopardized ability to successfully execute the task at hand. Some barriers able to be overcome included: only a few days to deliver on the immediate request for assistance, minimal volunteers offered to support, limited resources, competing work obligations, and a SFLCOA Executive team that was operating at only fifty percent capacity with others away on assignment or out of town.

In the end, the ASH's request was successfully fulfilled; as she was able to have her desired meet-and-greet with local USPHS officers. She received two escort officers who utilized personal vehicles to transport her around town for the two days during her trip. LT Butler also served as one of the escort officers to help rise to the occasion in absence of additional volunteers to serve in this capacity.

Not only was the ASH able to receive what was desired during her visit, the voices of the local USPHS officers in the field were heard by the ASH and her representatives during this visit. ASH connections to local USPHS leadership were established at the

officer meet-and-greet (eg. ASH representative contact information exchanged with Senior Officer Leadership/Captains, etc.) and USPHS leadership initiatives were entertained by the ASH.

Additionally, two junior officers, LT Brittanie Butler and LCDR Tenile Gilzene, were afforded an opportunity to serve in an official capacity (as escort officers) through an ultimate display of leadership, service, camaraderie, and esprit de corps!

If not for the actions of LT Brittanie Butler, in relation to the planning, organization, and service as escort officer for the ASH's June 2022 visit to Miami, the requested events would not have taken place. This monumental event will go down in history. LT Butler currently serves as the SFLCOA branch President following the dynamic end of SFLCOA year/term closeout immediately subsequent to the ASH's visit.

LT Brittanie Butler, LCSW, BCD, CCHP-MH, MBA is currently a Behavioral Health Provider for DHS/IHSC in Miami Florida.

Chicago COA upholds tradition of volunteering with the Chicago Marathon

by LCDR Jennifer Adams and LT Enrico Mangahis

The Chicago COA Branch once again led a medical volunteer team for the 44th annual Bank of America Chicago Marathon held on October 9, 2022. The officers served alongside hospital corpsman from Captain James A. Lovell Federal Health Care Center in a longstanding partnership with race organizers. It was a breezy, cool fall day on the shores of Lake Michigan. The race's iconic course took runners on a looped tour through 29 of Chicago's most vibrant and culturally diverse neighborhoods and attracted more than 1.7 million spectators cheering on more than 40,000 runners. Kenyan runners Benson Kipruto and Ruth Chepngetich won the men's and women's divisions, with American Blank Bruno winning the race's first historic non-binary division.

USPHS Commissioned Corps officers and US Navy personnel took to their

spotter towers around the marathon finish line to identify runners showing signs of distress and communicate to the medical team. Triage teams near the spotter towers were dispatched to distressed runners to evaluate and transfer to the medical tent for prompt medical attention. Spotters in the towers also served as a second set of eyes to identify any suspicious behavior and communicate to marathon security teams on the ground. Chicago Marathon Medical Director Dr. George Chiampas stated that there was a total of 17 hospital transfers from this year's race, relatively low compared with previous years.

Chicago COA is honored to continue this tradition of leading the spotter tower team in this high-profile event. They demonstrate compassion and confident service of public health.



LCDR Audrey De La Cruz, CDR Antonio "Tony" Vargas, and LCDR Peng "Jeff" Zhou pose with LT Enrico "Eric" Mangahis as he operates a spotter tower during the 2022 Bank of America Chicago Marathon.



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CDR C.

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Spiritual Wellness

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

The Spiritual Purposes of Gifts

Christmas shopping is my absolute FAVORITE pastime! Don't gasp, but I normally start shopping in the summer! I just love taking the time to think about each person, and what things they need or want that will bring them joy or peace. As I began to think about writing this month's column, I thought that it would be a good time to talk about why giving and receiving gifts from others is so important to us spiritually.

