The Work of COF: Washington, DC

Screenings of Invisible Corps: In Officio Salutis (In Service of Health)

by CAPT (Ret) Gene Migliaccio, President, COF Board of Trustees

The month of October 2023 was very busy with screenings of Invisible Corps: In Officio Salutis in the Washington, DC metro area. Over a 2-day period there were five major events bringing together “friends” of United States Public Health Service (USPHS) with many active and retired officers in attendance.

The screenings started on October 18th with a COA hosted Capitol Hill briefing to Congressional staff on the role of the USPHS Commissioned Corps. There were a number of officers, active and retired, who participated on a panel to brief the Congressional staff. The delegation of officers was led by Deputy Surgeon General Denise Hinton. Please see the article on page 2, which goes into more detail of this event.

During the evening hours, the University of Maryland School of Public Health held an event for their faculty, staff, students and local USPHS officers. The Baltimore COA Chapter provided support for the event and also engaged with students via a mini-career fair.

On October 19th, the Department of the Interior, held an event titled, “Healing our Planet: A Call to Action on Climate and Health Equity” that focused on the environment and the work of USPHS.

I am writing this column in early November as I return home from Washington, DC, where I attended two crucial meetings on behalf of members of the Commissioned Officers Association of the USPHS. The weather was chilly but brilliantly sunny, and everyone seemed to be enjoying the beauty of the changing fall leaves.

My first meeting was with the Office of the Surgeon General (OSG). We discussed several vital issues, along with the upcoming annual symposium in Jacksonville, Florida, scheduled for June 24-27, 2024. We also explored potential locations for our 2025 meeting.

COA’s foundation, the PHS Commissioned Officers Foundation for the Advancement of Public Health (COF), deeply appreciates the partnership of the OSG and the Office of the Assistant Secretary for Health (OASH) for the opportunity to co-sponsor this meeting. The 2024 gathering will mark the 57th meeting we organize on behalf of officers of the U.S. Public Health Service, and it is our pleasure to do so.
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 USPHS 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.

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

Capitol Hill Congressional Briefing on PBS Documentary

by Dave Corrigan, COA Deputy Director

As you read in COF President Gene Migliaccio’s column on page 1, COA and COF held multiple screenings of the PBS Documentary Invisible Corps: In Officio Salutis last month. To begin that series of screenings, COA hosted a briefing to Congressional staff in the Rayburn House Office Building on Wednesday, October 18th. In front of 30-40 Congressional staff, COA hosted a panel of retired and active USPHS officers briefed staff on personal experiences during their service in the USPHS. The event was hosted on a very busy day on the Hill, but staff were eager to attend the briefing and learn about the USPHS.

The hour-long event, hosted by the emcee Jacqueline Rychnovsky, COA’s Executive Director, started with the producer, Chris Schuler, and the narrator of the film, Actress Ali MacGraw, introducing the film and all the work that went into it. Deputy Surgeon General RADM Denise Hinton then gave remarks to open the rest of the event. RADM Susan Orsega, senior advisor for the Surgeon General and Assistant Secretary for Health, introduced the new USPHS legislative liaison program and educated the Congressional staff in attendance about USPHS’ priorities.

The majority of the program surrounded playing individual short clips of the documentary. After each clip, a member of the panel would explain how the topic of that video is represented in the responsibility of the USPHS or that individual’s personal experience. CDR Ian Myles discussed the short clip titled “Public Health History,” by explaining to the Congressional staffers how each part of their day is made easier by advances in public health from clean water to clean air. RDML Sean Boyd discussed the USPHS’ role in the FDA. After showing the clips “Categories” and “Commissioned Corps Nurses,” CAPT Karen Munoz then educated the staff on the 11 categories and the impact of her specific category, nurses, have had on public health around the country.

COA Board Chair CDR James Gooch then explained the USPHS role and increased deployment schedule during the pandemic after playing the clip titled “COVID-19.” After playing the short clip titled “Global Importance,” CDR Liz Garza discussed the role of public health and the USPHS around the world. To book-end the event, COF past-President RDML (Ret) Steve Solomon discussed the short clip “Health Care vs. Public Health. RDML Solomon has been an integral part in the production of the documentary, raising funds for the documentary, and raising awareness about the film after it was released.

Before the event, USPHS Commissioned Corps Mascot LCDR Abigail and her handler, LCDR Dan Johnson, greeted attendees as they arrived at the event. I’d like to think LCDR Abigail helped attract even more attendees than had planned on coming. Additionally, USPHS past and current legislative liaisons were in attendance to greet attendees and answer any specific questions they may have had about USPHS or its legislative liaison program.

While advocating for the USPHS Commissioned Corps, COA often speaks with lawmakers that do not know much, if anything, about the USPHS. This event was used to educate lawmakers and their staff about the history and mission of the USPHS. We are certain this will help us advocate in the future for parity with the other services.

The production of Invisible Corps has been an integral part in the production of the documentary, raising funds for the documentary, and raising awareness about the film after it was released.

COA would like to thank the panelists – RDML Boyd, CDR Myles, CAPT Munoz, CDR Gooch, CDR Garza, and RDML Solomon – for representing COA and the USPHS during this event. We would also like to thank RADM Hinton and RADM Orsega for their opening remarks. Chris Schuler and Ali MacGraw have been amazing partners in this project and we appreciate them for traveling from New Mexico to attend.

Stay tuned for more events like this. Please visit invisiblecorps.com to watch the film or share it with your family and friends.
Breaking Barriers While Building Community Partnerships: A Veterans Suicide Prevention Panel

by LCDR Velisa Jackson, M.S. COR and LCDR Jamillah Bynum, LCSW, BCD

Veterans often return home carrying invisible scars from their time in service. The mental and emotional toll of military service can be immense, sometimes leading to a tragic outcome: suicide. Veteran suicide is a pressing issue that demands our attention and concerted efforts for prevention and support.

On September 13, 2023, The United States Department of Housing and Urban Development (HUD), the United States Public Health Service (USPHS) Commissioned Corps, The American Board of Clinical Social Workers (ABCSW), Access Housing, Inc. (AHI), and Serving Together Project (STP) hosted a panel discussion on suicide prevention entitled Breaking Barriers while Building Community Partnerships: A Veterans Suicide Prevention Panel. This event included opening remarks by LCDR Jamillah Bynum, USPHS and HUD’s Assistant Secretary of Housing, Dr. Kimberlye McClain. The event also featured a panel of ten key suicide prevention leaders shedding light on warning signs, early intervention, and postvention strategies to address veteran suicide as a public health epidemic. Experts shared vital resources to facilitate community engagement and ways to support the continuum of care.

Veteran suicide is a multifaceted problem with alarming statistics. According to the U.S. Department of Veterans Affairs (VA), an average of 17 veterans die by suicide each day in the United States (2022 Annual Report). Suicide and suicidal behavior are public health challenges influenced by social determinants of health including poverty, discrimination, racism, limited affordable housing, lack of educational opportunities, and challenges to accessing medical and mental healthcare. Veterans, sexual and gender minorities, individuals who reside in rural areas, middle-aged adults, people of color, and tribal populations experience more negative social determinants and have higher rates of suicide or suicide attempts than the general U.S. population. This sobering reality highlights the urgency of addressing the mental health needs of our veterans.

