Leadership is more than a Rank

Several weeks ago I was privileged to participate in the retirement ceremony for an outstanding Commissioned Corps officer, CAPT Jason Woo, M.D. I confess not to know everything that CAPT Woo accomplished during his thirty-one years in the Corps, but I know that for the past five years he has taken it upon himself to offer leadership training to PHS officers. CAPT Woo did this with assistance from the PHS Commissioned Officers Foundation for the Advancement of Public Health (COF), the entity that sponsors the annual Symposium. But it was mostly his own initiative and ingenuity that resulted in many officers having the opportunity to study good leadership techniques and skills.

I was not part of the program at CAPT Woo’s retirement, but I ran into him before the ceremony and

Like Follow Share Comment

by LCDR Rebecca Wong, LCDR Oliver Ou, and LCDR Nancy Tian

On May 14, 2019, six PHS Commissioned Corps officers had the distinct privilege and honor of representing the HMI and receiving a proclamation from Councilmember Gabe Albornoz in Montgomery County, MD. The proclamation recognized both the importance of promoting mental health awareness in Montgomery County’s Asian-Pacific community and the collaborative efforts of all three partner organizations: Asian American Health Initiative (AAHI), Substance Abuse and Mental Health Services Administration (SAMSHA), and Asian Pacific American Officers (APAOC) in breaking down key barriers, coordinating trainings, and hosting community engagement events.

Asian American adults have the highest attempted suicide rates of all ethnic groups. This might be surprising to many people, but there continues to be a great deal of pressure in the Asian American and Pacific Islander (AAPI) community. For example, many AAPI youth feel the overwhelming pressure of strong cultural and family expectations from a very young age to perform well, achieve excellent SAT scores, and be “perfect.” Discussion of mental health is taboo and is not a dinner table conversation topic amongst AAPI families, in part because there is limited knowledge of and awareness about mental health in these communities. Additionally, there is a dearth of culturally- and linguistically-competent mental health education programs and providers amongst AAPI, which leads to a very low
COA Member Benefits

Capitol Hill Representation
Efforts on Capitol Hill continually support all Commissioned Corps officers – active duty 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 reports on monthly activities and items of interest about the Corps & COA

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

$7,500 for Online Degrees
$7,500 scholarships to earn online degrees, which include:
- MPH@GW
- MHA@GW
- HealthInformatics@GW
- MBA@UNC
- MBA@Simmons
- HealthcareMBA@Simmons
- IRonline (American)
- MBA@American

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

Scholarship Program
College scholarships for children and spouses of COA members

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

Legislative Update
FY 2020 Defense Policy Bills In House-Senate Conference

by Judy Rensberger

The annual National Defense Authorization Act (NDAA) is a major piece of legislation that runs to well over a thousand pages and sets defense policy on everything from aircraft procurement to undersea vehicle research to health care for uniformed services personnel to the Wounded Warrior service dog program.

Since early May, the armed services committees of both chambers of Congress have been independently developing their own visions for the NDAA. The Senate passed its bill on 1 July 2019. The Senate passed its bill on 27 June and the House approved its own bill on 12 July.

COA’s View

COA supports the House bill, H.R. 2500. It includes a 3.1 percent pay raise for the uniformed services. It also contains a robust section on health care, it is Title VII, Subtitle A, “Tricare and other Health Care Benefits.” This section responds positively to lobbying by the uniformed services community.

Section 701 would amend Title 10 of U.S. Code to allow members and former members of the uniformed services access to care related to the prevention of pregnancy with no cost sharing. Similarly, Section 702 would amend Title 10 to provide information and assistance to sexual assault survivors at military medical treatment facilities.

COA Weighs In

Every year, COA and its Legislative Affairs Committee closely track the NDAA. The Committee’s effort is led by CAPT Marc Safran, a retired PHS physician. He is a longtime committee member and chair of its NDAA subcommittee. COA also keeps an active watch through my participation on The Military Coalition’s Health Care Committee. On 16 July, ten of us on TMC’s Health Care Committee met for well over an hour with staff of the Senate’s Armed Services Committee. On 26 July, we met with staff of the House Armed Services Committee. (These staffers were unusually generous with their time; Capitol Hill meetings generally do not exceed thirty minutes.)

Throughout the process, our main collective focus has been the Defense Department’s unexpected and unexplained decision earlier this year to eliminate more than 17,000 medical billets in the armed services. Our collective “ask” is this: Do not permit the Defense Department to make this move without detailed analyses that document need and explain why and how. Section 716 of the House bill would order DoD not to realign or reduce military medical end strength.

see LEGISLATIVE continued on page 13
The 29th MOLC Awards Ceremony Honors Fourteen Exceptional Minority Officers

by LCDR Ogochukwu Ogoegbunam and LCDR Kemi Asante

Annually, the Minority Officers Liaison Council (MOLC) recognizes contributions made by minority officers in all chartered minority advisory groups (CMAGs). Each CMAG is responsible for performing the nomination and selection processes for their award recipients. On 9 May 2019, MOLC honored fourteen outstanding officers at the 29th MOLC Awards Ceremony during the 2019 COF Scientific and Training Symposium in Minneapolis, MN. Each year, the CMAG in the Vice-Chair role is responsible for planning and executing the MOLC Awards Ceremony. It is an opportunity for that CMAG to showcase elements of their culture, and this year, BCOAG had that privilege.

However, the ceremony was only possible with the collaboration and assistance of all CMAGS.

The MOLC was founded in 1990, by the Surgeon General and the United States Public Health Service (USPHS) to advise and serve the Office of the Surgeon General on issues of professional development and to recognize contributions made by minority officers in the USPHS. The MOLC serves as a liaison between the Surgeon General and the four chartered minority advisory groups (CMAGs). The MOLC is comprised of four CMAGs: American Indian/Alaskan Native Commissioned Officers Advisory Committee (AI/ANCOAC), Asian Pacific American Officers Committee (APAOC), Black Commissioned Officers Advisory Group (BCOAG), and Hispanic Officer Advisory Committee (HOAC), under the leadership of a Senior Advisor.

