

# COA/COF NEWSLETTER FRONTLINE

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*18th Assistant Secretary for Health, Dr. Brian Christine.*

## **DR. BRIAN CHRISTINE CONFIRMED AS THE ASSISTANT SECRETARY FOR HEALTH**

by Jasmine Stuart, Director of External and Legislative Affairs

Dr. Brian Christine was confirmed by the Senate on October 7th as the 18th Assistant Secretary for Health (ASH).

Dr. Christine is a board-certified urologist with nearly three decades of clinical practice, including extensive work in men's health and prosthetic urology. He earned his medical degree from Emory University and completed his residency at the University of Alabama at Birmingham. Dr. Christine most recently practiced as a urologic surgeon at the Urology Centers of Alabama's Homewood location.

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## 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

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Deep member discount and generous opportunities for waived fees to take the Certified in Public Health (CPH) exam



## FROM THE EXECUTIVE DIRECTOR

### 17 DAYS INTO THE GOVERNMENT SHUTDOWN – BUT THE MISSION CONTINUES

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

Today marks the 17th day of the government shutdown. Yet, through it all, Commissioned Corps officers continue to focus on the mission — doing good for the people of our nation and for public health. What we hear from officers is worry, but with little complaining. What we are seeing is your noses to the grindstone, working diligently, with potentially no pay until Congress produces a budget solution.

It is natural to worry about how you will pay your bills while receiving no paycheck. You have groceries to buy, pets to feed, a mortgage or rent payment due, and we know that retired officers share those concerns as well. While retiree pay could continue unless the shutdown is prolonged, we understand how heavily this weighs on your mind.

Amid these challenges, there are a few encouraging developments on Capitol Hill. First, our advocacy efforts on a wide variety of topics continue to gain

## LEGISLATIVE UPDATE

# MOMENTUM BUILDS FOR USPHS LEAVE PARITY AND LEGISLATIVE PRIORITIES

by Jasmine Stuart, Director of External and Legislative Affairs

With the federal government shutdown now underway, budget negotiations continue to dominate the legislative agenda in Washington, with debates over funding priorities, potential cuts, and the prospects for short-term continuing resolutions. Despite a challenging political climate, COA staff and our Legislative Affairs Committee, led by our new chair, LT Jesse Samluk, remain committed to advancing our legislative priorities. Our top priority for the 119th Congress is securing leave parity for USPHS officers. Our goal is to have 12 weeks of parental leave codified into law, along with all other leave authorities provided to the other uniformed services under Title 10.

We have recently made significant progress on this front. On September 17th, the House Energy and Commerce Committee voted unanimously (46–0) to advance the Uniformed Services Leave Parity Act (H.R. 2846). In the Senate, the companion bill (S. 1440) was unanimously passed out of the Health, Education, Labor, and Pensions Committee at the end of July and was approved by the full Senate by unanimous consent on October 9th. We have been in close communication with the offices of Representatives Houlihan and Bacon regarding next steps and are hopeful this bill will be placed on the suspension calendar. Additionally, Senator Duckworth filed this legislation as an amendment to the National Defense Authorization Act,

See **LEGISLATIVE** page 8



# STANDING THE WATCH

by CAPT John Iskander

At Deputy Surgeon General RADM Denise Hinton's retirement ceremony in September, RDML Michael Johnson gave a stirring rendition of "The Watch." This has always been my favorite part of this type of ceremony, and it caused me to reflect on the concept of "standing the watch."

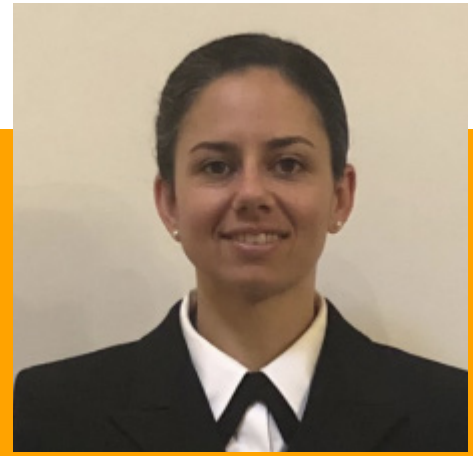
Much of what we do as officers of the United States Public Health Service Commissioned Corps can be described metaphorically as standing watch. We may use some jargon loaded phrases like "conducting public health surveillance" or "due diligence" to describe our professional activities, but when we conduct exercises to be prepared to respond to the next pandemic, we are standing the watch. When we screen our patients for diseases to detect them before they cause complications, we are standing the watch. When we routinely monitor levels of disease to detect and be able to rapidly respond to outbreaks and epidemics, we are standing the watch. When we monitor the safety of drugs and vaccines before and after they are approved, we are standing the watch. When we take after hours call to consult on rare cases which may require the release

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## BOARD OF DIRECTORS

# ANCHORED IN SERVICE AND STRENGTHENED BY PURPOSE



by CDR Alyssa N. Givens, Treasurer, COA Board of Directors

As I recently reached my 14th year as a Public Health Service officer, I found myself reflecting on my time in service. My career has been a deeply rewarding journey marked by significant achievements and meaningful milestones, though not without challenges and uncertainties. That perspective feels especially important today, when the constant noise of the modern world never seems to turn off. We are inundated 24/7 by news that seems to focus only on the negative. It can quickly overshadow the amazing things Public Health Service officers accomplish every day in service to their country. In times like these, it is easy to measure our professional worth by promotions, the next assignment, or some opinion story circulating online. Yet the true strength of the U.S. Public Health Service Commissioned Corps—and of each individual officer—rests on something far deeper: our personal values anchored in service and dedication to the mission of the USPHS Commissioned Corps.

Every officer joins the USPHS Commissioned Corps with a desire to protect, promote, and advance the health and safety of the nation. But beneath that shared oath lies a unique personal mission. This mission lives at the intersection of our individual values, passions, and long-term goals. When we clearly name those values, understand our passions, and fo-

cus on long-term goals, we gain a compass that stays true even when faced with policy changes, looming government shutdowns, or work-related obstacles.

The USPHS Commissioned Corps' guiding principles of Leadership, Service, Integrity, and Excellence offer a strong foundation. We can then add our own dimensions: courage, empathy, perseverance, creativity, etc. Taking time to articulate those personal values is more than a reflective exercise; it becomes a daily reference point. When deployment orders arrive unexpectedly or national headlines bring new uncertainty, that inner compass helps us decide how to act and how to lead.

Recent events remind us that circumstances can shift overnight. Promotions may be slow to post. Resources may tighten. Natural disasters may call on us with little warning. Officers who know their personal and professional mission can meet these challenges with steadiness and purpose. Our success can be measured by diligently performing our duties, mentoring younger officers, and maintaining focus on the people and communities counting on us rather than on things we cannot change or influence.

Living our mission is an active practice. Many officers find strength in a brief daily check-in: Did I serve my mission today? Others keep a written mission statement at their desk or share it aloud for accountability. Conversations with trusted peers can renew perspective, while routines that nourish body and

See **BOARD** page 8



## BOARD OF TRUSTEES FOCUSING ON THE FUTURE

by RDML (Ret.) Steven Solomon, MD, FACP, FIDSA  
President, COF Board of Trustees

The public health system in the United States is changing at a rapid rate. The framework of public health at the federal level is being reshaped by reducing the size and scope and activities and by altering policies and procedures. These changes have a significant impact on federal relationships with state and local governments and all the non-governmental organizations working in the public health space.

This disruption of the status quo has destabilized long-established structures and relationships. It will not be possible to return to the preexisting system. The United States will need to recreate its public health system in a new form, with rebuilt networks and relationships. The US Public Health Service, and particularly the Commissioned Corps, can and should serve as a crucial part of the foundation of that rebuilt system.

The rationale and driving force for many of the changes being undertaken is the loss of trust in science, in experts, in traditional sources of reliable information and especially in government. As the public health system is rebuilt in the future, the foundations of that system will need to directly address this issue of trust.

The US Public Health Service and its Commissioned Corps provide three elements that will be critical to

restoring trust: being non-partisan and apolitical; a history of stability and the ability to evolve to meet the changing needs of the nation's health; and the wearing of the uniform which communicates the singular dedication to serving the mission of public health.

The USPHS Commissioned Corps and its predecessors have served the United States under every President since 1798. USPHS officers serve loyally within their chain of command and express no political partisanship.

The PHS and the Commissioned Corps have been part of the nation's public health system since before any of today's health agencies and departments existed. As the nation's health needs grew and became more complex, the Corps evolved to broaden its mission, take on new responsibilities, and remain responsive to the emergent health needs of everyone in the United States.

The USPHS Commissioned Corps is unique in the world. No other country has a uniformed service that was created in parallel to its armed forces and dedicated to the mission of public health. Wearing our nation's uniform communicates a commitment to national service, as evidenced in the solemn oath that every officer takes to "support and defend the Constitution of the United States against all enemies, foreign and domestic [and] bear true faith and allegiance to the same."

See **TRUSTEES** page 8



PHS Officers enjoying the Summer Social Event.

## THE NIH PUBLIC HEALTH SERVICE SUMMER SOCIAL FOSTERS

Connection & Camaraderie

by LCDR Samora Casimir, OTD, OTR/L and  
LT Susan Joseph, PhD, MHA

On Thursday, August 21st, the National Institutes of Health (NIH) Engagement and Networking Subcommittee hosted a successful summer social event. Organized by LCDR Samora Casimir and LT Susan Joseph, the event was designed to bring together U.S. Public Health Service Commissioned Corps officers stationed at NIH for an afternoon of connection, camaraderie, and relaxation.

See NIH page 12



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## Addressing the Unique Needs of Commissioned Corps Officers

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*ACOA Officers serving on Operation Clean Sweep.*

## **SERVING WITH PURPOSE: NOURISHING FAMILIES AND BEAUTIFYING OUR COMMUNITY**

by LT Emilie Bouda

The United States Public Health Service (USPHS) Commissioned Corps officers partnered with local organizations to support underserved communities in Atlanta. The PHS officers participated in two key outreach efforts: serving 75 families at “Grace Community Food Pantry” and “Hands on Atlanta’s Operation Clean Sweep” on Whitehall Street. Aware of the city’s challenges with homelessness and poverty, officers were committed to addressing food insecurity, hygiene needs, and neighborhood conditions.