I'm sure that deep down, there is probably a psychological need that is pacified by my desire to give gifts, but there is a spiritual need that takes precedence over that. For me, the gratitude that I feel for my God, for the gifts that He has given me is what my gift-giving is all about. All that I am and all that I have is a result of His gifts to me, and I am so grateful to get to be here to share His blessings on me with others. You see, when we give of ourselves, or our resources, for the benefit of others, we actually gain spiritual renewal. Spiritual renewal is resilience building. When our cup is empty, it has to be refilled or we can't keep pouring out into the lives of others. Giving gifts should never feel like an obligation because our connectedness with others and with the sacred, is what helps us define our sense of value and purpose, our spirituality. To receive a gift does this also, so we should be mindful that this helps the other person spiritually, as well. There are some belief systems which prohibit the receiving of gifts. In these cases it is more appropriate to respect their personal spirituality by not giving them a gift.

How can I apply this toward officership as a PHS officer? Well, as we finish our COERs, our CV's, and OS's, we can look at our work as either only a means to gain promotion or as gifts that we gave our agency, our fellow officers, and the Commissioned Corps. We sacrificed for these gifts and we gave them willingly, knowing that we may not receive a gift in return. This is the beauty of giving, and our officers are phenomenal at this! May we all look at gift giving with a renewed sense of wonder at how the simple act of giving impacts us all.

Merry Christmas! Happy Chanukah! Happy Kwanzaa! Happy Bodhi Day and all others with spiritual holy days in December!



Education: Chrismon

“Chrismon” is a combination of the words “Christ” and “monogram,” and means “symbols of Christ.” Chrismon’s are gold and white, representing majesty and purity. Ideas for fashioning them are developed from early Christian symbols, the Bible and church histories.

Spiritual Exercises

1. Website: <https://www.whychristmas.com/customs/chrismons>
2. Website: <https://www.redbubble.com/life/benefits-of-giving/>
3. Book by Pierce Taylor Hibbs: *The Book of Giving: How the God Who Gives Can Make Us Givers*
4. Think of the best gift that you have ever received. If possible, find the person who gave it to you and tell them how much it meant to you.

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



Donate using CFC code
42884

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 our programs to "advance public health for a healthier nation." Our PHS Commissioned Officers Foundation (COF) 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 PHS 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 members 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 golf tournament or 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.

Alaska Area Officers Celebrate American Pharmacists Month with Vaccine Clinics

by LCDR Theresa Castellanos, PharmD, CLC

October is American Pharmacists Month and each year, officers in the Anchorage area stationed at Southcentral Foundation and Alaska Native Medical Center, are heavily involved in vaccination efforts in the community. LCDR Theresa Castellanos, pharmacy officer stationed at Southcentral Foundation and Executive Secretary/Community Outreach Chair of the Aurora Borealis COA branch, has been leading a Saturday Pharmacy flu clinic for the last 10 years. This year, they held four drive-thru flu clinics which successfully vaccinated over 300 people. Patients, particularly parents, enjoy the convenience of getting their flu shot without needing to get out of their vehicle. An entire family can get vaccinated within minutes without the hassle of going into a clinic, checking in, and waiting to be served. Despite working outside in the cold conditions, there was no shortage of volunteer officers. This annual month-long event is one that PHS officers look forward to for helping the community, work with other officers from the area, and have fun.

This year LCDR Castellanos also partnered with the State of Alaska, Anchorage Health Department, CDC, Southcentral Foundation, and Alaska



Stephanie McDonald (Local Pharmacy Resident), LCDR Theresa Castellanos, and CDR Adrienne Tveit.

Native Medical Center to offer flu and COVID bivalent booster vaccines at the Alaska Federation of Natives Convention. This is the largest gathering in the Nation of Native people to address issues of public policy and government. This year was the first in-person convention since the pandemic and drew thousands of attendees, including many political figures such as Alaska governor Mike

Dunleavy, Senator Lisa Murkowski, and US Representative Mary Peltola who is the first Alaska Native elected to Congress. Over two days at the convention, pharmacy staff vaccinated over 400 people. This community collaboration was especially important to keep people healthy as we go into the cold and flu season. Please stay safe, healthy, and don't forget to get vaccinated!

