2017: The Year in Review

As I have done in past years, I will recap the just-completed year by highlighting some of what happened within the Commissioned Corps of the US Public Health Service, with special emphasis on COA’s activities during the year.

January started auspiciously with signing of a Memorandum of Agreement between the Veterans Affairs Department and the Public Health Service under which up to 30 officers from the Commissioned Corps (20 physicians, 10 nurses) will be assigned to billets at the VA. Upon inquiry, COA leadership was told that there would initially be 5 physicians assigned to the VA from the PHS. As of the date of this article (16 January 2018), just over a year after the MOA was signed, there have been no assignments of PHS officers to VA billets, though a Liaison Officer has been named.

At 0400 on 28 November 2017, RADM Michael Iademarco’s telephone rang. The caller, speaking Italian, informed him that she was calling on behalf of the mayor of the Italian town of Mirabello Sannitico. Iademarco had been selected as an “Ambassador of Molise in the World,” representing the village where his grandfather was born. Competing with 136 other Italian towns and cities, Mirabello had nominated him for the honor, which recognizes meritorious professional achievement among those with ancestral ties to Molise. There was one catch: if he did not show up to receive the recognition in person eight days later, the honor would go to a nominee from another village. The next day, after talking it over with his supervisor, he let the town know he would do his best to attend.

Molise is one of twenty regions in Italy, the equivalent of a U.S. State. In 1911, at the age of sixteen, RADM Iademarco’s grandfather emigrated from Mirabello to Philadelphia. No descendants returned to the village until the 1990s, when Iademarco prompted his cousin, then living in Rome, to visit. Subsequently, Iademarco and other relatives vacationed in the village many times, appreciating the agrarian culture and ancestral connection.

Iademarco had to act quickly if he was to meet the arrival deadline. As this was a personal trip, he had to request and receive leave. As an Officer of the U.S. Public Health Service Commissioned Corps, Iademarco knew that although this was a personal achievement, he needed official vetting prior to accepting the honor. He immediately sought the advice of the CDC Ethics Office to ensure that acceptance of such a honor would not violate the emoluments clause of the U.S. Constitution.* In addition, he sought and quickly obtained official approval to receive the honor in uniform, documented in a memo signed by the Surgeon General. Further, Iademarco notified and received consent from the U.S. Mission to Italy in Rome, through the
Helping Our Own

As you all recall, we went out to the COA membership a few months ago and asked for donations to assist PHS officers whose homes were damaged by recent weather events in Texas, Florida, Puerto Rico, and the U.S. Virgin Islands. We did not know whether there would be such officers, and we stretched our net wide to try to capture any who were harmed by the water and wind. You were most generous with your donations, and the Golden Gate (San Francisco) Branch of COA even put on a special fundraiser selling PHS hoodies and raised over $5000 for the relief fund.

We eventually identified two officers whose homes were damaged. We have provided checks to them from the Commissioned Officers Foundation for the Advancement of Public Health.

An officer whose home had been damaged by flooding in the Houston area had the following to say after receiving the COF check:

“It is a wonderful Christmas gift for our family. The money will help toward completing the repair of our home (hopefully before Christmas or by the end of the year). My family and I want to express our heartfelt appreciation to you, the COA and PHS Commissioned Officers Foundation for looking after its officers like me in our time of need. I felt helpless and lost during the flooding of our one year old/new home from Hurricane Harvey. You ensured my family and I were safe and provided words of comfort, emotional security and the support we needed to go through the devastation effects of flooding. I could not be prouder to be part of the COA and PHS Commissioned Officers Foundation than I am now. It is like having an extended family, who knows when to lend a helping hand. Thank you for giving us a hand and your continuing support.”

An officer whose home in Puerto Rico was damaged wrote the following:

“Thank you very much for the kind and generous assistance. Please extend my gratitude, that of my family and fellow officers to your team, the foundation and its committed donors. It has been almost 90 days without power. Water service was restored last week . . . . I am still trying to fix parts of my home. My wife has been very active in the recovery distributing water filters and providing other aid. Recovery will take a long time but thanks to many groups helping I am hopeful we will recover. Wishing you health.”