### **Fighting Hunger at Grace Community Food Pantry**

In December 2024, USPHS officers collaborated with the Public Health Professional Advisory Group (PHPAG) Health Promotion and Health Education’s (HPHE) Community Health and Service mission to support individuals experiencing homelessness. Partnering with Grace Community Food Pantry, eight officers worked alongside staff and other volunteers to pack food, sort donated clothing, and distribute winter essentials to 75 families. The effort highlighted the crucial connection between food security and public health.

See **NOURISHING** page 11

FROM **STANDING** page 3  
of life saving medical products, we  
are standing the watch.

As America’s Health Responders,  
when we deploy in advance of a  
natural disaster that may or may  
not cause serious harm to the  
affected community, that too is  
standing the watch. When we  
train, train others, or maintain  
our physical, mental, and medical  
readiness to be able to rapidly and  
competently deploy and provide  
clinical and public health services,  
that also stands the watch.

During an earlier part of my  
career, I frequently gave presenta-  
tions involving complex public  
health surveillance data. At the  
time all presentations were avail-  
able as hard copies, and I could  
hear pages turning while I spoke  
because the audience was less in-  
terested in the details of what we  
had done and how we had done  
it than whether we had “found  
something”. I came to realize that  
the real value of the work though,  
was in the seeking (watching, if  
you will), not merely the finding.

The various terms we use to  
describe our watch-standing  
including monitoring, screening,  
exercising, and training, are not  
glamorous “action verbs” and  
won’t make our Service the sub-  
ject of TV shows or movies. That  
kind of attention only happens  
in public health when we detect

See **STANDING** page 11

FROM **LEGISLATIVE** page 3

which also passed the Senate on October 9th. With these efforts underway, we remain very optimistic and are hopeful to see this legislation enacted during the 119th Congress.

COA is also working on advancing a larger-scale legislative initiative, a consolidated bill that highlights and seeks to correct the major inequities faced by Corps officers. While we will continue to champion individual pieces of legislation, this broader measure will allow us to raise awareness of systemic disparities. Still in draft form, the bill is expected to include our main priorities for the 119th Congress, including continuation of retirement pay during a shutdown, Ready Reserve funding and parity, childcare access, and veterans' preference in federal hiring, as well as longstanding issues such as inclusion in the free national park pass program and an increase to the uniform allowance, among others.

We will keep you updated as this legislation takes shape, and once finalized, we will share the full contents along with tools and resources to help you engage your legislators. If you need assistance with an advocacy effort or would like support reaching out to your elected officials, please do not hesitate to contact the COA government affairs team at [advocacy@coausphs.org](mailto:advocacy@coausphs.org).

FROM **BOARD** page 4

mind (exercise, mindfulness, camaraderie) help sustain the drive required for exemplary service.

Our calling as USPHS Commissioned Corps officers is larger than any position we hold. By identifying our mission, embracing our values, and returning to them each day, we embody the ideals that drew us to wear this uniform. Duties may change and uncertainty can seem daunting, but a life of service grounded in purpose endures and this steadfast mission will guide us through every challenge ahead.

FROM **TRUSTEES** page 5

When work begins to rebuild the federal government's role in public health, I hope that the architects of that effort recognize the extraordinary value of the Commissioned Corps--a multidisciplinary uniformed service dedicated 24/7/365 to the singular mission of protecting, preserving, and promoting the health of everyone in the United States—as a foundation for a stronger, more trusted, national public health system.



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# FAMILY IS EVERYTHING: ACTIVE-DUTY OFFICER FAMILIES SERVE TOO

by CDR Shercoda "Cody" Smaw, PhD., MS., MLS (ASCP)

I am incredibly proud to be a United States Public Health Service (USPHS) officer. I enjoy serving my country and helping those in need on deployments and in my daily job at the U.S. Department of Homeland Security, Countering Weapons of Mass Destruction as the Director of Quality Assurance. In addition, I stay very busy with my leadership duties within the Surgeon General's Own Music Ensemble, Health Services Professional Advisory Committee (HSPAC), and Medical Laboratory Science Professional Advisory Group (MLSPAG). Serving as DC Ceremonial Band Co-Lead/Headquarters (HQ) Choral Division Liaison, HSPAC Community Wellness Subcommittee Co-Chair/ HSPAC Initiatives and Campaigns Chair, and MLSPAG 2025 Past Chair Liaison, MLSPAG Technical Readiness (TR) Co-Chair/ MLSPAG TR Newsletter Writer, MLSPAG Stakeholder and Community Engagement Events Lead/MLSPAG Recruitment and Retention Recruiter/Member. These positions, keep me actively on the go. Through it all, my family support me in everything involving USPHS. My husband Hero and my 91-year-old Grandpa John has always been by my side participating and attending events. They display the true meaning of love and support. They show that they serve alongside me and that is an awesome feeling.

I am known for my PHS Athletics events. I have been leading these fitness events since I joined the USPHS as a Lieutenant. I lead 4 to 8 events per year and my family wholeheartedly support and we do it as a family which makes it fun. We all get great joy out of keeping healthy and taking our signature photos with our event sign, PHS flags, pom poms and PHS attire on. I encourage all PHS officers to include your family members in on your events. I know it has brought my family closer and instead of me being away doing PHS events they are right there with me.



*RADM Denise Hinton, CDR Shercoda "Cody" Smaw, Grandpa John, and Hubby Hero at USPHS Picnic 2025.*

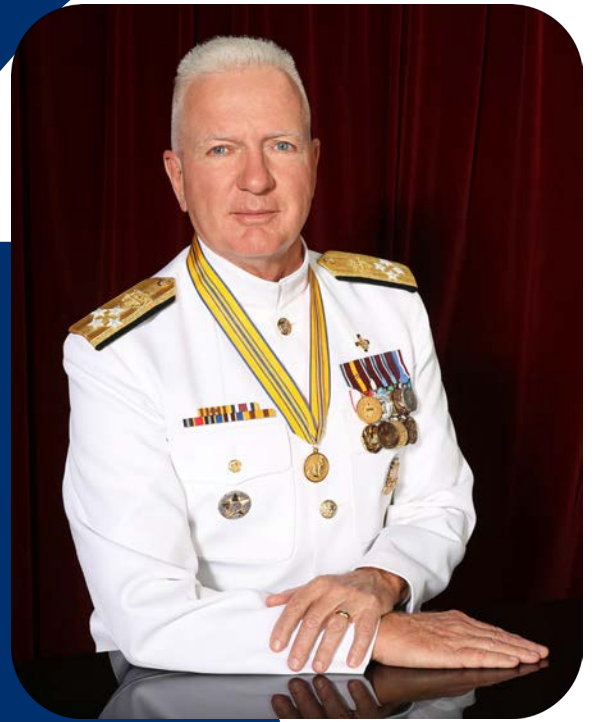
When we needed a drummer for the symposium, promotion ceremonies, and retirement ceremonies. My husband Hero, who is a drummer and guitarist, stepped up to participate and play drums for the Music Ensemble. He is an honorary band member supporting both the band and choral for events. He attends all DC Ceremonial Band and DC HQ Choral Division rehearsals with me in preparation for upcoming events and we have a blast practicing all the music.

My family and I had many memorable events, but two symposiums stand out. The 56th Annual Scientific and Training Symposium in Tulsa, OK where we had the honor of meeting and being directed in the band by the legendary conductor, George King III (Senior Chief Musician, U.S. Coast Guard). The second, was the 57th Annual Scientific and Training Symposium in Jacksonville, FL where we (Hero and I) had the honor of being greeted by CAPT (Ret) Jacqueline Rychnovsky, PhD at the conclusion of the symposium concert, which made our day super

See **FAMILY** page 17

# VETERANS AFFAIRS COMMITTEE\* VIRTUAL GATHERING

*\*formally the "Retired Officers Committee"*



## PRESENTERS

### Featuring:

- Admiral Brett Giroir, M.D.  
16th Assistant Secretary for Health (ASH)

### Your Emcee:

- Captain (Ret.) Terry Hoffeld, DDS, PhD,  
COA Veterans Affairs Committee Vice-Chair

## JOIN US AS ADMIRAL GIROIR DISCUSSES:

- Cato Institute Policy Analysis No. 1001,  
*"Unnecessary Relics: The Surgeon General and the  
Public Health Service Commissioned Corps,"* and his  
public response to the paper.
- View the paper at [https://www.cato.org/policy-analysis/  
unnecessary-relics](https://www.cato.org/policy-analysis/unnecessary-relics)
- All active-duty, Ready Reserve, and veteran officers are  
cordially invited to attend. No registration required.

## DATE



**Tuesday  
Nov. 18, 2025**

## TIME

**2:00-3:00 PM (ET)**

## ZOOM:

[https://  
us06web.zoom.us/  
j/85372150844](https://us06web.zoom.us/j/85372150844)



FROM **STANDING** page 7

an outbreak, or in clinical care when we find a patient's cancer at an early stage.

Many of you reading this who have prior military service have literally stood watch. You among all of us likely understand better than most that watch-standing is vital but involves little recognition and much sacrifice. We must all continue to stand watch, and we must not become weary. To our core values of leadership, service, integrity and excellence we must maintain the watch-standing virtues of patience, persistence, diligence, attention to detail, consistency, and teamwork. So as USPHS officers we say, not only to retired officers, but to the citizens of all countries, military members, and veterans we serve: rest easy, for we all have the watch.

## In Lieu of Flowers

The COF wishes to thank those families, who, in time of mourning, have asked that “in Lieu of Flowers a donation be made to the PHS Commissioned Officers Foundation.”

This is a thoughtful and lasting salute to the contributions made by the dedicated members of the Commissioned Corps. COF provides a listing of those donating “in memory of “ to the family. Thank you for thinking of those who will follow.

Donations to the Foundation should be sent to  
Commissioned Officers Foundation, P.O.  
Box 189 Cheltenham, MD 20623 or can be made at

<https://www.phscof.org/>

FROM **NOURISHING** page 7

## Beautifying Neighborhoods: Operation Clean Sweep

On March 29, 2025, USPHS officers joined Hands on Atlanta and other volunteers for Operation Clean Sweep, a citywide neighborhood beautification effort. That day's work focused on the Whitehall Street SW corridor, from Tift Avenue SW to Dewald Alley SW. Equipped with gloves, rakes, and trash bags, volunteers spent three hours clearing litter and helping restore dignity to shared public spaces. The volunteers collected over 40 bags of litter. Beyond the cleanup, the experience fostered a sense of community, pride and solidarity.