The keynote speaker, Dr. Kelly Posner Gerstenhaber, an international leader in suicide prevention and professor of psychiatry at Columbia University, focused on change within local, national, and international policy. Rear Admiral Matthew Kleiman, Assistant U.S. Surgeon General and senior uniformed behavioral health official in the USPHS Commissioned Corps, facilitated a robust discussion of experts consisting of licensed clinical social workers (LCSWs), community advocates, and active and retired service members. Panelists discussed risk factors contributing to the increased prevalence of suicide among veterans and prevention strategies to support community advocacy, clinical care, and collaborative efforts. They provided resources, examples, and models for the attendees to use, as well as opportunities for professional growth in social service delivery and therapeutic treatment arenas, for the 70 professionals in attendance.

Risk Factors

1. Post-Traumatic Stress Disorder (PTSD): Many veterans experience trauma during their service, leading to the development of PTSD, a significant risk factor for suicide if left untreated.

2. Depression and Anxiety: The transition from military to civilian life can be challenging, leading to feelings of depression and anxiety in veterans, exacerbating suicidal thoughts.

3. Substance Abuse: Substance abuse issues often co-occur with mental health challenges, increasing the risk of suicide among veterans.

4. Access to Firearms: Veterans often have access to firearms, possibly contributing to the lethality of suicide attempts.

5. Isolation: Feelings of isolation and disconnection from civilian society can leave veterans without a support system, compounding their emotional struggles.

Prevention Strategies

1. Mental Health Awareness: Raising awareness about mental health issues, encouraging veterans to seek help, and promoting a stigma-free environment is essential.

2. Access to Care: The VA has made strides in expanding mental health care services, but more can be done to reduce wait times and improve the quality of care.

3. Peer Support: Peer support programs, where veterans help fellow veterans, have shown promise in preventing suicide.

4. Lethal Means Safety: Educating veterans and their families about the safe storage of firearms and medications can help reduce the lethality of suicide attempts.

see SUICIDE PREVENTION continued on page 19
By CDR James Gooch, Chair, COA Board of Directors

I have just accomplished one of my proudest moments of the year. With my lovely wife out of town, I successfully led three kids under nine through Halloween trick-or-treating this year – and got them in bed before 8:30pm. It was not easy, but I did it. And in the heat of the battle, while navigating my four-year-old onto sidewalks, up steep driveways, out of traffic, around vampires, all the while also managing the candy intake - it occurred to me that Halloween might be my favorite holiday.

Let me explain. It's not because of the conspicuous consumption of candy that keeps dentists employed throughout the year. It's not the dress up and playing pretend, though that part is fun. For me, it's the rare opportunity to meet and greet my neighbors. I live in a wonderfully diverse neighborhood with many ages, ethnicities, incomes, and backgrounds. The fabric of our community is complex and beautiful. I cherish any opportunity I have to explore it. And frankly, there are few times when it is socially appropriate to go door-to-door in any neighborhood, or expectantly reciprocate that action by having your neighbors show up on your doorstep. Halloween is by far a once-a-year opportunity to actively invest in your community's social capital.

If you are not familiar with the term, according to Robert Putnam, social capital refers to the "social networks and the norms of reciprocity associated with them" (so basically the core tenet of Halloween). Since becoming vogue in the 1990s, social capital has been used and abused across many fields of study. However, at its core there is something fundamental about the concept as a non-economic measure of community wellbeing. Qualitatively, it looks like neighbors helping neighbors with small things like chores, animal care, childcare, or even just general empathy and emotional support. Quantitatively, it's much more deceptive, and as you can imagine, very complex to measure. I’m certain within our ranks, a few officers could offer a diatribe on the subject (future Frontline article please).

Over the last few decades, many academics have argued that social capital is declining across the US. This downward trend is cited as the reason for declines in membership to various kinds of organizations, like Commissioned Officers Association (COA). However, in my sugar-induced walkabout on Halloween, I did not experience a declining social capital in my community. In fact, I found the opposite. I felt invigorated by my neighbors and friends. I felt wealthy. It was a refreshing reminder of the importance of intentional community for me. That feeling is what I wanted to share with you. Not the sense of community, but the return on investment. The dividends being paid back to me in-kind despite only investing a few years in this neighborhood. This experience was notable for me, and it has motivated me to want to invest more in my community.

My experience on Halloween this year resonated deeply. It reminded me of the importance of community and reminded me that the opportunities for investing in social capital are not just once-a-year. I couldn’t help but find a parallel with our work in the COA community. Our intentional community - so complex, so diverse, so fleeting at times– and yet also in contradiction. The data shows our membership is in decline over the last few years. For COA, membership is our lifeblood. It's what keeps the doors open, but also it is what gives us standing for the advocacy we do on behalf of all officers. And yet, similar to my experience on Halloween, I find COA so full of social capital.

The Symposium, for me, is the closest I have felt to this Halloween gratitude. Admittingly, there are some similarities. We are dressed up (and usually some of us have had candy), but the annual event is where we get to experience a distinct feeling of collective community investment. It’s where we receive the dividends earned after years of deployments and volunteer activities. The feeling of those investments coming to term is so rewarding. It offers that once-a-year opportunity to renew our deep connections with fellow officers and reaffirm a real belief in seeing our efforts come to fruition with substantive shared generational wealth. This type of return on investment has been monumental for me. It grounds me to our Corps. And as a COA member, it makes me proud of what this organization means for USPHS and its future. I think we can sustain the Symposium feelings year-round. I think unlocking this shared investment is the future of COA. I invite you to be part of it. Reach out to me to discuss. Happy belated Halloween.
2023 Photo Contest
SHOW US YOUR BEST SHOTS!

You’ve been there. You’ve done that. You’ve seen the moment and snapped the shot. All you must do for a chance to win is submit your photo.

SUBMISSION DEADLINE: 12/4/2023

Full Contest Rules and Consent Form: https://tinyurl.com/COAphotocontest2023

1st Place Prize:
Free annual COA membership for one year OR Amazon gift card equivalent to that of the membership value (Life Members only)

2nd Place Prize:
$100 Amazon gift card

3rd Place Prize:
$50 Amazon gift card

Photo Suggestions:
Deployments Community service Local branch events Resiliency, self care Telework photos Work-related photos

SUBMIT TO:
coaphotocontest@gmail.com

Commissioned Officers Association of the U.S. Public Health Service

2024 USPHS Symposium Coin Design Contest

Submission Guidance

Deadline: January 1, 2024
Email Design to:
dcorrigan@coausphs.org
(Subject line: “Symposium Coin Contest”)

Design Format: JPG or PNG

Design Suggestions:
- Represent Symposium Theme “Inclusivity + Innovation:: Reducing Disparities in the Service of Health”
- “57th Annual USPHS Symposium”
- Location (Jacksonville, FL)
- Symposium Dates or Year
- USPHS Logo and unique design OR design both sides

Winner will be announced in the March 2024 issue of Frontline & the monthly email update.

PRIZE: Complimentary 2024 Symposium Registration

2023 Winning Design

2024 USPHS Symposium Coin Design Contest

Are you up for the Challenge?

Commissioned Officers Foundation

2024 USPHS Symposium

Co i n  Desi g n  Co n t e st

W i n n e r  w i l l  b e  a n n o u n c e d  i n
the M a r c h  2 0 2 4  i s s u e  o f
F r o n t l i n e  &  t h e  m o n t h l y
e m a i l  u p d a t e .

P R I Z E :  C o m p l i m e n t a r y  2 0 2 4
S y m p o s i u m  R e g i s t r a t i o n
by Lynn Abrahamson, MPH, RN, COF
Grants Manager

The PHS Commissioned Officers
Foundation for the Advancement of Public
Health (COF) awarded RDML Mishoe
Scholarships to three students for the
2023-2024 academic year. Scholarship
recipients include Hailey Smith, Christian
Langley, and Alison Narog.