The first of these officers is assigned to the Federal Bureau of Prisons, and the other is at the Centers for Disease Control and Prevention. We notified the directors of these agencies and received very nice acknowledgements from them. We also notified the Surgeon General and the Deputy Surgeon General of our efforts.

We at COA and COF want to thank all who donated to this relief effort. We send a special thanks to the Golden Gate Branch of COA, whose members showed just what a dedicated and determined and compassionate group of PHS officers can do. “Helping Our Own” is more than just a slogan; it is the reality of what COA and COF are to the Commissioned Corps.

Col. Jim Currie, USA (ret.), Ph. D.

Executive Director
Inspiring the Next Generation: 
Braddock Elementary Annual Health Event

by Timothy Martin, LT, United States Public Health Service

“Whoa! Is he real?” This question of astonishment from a 3rd grader is what I heard as I hustled by. I was wearing my Service Dress Blues, quickly walking the halls of Braddock Elementary as I prepared for the annual Walk-A-Thon health event. After overhearing the question, I stopped in my tracks, turned, and smiled at the child who asked the question. He responded with an ear-to-ear grin. I continued on my way, proud to know that our group of PHS Commissioned Corps officers there that day were impacting the students more than just in our health education objective.

On Veteran’s Day celebrated, November 10, 2017, a group of nine PHS officers, including myself, met at Braddock Elementary in Annandale, VA, to educate the school children on healthy living and healthy eating. The school hosted the annual health event on their grounds, where the children went through a series of physical and educational activities both individually and in small groups. The event had school-wide participation, and the students were eager to learn. Over 900 children and adults engaged in over 20 activity stations that empowered them with tools for a healthy future.

Despite the untimely cold-snap, Commissioned Officers Association (COA) PHS officers showed up, literally and figuratively. The event was co-led by LT Timothy Martin and LT Tramara Dam and would not have been such a success without the help of an amazing group of officers: LT Edward McDonald, LT Yajun Tu, LT Aaron Patterson, LT Jennifer Weekes, CDR HyeJeong Bolan, LCDR Leslie Rivera Rosado, and CDR William Bolduc. We represented a diverse group of PHS categories including engineer, pharmacist, nurse, social work, and scientist. Our group dedicated our day to giving back to the community by contributing to several National Prevention Strategy Directions and Priorities: Empowered People, Elimination of Health Disparity, Active Living, Healthy Eating, and PHS awareness.

The goal for the health event was to educate the children on who the officers of the PHS are, to stress the importance of handwashing, and to promote staying physically active. Our officers led events at three activity stations including the “army crawl” station, team-building station, and health education station. Specifically, at the “army crawl” activity station, officers taught the children how to army crawl and stressed the importance of being physically active. At the team building activity station, officers taught the children the importance of team work in accomplishing goals and how to balance the team’s strengths and weaknesses. The officers stationed at this activity station helped the children form teams that were tasked with holding onto a jump rope while navigating a series of cones. At the health education station, officers taught the children who the officers of the PHS are and what role they play in the country and community along with the importance of handwashing. The officers stationed at this activity station educated the children on what germs are, where they come from, and how to keep themselves protected with proper handwashing. The officers also acted as role models, and encouraged the children by explaining how they could become professionals with a future in the Public Health Service as Commissioned Corps officers.

As the Walk-A-Thon health education event wrapped up, Keisha Jackson-Muir, the school’s principal, gave us the warmest and sincerest thank you. She emphasized the great impact we made on the children and that we would be the talk of the school for the next several weeks. We left that day knowing that we gave the children more than health education; we inspired a new generation of children into knowing that they too can follow in our footprints and become leaders that contribute to a healthier nation.

Obituary

CAPT Catherine Annette Byrne, age 69, who retired from the Commissioned Corps in 2006, has recently died at her home in Cape Coral, FL. Among her survivors is her daughter, COA member CAPT Diane L. Kelsch, USPHs.
COF President’s Corner

by RADM Michael R. Milner, President, COF Board of Trustees

January Foundation Board of Trustees President

RADM Michael Milner, USPHS (ret.)

Hard to believe that our “family reunion” in Dallas is just four short months away. Time really does fly when you’re having fun. Being your Foundation President has been a great privilege and an honor and I really have had a lot of fun. I am coming down the home stretch of my two years as COF Board of Trustees President and close in on six years as a member of our board of trustees. The time has gone so fast.