MOLC Vice-Chairs LCDR Ogochukwu Ogoegbunam and LCDR Kemi Asante served as the masters of ceremony for the event. Following the presentation of colors by the United States Surgeon General’s Honor Guard, the USPHS Choral Ensemble sang the national anthem, and the invocation was given by CDR Malaysia Gresham. Welcoming remarks were made by LCDR Janet Hayes, 2019 MOLC Chair, to over 200 guests. Among the guests were several flag officers and distinguished guests including Deputy Surgeon General, RADM Erica Schwartz; Director of Commissioned Corps Headquarters, RADM Susan Orsega; Pharmacist Chief Professional Officer (CPO), RADM Ty Bingham; Dietician CPO, RADM Susan Gordon; Environmental Health Officer CPO, RADM Kelly Taylor; Scientist PAC CPO, CAPT John Eckert; RADM (ret.) Randall Gardner; RADM (ret.) Dawn Wylie, RADM (ret.) Sven Rodenbeck; COA Executive Director, Col (ret.) James Currie; and MOLC’s Senior Advisor, RADM Brandon Taylor.

The ceremony included an invigorating and energetic performance from Duniya Drum and Dance Company, who wowed guests with their rhythmic African drum playing and dance. Following the presentation, the keynote speaker, Mr. George Robinson, challenged officers to recognize the consequences of disparities among us and to be aware of unconscious bias. He stated that through our awareness of unconscious bias, we will discover micro-messages that we may be unintentionally sending to others. Once we make that discovery, we can confront and change it, so that we see people as they are as opposed to who we think they are.

RADM Brandon Taylor, MOLC’s Senior Advisor, presented Mr. Robinson and the Deputy Surgeon General, RADM Erica Schwartz, with shadow boxes containing coins from each CMAG, as a token of appreciation from MOLC. Each award recipient was then recognized by each CMAG for their outstanding contributions and dedication to the mission of the USPHS. Following the presentation of awards, LCDR Jennifer Smith sang a powerful selection, “For Every Mountain,” that left guests in tears. Then, RADM Taylor delivered a thoughtful and unifying closing remark.

The tremendous success of the 29th MOLC Awards Ceremony was due to the continuous dedication and unwavering efforts of the MOLC Awards Planning Committee led by LCDR Ogochukwu Ogoegbunam and LCDR Kemi Asante, BCOAG representatives to MOLC. Special thanks to the members of the Planning Committee, including RADM Brandon see MOLC continued on page 19
COF President’s Corner

by Sven E. Rodenbeck, Sc.D., P.E., BCEE
Rear Admiral, United States Public Health Service (ret.)

What a busy year! Not only did Foundation host another outstanding, record-setting USPHS Symposium in Minneapolis, but we awarded the second round of the CAPT Martha Barclay-Giel COF Grants (seed grants) to local public health organizations. The Foundation also provided financial support to local Commissioned Officer Association chapters and U.S. Public Health Service Junior Officers so they could attend the 2019 USPHS Symposium.

Many thanks to RADM Kevin Meeks, CAPT Jeanean Willis-Marsh, and CDR Deborah Dee for their leadership in planning the 2019 USPHS Symposium. Your leadership and continued support of our Corps is appreciated.

The 55th USPHS Symposium will be held on June 15-18, 2020, at the Renaissance Phoenix Glendale Hotel. I am sure it will be another outstanding event. I am looking forward to see and greeting you there.

Unfortunately, it is that time of the year when we must say goodbye to people that are rotating off the COF Board of Trustees. Many thanks to RADM (ret.) Clara Cobb, RADM (ret.) Christopher Halliday, RADM (ret.) Carol Romano, RADM (ret.) Richard A. Rubendall, and Mr. Michael Terry for their many years of service to COF and our Corps. I have enjoyed working with you as members of the COF Board of Trustees and I hope to have the opportunity to work with you again.

Last but by no means least, I want to welcome RADM (ret.) Michelle Dunwoody, RADM (ret.) Paul Seligman, CAPT (ret.) Jerome Alford, CAPT (ret.) Dan Beck, and CAPT (ret.) Rob Tosatto to the COF Board of Trustees. I am looking forward to working with you as we continue to advance, promote, and protect the health and safety of our nation.

The COF Board will continue to explore ways we can continue to support the U.S. Public Health Service Commissioned Corps and the greater public health community. If you have any ideas, please let me know.

In closing, I want to thank our wonderful COF staff for their continued support.

Our mission continues.

The U.S. Food and Drug Administration to Hold 24th Annual Commissioned Corps Promotion Ceremony on September 20, 2019

The Food and Drug Administration (FDA) will hold its 24th Annual Commissioned Corps Promotion Ceremony on Friday, September 20, 2019, at 1:30 pm. This prestigious event will be held at the White Oak Campus in the Great Room in Building 31, Silver Spring, MD. For some, this will be their first promotion, and for others, this will serve as a uniformed service career-affirming ceremony. At this ceremony, the FDA will formally honor the outstanding achievements and contributions our officers made during the 2019 Promotion year and throughout their uniformed service careers. During the ceremony, the Center Director or designated Center official participates with a family member to place the new rank on the shoulders of each deserving officer. The FDA is extremely proud of our Commissioned Corps officers and the significant contributions they make in improving the health and safety of this great nation. Please join us in recognizing these officers and celebrating this monumental career achievement. The uniform of the day for promotees is Summer Whites. All other officers should wear the prescribed uniform of the day.
April was the Month of the Military Child. Morale Welfare, and Recreation (MWR) at Camp Parks (Parks Reserve Forces Training Area) in Dublin, CA, hosted a field day with activities including races, bounce houses, rock climbing wall, raffles, and many other activities for the children. Over 125 children attended this event. US Public Health Service Commissioned Corps officers from the Golden Gate COA (GGCOA) branch showed their support to our sister service by volunteering for the event. This volunteer opportunity was coordinated by GGCOA Community Service Co-lead LT Christy Gadson. During this event, three PHS officers participated in setting up for the event and manning the activity booths. It was a great opportunity to meet and interact with over thirty military families in the local community and to provide visibility for the United States Public Health Service.
Buenos Dias fellow active duty and retired PHS officers,

I am really proud to introduce myself to you as the COA Board Chair for July 2019 through June 2020. I am so proud to be in a position of service to you all, my colleagues and friends, and will strive to do my best in this short tenure. I am a nurse officer, currently working at CMS in Baltimore, MD, and I’ve been in the Commissioned Corps for almost 16 years. I’m a proud native of El Paso, TX, a University of Texas El Paso (UTEP) Miner for life, and a proud Latina of Mexican heritage. I am a mother, and a grandmother of four beautiful and precious grandchildren.