The scholarship program was established
in 2021 by RDML Helena Mishoe, PhD,
MPH to support the ambitions of high
school students from underrepresented
populations who are interested in the
health sciences and other health-related
disciplines. The award recipients are
selected based on their school and
community involvement, demonstrated
leadership, ability to overcome challenges,
and their response to the meaning of the
following quote - “Hope emerges and the
future begins for one person only when
there is another who believes in the beauty
of their dreams” (RDML Mishoe's favorite
saying from a former student).

In her scholarship essay, Hailey wrote
that she wishes to pursue a career as a
pediatric nurse. As someone who has had
major health challenges, she values the
importance of empathy and how individuals
can make an impact. As highlighted in one
of her recommendation letters, Hailey "has
a special eye and ability for capturing what
matters most." She wishes to “continue to
mentor and support future generations and
remind them to keep pursuing their dreams
despite any obstacles or challenges that
may try to stand in their way.” Hailey
is studying nursing at a university in
Washington state.

When discussing the theme of the above-
mentioned quote, Christian wrote that “we
cannot be alone if we wish to accomplish
our dreams; it requires the help of others.”
He expands on this by saying that the
support he received when feeling isolated
and confused helped him come closer to
his goals. Their encouragement bolstered
his confidence and led him to develop
strong leadership skills. During his many
community activities, Christian learned
to “bring people together for the greater
good” and it is something that he plans
to continue to do. He is attending Wake
Forest University majoring in biochemistry
and molecular biology.

In overcoming a significant sports injury,
Alison learned that while she could not
directly participate in the team sport, she
was able to find other ways to contribute.
She also realized that hard work and
perseverance are important to being
successful. For Alison, the hope quote
means that “Dreams are not easy to reach,
and they are only more difficult when you
try to do it alone. Having someone there
for you makes a huge difference, whether
it is: offering perspective, support, comfort,
advising, or company.” Involved in a variety
of volunteer activities, Alison is well known
in the community for her willingness to help
others. She is studying microbiology at the
University of Idaho.

The Foundation congratulates all three
students who each exemplify a strong
commitment to their communities
and to pursuing higher education. It
would also like to thank the donors
who support this scholarship program
and the volunteers who reviewed the
fellowship applications. To learn more
about the Mishoe Scholarship, please visit
https://www.phscof.org/scholarships/
mishoe-believe-scholarship/
The following are planned changes to the TRICARE program benefits:

- **Elimination of Cost-Sharing for Female Tubal Sterilization as Preventive Care:** Effective January 1, 2023, TRICARE eliminated cost-sharing for female tubal sterilization as a preventive service when it is performed by in-network TRICARE-authorized providers.

- **Preconception and Prenatal Carrier Screening:** TRICARE covers preconception and prenatal carrier screening tests for cystic fibrosis, spinal muscular atrophy, fragile X syndrome, Tay-Sachs Disease, hemoglobinopathies, and conditions linked with Ashkenazi Jewish descent for beneficiaries with a limit of one test per condition per lifetime.

- **Breastfeeding Supplies:** Effective January 25, 2023, in keeping with industry norms of shipping packages of 100 versus the earlier-covered 90 breast milk bags, TRICARE began cost-sharing for 100 breast milk bags every thirty days following the birth event for breastfeeding TRICARE Prime and TRICARE Select enrollees.

- **U.S. Family Health Plan (USFHP):** USFHP is an additional TRICARE Prime option available through networks of community-based, not-for-profit health care systems (designated providers) in six geographic areas of the U.S. Beneficiaries are encouraged to review the information at https://www.tricare.mil/Plans/Enroll/USFHP and other available resources to determine whether they are in a USFHP eligible ZIP Code.

- **TRICARE Managed Care Support Contracts for East and West Regions Change:** A set of new TRICARE Managed Care Support contracts that facilitate health care in the private sector will serve beneficiaries in the East and West regions. Under the new contracts, beneficiaries residing in Arkansas, Illinois, Louisiana, Oklahoma, Texas, and Wisconsin will shift from the East to the West region. Beneficiaries with questions about this transition can seek more information at https://www.tricare.mil/Plans/SpecialPrograms/LowBackPain.

- **Reimbursement and Coverage of Services Provided by Freestanding End-Stage Renal Disease (ESRD) Facilities:** Effective January 12, 2023, TRICARE now recognizes freestanding end-stage renal disease facilities as authorized institutional providers, with an accompanying reimbursement methodology. The following are planned changes to the TRICARE program benefits:

  - **Low Back Pain Physical Therapy Demonstration Ends:** This three-year demonstration operating in ten states ends on December 31, 2023. The demonstration addresses the ongoing issue of low back pain among TRICARE enrollees and was designed to test the impact of waiving cost-shares associated with the first three physical therapy visits for low back pain. Information can be found at https://newsroom.tricare.mil/News/TRICARE-News/Article/3254092/changes-to-tricare-expected-in-2024.

  - **Laboratory Developed Test Demonstration Extended:** The Laboratory Developed Test (LDT) Demonstration to assess whether submitted LDTs without United States Food and Drug Administration (FDA) approval or clearance otherwise meet TRICARE coverage criteria, i.e., proven safety and effectiveness for its intended use, was slated to terminate on July 18, 2023. However, DHA has opted to extend the LDT Demonstration through July 18, 2028, to allow the Agency additional time to determine how to address LDT coverage long-term and allow continued coverage of these tests for TRICARE beneficiaries in the interim.

  - **Coronavirus Disease (COVID-19) Response Changes:** The U.S. National Emergency responding to the COVID-19 pandemic, originally declared in March 2020, ended on April 10, 2023. The Secretary of Health and Human Services (HHS) then ended the corresponding Public Health Emergency (PHE) on May 11, 2023. DOD had implemented certain flexibility for the MHS for the pendency of the National Emergency and HHS PHE that were to sunset with the termination of such emergency statuses. On termination of the National Emergency, DOD resumed requiring a three-day acute care hospital stay prior to admission to a skilled nursing facility and requiring TRICARE Prime enrollees seek referrals to acquire COVID-19 vaccines from non-network, authorized providers without incurring point-of-services charges; and discontinued coverage of National Institute of Allergy and Infectious Disease (NIAID)-sponsored clinical trials (note: eligible beneficiaries who enrolled in a covered trial on or before April 10, 2023 will continue to have their care covered through the end of the trial). DOD also discontinued coverage of the treatment use of investigational drugs under expanded access for all new episodes of treatment and eliminated the temporary waiver of certain interstate and international licensing requirements for providers practicing both in person and via telehealth.

  - **Pharmacy Out-of-Pocket Expenses for CY 2024.** TRICARE Pharmacy copayments will increase on January 1, 2024. (See photo)

  - **Premium Based Plans.** The CY 2024 monthly premiums for TRICARE Reserve Select, TRICARE Retired Reserve, and TRICARE Young Adult and the quarterly premiums for Continued Health Care Benefit Program will be posted to the tricare.mil/changes web page once announced.
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.

**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.

**Retired Officer 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** (active local branch COA member) 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** (COA local branch Executive Committee member). Recognizes excellence in contributions to the COA local branch, service to the association, and to the members thereof.

**Ready Reserve Member of the Year Award** (Active COA Member and Member of the USPHS Ready Reserve). Recognizes excellence in contributions of a Ready Reserve officer.