Looking ahead at our Dallas gathering, I am excited to know that our planning committee is hard at work. We have a great list of speakers, current topics and some wonderful new exhibitors planned for you. Our COA/COF staff along with our CME planner, Tim O’Neil from Leading Edge, have been hard at work planning for YOU, the question is…HAVE YOU BEEN PLANNING FOR DALLAS? With the new year now in full swing, I hope that each of you can make a commitment to “vote with your feet” (as my former mentor RADM Ken Moritsugu always said). Registration is open along with our hotel block, so please take a few minutes after reading this monthly update to register.

The COF Board of Trustees will host our quarterly telcon in late January and will be voting to update our Foundation Investment Strategy so that we are keeping in line with our values for strong growth of our endowments. Thanks to our treasurer, Bill Haffner, who led the detailed work necessary to update our policy. Kudos as well to Michael Terry, Foundation Trustee whose professional occupation is that of investment strategy advising. Michael’s input was very valuable. Pulling together the knowledge and skills of trustees to help us ensure our sound, solid financial footing has been aided by our Executive Director, Colonel Jim Currie.

We are also looking at ways to improve the flow of funds into our endowments. We have been blessed by unexpected donations from the estates of former officers in the recent past who knew the value of our Foundation and Association. They knew how hard both groups have worked to lobby on YOUR behalf for parity with our sister uniformed services as well as working on your behalf to keep the American public aware of the hard work each of you contribute day to day to protect, promote and advance the health and safety of our great Nation. I hope that many of you took time to make a pledge or donation to the COA/COF at the close of 2017 after RADM Clara Cobb’s outreach to you in December. If you didn’t make a pledge or donation in 2017, then please consider making a pledge or New Year’s Resolution to financially support our Foundation in 2018. There are many ways to do this like setting up a monthly giving plan through your financial institution; you’d be amazed at how much can accrue over the course of a year. Consider adding a codicil to your Will naming the COF as a beneficiary for any amount, large or small. If you do this, please let John McElligott know, and we’ll add your name to the John Adams Society of donors. You might also consider making an allotment thru the Combined Federal Campaign and direct the funds to COF. You can find our CFC donor number on our website.

I have been reaching out to various COF Trustees in the past couple months to encourage them in moving into new leadership roles. I will be joining three other Foundation Trustees in July as our terms of office as trustees come to a close. Ensuring that the Foundation is in good hands will be critical over the next few months and I’m glad to be aided by RADM Dick Bertin in this endeavor. Dick is chair of our Nominating Committee and will be working tirelessly in the coming months with his committee to vet all nominees. Some incredible names have been floated so far and I have a few more one-on-one telephone calls with folks who have been put forth to join our board. Our goal is to broaden our Trustee base and bring on folks willing to work hard to promote our organizational values. Expanding our influence in the broader national public health arena and continuing to advance our endowment so that we have the resources to meet our future missions will be important characteristics for all new Trustees. If you have any suggested nominations for our Foundation board, please share them with me or with RADM (ret.) Dick Bertin.

As I close this months’ Frontline article, let me say again how proud I am of all that each of you do day-to-day to allow your fellow citizens to sleep well at night. As one of those citizens, I appreciate your work and your sacrifice. Please stay safe in your day to day work and in your off-duty life as well. I can’t wait to see all of you in Dallas in early June.
Golden Gate COA Members Deployed to California Fires

by CDR Tamy Leung and LCDR Annie Lam

On October 12 and December 6, 2017, several Golden Gate COA (GGCOA) members deployed to the Sacramento Medical and Health Coordination Center (MHCC) and the Cal State Operations Center (SOC) in support of the California fire relief efforts. CDR Leung and LCDR Lam belong to the Region 9 –Regional Incident Support Team (RIST), and they volunteered to assist with deployment requests for the Northern and Southern California fires. Their role was to support the Office of the Assistant Secretary for Preparedness and Response (ASPR) Region 9 Regional Emergency Coordinators (RECs) who had the responsibility of updating several federal agencies on the California fires each day and coordinating any federal assistance if needed.