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penicillin factory, and a modern-day physician's office. The musical encourages improving the use of these important resources by demonstrating the dangers of resistant superbugs from overusing antibiotics.

In October and November 2022, performers received standing ovations at 12 sold-out shows in Atlanta and Washington, DC. Some audience members learned about the show from the New York Times, Forbes, or National Public Radio. The cast also performed excerpts for thousands of attendees at the opening session of the IDWeek international conference and at four school shows to raise awareness among children about AR. Dr. Judy Monroe, President and CEO of the CDC Foundation, who spoke at a pre-show panel in Atlanta, noted, "we certainly see the value

of the arts and the value that they play in communicating important public health messages, especially complex messages."

Performers were honored to strengthen connections between public health and the arts, and to contribute to innovative science education and community outreach about the important public health issue of antimicrobial resistance.

For more information:

<https://moldthatchangedtheworld.com>

<https://www.cdc.gov/drugresistance/index.html>

<https://www.who.int/health-topics/antimicrobial-resistance>

Officers from Houston Commissioned Officers Association Volunteer with Project C.U.R.E.

by LT Genevieve Hodges, MSN, FNP-C, CCHP; LT Jasmine Alexander, MSN, RN; and LT Vera Bijingsi, PharmD

Project C.U.R.E. (Commission on Urgent Relief and Equipment), founded by Dr. James Jackson in 1987, is one of the largest medical supply distributors and humanitarian relief organizations that provide medical supplies and support to underserved communities worldwide. The Project C.U.R.E. mission is to identify, solicit, collect, sort, and distribute donated medical supplies and services according to the imperative needs of the world. Project C.U.R.E. has seven distribution warehouses spanning the United States from Arizona to Pennsylvania, with its largest distribution center located in Houston, TX. They have shipped over 2,400 cargo containers containing hospital beds, IV catheters, sterile gloves, oxygen tubing, vital sign machines, and many more medical supplies and equipment to under-resourced hospitals, clinics, and community health centers in 135 developing countries across the world. Although currently on hold, Project C.U.R.E. offers travel opportunities for volunteers to provide medical treatment, training, community health education, and container delivery support at international partner facilities. Stateside opportunities include volunteering as a truck driver, warehouse sorter, and packaging crew member. Internships are offered to dedicated upper-level undergraduate and graduate-level college students to gain hands-on experience in global health. Project C.U.R.E. also accepts donations of medical supplies and financial contributions to assist with distribution of medical supplies abroad. With over 30 years of providing medical resources, their endeavors continue to grow and strengthen all “one container at a time.”

On Saturday October 8, 2022, LT Genevieve Hodges organized a group of Public Health Service officers from the Houston branch of the Commissioned Officers Association (COA) to spend the morning volunteering with Project C.U.R.E. at the Houston warehouse. Also in attendance were officers' family and civilian colleagues. Following a brief introduction of facility operations, the team sorted and packed medical supplies into different categories. They worked tirelessly to ensure that the mission was a success which resulted in the preparation of 15 bags of medical supplies and organization of four pallets for international shipment.

The experience was rewarding for all in attendance. It was an informative way to discover unique global health needs and



LT Oluwaseun Osunbunmi, LT Vera Bijingsi, LT Loann Nguyen, CDR Scarlett Lusk, LT Genevieve Hodges, LCDR Jolin Nguyen, LT Patricio Fuentes, LT Jasmin Alexander, and CDR Elizabeth Russell after a day of volunteering at Project C.U.R.E.

nonprofit operations while supporting internationally underserved and vulnerable patients. The time spent at Project C.U.R.E. Houston was one of solidarity and compassion for extending humanitarian relief globally. Officers were able to engage with Project C.U.R.E. staff to educate them about the U.S. Public Health Service Commissioned Corps and promote visibility through community engagement. As each item packed for distribution had life-saving potential, the partnership with Houston COA and Project C.U.R.E. allowed each Public Health Service officer to truly live out the mission to protect, promote and advance the health and safety of the nation.