**Apply Online**

If you would like to nominate an officer or need more information, please visit the COA website (coausphs.org) under the Awards menu. The deadline to submit nominations is **Friday, January 19, at 5 PM Eastern**.
Indian Health Service Officers Serve on Detail to Support the 2025-2030 Dietary Guidelines for Americans

by LCDR Joseph Rorabaugh-Irwin, MS, RD, LD, CDCES and LT Jessica Bluto, MS, RDN, LD, CDCES, CSOWM

With diet and nutrition playing an integral role in the health and well-being of the nation, registered dietitian officers are uniquely qualified to blend nutrition, behavior, and social sciences to shape the food choices of the American public. During the past year, two dietitian officers from the Indian Health Service (IHS) were selected by the Office of Disease Prevention and Health Promotion (ODPHP) and endorsed by the Assistant Secretary for Health (ASH) to serve on a six-month detail in support of the 2025-2030 Dietary Guidelines for Americans (Dietary Guidelines). Each updated version of the Dietary Guidelines is used as a basis for federal food, nutrition, and health policies.

Every five years, the U.S. Department of Health and Human Services (HHS) and the United States Department of Agriculture (USDA) collaborate and alternate leading the efforts to update the Dietary Guidelines, with HHS serving as the administrative lead on the 2025-2030 edition. Developing the Dietary Guidelines involves a scientifically rigorous, multi-year, five-step process. LCDR Joseph Rorabaugh-Irwin and LT Jessica Bluto brought their unique experiences and subject matter expertise to the federal team at HHS and USDA to support the 2025 Dietary Guidelines Advisory Committee (Committee) during the third step of this process, in which the Committee reviews scientific evidence. The Committee, composed of twenty nationally-recognized nutrition experts, collaborates to develop evidence review protocols, review and synthesize evidence, present scientific findings, and consider public comments. The Committee’s work culminates in a comprehensive scientific report on the current state of nutrition science and provides independent recommendations to HHS and USDA.

Over their six-month detail, LCDR Rorabaugh-Irwin and LT Bluto worked with three other United States Public Health Service (USPHS) Commissioned Corps officers stationed at ODPHP. These officers include RDML Paul Reed, a medical officer serving as the Deputy Assistant Secretary for Health and the Director of ODPHP; CDR Katrina Piercy, a dietitian officer and the Director of the Division of Prevention Science responsible for overseeing nutrition and physical activity policy development and implementation; and LCDR Dennis Anderson-Villaluz, a dietitian officer serving as a Nutrition Advisor.

LCDR Rorabaugh-Irwin used his training from his graduate degree in Dietetics and Nutrition by screening articles to answer protocol questions and his experience working in Quality Management for IHS in helping analyze data on the Committee's Data Analysis workgroup. He also assisted the Food Pattern Modeling Subcommittee refining and developing protocols to determine how to address foods with lower nutrient density. LCDR Rorabaugh-Irwin described his Committee experience as the “Highlight of my career,” noting that “it was amazing to see how the Committee worked together to ensure the report was inclusive of all groups residing in the United States and working to incorporate cultural foodways into food pattern modeling and research evaluation.” LCDR Rorabaugh-Irwin also shared, “As an Officer working for IHS, it was exciting to see the first committee member from a Tribal Nation. It was an honor to work with leading nutrition experts in the nation and support their work in synthesizing evidence to produce their report. I look forward to seeing the product of the Committee and the advances in our profession when the 2025-2030 Dietary Guidelines are published.”

LT Bluto describes her experience as “unparalleled.” She especially enjoyed the pivot from her clinical work at IHS to further explore the process that drives the see DIETARY continued on page 23
Foundation Announces 2023 Family Member Scholarship Recipients

by Lynn Abrahamson, MPH, RN, COF Grants Manager

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) recently awarded a total of $27,000 to high school seniors, undergraduate, and graduate students as part of its annual scholarship program. Recipients are the spouse, biological, step, or adopted child or grandchild of a current member of the Commissioned Officers Association of the U.S. Public Health Service (COA).

Scholarship recipients are selected based on their academic merit, school/community activities, honors/awards, and career aspirations. The twenty-seven awardees with their field of study and school of higher learning are listed below. The COA member associated with each student is in parentheses.

- **Abigail Post**: Exercise Physiology, Marquette University (CAPT Jennifer Post, ret)
- **Abigale Thompson**: Speech-Language Pathology, University of St. Augustine for Health Sciences (CDR Jasen Thompson)
- **Alan Marietta**: Computer Science, College of William & Mary (CAPT Robert Marietta)
- **Alexa Mutz**: Nutritional Sciences, Northeastern State University (CDR Shelo Mutz)
- **Alison Narog**: Microbiology, University of Idaho (CDR Brian Narog)
- **Amelia Scherling**: Biochemistry, Bemidji State University (CAPT Steven Scherling)
- **Amelia Thoennes**: Human Biology, South Dakota State University (CDR Mary Thoennes)
- **Ava Roe**: Psychology, Brigham Young University (CAPT Robert Roe)
- **Benjamin Harper**: Economics, Morehouse College (CAPT Juanika Mainor-Harper)
- **Carolyn Fenno**: Environmental Science, Washington University (CDR James Fenno)
- **Colin McGarry**: Biomedical Engineering, Regis College (CDR Mary McGarry)
- **Daniel Richardson**: Physical Therapy, Northern Arizona University (CAPT Jeffrey Richardson)
- **Ella Magill**: Architecture, University of Washington (CDR Stephanie Magill)
- **Emma Post**: Physical Therapy, Marquette University (CAPT Jennifer Post, ret)
- **Evan Wendel**: Biology, Whitman College (CAPT Arthur Wendel)
- **Hailey Smith**: Nursing, Saint Martin’s University (CDR Darin Smith)
- **Jack Martinson**: Biochemistry/Molecular Biology, Chapman University (CAPT Matthew Martinson)
- **Jadyn Simms**: Exercise Science, High Point University (CDR Kelley Simms, ret)
- **Jordan Roe**: Kinesiology, California Baptist University (CAPT Robert Roe)
- **Katherine Gora Combs**: Epidemiology, University of North Carolina (CAPT Jeffery Combs)
- **Lily Richardson**: Social Work, Arizona State University (CAPT Jeffrey Richardson)
- **Lucas Verani**: Economics/International Relations, U. of Southern California (CAPT Jennifer Verani)
- **Paige Reed**: Hearing and Speech Science, University of Maryland (LCDR Jennifer Shepherd)
- **Raviv Horesh**: Mechanical Engineering, University of Missouri-Kansas City (CAPT Dana Hall, ret)
- **Rebecca Cox**: Medicine, Emory University School of Medicine (CDR Deborah Cox)
- **Ryann Witter**: Biology, Carleton College (CDR Lee Witter, ret)
- **Zoe Esquada**: Nursing, Pacific Lutheran University (CAPT John Randall, ret)

Family Member Scholarships (formerly called Dependent Scholarships) have been awarded since 2006. Donations to this program are from active duty and retired members, local COA branches, and others. The Foundation wishes to thank them as well as the volunteer reviewers. More information about the COF Family Member Scholarships can be found at: https://www.phscof.org/scholarships/family-member-scholarships/
Operation Magnolia: Reservists’ Perspectives

by LTJG Osler Andres, PharmD; LTJG Sarah Beale, MPH; LTJG Toska Cooper, MPH; LTJG Leilahand Feinman, PhD; LT John Heafner, MD, MPH; LTJG Lauren McGlade, RD, LD, CNSC; LTJG Clarisa Medina, MPH; LTJG Jacob Myers, MS, RD, CLC; LTJG Anikah Salim, DrPH, MPH, CPH; LTJG Jesse P. Samluk, PhD, Esquire; and LTJG Jason Slavoski, PharmD

Part-One

Operation Magnolia (OM), the largest and first-of-its kind in-person active-duty training for officers in the United States Public Health Service Reserve Commissioned Corps (RCC), was executed during parts of March and April 2023 at Camp Shelby Joint Forces Training Center in Hattiesburg, MS to tremendous success.