## Looking Ahead: A Commitment to Ongoing Community Service

These events demonstrate that public health extends beyond clinics and policies—it encompasses community outreach and everyday acts of kindness. As the Community Service Committee officers plan future efforts, they invite you to help create a positive impact.

## Call to Action: Get Involved

We all can create positive change:

- Connect with local leaders to understand and address community needs.
- Join efforts that make a difference for vulnerable and underserved community members.
- Volunteer at a place of interest where there is a need.

As USPHS officers, let us continue to build stronger, more connected communities—one act of service at a time. Your time, compassion, and presence could be the gift that keeps on giving.

Acknowledgment of Volunteers: The following individuals contributed to at least one of the two community services events described in the article: LCDR Marie Cetoute, LCDR Leandra Jones, LCDR Taneshia Knight, LCDR Esra Toussaint-Barrett, LT Courtnee Bell, LT Emilie Bouda, LT Dali Davis, LT Shifawu Odunsi, LT Jelonia Rumph, and civilian Eric Harper.

Held at a vibrant restaurant in North Bethesda's Pike & Rose Plaza, the NIH Public Health Service (PHS) Summer Social offered a welcoming and casual setting to strengthen engagement, show appreciation, boost morale, and celebrate the contributions of NIH Public Health Service officers. A total of nine USPHS Commissioned Corps officers and three civilians attended the gathering. Senior officers were warm and approachable, while junior officers eagerly engaged in conversations about the legacy and accomplishments of the USPHS Commissioned Corps at NIH. The event also served as an informal opportunity for mentorship and recruitment, with civilian attendees asking thoughtful questions about the USPHS Commissioned Corp's mission, roles, and supportive work environments.

Among the attendees was LT Christopher Turner, an occupational therapy clinician stationed at the NIH. He appreciated the opportunity to connect with fellow officers from various disciplines. "The event offered a humanization of our fellow officers and allowed us to communicate and build relationships in a stress-free environment," he shared. LT Turner also noted that the relaxed dress code contributed to the welcoming atmosphere and casual conversations; "The preference for officers to wear civilian clothing helped remove barriers, dispel any concerns or

superficial propriety that would come from engaging with officers of higher ranks."

Another new Public Health Service officer in attendance, LT Bing Bing Zou, a registered nurse at the NIH emphasized the value of meeting experienced officers. "I felt welcomed during the summer social—it was a relaxed and an enjoyable setting that encouraged open dialogue and genuine connections," she said.

Events like the Summer Social are essential for USPHS officer engagement. They enhance trust, foster partnerships, promote well-being, and creates platforms for mentorship and collaboration. For new Public Health Service officers, such gatherings often provide their first opportunity to connect with colleagues, helping reduce isolation, build resilience, and support work-life balance.

Overall, the NIH PHS Summer Social was a meaningful success; bringing Public Health Service officers across ranks and disciplines together to strengthen professional networks, celebrate the spirit of service, and build a stronger sense of community. By putting faces to names, the event sparked confidence in future collaborations and inspired enthusiasm for continued engagement at upcoming social gatherings.

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# INVESTIGATING AN INCREASE IN ACUTE RHEUMATIC FEVER AND RHEUMATIC HEART DISEASE IN ALASKA

by LT Victoria Balta, PhD, MPH, and LT Joe Silva, PhD

In February 2025, pediatricians at two healthcare facilities alerted the Alaska Department of Health (ADOH) to a possible increase in cases of acute rheumatic fever (ARF) and rheumatic heart disease (RHD). ARF/RHD are immune-mediated sequelae of group A Streptococcus (GAS) infections. ARF primarily affects school-aged children and can progress to RHD without appropriate antibiotic treatment. RHD is characterized by damage to heart valves and can result in death. In the first 2 months of 2025, three children required transport to out-of-state intensive care for heart failure and heart valve replacement.

On February 21st, ADOH invited CDC to assist with an Epi-Aid investigation of the increase in ARF/RHD cases. One week later, three Atlanta-based epidemic intelligence service (EIS) officers, LT Joe Silva (Scientist), LCDR Minal Ahson (Medical), LCDR Veena Ramachandran (Medical), and CDC GAS subject matter expert, Christopher Gregory, joined the Alaska-based EIS officer, LT Victoria Balta (Scientist), and the rest of the CDC Arctic Investigations Program team, LCDR Heather Wheelock (Nurse), CDR Andra Rasmussen (Nurse), Sara Bressler (Statistician), and CAPT Heather Scobie (Supervisory Scientist), to begin the investigation. On February 28th, a statewide call for cases was released to clinicians, soliciting reports of ARF/RHD cases occurring among Alaska residents aged <40 years during January 2022-February 2025.

During the investigation, the team conducted medical record reviews of reported cases to assess present-



*CDC Epi-Aid team from left: Chris Gregory, LCDR Minal Ahson, LCDR Heather Wheelock, LT Victoria Balta, LT Joe Silva, CAPT Heather Scobie, LCDR Veena Ramachandran.*

ing signs and symptoms, prior GAS infections, clinical management, and outcomes. The team also conducted a secondary data analysis of the Indian Health Service's (IHS) National Patient Information Reporting System to assess trends in ARF/RHD incidence among Alaska Native children who received care within the Tribal Health System. The team also convened discussions with local pediatricians and cardiologists.

See **ALASKA** page 16



## Law Offices of David P. Sheldon, PLLC

### **A Message to Each and Every Officer of the United States Public Health Service: We Stand With You, and We Continue to Fight on Your Behalf.**

Since the beginning of the year, each of you have experienced so much turmoil and turbulence. Few definitive answers have been available. The attack on the CDC in Atlanta reverberates throughout your ranks nationally. Through it all, we stand with each of you and we continue to fight on your behalf.

In February 2025, we filed suit in, *Lee v. Kennedy* where an officer with the rank of Commander—seeks to overturn a decision by the Program Support Center Director that disregarded evidence of wrongful termination and procedural violations. The lawsuit asserts that the officer was unfairly separated from service despite a military records board’s acknowledgment that her supervisors failed to address critical signs of an underlying medical condition.

In June 2025, in *Futch v. Kennedy*, on behalf of a decorated officer of the United States Public Health Service (USPHS), with over three decades of distinguished service across multiple branches of the U.S. Armed Forces, the firm filed a federal lawsuit alleging that bureaucratic failures and unlawful actions within the Department of Health and Human Services unjustly derailed his career, denied him a well-earned promotion to the rank of Captain, and significantly reduced his retirement benefits.

The legal action, filed in the U.S. District Court for the District of Columbia, seeks judicial review of the USPHS Board for Correction’s refusal to credit six months of volunteer hospice work toward the officer’s Training and Education (TED) credit—a critical factor in determining initial rank, career trajectory, and eligibility for timely promotion. Despite multiple requests dating back to 2005 and a detailed appeal filed in 2022, the Board rejected his application as “untimely” and unsupported, ignoring compelling new evidence and legal arguments. His reconsideration request was also summarily denied in less than 24 hours by a contractor who lacked legal authority to issue such a decision.

This August, in two related cases, we filed suit in the United States District Court, challenging the USPHS “decision” was equally infirm.

Our point in launching these legal challenges is to ensure members of the United States Public Health Service are given their due under federal law and for the Board for Correction adhere to its mandate under 10 U.S.C. § 1552 to correct errors or injustices. *That is our mission, and we remain dedicated to each of you.*

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# DISTRICT OF COLUMBIA COMMISSIONED OFFICERS ASSOCIATION OFFICERS BUILD CONNECTIONS WITH NEW COMMISSIONED CORPS FLAG OFFICERS

by CDR Christine Corser, PharmD, MS, CDR Scott Steffen, PhD, and CDR Vandna Kishore, RPh

On July 31, 2025, six District of Columbia Commissioned Officers Association (DCCOA) officers engaged with ten of our newest flag officers at the Flag Officer Training Course held at Commissioned Corps Headquarters (CCHQ) in Rockville, Maryland. This was the second time CCHQ invited DCCOA to participate, recognizing the value of connections between officers and new Corps leaders.

The lunchtime Meet and Greet, at the conclusion of the training course, offered DCCOA officers a chance to connect directly with the Corps' new flag officers, two additional flag officers, two Chief Professional Officers, and six CCHQ Branch Chiefs. Attendees exchanged career insights, explored shared interests, and received on-the-spot informal mentoring. The Meet and Greet lasted about two hours, facilitating deeper connections and more conversation amongst the junior, senior, and flag officers. The atmosphere was noted for its high engagement, with participants valuing each other's company and feeling proud and energized by the connectedness and strength of the Commissioned Corps.

In addition to the valuable dialogue, the participating DCCOA officers—CDR Tyler Sharp (DCCOA Career Development & Education committee liaison, Board Member), CDR Scott Steffen (DCCOA President-elect), CDR Maggie Kemp (DCCOA Awards committee chair), CDR Yi Zhang, LT Andrea Gomez, and LT Juan Martinez—show-



*Excerpt from DCCOA's new brochure, shared at the recent Flag Officer Training Course*

cased DCCOA's recent accomplishments including sharing information on several National COA Award winners from our branch. CDR Steffen stated, "DCCOA was proud and humbled by this great opportunity and experience to meet our new leadership. It was truly our pleasure to share our thoughts and experiences with these outstanding officers." Additionally, the team distributed a newly published brochure detailing the leadership team, available merchandise options, recent community gatherings, and teased upcoming events such as the annual pickleball tournament and the joint TriCOA autumn picnic on September 27, 2025, being held collectively with the Montgomery County COA and Baltimore COA.

DCCOA expressed sincere gratitude for the opportunity to participate in this unique leadership event, and is appreciative of COA Headquarters for co-sponsoring the lunch with DCCOA. We look forward to seeing the future impacts these new flag officers will make across the Corps, their agencies, and communities nationwide.

The team found that annual ARF and RHD incidence increased in 2023-2024, compared with 2022, with the highest peak in cases occurring in December 2024. During 2022-2025, ARF and RHD incidences were high (>2 per 100,000 children) at 4.9 and 4.3 per 100,000 children aged 3-17 years, respectively. Incidence was highest in the Northern and Southwestern regions of Alaska and among children who were Alaska Native or Native Hawaiian/Pacific Islander. Analysis of IHS data found the average annual incidences of ARF/RHD during 2014-2023 were also high, 6.2 cases of ARF and 8.5 cases of RHD per 100,000 Alaska Native children aged 3-17 years.