The Northern California fires had devastating effects: 9000 structures destroyed, 245,000 acres burned, 100,000 evacuees, and 44 deaths. At the MHCC, the officers listened to all the briefings regarding medical taskings, shelter capacity, evacuees situation, hospital status, weather status and other pertinent information. During the height of the northern fires, there were 8-10 briefings or teleconferences a day.

RIST team members drafted summaries of these briefings and routed them to the Region 9 ASPR team for assessment. During the Southern California fires, CDR Leung along with the State counterparts called over 200 health care facilities in San Diego County to assess their operational status. The data were compiled and analyzed by the Licensure and Certification section to evaluate for gaps in medical needs.

Other GGCOA RIST team members include CAPT Jane Kreis (RIST-9 Team Leader), CDR Gloria Rodrigues, LCDR Christy (Renee) Adams, LCDR Joseph Seitz, LCDR Jason Wilken and LTJG Sara Richardson. Overall, the GGCOA officers gained valuable insight in the federal coordination for disaster and relief management.

Billets at the VA

On 13 April 2017 then-Surgeon General VADM Vivek Murthy sent a memorandum to members of the Commissioned Corps addressing an issue which had been fermenting for a very long time: PHS billets at the VA. “It gives me great pleasure,” wrote the Surgeon General, “to announce a partnership between the Department of Veterans Affairs (VA), the Veterans Health Administration (VHA), and the United States Public Health Service to improve the health and well-being of our Nation’s veterans.”

VADM Murthy went on to say that under the Memorandum of Agreement (MOA), “Commissioned Corps officers will be able to provide direct care to veterans in VA hospitals and clinics.” He added that, “There will be a limited number of officers selected initially with preference given to new recruits.” He also expressed a desire to avoid any harm to the Indian Health Service.

Feedback to COA from PHS officers in the field was immediate. Many COA members would very much like to serve at VA facilities. COA was delighted with this announcement and immediately sought a copy of the MOA. We were told that we could get one only by filing a Freedom of Information Act request, which we did. When we finally obtained the MOA we found that billets at the VA were limited to thirty officers: twenty physicians and ten nurses. No other categories would be included at this time.

As of this writing (mid-December 2017), there are no PHS officers assigned to the VA. Surgeon General Adams announced during his presentation at the AMSUS conference on 29 November that a PHS Liaison Officer had been named.

COA has discussed these billets with VA Secretary David Shulkin, who told us that he wants as many PHS officers as can be sent to the VA. COA continues to believe that more officers should be assigned and that additional categories of PHS officers should be allowed to apply for VA billets. We will continue to work for these changes in the current MOA, but as of now, the possibility of any given PHS officer being able to work at the VA is not a reality.
AMSUS, the Society of Federal Health Professionals, held its 126th Annual Meeting at National Harbor, MD, during the period 28 November through 1 December. Public Health Service officer COA members were well-represented among attendees, session presenters, and award recipients.

Monday featured a series of sessions under the title of “US Public Health Service Leadership Session: Global Stakeholder Interagency Coordination and Collaboration.” PHS officers leading these sessions included COA members CDR Damon Smith and CDR Bobby Rasulina.

The third session of the afternoon was titled, “Patient Movement: The Hail Mary of Public Health Emergency and Disaster Response.” CAPT David Lau, a COA Board member, was the lead on this session, joined by CDR Cheryl Fajardo.

The fourth session was “Leadership at the Domestic-International Interface: ASPR’s Division of International Health Security.” CDR Cody Thornton led this event. The final in this series on Monday afternoon was “Following the FDA Opioids Action Plan: An Overview of CDER Opioid Advisory Committees,” led by LCDR Stephanie L. Begansky and CDR Diem-Kieu Ngo.

All of these sessions were much better attended this year than was the case with the 2016 comparable sessions, and audience interaction with the presenters was quite lively.

Simultaneous with these sessions RADM Pam Schweitzer, Chief Professional Officer of the PHS Pharmacy Category, conducted a series of sessions for the benefit of the twenty or so pharmacists at the AMSUS conference. The first of these sessions was on the topic of “Pharmacist Roles in Deployments,” and COA members who spoke were CAPT Bill Pierce and CDR Selena Ready.