I had an entirely different write-up planned for this edition of Frontline, but I’ve been deeply affected by something this week, so I went in a different direction…

Saturday, August 3, 2019, I was driving Westbound on I-10, from Odessa, TX, to visit my mother in El Paso, which is my hometown. We crossed the city limit just as our cellphones began to blare with an emergency alert – “Active Shooter near Cielo Vista Walmart! Avoid the area!” It was quite terrifying, because my mother lives in the Cielo Vista Area. If you’ve been watching any news at all this week, you know that it was the Wal Mart in the Cielo Vista neighborhood that was visited upon by an unspeakable evil. It was the Wal Mart less than one mile from my childhood home where twenty-two individuals lost their lives to a senseless act of hate. More are still fighting to stay alive, and many are recovering. But I am sure the people in that store on that horrible day will never get over it. High school friends or their family members were trapped in the store. This has hit us very close to our home, and very close to our hearts.

I’ve always been fascinated by Public Health, ethics, and population health. And I’ve always been fascinated by how slow change occurs; significant, impactful change takes a long time to achieve. It is a tiresome marathon, or two. I have believed for many, many years that gun violence is a public health issue. Whether you are a lawful gun owner, or whether you are anti-gun, the fact is, we are losing too many Americans to this epidemic. Somethings gotta give…

Our Former Surgeon General, Dr. David Satcher, along with Former Dean of Johns Hopkins School of Public Health, Dr. Al Sommer, and CEO/Founder of Cure Violence Dr. Gary Slutkin, began an initiative in July 2015 to recognize all types of violence as a public health issue. Please visit http://violenceepidemic.com to learn more about this initiative and how you can get involved.

Dr. Ali Rowhani-Rahbar, M.P.H., a nationally-known violence prevention epidemiologist from the University of Washington, has stated that “there is no question gun violence is a public health concern.” The statistics he presents to back up his claim are sobering.

- 80,000 injuries from firearms each year in the United States, 38,000 fatalities.
- 90 people die from gun-related injuries every day in the United States. Eight children a day die from guns.
- Among persons age 1 to 24, deaths caused by gun-related injuries are about two times that of cancer, five times that of heart disease and 15 times that of infections.
- 60 percent of all firearm deaths are suicide.

If you don’t already believe that gun violence is a public health issue, then I would encourage you to consider...
As part of COA’s efforts to persuade the Smithsonian to include the US Public Health Service and the National Oceanic and Atmospheric Administration in its proposed National Native American Veterans Memorial, we have been lobbying members and committees of Congress. Shown here is COA Executive Director Jim Currie with Rep. Jamie Raskin (D-MD) at a Raskin fundraiser Jim attended recently in Kensington, MD.

Jim had been talking with Rep. Raskin’s staff over the past year, but he was not convinced that they were passing his message to the Congressman. By paying out of his own pocket to attend a fundraiser for Raskin, Jim was assured of having a one-on-one conversation with the member. As suspected, Raskin had not heard about the issue, and he expressed support for including the USPHS in the design of the memorial.

Why Raskin? First of all, he represents more USPHS officers than any other member of the US House of Representatives. His district includes FDA at White Oak, the National Institutes of Health campus, USPHS headquarters in Rockville, HRSA, and Indian Health Service headquarters, a total of over 1400 Commissioned Corps officers. Second, Raskin serves on the House Administration Committee, which has jurisdiction over the Smithsonian. If he speaks, the Smithsonian will listen. Jim followed up after the fundraiser by meeting with the Raskin staffer who handles veterans’ issues. There have been many promises from the Raskin office, but no evidence so far of any outreach to the Smithsonian.
CDC Announces 2019 James H. Steele Veterinary Public Health Award Winner

by Captain Casey Barton Behravesh MS, DVM, DrPH, DACVPM

Lieutenant Caitlin Cossaboom MPH, DVM, PhD, CDC Epidemic Intelligence Service (EIS) Class of 2017 received the 2019 James H. Steele Veterinary Public Health Award from the Centers for Disease Control and Prevention (CDC) at the 68th annual Epidemic Intelligence Service (EIS) Conference. The annual award is named for the first chief of the CDC’s Veterinary Public Health Division, and it is given to current or recent EIS officers for outstanding contributions to veterinary public health and One Health. One Health is a collaborative, multisectoral, and transdisciplinary approach—working at the local, regional, national, and global levels—with the goal of achieving optimal health outcomes recognizing the interconnection between people, animals, plants, and their shared environment.

Dr. Caitlin Cossaboom, a lieutenant in the veterinary category of the U.S. Public Health Service, was honored for her outstanding contributions to One Health, both domestically and internationally, for the prevention and control of zoonotic diseases including anthrax and brucellosis. Lt. Cossaboom currently serves as Veterinary Epidemiologist in CDC’s Viral Special Pathogens Branch in the Division of High Consequence Pathogens and Pathology where she continues to use a One Health approach to protect public health.

COF Provides Over $100,000 in Seed Grants

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) awarded $7500 each to 15 organizations as a part of the COF Barclay-Giel Seed Grant program. The Seed Grant funds support community-based public health programs. COF thanks the Regular Corps and retired officers who helped to review each of the 251 applications received from around the country. Special thanks go to CDR Mark Miller for his statistical analyses of the reviewer scores.

“We are glad COF and its donors can support such a range of public health programs that connect to the Surgeon General’s priorities and the goals of Healthy People 2020,” said retired RADM Sven Rodenbeck, President of COF. The COF Board of Trustees congratulates all recipients listed below.

- Center for Helping Obesity End Successfully: Kennesaw, GA – children at risk for obesity
- Central Vermont New Directions Coalition: Montpelier, VT – e-cigarette use among youth
- City of Lowell Health Department: Lowell, MA – opioid epidemic
- Community Health Worker Coalition for Migrants and Refugees: Edmonds, WA – opioid epidemic
- Fresno Policy Chaplaincy: Fresno, CA – counseling for children with unresolved trauma
- Lake County General Health District: Mentor, OH – tobacco cessation
- Madison County Health Department: Wampsville, NY – oral health
- Metropolitan Tenants Organization: Chicago, IL – Healthy Homes training
- Mississippi Oral Health Community Alliance: Jackson, MS – oral health
- Senior Charity Care Foundation: West Valley City, UT – oral health for rural seniors
- Smiles Across Montana: Bozeman, MT – oral health among children
- Soul Food for Your Baby: Cypress, CA – breastfeeding among African Americans in South Los Angeles
- Southern Nevada Health District: Las Vegas, NV – residential lead assessments
- The JEM Foundation: Gilbert, AZ – suicide prevention through insurance parity for mental health
- The Opportunity Alliance: South Portland, ME – oral health in schools

The Seed Grants program is named after the late Captain Martha Barclay-Giel. Captain Barclay-Giel dedicated her life’s work to advancing the health of Americans. After retiring, she generously supported COF through considerable charitable donations. Captain Barclay-Giel is a member of the John Adams Society. Members of the John Adams Society chose to bequeath funds to the Foundation in their wills and trusts. You can join the John Adams Society.