The investigation team found that ARF/RHD incidence in Alaska was high, particularly among Alaska Native

and Native Hawaiian/Pacific Islander children. Several factors may explain the recent increase in ARF and RHD, including a post-pandemic increase in GAS infections such as strep throat, changes in care-seeking behaviors related to the pandemic, potential changes in circulating GAS strains, and nationwide shortages in penicillin G benzathine (Bicillin) from 2023-2025. Findings from this investigation are being used to inform local public health recommendations and clinical guidance. Early diagnosis, appropriate antibiotic treatment, and prophylaxis for people with ARF/RHD reduce the risk of ARF recurrence and RHD progression.





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# CDR DAVID SCHWAB AND TEAM RAISE \$9K FOR COF

by Jasmine Stuart, COA Director of External and Legislative Affairs

The Commissioned Officers Foundation hosted its 19th Annual Golf Tournament Fundraiser on September 15th. This year's tournament brought together 88 golfers from the Washington, DC metropolitan area and across the country, with teams representing RBC Wealth Management, Eagle Health Analytics, the Law Offices of David Sheldon, Delta Dental, Henry Schein, and VersaTech.

The weather could not have been better at Maryland National Golf Club, where players enjoyed a full day on the course. Long-drive professional Michael Michaelides and current Epson Tour pro Aneka Seumanutafa were on hand to use their skills to raise additional funds for COF. Following the tournament, participants gathered for a southern comfort food lunch buffet during the raffle and awards ceremony.

Professional vocalist, Retired Army Master Sergeant Caleb Green, served as emcee, while fundraiser host CDR David Schwab, USPHS, and a team of dedicated



*Eagle Health Analytics' 1st place team winners, from L to R, Mark Greenberg, Ramsey Taweel, Kasey Moritz, Suegho Kang.*

volunteers distributed raffle prizes and awards. Congratulations to Eagle Health Analytics, led by Mr. Mark Greenberg, on their first-place win. We look forward to welcoming them back next year to defend their title.

Thanks to the generous support of sponsors, golfers, and volunteers, the tournament raised nearly \$9,000 for COF. CDR Schwab extends his gratitude to the outstanding volunteer team, CAPT Karen Munoz, CDR Cynthia Chennault, and LCDR Rogenia Parker, for their invaluable contributions to making this year's event successful.

## FROM FAMILY page 9

special. This concert was also memorable because I had both a singing and instrumentation solo on the bass clarinet and the timbales, alongside my husband Hero who played the drums for the symposium concert and the Anchor and Caduceus Dinner.

I have served 9 years and 5 months in USPHS, and I plan to do 30 years, and it is a joy knowing that my

family is everything and they serve right beside me every step of the way. Kudos to my family and to all family members who serve with their active-duty family. There is nothing like having the support of your family, it makes a big difference in the career of an officer. Please enjoy the photos I provided to this article displaying the fun times I have with my family doing USPHS events.



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# N-PAC'S PHS DAISY AWARDS

by LT Azeezat Lawal BSN, RN, LCDR Alex Artcher, BSN, MPH, CPH, CCHP, and LT Ivanna Plymouth, MSN, AGAC-NP-BC, RN

Established in 1999 to honor the life of Patrick Barnes and to recognize the care nurses displayed during his time in the hospital, the DAISY Award was created to highlight the exceptional achievements of nurses throughout the nation, overseas, the U.S. Department of Veterans Affairs (VA), and military treatment facilities (MTFs) across 50 states, 40 countries, and US territories to celebrate the accomplishments of nurses through this highly regarded recognition. This prestigious recognition celebrates nurses who demonstrate clinical excellence, compassionate care, and a commitment to advancing health equity. In June 2025, the United States Public Health Service (USPHS) Nurse Professional Advisory Committee (N-PAC) honored CAPT Sharon Chatman Rhynes, LCDR Erica Stoll, and LCDR Jun Chu, with the illustrious DAISY Award for their exceptional contributions to nursing practice and patient care.

## **CAPT Sharon Chatman Rhynes, ASPR Atlanta, GA**

Nominated by: LCDR Israel Cross

CAPT Rhynes exemplifies outstanding leadership, inspires & cultivates the professional growth and well-being of nurses across the Public Health Service and civil service. Her significant contributions to the nursing profession are recognized at the highest levels, recently selected as a Fellow of the American Association of Nurse Practitioners (FAANP) and nominated for Fellow in the American Academy of Nursing (FAAN).

As a senior leader, CAPT Rhynes cultivates work environments that encourage creativity, independence, and con-



## **PHS DAISY NURSE LEADER AWARD**

**Purpose: Recognize PHS Nurse Leaders who create an environment that fosters fortitude, empowerment, and support for the nursing workforce.**



<https://form.jotform.com/242686802861060>

tinuous growth, emphasizing support and empowerment. Her leadership extends to her role as Officer-in-Charge while concurrently serving as a clinician on 8 deployments totaling 260 days, where she fiercely advocated for the safety and well-being of nurses in austere environments.

Her dedication to professional development of others is reflected in her commitment to mentoring, leadership, and advocacy, ensuring nurses are well-equipped to provide high-quality, compassionate care.

As N-PAC Communications Subcommittee Co-Chair, Mentor Workgroup Co-Lead, and mentor, she has led teams and dedicated over 300 hours to mentoring. Over 13 years, she has coached over 50 PHS nurse officers and 10 civilians, also serving as a national mentor for the American Nurses Association. She has consistently devoted personal time to

See **DAISY** page 20

FROM **DAISY** page 19 meeting in social environments, mentoring nurses, reviewing 35+ promotion packets, CVs, and making officer statements, helping them identify opportunities for growth and success.

CAPT Rhynes' investment in future nursing leaders is inspiring and strengthens the nursing profession. Her commitment to leadership, advancing nursing, and mentorship makes her a truly deserved recipient of the DAISY Nurse Leader Award.

### **LCDR Erica Stoll, IHSC Washington, DC**

Nominated by: CAPT Pieter Van Horn

LCDR Stoll is an extraordinary medical assistance support team (MAST) Nurse Practitioner with the United States Immigration and Customs (ICE) Health Service Corps (IHSC). Lcdr Stoll selflessly travels to one of 19 IHSC run facilities across the United States every two weeks to provide evidence based and community standard of care for our patient population of over 38,000 non-citizens. Since starting in this role in late 2024, not only has she had over 1,200 patient encounters, but as a collateral duty, onboarded 3 new IHSC USPHS Advanced Practice Providers, including assisting in the completion of 23 Intensive Peer Reviews.



Most recently, Lcdr Stoll led a Discipline Specific Training for over 143 IHSC officers on the topic of Proton Pump Inhibitors (PPI's) in Correctional Medicine on March 24, 2025. Finally, Lcdr Stoll has been instrumental liaising the IHSC APP Program with our IHSC Medical Education Unit (MEDU) to transition our training and onboarding program to the IHSC TRAIN platform. Lcdr Stoll is a prior DOD asset and has served our great country as a Nurse for over 10 years. Lcdr Stoll optimizes servant leadership and is an excellent candidate for the DAISY nursing award.

### **LCDR Jun Chu, NIH Bethesda, MD**

Nominated by: Sarfaraz Hasni

LCDR Jun Chu is a nurse practitioner (NP) at the National Institutes of Health and a key member of our

team. Through her transformational leadership and self-motivation, she has spearheaded several quality improvement projects on standardizing complex, multisystem, lupus clinical care and improving reproductive health in rheumatic diseases which she was awarded the USPHS citation award and achievement medal. These quality improvement (QI) initiatives have improved workflow, which have impact beyond the scope of her responsibilities. She was selected as the safety officer within our institute to implement safety policies, promote a safety culture, and manage safety tracking and report system to investigate and determine root causes and prevent future recurrence. She has authored 6 abstracts accepted for presentation internationally and authored 9 peer reviewed rheumatology manuscripts accepted to high impact scientific journals. She

See **DAISY** page 22

## OBITUARIES



### GESWALDO “JOE” VERRONE

Geswaldo “Joe” Verrone passed away peacefully at the age of 94 in his home on September 10, 2025. Joe was born on December 28, 1930 in Johnstown, PA. He was preceded in death by his beloved wife, Andree Verrone, parents Toribio and Perina Verrone as well as his sisters, Jean Patterson, Minnie Bermosk, Corie Sallese and Casey Pfister. Joe is survived by his son Mark Verrone, and daughters Sona Davis (William), and Lisa Bonanno (Robert) and his brother Dr. Anthony Verrone. He was the best friend of his grandchildren, Kevin Davis, Ashley Dakkouni (Larbi), Alexis Davis, Jordan Bonanno and Danielle Bonanno. Joe was a loving Great Grandfather to Farrah Dakkouni and Zayn Dakkouni. He also was a loving uncle to Carol Anne Dzuricky and two nephews Timothy and Eric Pfister.

After achieving his Bachelor’s degree from University of Pittsburgh, he was drafted in the United States Army at the end of the Korean War in 1953 where he served as a Preventative Medicine Technician, his

See **VERRONE** page 22



### CATHERINE V. BAKER

Cathy worked for the Federal Government for 30.5 years, 4 years with the Department of the Navy, and 26.5 years with the National Institutes of Health, retiring in 1992 as a contract specialist with the National Cancer Institute.

She was born in Takoma Park, MD in 1934 and died September 6, 2025. She attended the University of Maryland, and graduated from Columbia Union College in Takoma Park, MD.

Cathy was an active Republican and a former election official, a member of the Olney Women’s Republican Club, the American Association for University Women, the USPHS Officer’s Wives Club, and a member of the Honorable Order of Kentucky Colonels. She was an associate member of the Rock Creek Women’s Republican Club, and the League of Republican Women of the District of Columbia. She also did volunteer work. In 1977, she accompanied her husband to Zurich, Switzerland, where they lived for 5 years, and where she was active in the American Women’s Club.

See **BAKER** page 22

FROM **VERRONE** page 21

introduction to the Public Health profession. His incredible career included him receiving a Bachelor's of Science in Zoology-Chemistry from the University of Pittsburgh and a master's degree in Public Health in Sanitary Science from the University of North Carolina school of Public Health in 1960. He went on to get his Doctorate in Public Health Administration from Tulane University school of Public Health in 1974.