Surgeon General VADM Jerome Adams was the main speaker at the plenary session on Wednesday morning, and he did a terrific job of representing the Commissioned Corps and helping the audience of over 1000 attendees from all the uniformed services and twenty or so foreign countries understand more about the Public Health Service Commissioned Corps and what it does for our country. Surgeon General Adams is a dynamic and believable speaker, and his hour-long presentation concluded with a discussion of what he termed his “Calls to Action,” which were as follows:

- Expand the definition of readiness to target community health
- Leverage our roles as leaders and role models
- Convene leadership to expand and enhance engagement between fellow uniformed services and the Department of Veterans Affairs
- Embrace “Better Health Through Better Partnerships.”

Thursday evening was the AMSUS formal dinner, at which PHS officers and other attendees donned their finest uniforms and displayed their medals and awards. PHS officers were well-represented among those to whom awards were given.

LCDR Tonya H. Kelley was recognized with the “Junior Public Health Service Female Physician Leadership Award.” Another PHS officer who is not a COA member received the “Senior Female Physician Leadership Award.” COA member CAPT Vicky Ottmers was recognized by AMSUS with the “Dentist Award,” while LCDR Jeffrey Ball was given the “Management & Administration Award.” PHS Rapid Deployment Force Team 3 was given the AMSUS “Humanitarian Assistance Award.” It was altogether a fine night for the PHS Commissioned Corps, which was represented on the main stage by DCCPR Director RADM Joan Hunter.
RDF-5 Deployments for Unprecedented Atlantic Hurricane Season

by LCDR Stephanie Magill and CDR Mark Sellers

During three hurricane deployments in the fall of 2017 Rapid Deployment Force-5 (RDF-5), “Tip of the Spear,” maintained its distinction as a leading deployment response force within the U.S. Public Health Service Commissioned Corps (USPHS). The Atlantic hurricane season produced 17 named storms, and 10 of these storms became hurricanes. Six were category 3 or higher, and three required a federal response. RDF-5 deployed well beyond the normal two-week cycle, extending the team’s regular on-call month of August through October 2017. Some RDF-5 officers deployed to three hurricanes; Harvey, Irma, and Maria in the span of three months.

Hurricane Harvey—Houston, TX

Seventy-eight team members of RDF-5 deployed to Hurricane Harvey on August 24, 2017. Staging, preparation, training, and coordination with RDF-4 and several Disaster Medical Assistance Teams (DMATs) occurred in Dallas, TX, where the team waited for Harvey’s landfall. Officers reviewed cache inventories and met with their respective sections to plan for staffing a Federal Medical Station (FMS). The team, augmented by officers from Tier 3, traveled via buses to the George R. Brown Convention Center in Houston to manage the FMS and work beside DMATs from North Carolina and Minnesota.

The Assistant Secretary for Preparedness and Response (ASPR), Dr. Robert Kadlec, visited with the team at the convention center to thank them for their efforts. While responders worked in Houston, Hurricane Irma was gaining strength in the Atlantic, and by September 7, 2017, the Virgin Islands and Cuba felt the effects of the storm. Pharmacist LCDR James Haley remarked that during his multiple trainings with the team, it was stressed that each deployment can be very different, and mission objectives often change in scope and focus. This point was driven home for him when transitioned from pharmacy Base of Operations (BOO) coverage in Houston to covering a nurse shift while at the hurricane shelter in Ft. Myers, for which he will always appreciate the role of nurses!

Hurricane Irma—Orlando and Fort Myers, FL

After two weeks of response efforts in Houston, most members of RDF-5 were sent to Atlanta, GA, and Ft. Myers, FL, in anticipation of supporting Hurricane Irma relief efforts. Part of the team took commercial flights, and the other team members were flown by a C-130 military transport to the Orlando airport. This airport was closed to commercial traffic, making coordination of ground transportation to the Incident Response Coordinating Team (IRCT) difficult.

Once they arrived in Orland, the team was divided into four task forces and sent to area shelters to ride out Hurricane Irma alongside community members. Engineer CDR Joshua Simms...
Raising the Cost of Tobacco, Lowering Its Use

by Col. Jim Currie, USA (ret.)
Executive Director

Surgeons General first became involved in anti-tobacco messaging when Dr. Luther Terry issued his 1964 landmark study, Smoking and Health: Report of the Advisory Committee to the Surgeon General of the United States. His successors have expanded upon Dr. Terry’s message, and COA has fully embraced its role as a supporter of public health through its own anti-tobacco efforts.