Please encourage non-profit organizations near you to apply for funding each January when the next cycle of Seed Grant funding is available. Find more information about the COF Barclay-Giel Seed Grant program at www.phscof.org/seed-grants.
JOAG at the 2019 Symposium

by LCDR Beth Wittry
and LT Lusi Martin-Braswell

The 54th USPHS Scientific and Training Symposium was held at the Minneapolis Convention Center in Minneapolis, MN, on May 6-9, 2019. As always, the Junior Officer Advisory Group (JOAG) was in full force with over seventy-five junior officers volunteering at several booths, a community service event, a Back to Basics Readiness presentation, and the annual in-person JOAG General Meeting. Junior officers at the O-3 level or below who are current COA members could receive full registration scholarships from the Commissioned Officers Foundation, who sponsors the Symposium.

During the 2019 Symposium, distinguished visitors to JOAG booths included the Assistant Secretary for Health, ADM Brett Giroir; the Principal Deputy Assistant Secretary for Health, RADM Sylvia Trent-Adams; and the Surgeon General, VADM Jerome Adams. In addition, over 400 officers attended various JOAG-sponsored events.

The Uniform Inspection Booth (UIB) provided a uniform inspection service for officers at the Symposium. Before the Anchor and Caduceus Dinner commenced, several junior and senior officers visited the booth to ensure that their uniforms were in compliance with the uniform policy and UIB volunteers ensured that they were. The service would continue through the rest of the Symposium.

The Junior Officer Career Enhancement Booth (JOCEB) offered JOAG resources about professional development, to include an interactive Promotion Checklist to assist officers in capturing impactful statements for their promotion.

The Merchandise Booth was a one-stop shop to stock-up on popular JOAG swag and Corps pride items. JOAG featured two popular new items at this year’s Symposium: a USPHS etched glass picture frame and stainless-steel reusable straws. Despite the rainy weather, JOAG kept up its Symposium tradition of service by successfully completing a local area beautification community service project with an organization known as “People Serving People.” This group’s mission is to help the homeless, at-risk children, and their families manage crisis situations and build a strong foundation for their long-term success. The Back-to-Basics Readiness Presentation featured a panel of deployment experts. Attendees learned deployment readiness tips and interacted with the panel to obtain guidance and advice for joining deployment teams. Still in its infancy, JOAG’s “Instagram Scavenger Hunt” challenge called for junior officers to take pictures showing the Corps values and post them to JOAG’s Instagram page. This year’s JOAG Instagram Scavenger Hunt winner was LCDR Linzi Allen.

JOAG’s only yearly in-person General Meeting is held annually at Symposium. It occurred on the last day of the event. Junior officers networked with each other and with Corps senior leadership. RADM Schwartz and RADM Orsega made an appearance and spoke to junior officers about the future of the Corps and offered words of wisdom. Colonel Currie, COA Executive Director, was also present at the meeting and urged junior officers to continue participating in Commissioned Corps events. During the JOAG General Meeting, junior officers broke out into their respective categories and had small group sessions with their respective CPOs. The see JOAG continued on page 17
**DoD Outbreak Course**

The USAMRIID in Fort Detrick, MD, recently provided a three-day NDMS Training attended by Commissioned Corps officers pictured right. The DoD Outbreak Response Course (ORC) is designed to promote and enhance relations between DoD and other federal agencies. The course trains learners on infectious diseases most likely to cause an outbreak and provides in-depth training with equipment, including donning and doffing of Personal Protective Equipment (PPE). It also trains learners to create an infectious disease treatment area, based on Ebola Treatment Units, in both a field and hospital setting. During the course, learners were taught concepts of planning and coordination of logistical assets for an outbreak response. Instruction also included principles of the National Incident Management System (NIMS) as it relates to outbreak response. Commissioned Corps nurses attending the course had an opportunity to increase their knowledge, skills, competence and performance in a simulated triage/clinic setting by responding and treating infectious diseases in a biochallenged environment and familiarizing themselves with the planning process and logistical steps for supplies and equipment needed in an outbreak. The ORC course identifies and fills gaps in capabilities of DoD, clinicians, nurses and emergency responders in outbreak response: specifically targeting deficiencies in triage, transport, transfer and management of logistical assets.

**American Forces Travel Discounts now Include USPHS**

In January 2019 the well-known discount travel site Priceline announced that it had teamed with the Department of Defense to offer discounted travel to members of the armed forces through American Forces Travel. As happens so often, officers of the USPHS were not included. COA reached out to Priceline, and after six months of persistence, this omission has been rectified. As of 12 July, USPHS officers are eligible for the same travel discounts that are given to members of the Defense Department services. A screenshot of the American Forces Travel website home page is on the COA website at https://cdn.vmaws.com/www.coausphs.org/resource/resmgr/lettersandnewsmedia/cc/screenshot_of_american_force.pdf

**OBITUARY**

**CAPT (Dr.) Michael J. Frederiksen**

Long-time COA member CAPT (Dr.) Michael J. Frederiksen died on May 21, 2019, after a long career in the US Public Health Service. CAPT Frederiksen was born and raised in Cedarburg, WI. He studied medicine at the University of Wisconsin (Madison) and shortly afterward joined the USPHS. He worked for several years as a General Medical Officer in different towns on the Navaho Reservation in Arizona and New Mexico. He then completed a residency in ophthalmology and continued his work with the Native American community.

He went to Afghanistan in 1978 and worked as a consultant, teaching ophthalmology residents in Kabul. He was later director of Herat Ophthalmic Center. Dr. Frederiksen then accepted a position as an ophthalmologist at Kilimanjaro Christian Medical Center in Tanzania. He taught ophthalmic medical officers from across Tanzania. He also traveled to bush hospitals, where he performed eye surgeries ranging from cataract extractions to tumor removal to skin grafts to corneal transplants to strabismus surgery. While in Tanzania he climbed Mount Kilimanjaro, the highest peak in Africa.