In 1962, Joe returned to the U.S. and received a commission from the U.S Public Health Service and was called to active duty in the Indian Health Service. He developed and implemented a comprehensive environmental health service program for the Native American people living in the states of Oregon, Washington and Idaho.

Joe's legacy will live on in the countless memories of his laughter, warmth, and wisdom. He will be dearly missed but never forgotten.

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FROM **DAISY** page 20

was selected as the only NP on an international committee for quality of care in rheumatology and later as a member of their executive committee due to her exceptional leadership.

LCDR Chu significantly influences professional development through her mentorship and teaching. Through her innovation and leadership in clinical training, she mentors post baccalaureates and leads efforts to provide expertise to clinicians on reproductive health in rheumatic diseases.

LCDR Chu has a unique ability to connect with patients, creating a sense of trust and comfort between patient provider relationships hence improving patient outcomes. LCDR Chu is a role model for others in the institute. She is an exceptional officer, and an

FROM **BAKER** page 21

Cathy is the wife of the late Dr. Carl G. Baker, former Director of the National Cancer Institute of the National Institutes of Health, and former Medical Director of the Ludwig Institute for Cancer Research, Zurich, Switzerland.

Her marriage to Robert E. Kibler, Sr., resulted in three children, but ended in divorce.

Survivors include two sons, Dr. Robert Kibler, Jr. of Minot, ND, Dr. Bruce Kibler of Sigmaringen, Germany, and a daughter, Kathleen V. Kibler, J.D of Olney, MD; stepdaughters, Jeannette Jefferies RN, MS, CCRN of Millsboro, DE, Cathy Schafer of Seaford, DE, and predeceased by stepson, David Moquin of DE. She's also survived by seven grandchildren, four step-grandchildren, and one step great-grandchild (Baby Myles was born just over a week before her passing). She was a force of nature and will be deeply missed.

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expert and compassionate clinician involved in clinical research.

In conclusion, with great appreciation, we commend these officers for their continued contribution to the advancement of nursing practice and as always, we thank the PHS Commissioned Officers Foundation for their support of dedicated Public Health Service nurse officers. Additionally, we continue to welcome nominations for the PHS DAISY Nurse Leader Award. For those deserving, kindly consider nominating a Public Health Service nurse officer through the Nurse Professional Advisory Committee (N-PAC) today!

How to Apply: Submit your nominations using links in NPAC announcements and QR-code above. Don't miss the opportunity to recognize and celebrate your fellow nurses' excellence!

# A MESSAGE FROM COA MEMBER RADM (RET.) KEVIN MEEKS TO ACTIVE DUTY OFFICERS

Dear Officers,

I recently became aware of 120-day Officer Details in support of the Indian Health Service, and I want to take a moment to personally thank you for your extraordinary service to Native American and tribal communities. These assignments are powerful examples of the remarkable value the U.S. Public Health Service Commissioned Corps brings to our nation. It is precisely this kind of work that demonstrates why Corps officers are essential—and why the Corps itself must be preserved. At its heart, the Commissioned Corps exists to serve people in need, and the health and welfare of entire communities depend on the dedication, skill, and compassion of officers.

You may not know, but the primary reason that the history of the Indian Health Service is so intertwined with that of the Commissioned Corps is when the Transfer Act of 1955 was enacted, it moved the responsibility for the provision of healthcare services for First Americans from the Bureau of Indian Affairs to the Public Health Service. As a citizen of the Chickasaw Nation, I can think of no higher calling for officers than to continue to fulfill our Nation's commitment to providing healthcare to our Tribal communities.



As a retired officer, I want you to know how deeply valued you are—not only by those you serve but also by those of us who have worn the uniform before you. Your commitment makes us proud, and your impact is felt far beyond the communities you touch directly. On behalf of the retiree community, thank you for everything you are doing. You are carrying forward a tradition of service that is vital to the health of our nation, and we are grateful.

With respect and gratitude,  
Rear Admiral (Ret.) Kevin Meeks, MPH  
Past Area Director, IHS, Oklahoma City Area  
Past Deputy Director for Field Operations, IHS  
Deputy Secretary of Health, Chickasaw Nation

## RESERVE COMMISSIONED CORPS PROMOTIONS

### TO LIEUTENANT COMMANDER (O-4)

DRAZICH, BRANDON  
GRAHAM, OCTAVIA  
HEAFNER, JOHN  
ICASIANO, HERBERT  
WITTEN, NASH

### TO LIEUTENANT (O-3)

ADDIS, BETHLEHEM  
AMENDANO, LUCIA  
ANDRES, OSLER  
ANDREWS, AYA  
BAJWA, SARAH  
BARNARD, BEN  
BARRY, NATHAN

BEALE, SARAH  
BISWAS, SHARMISTHA  
BRADLEY, DARREN  
BRANDNER, ANTHONY  
CALUAG, KRISTEN  
CASTRO, JOSEPH  
CHAN, JUDY  
EINHARDT, ADAM  
FEINMAN, LEIGHLAND  
FORCHA, CYRIL  
HEWITT, STEPHANIE  
JEAN, PATRICK  
JONES, SPENCER  
JOSEPH, CHRISTOPHER  
JUSTE, ASHLEY  
KHAN, SINAN  
KUNTZ, JAMIE

LAM, EDWIN  
LEE, JAMES  
MARTIN, CHRISTOPHER  
MARTINEZ LOZANO, MARIJULIE  
MAYO, MAURICE  
MILLER, KIMBERLY  
NATHAN, DOMINIC  
PAIK, JOHNNY  
RAHIM, MOIZ  
ROMANER, ANDREW  
ROSE, BRANDON  
SALIM, ANIKAH  
SAMLUK, JESSE  
SAVARD, ZAINAB  
SCHIMMELFING, JOHN  
SUMMONS, DONIESHA  
TAYLOR, ANISSA

THOMAS, DEVONTE  
URIBE, GABRIEL  
VALIANT, WILLIAM  
WILLIAMS, NORDIA  
WOLFF, MARILYN  
YANGDRON, TSETEN  
ZHANG, KATHY

### TO LIEUTENANT JUNIOR GRADE (O-2)

COOPER, NICOLE  
MELIKIAN, PATRICE  
OGBONMUWAGUN, GBENGA  
PATTON, MARISSA  
SMITH, CHARICE  
TEMSAH, LAYAL

# LIFESTYLE MEDICINE: THE POWER OF HEALTHY LIVING FOR ALL

by LCDR Cashmere Miller, DNP, APRN, FNP-C

In today's fast-paced environment, chronic disease rates continue to rise, impacting individuals across all walks of life. As we seek sustainable solutions for long-term wellness, lifestyle medicine is emerging as one of the most effective and empowering approaches to improve health and prevent illness. As Public Health Service officers, we are uniquely positioned and expected to lead by example, inspiring healthy living through both our professional roles and personal choices.

## What Is Lifestyle Medicine?

Lifestyle medicine is a medical specialty that uses evidence-based therapeutic lifestyle interventions to prevent, treat, and even reverse chronic diseases. These interventions focus on everyday behaviors such as nutrition, physical activity, sleep, stress management, avoidance of harmful substances, and fostering positive social connections.

Unlike conventional medicine, which often emphasizes a pharmaceutical or surgical approach, lifestyle medicine addresses the root causes of disease, supporting lasting change that enhances quality of life.

## Why It Matters Now

Chronic conditions such as type 2 diabetes, hypertension, cardiovascular disease, and obesity continue to place a heavy burden on individuals, families, and our healthcare system. The good news is that many of these conditions are largely preventable and even reversible through healthy lifestyle changes. By making intentional choices every day, you can dramatically influence both your short-term and long-term health.

## Tips for Making Lasting Changes

- Start Small, Think Big: Begin with just one change, like adding a vegetable to your lunch or taking a 10-minute walk after dinner. Build from there.
- Keep It Simple: Healthy doesn't have to be hard. A

## The Six Pillars of Lifestyle Medicine and How to Apply Them

Lifestyle Pillar	How to Incorporate It Daily
Nutrition	Choose more whole, plant-predominant foods: fruits, vegetables, whole grains, legumes, nuts, and seeds. Try to eliminate processed foods and added sugars.
Physical Activity	Aim for at least 150 minutes per week of moderate exercise (such as brisk walking), plus 2 days of strength training. Start where you are and build gradually.
Restorative Sleep	Adults need 7-9 hours each night. Create a consistent sleep routine: no screens one hour before bed, keep your room dark and cool, and avoid caffeine late in the day.
Stress Management	Try yoga, meditation, deep breathing, or journaling for 5-10 minutes each day. Find what helps you decompress and make it part of your daily routine.
Avoiding Risky Substances	Refrain from smoking and limit alcohol. If you're struggling, reach out for help, and know that resources are available.
Positive Social Connections/ Connectedness	Strong social bonds improve mental and physical health. Stay connected with others through regular check-ins, family meals, or group activities.

See **LIFESTYLE** page 27

FROM **CHRISTINE** page 1

As Assistant Secretary for Health, Dr. Christine will serve as the principal public health advisor to the Secretary of Health and Human Services, Robert Kennedy, Jr., and lead the Office of the Assistant Secretary for Health (OASH). In this role, he is responsible for shaping national public health priorities and advancing the department's policy agenda.

Dr. Christine is charged with the oversight and direction of the U.S. Public Health Service Commissioned Corps, providing strategic leadership and support to its more than 5,000 officers. During his confirmation hearing before the Senate Committee on Health, Education, Labor, and Pensions, he described himself as a "main street doctor" and emphasized that he would implement a patient-centered approach to policy, shaped by his firsthand clinical experience. He discussed priorities including addressing the healthcare workforce shortage, restoring trust in public health institutions, and improving access to care, particularly in underserved communities.

Dr. Christine succeeds Admiral Rachel Levine, who held the role from 2021 to 2025, with Dr. Dorothy Fink serving in an acting capacity as of May 26, 2025. His confirmation comes at a time when the Corps is

responding to growing public health challenges at home and abroad, as Secretary Kennedy recently announced 120-day officer details in support of the Indian Health Service. This ever-evolving landscape brings with it high expectations for strong, visible leadership and continued investment in the Commissioned Corps' mission.