Thirty-four RCC officers participated in OM. This exercise was designed to simulate hurricane disaster response and what occurs at a federal medical station (FMS) when infrastructure is adversely affected. A pioneering event for the RCC, Operation Magnolia focused on developing readiness and officership for reservists when they are called to active duty.

The training primarily focused on command and general staff roles as detailed in the Incident Command System (ICS), such as logistics, admin/finance, operations, planning, incident commander (IC)*, public information officer (PIO), liaison officer (LNO), and safety officer. Ancillary to the overall ICS training was patient care during a disaster event. Reservists in attendance represented most of the USPHS categories and were required to plan and provide for 24-hour operations of their FMS serving individuals with access and functional needs, while weathering a series of storm-related challenges, without compromising care.

The scenario was based on a devastating hurricane that struck the greater New Orleans metropolitan area, including Hattiesburg, MS. The mission was to provide necessary medical services to residents of Hattiesburg who could not relocate due to the storm. However, in order to better prepare reservists for a response such as a hurricane, multiple scenario injects (i.e., hypothetical situations) were also introduced, including an active shooter, a psychiatric patient that resisted transfer to an appropriate facility, power outages, and cellular communications and data outages.

Additionally, officers were expected to fulfill real-world objectives relating to their ICS roles. For example, logistics officers managed vehicles and housing assigned to training attendees. The PIO/LNO team interacted with local nonprofits for a service activity as well as prepared a site guide for a distinguished visitor (DV), which was used to brief the Surgeon General. Clinical officers in attendance took responsibility for Force Wellness.

What follows is a description of the roles occupied as part of the overall exercise. Note that, for the duration of the exercise, the reservists were split into two teams that occupied these roles, including leadership roles (IC, Deputy IC, and staff leads) who were theoretically located 100 miles away from each other.

According to the ICS roles, the (IC), as well as their deputy, oversee the entire operation. Their goal is to not only ensure mission objectives are achieved but are also responsible overall for personnel on site (staff and patients). In short, they are the “conductors of the orchestra”.

For Operation Magnolia, in particular, there were two sets of teams and two ICs. Their duties started before the exercise and did not end until all personnel safely returned home. They had the ultimate task of making sure the teams that comprised the FMS not only had the resources to do their jobs, but also did it successfully. They received and provided daily updates to higher leadership in CCHQ about the current situation of the hurricane response, and relayed critical information to team leads. While this short description does not provide justice to every task that the ICs completed as part of their duties, it does highlight the importance of their role.

The Admin/Finance department played a pivotal role in delivering the mission objectives, encompassing not only the management of financial affairs but also handling fundamental administrative and secretarial functions. From a financial

see RESERVISTS continued on page 13
We send our deepest thanks to all the members of the United States Public Health Service for your brave service and commitment to our Nation’s health and safety. **You are and forever will be heroes!**

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

*We are truly grateful for your dedication to your duties.*

**Thank you.**

The entire team at the Law Offices of David P. Sheldon, PLLC

Washington, DC.

Law Offices of
David P. Sheldon, PLLC

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October was National Physical Therapy Month, and this year’s theme was “The Value of PT”. LT Daanish Memon led this year’s effort at the National Institutes of Health (NIH) to promote the profession and the public health of the NIH community. LT Memon has been practicing for six years and in that time, has become a board certified Orthopedic Clinical Specialist (OCS) and completed his Trigger Point Dry Needling certification. He has been with the NIH since December 2022, and commissioned as an officer in May 2023. With the support of his colleagues in the Physical Therapy (PT) section of the Rehabilitation Medicine Department (RMD), LT Memon coordinated an outreach event on October 3, 2023, on the South Lawn of the NIH Clinical Center, which included an information table and physical challenge activities for participants. The information available included the benefits of physical therapy, tips to maintain a healthy and active lifestyle, and how physical therapy can be used as an alternative or adjunct to traditional pain management techniques. The physical challenge activities offered were single leg balance time and hand grip strength; both activities have been shown to be predictors of overall health, morbidity, and mortality. LT Memon educated participants on normative values and how providers can use them to track overall health and function over time.

In addition, LT Memon provided an educational in-service to a multidisciplinary group of 12 clinicians in the RMD PT Section, educating them on pain referrals. The presentation included information on myofascial pain, somatic pain, and visceral pain referrals, and their implications when forming a differential diagnosis during an orthopedic evaluation. He emphasized the importance of a thorough subjective exam to formulate an initial hypothesis, followed by an objective exam to further rule in or rule out a possible diagnosis. The audience was encouraged to utilize established Clinical Prediction Rules, which are a cluster of special tests that, when used together, can help illustrate the likelihood of the presence or absence of a condition. The presentation resulted in positive feedback and thoughtful questions, which encouraged further discussion on the applicability of the information in treating the unique patient population at the NIH.

LT Memon’s leadership during National Physical Therapy month at the NIH left a lasting impact. Coordinating an engaging outreach event on the South Lawn of the NIH Clinical Center, LT Memon, alongside the Physical Therapy section of the Rehabilitation Medicine Department, successfully raised awareness about the benefits of physical therapy and conducted physical challenge activities with valuable health predictors. Simultaneously, his in-service session for clinicians within the NIH Rehabilitation Medicine Department on pain referrals, including myofascial, somatic, and visceral pain, deepened their understanding and sparked discussions on practical applications. These initiatives collectively contribute to a heightened awareness of the value of physical therapy within the NIH community and equip clinicians with enhanced knowledge for more precise and effective patient care, reflecting a significant step toward promoting public health and well-being at the NIH.
Research Study of Moral Injury, Moral Distress and Spirituality Among Public Health Emergency Responders Who Have Worked With Resource Scarcity Due to Catastrophic Events

If you are a public health emergency responder and you have responded to catastrophic events to provide care for patients and or community members, you may be eligible to participate in an online survey study.

This study seeks to survey public health emergency responders who have responded to catastrophic events with resource scarcity to provide patient care and or support to community members. We are interested in learning about your unique experiences to determine if spirituality plays a role in how you process your experiences during catastrophic events.

This study is completely voluntary. If you choose to participate, you will take part in a single online survey. The online survey will last approximately 30 minutes. The online survey will have all personal identifiers removed.

There is no compensation for participating in this research study.

Disclaimer: This project is not an HHS/ASPR sponsored project. Thus, participation in this project is voluntary for HHS/ASPR/NDMS members to choose to participate in their personal capacities during their own time. Participants will not be compensated by ASPR for choosing to participate in this project. HHS/ASPR/NDMS participants may not share non-public information while participating if they choose to participate. This project and any publications as a result of this project is not endorsed by HHS.

Details

- Online survey participants will take a single approx. 30-minute survey. All personal identifiers from the online survey will be removed.

Are you eligible?

- You are eligible if you are a public health emergency responder.
- You are eligible if you have been a public health emergency responder for at least 3 years.
- You are at least 18 years old.