Shown above is a sign that is placed prominently at the point of sale for tobacco products in the Marine Corps Exchange (Henderson Hall) in Arlington, VA. I took the photo when I visited there on 7 January, and it made me proud of COA, because we were instrumental in working with a member of Congress to make this happen.

The back story is that back in 2015 then-Navy Secretary Ray Mabus, who had already taken steps like ending smoking on underwater nuclear submarines, was seriously thinking about ending the sale of tobacco in Navy and Marine Corps Exchanges. Before he could so, however, a Congressman from California who had received significant campaign contributions from the tobacco industry successfully added an amendment to that year’s House of Representatives version of the National Defense Authorization Act (NDAA) prohibiting the military services from ending the sale of tobacco products in exchanges and commissaries. There was no comparable language in the Senate NDAA, so COA took the lead in putting together what we called the “Ad Hoc Coalition on DoD and Tobacco.” This group included the heart, lung, cancer and dental associations, as well as the American Public Health Association, the Campaign for Tobacco-Free Kids and Action on Smoking and Health.

Our coalition started lobbying Senate members of the Armed Forces Committee (SASC) and urging them to reject the House amendment on tobacco. We had worked our way through most members of the SASC when we visited the office of a Republican Senator who serves on the committee. “You all have scared the **** out of Big Tobacco,” we were told. “As a result, they are following behind you and twisting arms and handing out money.” So, we lost.

In the end, the Senate accepted the House amendment. But we were not done. We, meaning COA, worked with staff for Sen. Richard Durbin (D-IL), and he successfully placed an amendment in the Defense appropriations bill that year raising the price of tobacco sold in exchanges and commissaries to equal those in the communities around them. That’s what the sign shown above is all about. We had to tweak the law a bit, because the first version did not take the exchange’s sales tax exemption into consideration, but the law now requires the pricing to be as indicated on the Marine Corps Exchange sign.

We know from many studies that young people are especially sensitive to price when it comes to starting tobacco use. Raise the price and you lower the usage rate. Studies have shown that somewhere between 36 and 40 percent of current military smokers started after they joined the military. For snuff and dip and chew users the comparable figures are 11 to 23 percent. We believe that by raising the price of tobacco products sold by exchanges and commissaries (which receive their tobacco on consignment from the exchanges), we have stopped many young servicemembers from starting to use tobacco.

We at COA are proud of our effort to “advance public health,” as the title of our Foundation suggests.

COA Staffer Goes Airborne

We don’t often write about COA staff, but we thought it newsworthy enough that we are letting all of our COA members know that Deputy Executive Director John McElligott completed three rigorous weeks of U.S. Army Airborne School on 15 December. John is a First Lieutenant in the Army Reserve and is in a unit that emphasizes the ability to jump out of aircraft in flight with a parachute and land successfully.

We at COA are not exactly how John’s new status will benefit us here at COA, but he has certainly proved his fearlessness by making five jumps and surviving them. He joins COA’s Executive Director, Col. (ret.) Jim Currie as airborne-qualified COA/COF staff. There are many non-profit organizations in the Washington area that work on uniformed service, veteran, and public health issues, but so far as we know, COA is the only one that has qualified fully one-third of its staff to participate in Army airborne operations.
Hurricane Maria Aftermath: My Experience as a Civilian and PHS Officer

by: LCDR Laura E. Garcia

While conducting inspections in Midland Texas, my beautiful island that I call home and where I have lived all my life was devastated by Hurricane Maria, one of the most powerful category 5 hurricanes in Puerto Rico’s history. I had traveled to Texas expecting that, one more time, we would be blessed and the hurricane would take another route and not hit the island, but that was not the case.

The fragile and outdated power and communications systems in Puerto Rico could not sustain the powerful and relentless 175 mph winds. The island became silent and dark during the aftermath. I lost communication with my family the day before the hurricane hit the island. Multiple attempts to call them every day caused a struggle to keep myself balanced. There is nothing worse than the uncertainty of not hearing any news from one’s family and friends for days.