COA Executive Director CAPT (Ret.) Jacqueline Rychnovsky and COF's Board of Trustees President RDML (Ret.) Steven Solomon had the pleasure of meeting with Dr. Christine last month in Washington, DC to welcome him to his new role and brief him on the importance of the upcoming 58th Annual USPHS Scientific and Training Symposium, scheduled for May 18-21, 2026 in Cleveland, Ohio, which COF co-sponsors with the OASH, as well as other matters of value to COA and the Corps. The conversation was very productive. Dr. Christine acknowledged the critical role officers play in protecting and promoting public health. Officers can expect ongoing updates from COA as we continue engaging with Dr. Christine. COA is very excited to welcome him to this new role and we look forward to working with him in support of the Corps.

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FROM **LIFESTYLE** page 24

piece of fruit instead of chips or standing during phone calls can lead to big improvements over time.

- **Make It a Family Affair:** Get loved ones involved. Walk together, cook healthy meals as a team, and celebrate progress with non-food-related rewards.
- **Stay Committed:** Lifestyle medicine is a journey. Expect setbacks, and don't view them as failures. What matters is consistency, not perfection.

## **Your Health, Your Choice**

Health is personal and profoundly powerful. You have more control over your future than you may think.

Lifestyle medicine puts that power into your hands, offering science-backed tools to help you feel better, prevent disease, and live a longer, more fulfilling life.

As members of the broader Commissioned Officers Association community, promoting wellness isn't just about self-care; it's about setting the tone for those around us. When we lead healthy lives, we inspire others to do the same.

Let lifestyle medicine be your foundation, not just for health, but for a stronger, more resilient life.

# MENTAL HEALTH AND WELLNESS: A SHARED COMMITMENT ACROSS FAITHS

by CDR Carissa Haney, DNP, MSN, APRN-BC, RN-CPH  
and LCDR Jamla Rizek, DNP, MBA, RN, CEN, CPEN,  
NHDP-BC, NRP, FAEN



Mental health and wellness are cornerstones of readiness for United States Public Health Service (USPHS) officers, whose mission requires them to serve communities in times of crisis and calm alike. The ability to respond effectively to public health emergencies depends not only on clinical competence and operational preparedness, but also on emotional resilience and spiritual grounding. Two nurses from different faith traditions—a Christian and a Muslim—illustrate how mental wellness and faith-informed perspectives strengthen both officers and the populations they serve.

From the Christian perspective, holistic care means attending to body, mind, and spirit while serving others. Nursing practice reflects the belief that compassionate care, hope, and service to the community are vital in sustaining wellness. One strives to set the example of caring for others without prejudice, meeting both immediate and deeper needs in dignity and love. For officers, long deployments and high-stress missions can lead to burnout, moral distress, and compassion fatigue. Faith practices such as prayer, reflection, and fellowship offer grounding and renewal. Just as nurses provide comfort to patients in moments of vulnerability, Christian officers find strength in their faith to carry hope into disaster zones, correctional facilities, or underserved clinics. This foundation not only protects their own mental health but also models stability for the communities they serve.

From the Muslim perspective, wellness is rooted in the balance of physical, mental, and spiritual health,

with an emphasis on service to humanity (Khidmah). Officers from this tradition draw on practices such as daily prayer, mindfulness in action, and gratitude to foster resilience during demanding missions. Islamic teachings encourage caring for one's inner state as a duty, recognizing that an unsettled heart cannot fully serve others. For a Muslim nurse officer, ensuring mental wellness means creating routines of self-care and reflection even in austere environments. This balance allows them to approach patients with presence, patience, and cultural humility, affirming the dignity of every individual.

Together, these perspectives demonstrate that while faith traditions may differ, the commitment to mental health and wellness is shared. USPHS officers serve populations facing profound stress—whether displaced families after a hurricane, children impacted by violence, or elders navigating chronic disease. When officers attend to their own mental well-being, they can extend empathy, communicate effectively, and support the resilience of entire communities.

Importantly, mental health carries stigma in many settings. Nurses of faith can help break down barriers by modeling vulnerability, normalizing conversations about stress, and advocating for accessible behavioral health resources. By drawing from their own traditions of compassion and service, they create culturally responsive pathways for patients to seek care without shame.

For USPHS officers, wellness is not an individual pursuit but a collective responsibility. It ensures that

See **MENTAL HEALTH** page 27

# SERVING OUR COMMUNITY: A DAY AT THE KING'S TABLE

by CDR Sabrina Debose

On May 3, 2025, seven United States Public Health Service (USPHS) Commissioned Corps officers, along with a family member, volunteered with The King's Table (TKT) Food Ministry at New Birth Missionary Baptist Church in Lithonia, GA. The event made a meaningful difference for families experiencing food insecurity.

## About The King's Table

TKT Ministry launched its mission to combat hunger in January 2020 by distributing free food to those in need. What began with support for 30 families each week, quickly expanded during the COVID-19 pandemic and now serves more than 1,000 households weekly. Since its founding, TKT has partnered with over 60 organizations and distributed more than 9.8 million pounds of food, reaching more than 1.4 million people.



Atlanta COA Officers volunteering at The King's Table Food Ministry.

## May 3, 2025: USPHS officers Day of Service

On May 3, Public Health Service officers packed and distributed food boxes in a drive-thru setup, ensuring families received essential groceries including fresh produce, proteins, and pantry staples. That day alone, TKT distributed over 44,520 pounds of food, serving 3,318 people including 1,152 children, 1,172 seniors (65 and above), and 1,162 adults.

## Join the Effort

TKT distributes food on the first and third Saturdays of each month,

except for July and January, when the ministry pauses for a sabbatical. To get involved, sign up to volunteer through Hands On Atlanta ([www.handsonatlanta.org](http://www.handsonatlanta.org)) or the Atlanta Community Food Bank ([www.acfb.org](http://www.acfb.org)).

## Small Acts, Big Impact

The work of TKT demonstrates how communities can unite to bring hope and relief to those in need. Every food box represents a small but powerful step in the fight against hunger.

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the Corps remains a steady force in public health, capable of protecting and promoting the nation's health. Whether through Christian prayer circles, Muslim mindfulness practices, or other faith-inspired approaches, the message is the same: tending to the mind and spirit is essential to healing others. In unity

across differences, officers embody resilience, compassion, and readiness-values that sustain both the uniformed service and the communities it serves.

### Resources:

Christian-Muslim Relations Mission Toolkit | Presbyterian Church (U.S.A.) [presencesans1\\_0.pdf](#)

# PROMOTION YEAR 2025 PROMOTIONS

## **MEDICAL OFFICERS TO CAPTAIN (O-6)**

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ADKINS, SUSAN  
BASAVARAJU, SRIDHAR  
BELL, JENEITA  
FOSTER, MONIQUE  
GRAITCER, SAMUEL  
HATCHER, AMY  
HUTTER, JOSEPH  
JONES, JEFFERSON  
LUNA, KENNETH  
NAKAO, JOLENE  
PACIA-RANTAYO, PRECIOSA  
PATTON, MONICA  
PAULIN, HEATHER  
PEAKER, BRANDY  
POURAKIS, GEORGE  
POWELL, KRISTA  
SEE, ISAAC  
SEIDE, WITZARD

## **TO COMMANDER (O-5)**

---

BRENNAN, TIMOTHY  
EASTMAN, EDWARD  
FISHER, EVAN  
LOGAN, NAEEMAH  
MAKADIA, PREYANKA  
MCGANN, STEPHANY  
MESTER, MELANIE  
ROSZKO, PAUL  
SMITH, COLIN  
WU, RICHARD

## **TO LIEUTENANT COMMANDER (O-4)**

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CHIEN, KEVIN  
MANGALMURTI, NAINA

## **TO LIEUTENANT (O-3)**

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None Available

## **DENTAL OFFICERS TO CAPTAIN (O-6)**

---

ATTRIDGE, JOAN  
FOSTER, AMBER  
LUMMIS, ROBERT  
ORTEGA, CARA  
REYES, ROBERTO  
SOLTANI, M

## **TO COMMANDER (O-5)**

---

HUYNH, CAM-VAN  
VU, VY VY  
WHALEN, MELANIE

## **TO LIEUTENANT COMMANDER (O-4)**

---

TRAN, PHUONG

## **TO LIEUTENANT (O-3)**

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None Available

## **TO LIEUTENANT JUNIOR (O-2)**

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None Available

## **APPLIED PUBLIC HEALTH TO CAPTAIN (O-6)**

---

ALBRIGHT, TIMOTHY  
BARRAIS, ROD-JIMIL  
BINGLEY, KEVIN  
CHRISTENSEN, BRYAN  
EGBE, WANDA  
FEHRMAN, CHRISTOPHER  
FILLERUP, SCOTT  
GAINES, JOANNA  
GIERALTOWSKI, LAURA  
GREGORY, CRIA  
GWISDALLA, DAVID  
JONES, JOSEPH  
KATHOL, JOHN  
KNUST, BARBARA  
KOHLER, JAMES  
LEFFERTS, BRIAN  
MERGENTHALER, MATTHEW  
MISEGADES, LARA  
SMITH, ANTOINE  
SMITH, MARTIN  
SPINDEL, SAMANTHA  
STEELE, BREK  
WALLY, JEREMY  
WALTERS, MAROYA

## **TO COMMANDER (O-5)**

---

ADAMS, JENNIFER  
ANNETTA, LAURA  
ANNOR, FRANCIS  
BAILEY, DAVETA  
BENASUTTI, BRADLEY  
BERNASCONI, LOUIS  
BONZAGNI, NEIL  
BUCK, DERRICK  
CARROLL, GEORGE  
CHENG-DOBSON, JENNIFER  
CHO, CHUNG  
COFFEY, STEPHANIE  
CROSS, ISRAEL  
DEERING, AMANDA  
DEVERA, BENIGNO  
DYER, JACOB  
EDELSON-MAMMEL, SHARON

EDWARDS, ELIZABETH  
ERLING, DOUGLAS  
EVANS, KIMBERLY  
FRANK, SAMUEL  
GOODWIN, BRADLEY  
GRUNENFELDER, CRAIG  
HAITH, MATTHEW  
HOUSTON, KEISHA  
IVERSON, SALLY ANN  
KOUADIO, JACQUELINE  
LANG, TYRRELL  
LESHIN, JONATHAN  
MEEHAN, SARAH  
MERCER, CHRISTOPHER  
MUNIZ-ORTIZ, JORGE  
NAKAGAWA, LISA  
OKOLO, ANDREW  
OTTO, MARK  
RUIZ, JACLYN  
SHAHAN, MICHAEL  
STANLEY, AYANA  
STEPHENS, MARTIN  
STUCKEY, MATTHEW  
TECHEIRA, TITANIA  
TILLER, REBEKAH  
TOMOV, JESSICA  
TUTT, TANESHA  
VOLKMAN, KELSEY  
WANDERSEE, MICHAEL  
WIGGINS, LONDON  
WIYOR, HANNIEBEY  
WOLFF, CODY  
WOSTER, TRISTAN  
WYATT, VALERIA  
ZWALD, MARISSA