Enrollment period: 11/06/2023 to 03/31/2024

To ask questions or participate:

Please contact: Dwight Ferguson, PhD, MS
Bioethics Student, Harvard Medical School, Center for Bioethics
Email: dwight_ferguson@hms.harvard.edu

Click here to participate https://hms.az1.qualtrics.com/jfe/form/SV_ehcmiGcMhn5TWHc

Or scan QR Code

IRB#23-1070-02

Approval Date: 10/31/2023
The Women’s Leadership Support Group (WLSG) was founded in 2014 under the guidance of retired RDML Pamela Schweitzer, former Pharmacy Chief Professional Officer. Female officers in the Commissioned Corps needed support balancing multiple unique challenges in their work and home lives. WLSG was formed to provide a safe space for female officers facing common issues to share comfort and support, camaraderie, and friendship. There are support groups, or pods, throughout the country that female officers can join at any time. Some support groups are geographically based while others are based on common interests, such as assisted family planning. The Atlanta pod consists of officers representing different categories and agencies with various family situations. Led by CDR Candis Hunter and LCDR Ayana Stanley, the pod keeps members engaged throughout the year by offering educational sessions, informal discussions, and fun social events. For example, previous sessions included navigating Tricare benefits, informal retirement planning, understanding dimensions of wellness, developing vision boards, and building personal resilience. Recently, the Atlanta pod provided in-person opportunities for members to grow bonds through a gardening event and harvest friends with an apple picking outing.

During the summer of 2023, seven officers were welcomed by fellow WLSG member, CDR Jessica Otto, at her home to create their own pizza gardens. Officers learned gardening basics such as preparing their garden soil, planting seeds and transplants, and understanding watering and pest prevention techniques. At the conclusion of the event, officers took home their own portable pizza garden that included tomatoes, basil, oregano, thyme, and parsley — all the ingredients needed to make a fresh and healthy pizza or pasta sauce. Overall, the opportunity provided officers a community to fellowship, to get some fresh air, and to learn how to grow their own fresh food for better health. After the event, officers continued to build their connections by creating a WLSG Gardening WhatsApp group where they share their gardening questions, advice, recipes, and prized photos of gardening produce.

In the fall of 2023, five officers and their families met at the B.J. Reece Orchards tucked in the North Georgia Mountains for some apple picking fun. The family-owned and operated orchard has a petting farm, giant farm slide, cow train ride, and many more kid friendly activities. Although it started drizzling, the rain didn’t stop the group from venturing out to the orchard. From the sweet Crimson Crisp to the tart Granny Smith, the orchard was lined with trees full of delicious apples. Officers took home freshly picked apples to share with their families and friends. Some enjoyed the apples as healthy snacks, while others used them to make homemade pies.

Female officers looking for greater work-life balance and support from USPHS women in similar situations can scan the QR codes below to sign up for the WLSG listserv and join a pod. Overall, the mental and emotional support that the WLSG community provides will enable female officers to navigate through various career and life challenges, making them more connected, confident, and resilient.
COA Branch Engages Community to Promote Healthy Home-Grown Nutritional Options

by Susan Robins-Ndori; MS, RDN, CDR Daryl K. Dineyazhe-Toya; PharmD, CDR Erik M. Cala; MA, CCC-SLP, MBSImP; and LCDR Gail Surrena, MSN, RN

The past six months has brought new beginnings for the Continental Divide Branch of COA at Crownpoint in the high-desert of Northwestern New Mexico. After three stressful years, when all officers at Crownpoint were dedicated exclusively to the healthcare emergencies brought by the COVID-19 Pandemic, USPHS Commissioned Officers of the local COA Branch, under the direction of Ms. Susan Robins-Ndori, Division of Public Health-Nutrition (DPH-N), established a dynamic and functional Demonstration Garden. Crownpoint Healthcare Facility serves a population of over 20,000 Navajo and Native American beneficiaries. It provides healthcare services in an area covering 4,200 square miles, similar to the size of Connecticut. The area has one grocery store and several gas stations with marts - a total food desert.

Under the leadership of CDR Daryl K. Dineyazhe-Toya, CDR Erik M. Cala, and LCDR Gail Surrena, the USPHS officers assisted the DPH-N, who provided raised beds and materials, including an irrigation system for setting up the garden. Members of the Hozho Voices and Healing Center, dedicated to revitalize the Navajo agropastoral economy, Mr. Bud Lopez, the New Mexico State University Tribal Agriculture Agent held educational planting and seed starter sessions in the demonstration garden during the spring and summer months.

USPHS Commissioned Corps officers serving in Crownpoint realize the importance of engaging and encouraging the hospital staff and the local community to establish home and community gardens which will provide healthy, nutritional, and environmentally-friendly alternatives to the processed and preservative-filled foods pervasively found in the area’s stores.

The Demonstration Garden consists of six raised planting beds near the entrance to the facility. Each bed was adopted and cared for by a different healthcare division, department, or group of colleagues within the Crownpoint Service Unit. The commissioned officers selected one of these beds for their charge. The project began in May 2023, with a Native Navajo Prayer conducted by Mr. Wilson DeVore from the Department of Native Medicine for a prosperous planting and harvesting season. Several staff members and community members attended this event. Each team filled a bed with the appropriate soil, topsoil, and mulch suitable for planting seeds. Each team was able to select the produce to be grown in their bed from environmentally friendly native seeds and plants suitable to the region and climate. A drip-irrigation system with water conservation-friendly sprinklers was installed in each bed. Each team cared for their plants and communicates with their team leader. The team leaders then shared with Ms. Robins-Ndori or CDR Cala any concerns, and tries to solve the issue.

Over the months, the team has noticed the Demonstration Gardens serving a second unexpected purpose – positive communication and growth in community spirit. COVID-19 cast a somber shadow over many remote Service Units. We witnessed how long hours, stressful situations, and the passing of many of our patients affected the morale of our staff and providers. The Demonstration Gardens brought back joyful conversations among colleagues. Staff members photographed plants as they grew and produced fruit. Demonstration Garden photographs have been prominently displayed within the Crownpoint Healthcare Facility News, a monthly informative newsletter for the community. The gardens are peaceful places where community members can enjoy nature. Several published studies identify that spending time in nature:

• Reduces stress
• Helps lower blood pressure
• Decreases the risk of heart disease
• Decreases anxiety
• Helps with focus, especially with those who have ADHD
• Increases your vitamin D level naturally
• Contributes to overall wellbeing.

After the success of the current demonstration garden, the USPHS Commissioned Officers and the Division of Public Health-Nutrition are moving forward with a larger garden at the Service Unit, where crops of native produce can be grown in a sustainable manner. USPHS Commissioned Officers and fellow staff members of Crownpoint Service Unit are motivating the community by showing the possibilities in gardening in the high desert. USPHS Commissioned Officers and staff members are a positive example of community engagement by demonstrating process of home-growing nutritional options that improve the health and well-being of the community.
Smudging is a spiritual practice used by many First Nations peoples. There are four sacred “medicines” which are used: Tobacco, sage, cedar, and sweetgrass. Although there is variation in how smudging is done, the purpose is consistent. It is a means of cleansing oneself. Smudging requires one to slow down, be centered, and connect to an event, task, or purpose. It calls people to let go of imbalances and focus on feelings of being calm and safe.

I found a quote on smudging that explains this practice very well: “When we smudge, we first cleanse our hands with the smoke as if we were washing our hands. We then draw the smoke over our heads, eyes, ears, mouths and our bodies. These actions remind us to think good thoughts, see good actions, hear good sounds, speak good words, and show the good of who we are.” How beautiful is that?

Whether your belief system uses smudging or other forms of smoke in your practices or not, I think that we can all grow from learning about it. Take some time and reflect or meditate on the spiritual practices that you do which help you to slow down, be calm, and focus on the good things around you.