To find a Project C.U.R.E. location near you, visit <https://projectcure.org>.

OBITUARIES from page 15



CAPT Donald M. Mason Sr. DVM, MD, FACP

Novato, CA – Captain Donald Mason died on August 22, 2022 at the age of 95. Don served in the Navy during WWII before his career in the US Public Health Service where he served first as a veterinarian and later as a physician. During his time at CDC as a veterinarian, Don worked preventing Q

fever in cattle, rabies in bats, and psittacosis in turkeys. Don then became interested in medicine and went on to get his M.D. from Stanford in 1961.

He was a Fellow of the American College of Physicians and a life member of the USPHS Commissioned Officers Association. He was on the medical Staff of Marin General and the former Ross Hospital where he had served as Vice Chief of Staff. He served as an Associate Clinical Professor of medicine at UCSF for many years. At the time of his retirement from the USPHS in 1976, Don was Chief of the Department of Medicine and Director of the internal medicine residency program at the former USPHS Hospital in San Francisco.

Don loved the outdoors and enjoyed traveling, camping, back packing, skiing, gardening and other activities with his family. Don was a devoted family man. He was preceded in death by his dear

wife Elaine, foster brothers, two sisters. He is survived by his Son, Don Jr. M.D. and wife Nyamaa, Daughter Melanie Bretan and husband Peter M.D., grandchildren and great grandchildren.

CAPT John Orthofer

Gainesville, FL - Captain John George Orthofer, age 89, passed away on Thursday May 19, 2022. He was born on November 7, 1932, in Columbus, Ohio to Joseph Edward and Frances Ann Stout Orthofer.

John was born and raised in Columbus and grew up on the farm with his six brothers and sisters. He proudly served in the U.S. Army during the Korean Conflict. He graduated from Ohio State and U.C. Davis. John spent his career in the Public Health Service until retirement in 1982.

He is preceded in death by his loving wife of 54 years Carol Jane Maas Orthofer; sister, Rita M. Scott and brother, Carl Orthofer.

John is survived by sons, John Carroll Orthofer (Donna Kilcoyne Orthofer) and Joseph David Orthofer (Stacey Shook Orthofer), daughter, Martha Frances Orthofer, brothers, Joseph Orthofer, Frank Orthofer; sisters, Charlotte “Chick” Mills, Mary Ann Streets; grandchildren, Henry John Orthofer, Nicholas Joseph Orthofer and Timothy John Orthofer

In lieu of flowers please consider donations to the World Wildlife Fund www.worldlife.org or Alachua County Humane Society www.humanesocietyncl.org

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Commissioned Corps. The program was piloted in 2020-2021 with a PHS officer sponsored by Commissioned Corps Headquarters.

In 2021, I was selected to participate in the GAI Capitol Hill Fellowship Program and piloted the agency-sponsored component of the program, sponsored by the Administration for Strategic Preparedness and Response (ASPR). My seven-month fellowship experience began in December 2021 with didactic instruction as well as methods and support in securing an assignment with Congress.

After interviewing for over twenty positions with committees and members of Congress, I secured a full-time assignment on the staff of Senator John Hickenlooper in Washington, D.C., where I would gain six months of hands-on experience. Senator Hickenlooper is a member of the Senate Health, Education, Labor, and Pensions (HELP) Committee whose jurisdiction encompasses most of the agencies and programs of HHS, including the USPHS Commissioned Corps.