## **TO LIEUTENANT COMMANDER (O-4)**

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ABOAGYE, SAMUEL  
BANMEKE, OLUBUKOLA  
BLAKE-KEETSO, ULALEYA  
BUCKELK, MIKE  
CAMERON, RUSSELL  
CARTER, BEAU  
COLVIN, ANDREW  
DEJONGE, PETER  
FEELY, TAQUANTA  
FRANK, MELINDA  
HERNANDEZ, VERONICA  
JONES, SHAKYE  
KYAW, NANG THU THU  
LAMBON, JUSTICE  
LEO, JIA  
LUAPULA, LLOYD  
MEEKER, JESSICA  
NEWFORD, MICHAEL  
ODUNSI, SHIFAWU  
PARK, SUNG JIK  
PHAM, FRANCIS  
PINA, ALBERTO

REED, JAZMIN  
REED, MITCHELL  
RIVERA, SAMUEL  
SARISKY, JOSEPH  
SCHAPPERT, ALEXA  
TOWNSEND, JANESA

## **TO LIEUTENANT (O-3)**

---

ADORBOE, CATHERINE  
BURTON, CHRISTINA  
CHOWDHURY, RAHAT  
CLYBURN, REGINALD  
DE PASION, JULLYANNE  
DOMINGO, ALDEN  
GENUS, ANDRAE  
GONZALES, KAITLIN  
JOHNSON, JAMES  
LEWIS, THORNDREA  
MACKENZIE, DOGBEDA  
MARTIN, CONNOR  
NICOLAI, ANDREW  
SHAIFF, ABDULLAH  
STIDHAM, BRADY  
STRAND, TAYLOR  
TEMPLE, DEVIN  
ZANETSIE, CLAUDE NOEL

## **TO LIEUTENANT JUNIOR (O-2)**

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None Available

## **ALLIED HEALTH TO CAPTAIN (O-6)**

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ALLEN, LINZI  
ANDRADE, CHRISTINA  
ANDREWS-BURKE, JENNIFER  
FINOCCHIO, JACKLYN  
HARPER, PATRICK  
HARRIS, ADAM  
HODGE, DONNIE  
JOHNSTON, BRIAN  
KECKLER, WADE  
KIRCHOFF, MATTHEW  
MOBLEY, JOY  
MURRAY, CARL  
RABE, STEPHEN  
SCHULTZFISCHER, JESSICA  
SHARRIEFF, ALLAH-FARD  
SPADY-GROVE, KYMBERLY  
STEINERT, JESSICA  
STRINGHAM, LUKE  
TRAN, TRANG  
TYSON, JAMES  
VOINICH, INNA

## **TO COMMANDER (O-5)**

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ALLEN, JOSEPH  
ANTIGUA-SANTANA, FRANCISCO

See **PROMOTIONS** page 29

FROM **PROMOTIONS** page 28

BARKER, SOPHIA  
BARKER, RYAN  
BONNER, AMANDA  
BOWER, JAMES  
BROWN, DANICA  
BUTCHER, ERIC  
CAMPBELL, JACQUELINE  
CASTELLANOS, THERESA  
CAVANAUGH, CASEY  
CHANG, HENG  
CHAO, FIONA  
CHEN, DEBRA  
CROPP, SAMUEL  
DALESSANDRO, DOMENIC  
DILL, MEGAN  
FRYE, MATTHEW  
IREGBU, EPIPHANIS  
JACK, SHANE  
JARVIS, ESTHER  
JOHNSON, DANIEL  
KEBKER, ERIC  
LAL, RENU  
LI, NATALIE  
LOCK, LADONNA  
MARLIN, CASEY  
MARTIN-BRASWELL, LUSI  
MAYSONET SCAVO, MADELINE  
MOULDER, LAUREN  
MURRAY, KATHI  
ORSBORN, MONICA  
PAK, SARAH  
PATEL, NEHA  
PATEL, PRITESH  
PENN, RUMANY  
PERRY, JENNIFER  
PLAISTED, CODY  
RORABAUGH-IRWIN, JOSEPH  
SHELTON, ANTHONY  
SMITH, JOSEPH  
STAJDUHAR, NIKOLAS  
THOMPSON, JESSICA  
WAITE, RODNEY  
WARD, JEFFERY  
WASHBURN, RACHEL  
WEEKS, MEGAN  
WHITEHEAD, BRETT  
WINANS, EMILY  
ZERISSASSIE, TIGISTY

**TO LIEUTENANT  
COMMANDER (O-4)**

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ADELEKE, KAFILAT  
ALLEN, TIANA  
AMEGADJE, KOFFI  
ASBURY, BRITONNI  
BRAITHWAITE, ARIA  
CABRERA, WHITNEY  
CARR, CHARLES  
CHAN, KATHARINE  
COLON, CHRISTIANNA  
DISMUKES, JOSEPH  
FITZGERALD, KRISTY  
GALLAGHER, TIMOTHY  
HUXALL, GALEN

JONES-DOVE, ADRIAN  
KENNEDY, MARIA  
KERN, COLBY  
LEE, JE HOON  
LEE, REBEKAH  
LEE, SHAUNA  
MA, JIMMY  
MAI, ALAN  
MANN, CONNER  
MCCRIMMON, FRANTISHKA  
MURPHY, BARSHAM  
NDUANYA, CHIBUIKE  
OH, XIN YING  
PHAM, AILEEN  
PLOUSSIOU, HELEN  
QUASTE, ANTHONY  
REID, PAMELA  
RICHBURG, LAUAKIA  
ROBERTS, ALEXIS  
SANDOVAL, JACOB  
SKIDMORE, BARBARA  
TASSONE, JING  
VALDEZ, BRIAN  
WALSTON, DERRICK  
WHITMIRE, HAILEY

**TO LIEUTENANT (O-3)**

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MARQUEZ, ROCIO  
MONTGOMERY, JEFFREY

**TO LIEUTENANT JUNIOR  
(O-2)**

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None Available

**MEDICAL  
SERVICES  
TO CAPTAIN (O-6)**

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ABERLE, CARLETTA  
BURGOS, JOSE  
DAVIES, CATHLEEN  
DEMERS, KATHERINE  
DETSOI-SMILEY, PAMELA  
FATH, KELLY  
JONES, AMBER  
KOPERA, JASON  
LESSERT, AMANDA  
METTEE ZARECKI, SHAUNA  
SAUNDERS, BRIAN  
SCHULER, CARRIE  
SCOTT, TSHIKANA  
SMITH, ELLEN  
STEVENS, CLARA  
TAXERA, MARTIN  
UPSHAW, JULIANA  
WAGONER, DANIEL

**TO COMMANDER (O-5)**

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ACOSTA-VANDENBERG, JESSICA  
ADDO, ADLAIDE  
AVENT, RODNEY  
BACHINI, STEVEN  
BOFAH-KONADU, CHARLES  
CABELLO, CYNTHIA

CHASE, CARLA  
CHERUP, JAMIE  
COLLINS, SUSAN  
COOK, BRADLEY  
CURTIS, JENNIFER  
DARKENWALD, TORREY  
DAVERIN, HOLLY  
DE LEON, JORGE  
DELOSSANTOS, MARIA  
DUBINSKY, JEREMY  
FAIN, BRANDON  
FOLAMI, ALEX  
FOSS, JOSEPH  
FREEMAN, AMANDA  
FYLPA, HANNA  
GEEST, ELIZABETH  
HARDY-LOVELOCK, TEMIKA  
HARLOS, JENNIFER  
HARMON, DEANNA  
HARRIS, CRYSTAL  
HEALY, KEVIN  
HINGTGEN, DREW  
HORTON, ALEX  
HUGHES, SARA  
JONES, MARK  
KAMINSKI, CATHERINE  
LEMMON, NATHANAEL  
MCNAIR, STACI  
MOLCHAN, CARIN  
MOORE, JODI  
NGAMENI, ELISE  
PADGETT, MATTHEW  
POLVADORE, LI JUAN  
POMMIER, RYAN  
QUINN, KERRY  
REED, MICHAEL  
RIVERS, LAURETTE  
RYSZKA, LAUREN  
SAVION, REBECCA  
SECRET, LETISHA  
SINOBEEN, SHEILL-MAE  
SPENCER, MELISSA  
STUTTS, JUULA  
SUMNER, TANYA  
TALLMAN, BOBI  
THOMPSON, JILL  
THOMPSON, PAULA  
TRENDEL, GRETCHEN  
WAGGONER, VAUGHN  
WEBB, MELANIE  
WEST, KRYSTAL  
WESTBROOK, MARK  
WILSON, DORETHA  
YONKERS, RANAY  
ZALNO, BETH

**TO LIEUTENANT  
COMMANDER (O-4)**

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ABORN, TRAVIS  
AKOTH, ELIZABETH  
BENIGNO, ROSECELIE  
BROMFIELD, VANESSA  
DAUTRICH, JEREMY  
DODD, DEREK  
FARINAS, DAHYLEM  
GATES, KHRYSSTOPHER

GRIMALDI, THOMAS  
HENDERSON, BRENDA  
KAVISHE, LILLIAN  
LAMPTEY, CATHERINE  
LEE, CHRISTINA  
MARTINEZ, LIZETTE PARRA  
MASQUAT, WINONA  
MAY, SYLVIA  
MONROE, SELIA  
NGANGA, ROSEMARY  
NWABINWE, STANLEY  
OKEREKE, CHINWE-NGOZI  
PEREZ, ELLIS  
POWELL SEXTON, RANDI  
RIVERS, KIMBERLY  
SHARRY, KELLY  
SLETTEN, JOLENE  
STANLEY, NATASHA  
TAYLOR, BOBBY  
THOMPSON, DANA  
TYSON, APRIL  
VALENZUELA, SARA  
WILLIAMS, JAMIE  
WILSON, SHERRYANN  
YELLOW, ROBBIE