As USPHS officers, we are used to multi-tasking. Managing our work and family life balance can overwhelm us at times and cause our thoughts to be more negative. If that has been happening to you lately, perhaps trying a spiritual practice that is designed to help you reset your balance is just what you need. Maybe the phrase “feel the burn” can take on a spiritual meaning for you. You are all in my thoughts and prayers.

**Education: Incense**
Grains or resins which are sometimes mixed with spices that are burned as an offering to God or a god.

**Spiritual Exercises**
3. Read: *The Incense Bible: Plant Scents that Transcend World Culture, Medicine, and Spirituality* by Kerry Hughes

Questions? Comments? Contact me at khredman@hotmail.com.
Alaska Area Officers Participate in Naloxone Drive-Thru Training

by LCDR Theresa Castellanos, PharmD, CLC

According to the CDC, more than 100,000 people died from a substance overdose in 2021 with the rate increasing each year. The Alaska Native Health Campus in Anchorage has been proactive in efforts to combat the opioid epidemic. On August 24, 2023, a Naloxone-build out event was held where over 70 volunteers came together to assemble nearly 1700 naloxone kits in 4 hours. These kits included two units of Kloxaddo (naloxone) nasal spray, gloves, face mask, fentanyl test strips, and brochures on how to recognize signs and symptoms of an opioid overdose and instructions on how to use the naloxone nasal spray. RDML Kelly Battese, USPHS Chief Professional Officer for the Pharmacy Category, was visiting the campus during the week and was able to stop by and participate in the event. It was a wonderful opportunity for him to see officers in action and collaborate on such an important mission. These kits were used for the first Naloxone Drive-Thru Training event held on the campus on September 16, 2023. This was a joint collaborative effort between the Alaska Native Tribal Health Consortium, Alaska Native Medical Center, Southcentral Foundation, State of Alaska, and Project HOPE. This event was open to the community and the goal was to get as many people trained in 5 minutes on how to recognize signs and symptoms of an opioid overdose and learn how to administer naloxone. During the 3-hour event, over 400 cars drove through and over 700 naloxone kits were distributed. USPHS officers who volunteered at the event expressed how rewarding an experience it was for them to have a positive impact on the community. There are already plans for additional naloxone drive-thru events in the future.
Reflections on serving as an escort officer and tips for a successful trip

by LCDR Jackeline Rodriguez, MPH, MS, PMHNP-BC, RN-BC

As an escort officer, you are temporarily assigned to a flag officer or dignitary. You will meet and then accompany the distinguished visitor throughout the duration of their trip. A visit by a distinguished visitor requires thorough planning and preparation for the visit to be a success. You will want to equip yourself with the right tools and knowledge beforehand to meet any requests that may arise. Most importantly, remain calm and flexible as a visit from a distinguished visitor may overwhelm you and those around you.

Preparation for ADM Levine's visit began shortly after I had responded to the request for a U.S. Public Health Service (USPHS) officer local to the area to assist her scheduled events in New England from November 1 - 4, 2022. In the weeks leading up to ADM Levine's visit, there were many emails and conversations regarding travel itinerary, logistics, vehicle size, parking, meeting locations and times, food preferences, and uniformed services customs and courtesies. I was fortunate to have an aide-de-camp guiding and briefing me beforehand on the expectations of the escort officer and if needed, how to serve as aide-de-camp.

As an escort officer, you are to support the distinguished visitor and abide by uniformed services customs and courtesies. Escort officers should have an exemplary professional appearance in uniform, grooming, and bearing. Observing uniformed services customs, protocols, and social etiquette at all times is key. Review courtesy and protocols including rendering honors (saluting), position of honor (always to the right), and coming to attention. The experience of escorting and interacting with a flag-grade officer is one that I greatly recommend to any USPHS officer. It was an invaluable experience for me both on a personal and professional level. I was inspired by Admiral Levine's eagerness to engage with the New England Commissioned Officers Association (NECOA) members and speak about modernizations efforts and the next steps for our service.

Here are a few important tips to consider when serving as an escort officer:

- Coordinate with the aide-de-camp early on.
- Note distinguished visitor's preferences - food, temperature, or other individual preferences.
- Identify event locations ahead of time and allocate sufficient time for bad traffic or poor weather conditions.
- Always arrive early.
- Request distinguished visitor parking whenever possible.
- Stay on schedule.
- Prepare and clean uniform and vehicle in advance (I had hand hygiene sanitizers and facemasks readily available).
- Remain flexible as scheduling changes may occur. These tips may be helpful to anyone interested in serving as an escort officer. This is another way to demonstrate your commitment to service, officership, and most importantly esprit de corps!

SUICIDE PREVENTION from page 3

5. Community Involvement: Engaging communities in supporting veterans through local initiatives and programs helps veterans feel more connected.

Preventing veteran suicide is a moral imperative. Challenges include prevention efforts lacking a broad approach, lack of ample research, few treatments proven to reduce death by suicide, and thinking of suicide prevention as the responsibility of mental health professionals instead of a public health responsibility. Using proven strategies, we can make significant strides in preventing veteran suicide. Together, we can honor and save our heroes by ensuring their well-being long after their military duty has ended.

To access the recording: https://www.dropbox.com/scl/fo/95pnpfgwlqengn0r9g8p7/h?rlkey=40vys50xy43eifot9pk9jrzfl&dl=0

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Officers assigned to the National Park Service. The District of Columbia COA Chapter (DC COA) supported this event. Also, in the afternoon an event was held at the American Pharmacy Association with many active and retired USPHS pharmacy officers in attendance.

The final event of the day took place at George Washington University, Milken Institute School of Public Health with faculty, staff, and students. Plus, all donors to the documentary were invited to this event as a way to say thank you for making the documentary possible. It was a great turnout of donors, many who attended were local from the Washington DC area. Some traveled to the event from locations around the country. The Montgomery County Maryland COA Chapter supported this event and spoke to many students interested in learning about the USPHS Commissioned Corps.

The level of leadership and dedication from many contributed to a successful two-day screening extravaganza. Special thanks go to Steve Solomon, Boris Lushniak, Pam Schweitzer, Sara Newman, Ali MacGraw (Narrator), Chris Schueler (Producer), Jacque Rychnovsky, and Dave Corrigan for organizing events. Plus – I want to recognize and thank Karen Munoz for her leadership by organizing our COA Chapters (Baltimore, DC, and Montgomery County) that provided top-notch professionalism.

Here is my take away – all the events contributed to our proud history and to “creating a future as noble as our past.” For my remarks at the George Washington University event, I asked Steve Solomon for advice and he led me to the following very powerful words that describe what we do every day as USPHS Commissioned Officers.

The 9/11 attacks, Hurricane Katrina, the Ebola outbreak, COVID, the plague of opioids, industrial accidents and train derailments that poison our air and water, and so many other epidemic and endemic health crises have one thing in common. The officers of the USPHS Commissioned Corps were there—saving lives, preventing illness, and providing critical relief to the ailing and the injured. These rigorously trained disease fighters are called upon when and where disaster strikes, pandemics rage and people are suffering. And, as they have for generations, they fight health inequity by serving the most vulnerable.

We have all learned through hard experience that defending our nation’s health and protecting the safety of our people from illness and disease requires expert, crisis-tested leaders whose lives and careers are devoted to serving the United States and its people. The officers of the USPHS Commissioned Corps—the only uniformed service of its kind in the world—fulfill that duty to preserve, protect and defend every single day. And they carry that commitment after they leave the service and continue that duty to serve for the rest of their lives.

My final comment on our work last month is – Bravo Zulu! In the meantime, check out https://invisiblecorps.com and let me know your thoughts.