The last part of his career was spent as a commissioned officer in the USPHS, working in the clinic at Gallup Indian Medical Center (GIMC). He served at GIMC beyond the usual retirement age and afterward provided medical care during mission trips to countries in Central and South America.

In his private time he enjoyed hiking, swimming, birding, and photographing wild flowers. He is survived by his wife and three sons and their families.
USPHS Officers judged student competitions at Cal-HOSA

by LT Christy Gadson and LCDR Annie Lam

The State Leadership Conference for California Health Occupations Students of America (Cal-HOSA) was held on March 28-31, 2019, in Sacramento, CA. LCDR Annie Lam, LCDR Diyo Rai, and LT Christy Gadson participated in the event by serving as student competition judges. Another PHS officer provided information to over 125 individuals at the PHS booth on Career Day. Together, these officers interacted with numerous students, teachers, and faculty from many California junior high and high schools. They provided visibility of the United States Public Health Service and supported the HOSA mission. It was exciting for the Public Health Commissioned Corps officers to be amongst future innovators and leaders of the medical and health sectors. During this event, officers were able witness the confidence, innovation and knowledge the students displayed on public health and medical issues. PHS officers were able to learn about the students’ health related interests and discussed possible career opportunities within the US Public Health Service.

BOARD from page 6

Learning more about the statistics and the impact that gun violence in America is having on our collective psyche. Perhaps someday soon, with enough voices of reason in the discussion, small changes can be made to lead us in a direction where our children, our elderly, and our families can feel safe once again going to a movie, a concert, a food festival, or shopping for back-to-school supplies at a neighborhood Wal Mart. In the meantime, if we never start this marathon toward change, then we’ll never even take a step forward.

Also, with regard to the event at the Wal Mart in El Paso, I realized quickly what a wonderful bond we share as fellow PHS Officers and members of COA. I know of many PHS Officers stationed (and deployed) here in El Paso who received phone calls and texts from other PHS officers around the country checking on them and offering support and encouragement. I received many supportive and caring calls and texts as well. Because PHS is not a centralized service, it doesn’t have the structure of our sister services. We don’t have units such as divisions, brigades, battalions, companies, or platoons—our command structure simply does not work that way. So, in my humble opinion, it is the local branches of the COA that often serve as an organized unit to bring fellow PHS Officers together by locale in an unofficial capacity. The local branches help form bonds between active duty and retired officers of various duty stations who reside or work in a common vicinity, and local branch members are the ones who are often there for one another in tough times. I want to thank every leader, past or present, of the local branches for everything you have done, and continue to do, to enhance esprit de corps and camaraderie among our “troops” scattered across the country and the world. Please continue to be there for one another.

Con amor y respecto,
CAPT Karen Munoz
COA Board Chair
Sickle Cell Disease (SCD), a lifelong genetic blood disorder affecting over 100,000 Americans, causes the body to produce abnormal blood cells shaped like crescents or sickles rather than discs. These sickle-shaped cells have trouble properly delivering oxygen to body tissues and cause extraordinarily painful and severe attacks known as a “crisis.”1 People living with SCD often experience long-term health challenges such as stroke, acute chest syndrome, and organ damage. The Twin Cities is home to a rapidly growing SCD patient population, which has reached “emergency status” according to a local hematologist.2 Given the need for frequent blood transfusions by SCD patients, the high priority of SCD among USPHS Commissioned Corps leadership,3 and the opportunity that the Symposium’s location presented, public health action became necessary.

The Scientist Professional Advisory Committee (SciPAC) Visibility Subcommittee hosted the Battle of the USPHS Commissioned Corps Categories Blood Drive on May 7th during the 54th USPHS Symposium in Minneapolis, MN, to address genetic blood disorders, particularly SCD. The blood drive promoted esprit-de-corps through friendly competition to determine which of the USPHS categories had the highest proportion of its officers donate blood. Officers unable to attend the Symposium could donate at a local blood bank of their choice and contribute to their category’s total.

CAPT John Eckert, USPHS Chief Scientist Officer, was the first to roll up his sleeve to donate blood at 0800, and within minutes he was joined by CAPT Suzan Gordon, USPHS Chief Dietitian Officer, in what commenced as a battle for the fastest blood draw. Throughout the day, individuals flowed steadily into the room to donate. The entire event far surpassed expectations and ultimately exceeded the capacity that was anticipated for blood donation. Over twenty walk-ins were turned away because of the overwhelming level of participation. After donating, donors excitedly gathered at the leaderboard to log their donations with a sticker and to check out how the spirited competition was progressing.

When USPHS CC officers see a public health challenge, we respond and exceed expectations. USPHS officers responded to the Minneapolis SCD crisis in a huge way. Through this effort, we will have a lasting impact on this community. Notable impacts of the inaugural Battle of the USPHS CC Category Blood Drive include:

- Nearly 10% of COF attendees donated or attempted to donate blood
- 39% of Symposium participants were first-time donors
- All 11 USPHS Categories participated. Categories with the largest proportion of donations were:
  - Scientist (1st Place)
  - Environmental Health (2nd Place)
  - Dietitian (3rd Place).

In addition to saving lives, USPHS Scientists were able to unite two blood banks—the American Red Cross (ARC) of Minneapolis and Memorial Blood Centers (MBC) in neighboring St. Paul. ARC collected donations during the COF blood drive. Notably, Dr. David Mair, Senior Medical Director with ARC Blood Services, Assistant Professor of Laboratory Medicine & Pathology, University of Minnesota School of Medicine, came out to support the event.
and engage officers in discussions about SCD treatment. Officers were also personally invited by Dr. Jed Gorlin, Medical Director and Vice President, Medical and Quality Affairs, to tour MBC. According to Dr. Gorlin, MBC has had a sickle cell program for over twenty years and supplies Children’s Hospital and Hennepin County Medical Center with matched blood for chronically transfused patients with sickle cell anemia. On May 9, RADM Kelly Taylor (Chief Environmental Health Officer), CAPTs Gordon, Eckert and Sara Newman, LCDRs Shondelle Wilson-Frederick and Israel Cross, and LTs Lacreisha Ejike-King and Valeria Moore, along with local SCD advocate Mrs. Rae Blaylark, toured MBC’s donor facility, various laboratories, and received an overview of their operational processes.