**TO LIEUTENANT (O-3)**

---

ABRAMS, UNIQUA  
ADESEMOWO, ADESUWA  
ALBI, COLIN  
BAILEY, JEREMY  
DANIEL, MEAGAN  
DONALD, AUDRIC  
EUGENE, JEANHEROLD JUNIOR  
GONZALEZ, MARCO  
GROVES, JASMINE  
JEANNOT, MELISSA  
JENNINGS, ANDREW  
KIM, HWAHWI  
KIZZIA, TRACE  
LAFLAME, ELIZABETH  
LAWRENCE, JOEL  
LOUIS CHARLES, ZOLETTE  
LUCAS, ZACHARY  
LYNCH, CAMERON  
MORGAN, FRANCES  
NELSON, NICHOLAS  
NOLEN, ELIZABETH  
ORTIZ, LUIS  
PUTNEY, CULLAN  
REDD, MORGAN  
TOLEDO, EMMA  
WAGNER, EMILEE  
WHITMAN, MICHAEL  
WOOTEN, MATTHEW

**TO LIEUTENANT JUNIOR  
(O-2)**

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None Available

## OFFICER SPOTLIGHT: CDR ISRAEL CROSS NAMED 2025 SHALON M. IRVING JUNIOR SCIENTIST OFFICER OF THE YEAR

by LCDR Christine Nappa, LCSW, BCD, CDR Ana Sandee, PT, DPT, MPH, and LCDR Israel Cross, PhD, MA, CAPS, ECHM, CDP

CDR Israel Cross been awarded the 2025 Shalon M. Irving Junior Scientist Officer of the Year Award. For him, the recognition is both professional validation and a personal milestone.

“Receiving this award is both humbling and affirming,” said CDR Cross. “It’s an emotional honor to be recognized in the name of Dr. Shalon Irving—a scientist who modeled what it means to pursue excellence with empathy. Professionally, it’s a powerful reminder that our work in gerontology, caregiving, and public health must continue to center human dignity, equity, and science that serves communities over lifetimes.”

CDR Cross discovered unexpected parallels between his own career path and Dr. Irving’s. “I had always known her as an epidemiologist, but after reading further, I discovered we both have advanced training in sociology and gerontology—a rare and vital combination in the Commissioned Corps,” he explained. That realization reinforced his commitment to building more equitable systems of care.

As a Senior Public Health Advisor with the Health Resources and Service Administration’s (HRSA’s) Bureau of Primary Health Care, CDR Cross oversees a portfolio of 13 Health Center Controlled Network cooperative agreements and due to his expertise, leads a grant focused on older adult health. His work emphasizes health information technology, data modernization, and population-based models of care, which are efforts aimed at closing systemic gaps. “My work centers on building systems that recognize and respond to structural inequities,” he said. “I’ve focused on integrating caregiver variables into emergency planning, embedding geriatric best practices into value-based care, and using Health IT to close healthcare gaps.”

Leadership and mentorship also define CDR Cross’s career. He served as Chair of the U.S. Public Health Service (USPHS) Scientific and Training Symposium’s Training Day, helping rebrand the event and expand officer participation. CDR Cross also mentors junior officers and supports programs like the American Society on Aging RISE Fellowship. “One of the big-



COA's Executive Director, Jacqueline Rychnovsky, with CDR Cross at the September retirement of RADM Denise Hinton.



CDR Cross participating in a virtual dementia tour—a sensitivity training designed to help caregivers, family members, and friends understand what it is like to live with a form of dementia. Participants' hearing, vision, and other senses are distorted to simulate the effects of the disease.

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momentum. We have seen increasing interest, support, and understanding of the U.S. Public Health Service Commissioned Corps in the congressional offices we visit.

### **Active duty pay during a shut down**

For the past several years, we have worked with The Military Coalition to advocate for continued pay for USPHS retirees during a government shutdown. In addition, we have been working closely with congressional offices and sister service coalitions to have the U.S. Public Health Service added to the Pay Our Troops Act. In March 2025, we contacted policymakers to ask that USPHS be included in that bill and were told the exclusion was simply an oversight. Yet here we are — another shutdown, another cycle — and were still not included. But progress comes small steps, and we must be diligent, but persistent. Now that the Department of Defense and US Coast Guard have found a way to pay their troops, our hope that the Pay Our Troops Act will pass is low. On your behalf, we have sent a letter to the Assistant Secretary for Health, urging him to engage Secretary Kennedy on this matter (see page 32). We

have additional congressional visits scheduled to continue these discussions, and we will keep pressing forward. The shutdown will end, but we know there will be another one someday, and we must be prepared.

### **Retiree pay during a shut-down**

This week we sent a letter to the Assistant Secretary for Health, urging him to ensure that funds to pay retired officers are prioritized (page 33). COA is taking the lead and partnering with the Office of the Surgeon General and other coalitions to find a permanent solution for ensuring continued pay for retirees during a shutdown. We will not stop fighting until we succeed in convincing lawmakers on the importance of moving the USPHS retirement fund under the Department of Defense Retirement Fund so retiree pay can be counted on.

### **OASH/OSG Transitions**

Recent events have brought moments of sadness and renewal. On September 30, we said farewell to Rear Admiral Denise Hinton, who retired after 32 years of proud and honorable service in both the U.S. Air Force and the U.S. Public Health Service. We thank her for

her extraordinary dedication and leadership and value immensely the support we received from her during her tenure. We welcomed Dr. Brian Christine as the 18th Assistant Secretary for Health at the Department of Health and Human Services. Dr. Christine is proud to serve and eager to wear the cloth of our nation and to represent each Commissioned Corps officer. To learn more about his vision, you can view his congressional testimony.

As we look ahead to November, we remain hopeful for better news. I want to offer a special shout-out to all officers currently deployed on detail to the Indian Health Service or assignments in support of immigration health. We know these deployments are demanding — and deeply rewarding — as you serve so many in need. To all officers on deployment or supporting challenging missions--keep your chin up! Please do not hesitate to reach out if there is anything we can do to support you during this time.

As always, my virtual door — my phone line — is always open. Please reach out anytime to share what is on your mind, and I am hopeful that by next month, things will be looking up.



October 13, 2025

Dr. Brian C. Christine  
Assistant Secretary for Health  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Dr. Christine,

I am writing to respectfully request that you reach out to Secretary Kennedy to secure the necessary funds to pay the 75% of *Excepted* category U.S. Public Health Service Commissioned Corps officers who are at risk of not receiving pay at the end of the month due to the ongoing government shutdown.

Now that the Department of Defense and the Department of Homeland Security have identified funding mechanisms to ensure continued pay for their military personnel, it is essential—for purposes of parity, morale, and alignment across the uniformed services—that the Department of Health and Human Services take similar action on behalf of our U.S. Public Health Service officers.

These 4,000 dedicated officers, designated as *Excepted* employees, stand ready to serve and protect the health of our nation in times of crisis and at great personal sacrifice. Many are currently deployed, spending extended periods away from their families to provide care in rural Indian Health communities and immigration facilities. Your outreach to Secretary Kennedy to secure their pay would be a crucial step toward ensuring they are compensated for their service during this period—both as a matter of fairness and as a reaffirmation of the values that define the U.S. Public Health Service.

Thank you for your leadership as the most senior official guiding the proud tradition of the Commissioned Corps. Your steadfast commitment to the health and well-being of our nation—and to the officers who uphold that mission—is deeply appreciated. We are grateful for your consideration and for your continued advocacy on behalf of those who serve.

With respect and appreciation,

Jacqueline D. Rychnovsky, PhD, RN, CPNP, FAANP  
Captain (Retired), U.S. Navy  
Executive Director

Cc: Bridget Devoy, Chief of Staff, Office of the Assistant Secretary for Health  
Joseph Proenza, Deputy Chief of Staff, Office of the Assistant Secretary for Health  
Dr. Stephanie Haridopolous, Chief of Staff, Office of the Surgeon General  
RDML Richard Schobitz, Director, Commissioned Corps Headquarters



October 14, 2025

Dr. Brian C. Christine  
Assistant Secretary for Health  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Assistant Secretary Christine,

The purpose of this letter is to respectfully urge you to ensure that funds are prioritized, if they are not already, to pay the 7,500 retired U.S. Public Health Service Commissioned Corps officers who have dedicated their careers to advancing and protecting the health of our nation.

Although historically, discretionary funding has never resulted in retirees missing a paycheck, we have been unable to obtain a definitive answer regarding the status of retired pay during the ongoing government shutdown. Conflicting information from multiple sources has created uncertainty and anxiety among retirees who depend on this earned benefit. This situation represents a profound injustice. These retired officers served faithfully for decades—often in austere and high-risk environments—to safeguard the public’s health. They earned their retirement through years of sacrifice and service, and that commitment should never be compromised or placed at risk due to funding ambiguities.

I respectfully request that you make a plea to Secretary Kennedy and other administration officials to confirm and secure the funds necessary to guarantee uninterrupted pay for retired Commissioned Corps officers. This action would not only honor their lifetime of service but also uphold the integrity and trust inherent in our nation’s uniformed service commitments.

We are grateful for your leadership and for your support of both active duty and retired officers of the U.S. Public Health Service Commissioned Corps. Your advocacy will make a tangible difference to those who have devoted their lives to protecting the health and safety of our country.

With respect and appreciation,

Jacqueline Rychnovsky, PhD, CAE  
Captain, USN (Retired)  
Executive Director

Cc: Bridget Devoy, Chief of Staff, Office of the Assistant Secretary for Health  
Joseph Proenza, Deputy Chief of Staff, Office of the Assistant Secretary for Health  
Dr. Stephanie Haridopolos, Chief of Staff, Office of the Surgeon General  
RDML Richard Schobitz, Director, Commissioned Corps Headquarters

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13. Publication Title: **Frontline**

14. Issue Date for Circulation Data Below:

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FROM **CROSS** page 30

gest takeaways from Training Day is the importance of cross-disciplinary dialogue. Officers bring diverse expertise, and when we create spaces for that, innovation follows.”

Looking ahead, LCDR Cross plans to expand his impact as President of the National Aging in Place Council, strengthening partnerships across health, housing, finance, and technology. He also hopes to

elevate the visibility of caregivers in emergency preparedness.

For LCDR Cross, Dr. Irving’s legacy remains a guiding force. “Her example reminds me that rigor and heart are not mutually exclusive,” he reflected. “By blending expertise with compassion, we can build systems that honor caregivers and support health across the lifespan.”

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