As a pharmacist officer and the only healthcare professional in his office, I was responsible for executing Senator Hickenlooper's health

policy agenda, staffing him in meetings and hearings, providing policy and vote recommendations, drafting bills and letters, and communicating with stakeholders and constituents. Given my experience working at the Food and Drug Administration (FDA) and ASPR, the opportunity to work on the FDA user fee reauthorization and pandemic preparedness legislation (that included a provision to expand USPHS Commissioned Corps annual leave carryover from 60 to 120 days) was particularly rewarding. In my role as a COLLE, I exposed Congressional members and staff to the USPHS Commissioned Corps organization and advocated for the Service.

During my fellowship, I completed additional research on U.S. prescription drug pricing policy and leveraging corporate income tax policy to incentivize onshoring of critical medical products that earned me a Certificate in Legislative Studies from GAI. The GAI Capitol Hill fellowship gave me an opportunity to gain first-hand, senior-level experience with the workings of the U.S. Congress, learn and understand how congressional actions affect the executive branch of government, and help build strategic relationships between the USPHS Commissioned Corps, Congress, and health policymakers. These foundational efforts will continue to aid with modernization of the USPHS Commissioned Corps well into the future.

EXECUTIVE DIRECTOR from page 1

resource management, and contracting.” I think we can all agree, it’s a big job!

In the past months, TRICARE announced several changes, one of them being a change to the pharmacy networks. This change resulted in approximately 15,000 retail pharmacies (including 7,100 independent pharmacies), no longer being part of the TRICARE Network on October 24, 2022. COA sent information about this change to our members, and in turn heard back from many of you on the level of impact this change had to you and your family. Around this same time, there was also a change to the active-duty dental plan. Overall, officers seemed fairly content with their previous Delta Dental plan, and the conversion to United Concordia was rocky. After hearing horror stories of bifurcated care, disrupted treatment plans, and unpaid claims, COA opened a survey and asked you to provide your experiences.

Over a period of five days, 157 active duty (85%) and retired officers (15%), responded to the following “Please share any concerns you have with the new dental plan” and “Please share any concerns you have with the TRICARE pharmacy network changes.” I was able to organize this raw data into a 32-page report which I personally shared with LTG Place and Dr. Michael Malanowski, DHA Deputy Director, before the meeting. Within one-hour of sharing the report via email, LTG replied to me with this message:

“Jacque, I just finished reading the comments-I really appreciate the gift of so many people providing feedback. There are some really helpful comments that our TRICARE team can use.”

I also discussed the issue further in a face-to-face conversation with LTG Place and Dr. Malanoski later that day. I explained the challenges many officers face with remote assignments and limited provider networks. They both seemed to appreciate hearing your words which so eloquently and passionately shared the challenges you face.

Later in the meeting, during a brief by Lieutenant Colonel Nathan Reynolds, USAF, on the Rise of Telehealth in the MHS, he announced a new program to be rolled out in 2023 for active-duty members and their family called “Behavioral Health Resources and Virtual Experience (BRAVE).”

This new, centralized tele-behavioral health program will increase behavioral health capacity by 60,000 visits annually and will offer low-to-medium complexity behavioral health care via video, 24/7. While I was initially excited about this program as an opportunity



COA’s Executive Director, far left, joins other MSO/VSO leaders at the November DHA MSO/VSO meeting hosted by Lieutenant General Place, the Director of the Defense Health Agency.

to provide needed support to remotely stationed officers who are forced to use TRICARE Prime Remote, I could not get confirmation that these officers would be eligible to use the BRAVE program. While TCR users might not have access to the BRAVE program, I have a follow up meeting with TRICARE leaders in December to learn more about how you can access Telemynd and Doctors on Demand virtual care, so stay tuned.

Other briefs included an update to the launch of the MHS Genesis electronic medical record (EMR) which is at 67% completion, and discussion of how they are growing the EMR network with private sector systems such as CommonWell, CareQuality, and eHealth Exchange. The vision will be that one day, all care you receive whether at a military treatment facility, Veterans Administration, or private sector, will be fully accessible to your entire health care team.