Our efforts to combat SCD will not end with the Symposium. The USPHS Prevention through Active Community Engagement (PACE) Sickle Cell Disease Workgroup is actively being formed to sustain our efforts nationwide. This multi-disciplinary team of USPHS CC officers will work to advance the priority of ADM Brett Giroir and VADM Jerome Adams to improve the quality of care for people living with SCD.

What began as a modest notion to raise awareness about SCD and genetic blood disorders in one community has blossomed into a nationwide effort to address this public health issue led by USPHS Scientists The Battle of the USPHS CC Categories Blood Drive and its subsequent community outreach are truly a demonstration of the 2019 Symposium theme: “Better Health through Better Partnerships.”

References:

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utilization of mental health treatment services. It is clear that the “SAT” in the AAPI community has taken on new meaning: stigma, alienation, and trauma.

In response to the urgent needs of the AAPI, APAOC’s Community Engagement Workgroup has collaborated with SAMHSA and AAHI to create HMI. The purpose of HMI is two-fold: improve mental health literacy in Asian American communities and address the stigma and cultural barriers faced by Asian American youth and communities when seeking treatment for mental health. Over the last year and a half, SAMHSA and AAPI played a critical role in training and educating many Commissioned Corps officers to deliver key mental health messages in their respective cultural communities. In addition, AAHI has provided thirty-six Mental Health First Aid certifications and supported trained officers in over fourteen outreach events and community workshops that have been hosted in Montgomery County, MD, to promote mental health in AAPI communities.

The passion, dedication, and inspiration of our officers supporting HMI continues to expand mental health awareness and reduce stigma of mental health among AAPI not only in Montgomery County, but in other parts of the greater Washington, DC, area and other surrounding areas in our nation. Collectively, we will continue to work together and further break down the barriers associated with mental health awareness and treatment in our nation.

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until reviews and analyses are conducted, metrics defined, plans developed for mitigating any gaps in health care services, and a public forum created to air the concerns of covered beneficiaries.

NDAA and PHS
Most provisions in the annual NDAA are not remotely relevant to the USPHS Commissioned Corps. But salted throughout this year’s bills are references to congressional concerns about adequate mental health care for armed services personnel. Section 715 requires the Defense Department to develop a “comprehensive policy” for providing mental health care to armed services personnel. Mentions of mental health care surface elsewhere as well. Section 717 orders the Defense Department to report on the shortage of mental health professionals and calls for a strategy to recruit more of them. Other NDAA provisions mention treatment for PTSD, suicide prevention, medication-assisted therapy for opioid use, and access to care for service members who are victims of sexual assault or domestic violence.

Taken together, all this seems to me to suggest an opportunity for PHS mental health providers to help expand mental health care for service personnel, including those suffering from PTSD. Is that a possibility? COA expects to be asking this question.

Where Things Stand
As I write, both chambers’ versions of the NDAA are before a joint House-Senate conference committee. The conference committee will reconcile differences in the bills and come up with a reasonable compromise that both chambers can support, and that Congress will vote into law.
For three days in mid-July, I had the privilege of visiting with COA members who live and work in the Four Corners region. For those who don’t know where that is, “Four corners” is where the States of Arizona, New Mexico, Utah, and Colorado touch each other. It’s the only place in our country where four States do that. My road trip is part of a larger effort for COA to learn more about our members so we can better explain the impact you’re having as uniformed health professionals.

The Four Corners area is home to about two dozen Indian Health Service facilities. Most of the land belongs to the sovereign Navajo Nation and the other federally recognized tribes of Hopi, Ute, and Zuni.

Road Trip

CAPT Brian Johnson, Acting Director, Navajo Area Indian Health Service, had approved of my visits in the service area. I thank him and the many officers who helped to coordinate access to their facilities.

Starting in Phoenix, I drove 222 miles north through Flagstaff and stopped in Tuba City, AZ, to visit with COA members working at the Tuba City Regional Health Care Corporation, a tribally-operated 638 program. From Tuba City, I drove 75 miles northeast to Kayenta and met with a COA member at the Kayenta Health Center. The Kayenta Service Unit of IHS serves a population of 20,000, while the town of Kayenta has only 5,000 people. Kayenta provides outpatient and emergency services, plus some surgery.

The next day, I drove 55 miles to Red Mesa and the Four Corners Regional Health Center. The facility offers ambulatory care services for 7,000 patients. Officers serving in Red Mesa are way out there. A beautifully sparse area, the population of Red Mesa is about 500 people. From Red Mesa, I drove 45 miles east to the Northern Navajo Medical Center (NNMC) in Shiprock, NM. The largest service unit in the Navajo Nation, the NNMC is a huge facility with dozens of PHS officers working to serve over 80,000 patients. From Shiprock, I headed south for 97 miles to Gallup and met ten COA members for dinner. Most of the PHS officers work at the nearby Gallup Indian Medical Center, which is a 99-bed hospital.
and sees about 250,000 outpatients visits each year. Located along historic Route 66, Gallup is a convenient spot for anyone who likes outdoor fun.

On my third day, I drove 34 miles to the Tséhootsoolí Medical Center in Fort Defiance, AZ, and shared breakfast with COA members there. The tribally-operated 638 program offers many services including pharmacy, a dental clinic, eye clinic, emergency department, radiology, and a mobile health clinic to reach patients who cannot access the facility. My final stop was Winslow, AZ, 139 miles west of Fort Defiance and home to the Winslow Indian Health Care Center. (Author’s note: Winslow was made semi-famous in “Take It Easy” by The Eagles, a 1977 hit song). The WIHCC is an ambulatory care center which sees about 190,000 outpatient visits annually. I met with half a dozen PHS officers working in medicine, pharmacy, and public health nursing. After another positive experience in the field, I drove a short 202 miles back to Phoenix.

What I Learned

COA members in the Four Corners region are truly doing God’s work. They go without the conveniences often found in large cities and embrace the opportunity to provide clinical care and manage programs which benefit underserved and marginalized populations. Some PHS officers hail from the tribes they now serve in uniform. Many others choose to work in Indian country and learn quickly whether it’s a lifestyle they enjoy.

Working in remote healthcare facilities comes with the common challenge of recruiting and retaining enough staff to care for the patient population. COA members understand this well and appreciate the HHS effort to detail new Calls to Active Duty/Regular Corps officers to duty stations in IHS, BOP, and the ICE Health Service Corps.