While in Texas, television news and social media presented images of the massive destruction, and damages to the health system, infrastructure and economy of the island. In addition, I observed that basic needs such as potable drinking water and food were scarce, waiting lines for gasoline were endless, banks were limiting the amount of cash that could be withdrawn, and the possibility of flying into and out of Puerto Rico was very limited due to power failures at the airport. I was finally able to establish communication with my family after eight days of waiting. My emotions were high, and I couldn’t resist crying, laughing, and screaming.

After multiple flight cancellations, I was eventually able to fly back home. The island landscape was unrecognizable, the green scenery was replaced by gray, brown, and dusty images of broken trees; in simple words, it reminded me of a war zone from a movie.

As a PHS Officer, I am still waiting to be deployed to fulfill part of my duties. Meanwhile, I worked as a volunteer in a Christian Church, “Catacumba 5”. I was assigned to the Operations and Logistics Section. I had the opportunity to see and experience the enormous and professional job this group is doing to help our communities. They organize missions to bring relief by giving health care, water, and food to rural areas. I traveled to areas that suffered total devastation as they lost everything, including their homes. These missions made a positive impact in the lives of the volunteers despite our own personal struggles. I also participated in two missions with my neighbors where we brought hot food, clothes, and necessities to two different towns that were totally devastated. I worked with volunteers from FEMA, Añasco Municipality Emergency Response Group, physicians from PHM (Preferred Health Medical), and Team Rubicon Disaster Response.

Today, more than two months after hurricane Maria, one-half of Puerto Rico’s population is still lacking potable drinking water and electricity. The Puerto Rico Department of Health reported water-borne diseases such as Leptospirosis causing some deaths, and many hospitals are still operating with back-up generators. Communications continues to be a challenge within and outside the Island. The majority of the mountain towns suffered a lot of damage such as destroyed bridges and roads. The worse situation is that more than 100,000 houses were damaged or destroyed.

We, as Puerto Ricans, have a lot of work to do as a team to recover from this catastrophe. I know that we will stand up better and stronger than ever when this is over.

Heart of America COA Wreaths Across America- “Say Their Name”

by Co-Authors: LCDR Thuy Le and LT Dwight Ferguson

On Saturday, December 16, 2017, nine officers from the Heart of America COA participated in a Wreaths Across America event at Fort Leavenworth National Cemetery, KS. This cemetery, first established in 1862 at Fort Leavenworth, a U.S. Army base, is the resting place for over 20,000 who died during or after service to our country. There are eight Medal of Honor recipients buried in the cemetery. Wreaths Across America is an event to remember the fallen. This year at the Fort Leavenworth Wreaths Across America event, the emphasis was on “Say Their Name.”

As we laid the wreaths on the graves, we said the names of the fallen aloud and rendered a salute. It was a somber but thankful moment to remember the great sacrifices made for our freedoms. Altogether, approximately 7,000 wreaths were laid at Fort Leavenworth. It was an honor to have participated in this event.
As all of you probably know, a new retirement system for PHS officers went into effect for those who joined the Commissioned Corps on 1 January 2018 and after. It contains some of the features of the system that has been in effect for many years, but it throws in some new wrinkles such as a matching 401(k)-type plan and deserves a careful examination for those of you who are eligible to transfer into it.

If you have twelve or fewer years of service as of 1 January 2018, you are eligible to transfer into the new system. If you make no decision you will remain where you are in terms of retirement plans. The financial significance of a decision or a non-decision can be huge. We at COA are not financial planners, so we can’t advise you as to the proper course of action, but we do want you to have the tools to help you make your decision.

The first thing you should do is go to the COA website and call-up the webinar we did on retirement and the new system. This webinar can be found at http://www.coausphs.org/events/webinars/. Look for the webinar entitled, “The New Uniformed Services Retirement System: How Does It Affect You?”

Second, you should go to https://dcp.psc.gov/ccmis/bulletin/Blended_Retirement_System.aspx that refers members to Military One Source for online training. It also refers members to DOD’s three online training programs.