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CAPT (Ret) Thomas E. Carter – Life Member
Waco, Texas - Thomas Edwin “Ed” Carter, 94, passed away peacefully with loving family members in his presence. Ed was born in Atlanta, Georgia where he lived until adulthood.

After 59 years of marriage, Ed’s wife, Anne passed, away in 2008. Ed tenderly cared for her throughout her long battle with Alzheimer’s disease. Ed and Anne Carter had three children, twin sons, Lee Carter (Julie), Les Carter (Jennifer), both of Waco, and daughter, Allyson Carter Mark (Daniel), of Houston. In 2009, Ed married his surviving wife, Barbara, who, along with her daughters, Carole and Rebekah, brought tremendous joy into his world.

After completing a bachelor's degree in Psychology from Furman University and master's degree in Psychology from Florida State University, in 1953 Ed entered the military as an officer, serving eight years as an Army Chaplain.

After his children completed high school, Ed joined the Public Health Service and provided mental health services to military personnel and others. After retiring in 1983, he and Anne moved to Waco to be near their children and grandchildren. He was a generous benefactor, giving to many organizations and people, both directly and anonymously.

CAPT (Ret) Richard Potter – Life Member
Middletown, MD - Richard Potter, 77, passed away on October 2, 2023 as a result of injuries suffered from a bicycle accident. He was born on September 30, 1946 in Omaha, NE.

Rich served in the Army during the Vietnam War. He then served in the U.S. Public Health Service, mostly at the FDA, retiring after 30 years as a Captain.

Rich was a man of many interests and hobbies. He enjoyed running, biking and photography which kept him active and fit throughout his life. He was a long-time member of the Frederick Steeplechasers and many other social groups. He also volunteered for many organizations including Meals on Wheels, Big Brothers Big Sisters and the Asian American Center.

He was preceded in death by his grandson Owen and sister-in-law Mary Kalamaja. He is survived by his wife of 50 years Catherine, brother Bob, his son David and daughter-in-law Cara, son Andrew and daughter-in-law Courtney, daughter Allison and son-in-law Arjun Ramakrishnan, grandson Henry, and granddaughter Adrienne.

CAPT (Ret) Kent Angerbauer
Kentfield, CA - After a long illness, Kent Angerbauer passed away at Marin Health Hospital on August 20, 2023. Born in Salt Lake City, Utah to parents Afton and John Angerbauer. Kent will be remembered as a kind hard working person. Kent attended the University of Idaho in Moscow then attended Loyola Dental School

He and his wife, Carol married in Boise. Kent completed an internship at the Staten Island Naval Hospital. Upon completion of the internship, Kent and family relocated to St. Paul, Minnesota where Kent attended the University of Minnesota and received a Masters Degree in Public Health. Kent then accepted a position with the United States Public Health Service and the family eventually relocated to San Rafael, California in 1976.

Kent worked for the Public Health Service in San Francisco and retired in 1992. Kent then worked as an independent consultant hired by dental clinics all over the United States. Kent volunteered his services at dental clinic facilities in the Canal Area of San Rafael. Kent is survived by his wife Carol of 61 years, his daughter Jill Gorder, his son Scott Angerbauer (Hadri), his granddaughter Bridget Gorder and his grandson Daniel Gorder.
Executive Director from page 1

If you haven’t visited the symposium webpage recently, I encourage you to do so now at https://phscof.org/symposium. There, you can learn more about the 2024 meeting theme Inclusivity + Innovation: Reducing Disparities in the Service of Health, get a sneak peak of the proposed agenda, and review submission guidance if you plan to submit an abstract for the Scientific Track session on June 27, 2024, or the Training Day session (formerly known as “Pre-conference session”). The due date for Abstract and Training Day Proposals is December 4, 2023.

During my meeting with the OSG I had an opportunity to share ongoing concerns I’ve been hearing about the revised promotion policy. I was pleased to learn that this policy, along with others, is consistently being re-evaluated. The OSG is partnering with your advisory groups, committees, and councils to hear your feedback and understand the challenges and your experiences.

Next, we discussed the ongoing need for chaplaincy and additional mental health support for officers during or following deployments and for job stressors, family issues, economic challenges, or other life events.

Other topics of discussion revolved around the ongoing request for DD214’s for officers who transitioned before October 1, 2021. I was pleased to hear that a stepwise approach to issuing this form has been discussed for the future implementation. While it remains uncertain whether all former or retired USPHS Commissioned Corps officers who are no longer on active duty will receive a DD214, we hold hope that this will eventually happen. We recognize that obtaining a DD214 won’t instantly grant veteran status at the state level, but it’s a start. This is why our Legislative Affairs Committee and COA staff continue to work with the State Directors of Veterans Affairs to facilitate state law revisions when needed.

Lastly, we discussed the Capitol Hill briefing sponsored by COA on October 18, 2023. During this briefing, the Deputy Surgeon General, RADM Denise Hinton, and the Senior Advisor to the Office of the Assistant Secretary for Health, RADM Susan Orsega, joined COA staff, along with five outstanding active duty and retired officers, for a screening of selected short videos from the Invisible Corps documentary. This was followed by personal vignettes from the panel of officers, highlighting the essential work being done by the Commissioned Corps. The meeting was well attended by both Senate and House staffers, many active duty, and one Ready Reserve officer.

On the last day of my trip I attended the Annual Board of Directors Meeting for The Military Coalition (TMC). This annual meeting, held every November, offers the Chief Executive Officers and Executive Directors of the coalition the opportunity to gather, approve the budget, and set the strategic direction for the upcoming year. In January we will enter the second year of the 118th Congress where we plan to continue advocating for issues important to active duty and retired officers. If you haven’t reviewed COA’s legislative priorities recently, you can do so on the Advocacy tab of COA’s website. To view the annual goals of The Military Coalition, please visit http://www.themilitarycoalition.org.

In closing, I want to express my special thanks to the officers who supported the Capitol Hill briefing and to the members of the DC, Baltimore, and Montgomery County Local Branches who supported the October screenings of the Invisible Corps film. You can read more about the events on pages 1 and 2 of this edition of Frontline.

Until next month!

Jacque
We Welcome New Members of COA, October 1 - October 31, 2023

LT David Carranza, DC
LCDR Chrysl Elkerson, NC
LCDR Julia Haston, GA
LCDR LeeAnn Keener, VA

LT Sophia Lopez, NV
CAPT Marcus Martinez, WA
LCDR Tori Moore, SC

LT Dekoda, Murphy, TX
LT Chinwe-Ngozi Okereke, TX
LT Monique Reyes, AZ
LT Sherryann Wilson, VA

COA Donations
Commissioned Officers Association of the USPHS Donations Received
October 2023
Bronze ($100)
CAPT J. Gary Sirmons

DIETARY from page 9
evidence-based recommendations behind her everyday practice. LT Bluto was able to use her graduate degree work in nutrition policy and communication to assist the Dietary Patterns and Health Equity Subcommittees. “It was an honor to work with such influential experts in the field of nutrition. The true highlight of my detail was the opportunity to be a part of the collaborative and dynamic teams at ODPHP and USDA. I am still in awe of the high caliber of work that they produce and their impact on nutrition at a national level.”

Interagency detail opportunities, like the one that LCDR Rorabaugh-Irwin and LT Bluto participated in, allow officers to carry out the mission and core values of the USPHS Commissioned Corps while bringing back new skills to utilize in their home agencies. As diet-related chronic diseases continue to affect American Indian and Alaska Native individuals disproportionately, both officers’ experiences supporting the Dietary Guidelines have provided them with tools and resources that will directly contribute to their continued efforts to further the mission of IHS.