COA members in the Four Corners region also understand the HHS shift to a more clinically competent uniformed service. Since many of the officers are already clinical, they get it but they’re not sure what else to do. Members frequently mentioned how they’re so busy treating patients and working on clinical committees that they have little time for PHS-focused activities which may fall into the “officership” bucket for promotion. Other COA members believe the HHS focus is shifting from public health to health care and, if they’re in a non-clinical billet, they are unsure whether their jobs will remain available.

Being ready to deploy is simply a fact of life in the uniformed services. Unlike sister services with force management and line items for personnel funding, PHS officers are more beholden to the agencies which employ them than to the Department which commissioned them. The supervisors of PHS officers working in the remote Four Corners region often outweigh any request for emergency response elsewhere with priorities of the agency. It makes sense. Many of the duty stations are understaffed. PHS officers working there are mission critical. COA is working diligently to support a proposal from HHS to authorize a Ready Reserve Corps. Members of the future reserve component would be able
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asked if I might say a few words. He readily agreed, and I started thinking at that point about what I might say. The ceremony took place at Food and Drug headquarters at White Oak, and we were in a nice room that had a plaque mounted on the wall behind the speaker’s podium. The plaque commemorated the 100th anniversary of the FDA, 1906-2006. That suggested part of what I would say to the crowd, because the establishment of the FDA through the Pure Food and Drug Act of 1906 represented an act of leadership by many individuals: Dr. Harvey Wiley, President Theodore Roosevelt, and certain members of Congress.

The law was inspired by a journalist, as many of you probably know. Upton Sinclair was what we would call today “an investigative reporter,” though he was more a novelist, and he wrote an expose of the meat-packing industry, a best-selling book titled *The Jungle*. If you have never read this book, you should do so. Read it after dinner, not before. President Roosevelt read the book and thought something needed to be done to protect the American consumer from adulterated food and rugs. Harvey Wiley was a medical doctor and chemist who introduced the scientific method into the study of food adulteration. We take for granted today that the federal government should study drugs before they are offered to the public, and inspect meat that is sold to consumers, but in the early twentieth century, many political figures saw this as too much federal power. It took many years and a long fight before the 1906 act—also known as the Wiley Act—became law. It took leadership that refused to back down in the face of opponents who believed that the marketplace would take care of all concerns about bad drugs and tainted food. Telling this story, briefly, was how I started my talk at CAPT Woo’s ceremony.

I taught for eighteen years at one of the Defense department’s “senior service colleges”—commonly called “war colleges”—at Fort McNair in Southwest DC. In a ten-month course of study we offered O-5s and O-6s from across the military services the opportunity to learn broadly and think strategically. We offered them a course in strategic leadership. All of these officers had been successful leaders at the tactical and even operational levels. But few of them had risen to the strategic level. We helped them learn what it meant to lead at that level, where you are concerned with the great currents that move countries and determine their fate, and not with whether your troops can take the hill or defeat the enemy’s ground forces. Of course, you have to win the ground and air and naval battles, but what do you do when that is accomplished? The nineteenth century Prussian military thinker Carl von Clausewitz laid out the purpose of warfare in one succinct sentence: “War is the continuation of politics by other means.”

You as public health experts also fight on different levels. Tactical might be that of curing the patient or cleaning up the water supply or vaccinating a child. Operational might be that of creating a sanitary water system that is protected against contamination. Strategic might be helping people live healthier lifestyles, not becoming obese, and never using tobacco, helping pass laws that protect people against those who would exploit them. It’s not so different today from 1906. We still have to fight the forces that...
denigrate public health as indications of a “nanny state.”

Countries can save lives and dollars by preventing disease, rather than curing it, but we all know that securing funds for prevention is very hard, while securing funds for cures is much easier. It’s sort of like building lighthouses in the old days. We instinctively knew that placing a lighthouse near an area of shoals would save lives, but it was hard to measure how many. We went ahead and built the lighthouses and prevented the shipwrecks because we wanted to save lives.

I titled this column, “Leadership is more than a Rank,” because far too many people achieve rank and think that makes them a leader. Leadership, I submit to you, is a state of mind. Leadership—as displayed by Dr. Harvey Wiley and President Theodore Roosevelt—is a willingness to take political risks. It’s going where you ought to go, even if your constituents have not yet figured out that that’s where they ought to be.

Too many political figures today are governed by polls and what their constituents supposedly want. That’s not leadership. It’s pandering. Leadership is laying out the case for what needs to be done and persuading people to support it. Change is always hard, and getting people to accept change and embrace it involves leadership.

Most of you probably remember last year at this time when the Office of Management and Budget (OMB) proposed cutting the Commissioned Corps by forty percent. Their rationale was based on a 1996 GAO report that said that you all in the Commissioned Corps were nothing more than civilians in uniform and that you could easily be replaced by cheaper civilians. The GAO was probably right in saying that the technical aspects of many of your day jobs could be performed equally well by civilian government employees. What they missed is the leadership you offer when you are deployed to the scene of a natural disaster. It is a truism that people turn to uniformed personnel when there is a disaster.

They look to the person who carries themselves with authority and confidence and who seeks the challenge. Some civilians can also offer leadership. Of course they can, but they are not trained to step forward and demonstrate it like you are. I will say here that ADM Brett Giroir, Assistant Secretary for Health, demonstrated his leadership by working with OMB to remove this immediate threat to the Corps. ADM Giroir took a political risk in doing so, but he thought it through and took the risk.

I go back to CAPT Woo. For the past several years he has offered leadership training to Corps officers on a voluntary basis. Commissioned Corps headquarters was not offering this training, unlike the military services, which provide such training opportunities throughout a career. So, CAPT Woo offered book clubs to interested officers, and he offered sold-out multi-day leadership sessions before each of the past few Symposiums. The demand was enormous, because PHS officers understood that leadership can be taught and that they needed the classes. We’re not sure what will happen now that CAPT Woo has retired, but the need for leadership training remains.

Leadership is more than rank. It is a willingness to take calculated risks and to stand up for those who serve under you. It is about being willing to speak out on behalf of those who report to you, whether you have one person under you or several hundred or several thousand. Leadership is about doing what is right, even if it involves some degree of personal risk or career risk. Leadership is what distinguishes you from those who don’t wear uniforms. You can be the best physician or nurse or pharmacist or engineer anywhere. You can be the most technically-competent person in your organization. But unless you are also a leader, your uniform means little. The GAO would then be proven right. You should be replaced by civilians, because uniforms should be reserved for leaders, of whatever rank and in whatever uniformed service they serve our country. You are a Commissioned Corps officer. You are a leader.
Fighting Bioterrorism in the Laboratory

Dozens of industrial chemicals that are deadly to humans have no antidote and could potentially be used as weapons of terror. Together with his research team, Michael P. Shakarjian, Ph.D., assistant professor of public health in the Division of Environmental Health Science and director of the Master of Public Health (M.P.H.) Environmental Health Science Program at New York Medical College (NYMC) School of Health Sciences and Practice (SHSP), is focused on one already being used on the other side of the world.