The meeting closed with an excellent brief by one of your very own, RDML Brandon Taylor. RDML Taylor briefed the MSO/VSO representatives and service chiefs in the room, including the Deputy Surgeon General, RADM Denise Hinton, on the new DHA Public Health initiative he is leading. The mission of this new division is to “advance joint force health protection with agile public health enterprise solutions in support of the National Defense Strategy.” You will learn more about this initiative in the January/February edition of Frontline where RDML Taylor will sit with us for an interview. Until then, I wish you and yours a joyous and relaxing holiday season. Let me be one of the first to wish you an early “Happy New Year.” I look forward to seeing you in 2023.

EFFORTS from page 16

coalition is integral in the creation of legislation related to burn pit and toxin exposure.

Additionally, COA is also a member of the Nursing Community Coalition, Campaign for Tobacco-Free Kids, and the American Indian Alaskan Native (AI/AN) Health Partners.

Although the mission of some of the coalitions, or their members, may not line up exactly with COA’s mission, we benefit greatly

from their support when we need it. This broad overview of the coalitions is meant to introduce our members to the work that COA does with the coalitions and some of our goals. Going forward, I will submit a recurring column for Frontline that will explain, in addition to the monthly Legislative Affairs/ Advocacy Update, the work that the coalitions are doing to support military and veterans across the services, and how the coalitions are supporting COA with our own efforts.

PHS Commissioned Officers Foundation

Donations Received, November 1, 2022 to November 30, 2022

Platinum (\$1,000+)

CAPT Amy Barkin*
 DC COA Local Branch*
 CAPT Thomas DeCaro*
 RADM Gary Hartz*
 LT Matthew Lindsley*
 SoCal COA Local Branch*
 LTJG Lisa Wind*

Silver (\$250)

Amazon Smile
 CAPT Robert Brewer*
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LCDR Omobogie Amadusu
 CAPT Mark Anderson

* PBS Documentary Donations
 All other donations were made to the COF
 General Fund

We Welcome New Members of COA, November 1 - November 30, 2022

LTJG David Akakpo, AZ
 LTJG Osler Gregorio Andres, WA
 LT Aria Braithwaite, GA
 LT Victory Bryant, FL
 ENS Nicole Cooper, OH
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 LCDR Fain Richardson, AZ
 LTJG Anikah Salim, MD
 LTJG Taylor Strand, ND
 LT Jenny Sung, NJ
 LT Huy Truong, CA
 LTJG Tseten Yandron, WI

Volunteer at the San Francisco Neighborhood Emergency Response Team

by CDR Tamy Leung, PharmD, MPH, BCPS, CDCES, BC-ADM

For the past five years, CDR Leung has been an active member of the San Francisco Neighborhood Emergency Response Team (SF NERT). SF NERT was created after the Loma Prieta earthquake that hit the San Francisco Bay Area in 1989. Volunteers learn about emergency response skills and assist the city with any response taskings. Monthly virtual or in-person training drills are offered for members. Biannually, members come together for the city-wide drill. Recently, members participated at the San Francisco Airport (SFO) mass exercise. CDR Leung served as one of the 100+ victims trapped on a de-commissioned aircraft. The scenario was that an irate employee crashed a fuel truck into the plane and caused a fire and explosion. Moulaged passengers were sorted quickly by several fire fighters into one of four categories: minor, delayed, immediate, or deceased. Passengers were then transported by ambulances to four local hospitals who partook in the exercise. Over 200 first responders participated in the exercise to practice their skills.

In mid-October, CDR Leung also participated in the city-wide drill. Attendees had hands-on experience on triage, cribbing, hazard identification, and filling out incident forms. Overall, it was a great experience to apply knowledge and practice response skills. These skills will come in handy when a disaster strikes and makes for a greater resilient community.



CDR Tamy Leung, playing a patient, waits on a plane prior to the beginning of the SFO exercise.

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