Dr. Shakarjian's many research activities include investigating countermeasures against dermatological and neurological poisons at one of NYMC’s on-campus laboratories. His research focuses on investigating the effects of a seizure-inducing rodenticide that has been responsible for thousands of accidental and intentional poisonings. With his collaborators, Dr. Shakarjian is searching for the most effective treatments for the convulsant syndrome produced by this poison. His support for this project comes from the National Institutes of Health (NIH) Countermeasures Against Chemical Threats (CounterACT) Program and the NYMC Intramural Sponsored Research Program. Prior to his academic career, Dr. Shakarjian spent ten years in the pharmaceutical and biotechnology industries where he was involved in the research and development of small molecule and protein-based therapeutics.

NYMC faculty are active practitioners and researchers and NYMC toxicologists are actively involved in many important and timely research projects, like Dr. Shakarjian’s. Enhance your career. Learn analytical and problem-solving skills as well as how to communicate with technical experts and non-technical constituents. Apply now at www.sophas.org for the online M.P.H. in Environmental Health Science or the Advanced Certificate in Environmental Health Science, and receive a 50% tuition discount for fall 2019. The M.P.H. curriculum includes compliance, environmental monitoring or audits, inspections and permits, water quality, food, sanitation or air quality; the Advanced Certificate in Industrial Hygiene may be combined with the M.P.H.

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Taylor, CAPT Kofi

2019 Award Recipients (each award is unique to its CMAG):

American Indian/Alaskan Native Commissioned Officers Advisory Committee (AI/ANCOAC)

RADM Brandon Taylor – RADM George Blue Spruce Jr. Flag Officer Award

CDR Angela Fallon – Dr. Taylor McKenzie Senior Officer Award

LCDR Erica Zimprich – Annie Dodge Wauneka Award

LCDR Lenora Littledeer – Elizabeth Peratrovich Leadership Award

LT Kenneth Stearns – Junior Officer Award

Asian Pacific American Officers Committee (APAOC)

CDR Karen Ho Chaves – RADM Samuel Lin Senior Officer Award

LCDR Xinzhi Zhang – RADM Kenneth Moritsugu Junior Officer Award

LCDR Oliver Ou – CAPT Allan Lock Service Award

Black Commissioned Officer Advisory Group (BCOAG)

CAPT Hilda Douglas (ret) – Retired Public Health Service Officer Recognition Award

CAPT Shary Jones – CAPT Hildrus A. Poindexter Award

CAPT Morissa B. Rice – John C. Eason Responder of the Year Award

LCDR Andrew Gentles – RADM George I. Lythcott Award

Hispanic Officers Advisory Committee (HOAC)

CDR Mizraim Mendoza – VADM Richard H. Carmona Award

LCDR Muñiz Ortiz – VADM Antonia C. Novello Junior Officer of the Year Award
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to backfill positions of Regular Corps officers when they deploy and help to ensure adequate staffing in mission critical positions.

Another lesson I learned from the visits was seeing the strong commitment members have for connecting with each other and building esprit de corps. Without any similar network supported by HHS, PHS officers turn to involvement in COA Local Branches as their way to connect and to participate in community volunteer activities. COA fully supports involvement with Local Branches. We encourage all members to submit a request for approval of outside activities, using form HHS-520, whenever participating in Local Branch activities.

My July road trip was approximately 870 miles, a wonderful experience that taught me a great deal, and was completely worth it for me and the COA members with whom I met. Most of the members mentioned this was the first time in twenty years that someone from COA had visited their duty stations. For some members, it was the first time ever. COA shouldn’t wait another twenty years to visit members working in the Four Corners region.

Special thanks go to CDR Reasol Chino in Tuba City, CDR Paul DeWitt in Kayenta, CAPT Julie Niven in Red Mesa, LCDR Janet Hayes in Shiprock, LCDR Neha Patel in Gallup, LT Kaley Dorsey in Fort Defiance, and LCDR Susan Clauschee in Winslow.

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From left, CDR Reasol Chino, LCDR Annie Edleman, John McElligott, LT Rachel McBride, and LT Sita Shablack outside of the Tuba City Regional Health Care

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From left, CDR Janet Hayes, LCDR Melissa Schossow, John McElligott, and LCDR Shealyn Lucero inside the Northern Navajo Medical Center in Shiprock, New Mexico

FOUR CORNERS from page 15

From left, CDR Janet Hayes, LCDR Melissa Schossow, John McElligott, and LCDR Shealyn Lucero inside the Northern Navajo Medical Center in Shiprock, New Mexico

USPHS Nursing Category 75th Anniversary Gala

The USPHS Nurse Professional Advisory Committee (N-PAC) cordially invites you to join us for a formal gala in honor of the USPHS Nursing Category’s 75th Anniversary. We would be honored to share this special occasion with you as we mark this extraordinary milestone and celebrate the continuation of an innovative and distinguished nursing profession.

Friday, October 25, 2019, at 6:00 pm

Crystal City Gateway Marriott, Arlington, VA

Tickets are $75 per person. Purchase them by September 15 online at http://usphsnursinggala.rsvpify.com

Uniformed service members should wear either Dinner Dress Blue Jacket or the Dinner Dress Blue, which is Service Dress Blues worn with miniature medals. Civilians should wear formal attire.

USPHS Nursing Category 75th Anniversary Gala

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^ C. Everett Koop Living Legacy Fund
$ Disaster Relief Fund
All other donations were made to the COF General Fund
We Welcome New Members of COA, 
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LT Lola Adeniyi  
Dr. Grace Appiah  
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mission also strengthened community ties and supported the U.S. Public Health Service Commissioned Corps mission. RAM Mission and RDF-5 Administration Section Chief, LCDR Christopher LaFleur, said, “After working alongside fellow officers, RAM staff, and volunteers during this mission and seeing the positive impact that we had on this underserved population, I saw firsthand how better health was provided through better partnerships.”

Respectfully submitted by LT Jenna Cope and LCDR Tyann Blessington

Public Information Officers, Minneapolis, MN RAM Event