Here’s what our colleagues at MOAA have to say about the new retirement system:

“What it comes down to, is that each individual needs to educate themselves and decide whether or not the new BRS works for them. It should be painfully obvious to those who intend to reach retirement eligibility (already well into a career), to stay under the current system. For those who are 150% sure they’re going to depart prior to 20 years, take the government’s matching funds. For those in-between, they need to work the numbers, make some tough choices/decisions and determine what’s best for them.”

COA can’t make that decision for you, but we hope these resources will assist you in making the most prudent choice about your retirement. It is undoubtedly one of the most crucial financial decisions you will ever make.

Col. Jim Currie, USA (ret.), Ph.D.
Executive Director
USPHS Officers Assist with the Park Prescription Day Celebration in the NPS Golden Gate National Recreation Area

by LCDR Tara Dondzila

As COA Local Branches start planning community activities for 2018, here is a success story from 2017. In April of 2017, the nation celebrated the 2nd annual Park Prescription Day. This day was created to commemorate the Park Prescription initiative, a tenet of the National Park Service’s Healthy Parks, Healthy People campaign, in which medical providers are prescribing time in nature as a way of improving their patients’ health.

Studies have shown that time in nature improves our mental, physical and social health. For instance, time spent exercising outside has been reported to reduce stress and improve attention. Additionally, being outdoors allows us to make vitamin D and to be physically active to prevent the onset of chronic disease. “Walking and having fun in a park is a simple, yet effective, way for Americans to improve their overall health,” said Ram Koppaka, MD, PhD, Regional Health Administrator for the Office of the Assistant Secretary for Health in Region IX of the U.S. Department of Health and Human Services. “We know that an average of 22 minutes a day of physical activity—such as brisk walking—can significantly reduce the risk of heart disease and diabetes.”

Park Prescription Day was a day for people to do just that -- walk in a park and celebrate the growing Park Prescription movement. This year over sixty events took place across thirty states, Washington DC, and Puerto Rico. In the Golden Gate National Recreation Area, a park unit of the National Park Service in San Francisco, over 3000 attendees participated in the event. One hundred thirty-five exhibitors were also at the event, including National Park Service partners such as the Institute at the Golden Gate, the Department of Health & Human Services in Region IX, and local health and park organizations. They provided a variety of physical activities and resources about local health programs, the value of nature for health, and healthy behaviors for illness prevention. Throughout the event, activities such as a climbing wall, obstacle course, and parachute were available. Other activities were scheduled throughout the afternoon including mindfulness walks, ranger-led walks, tai chi, Zumba, and yoga.

Volunteers were a vital part of the event’s success. Seven USPHS Officers from a variety of federal agencies volunteered by assisting with event set-up, lunch service to shuttle users, physical fitness promotion by hula hooping with families, and event break-down.

I encourage you to find your park! Here are eight reasons to do so:

1) Being in nature can improve your mood;
2) Having access to parks can increase physical activity and combat obesity;
3) Parks and their health benefits can be enjoyed by anyone regardless of who you are and where you come from;
4) Contact with nature through parks improves all people’s physical, mental, and spiritual health;
5) Parks foster social connections which are vital to community cohesion and contribute to social wellbeing;
6) For children, parks foster active play, which is associated with physical, cognitive, and social benefits;
7) For adolescents, parks improve mental and social health during what is often a challenging time of life;
8) Park use is linked to physical and mental health benefits among adults, especially older adults.

Learn more about how to develop a park prescription program by visiting the National Park Prescription webpage http://www.parkrx.org/ or contact Diana Allen, NPS Office of Public Health, Chief of Health Promotion/Healthy Parks Healthy People at Diana.Allen@nps.gov.
Officers of DC COA National Prevention Strategies-Prevention Through Active Community Engagement (NPS-PACE) make an impact at two local public school systems

by LCDR Shiny Mathew, CDR Leo Angelo Gumapas and CAPT Dimitrus Culbreath

“Teaching is the most powerful force that changes the world one student at a time.” Taking this quote to heart, Commissioned Officers of DCCOA NPS-PACE stepped into two local county middle schools to enlighten students about the Corps, Science careers and NPS. This is the first time area NPS-PACE officers were able to introduce our new Surgeon General (SG), VADM Jerome Adams, to the local school system since he took office.

The first NPS-PACE career day event took place at the Sligo Middle School in Silver Spring, MD in Montgomery County on November 17, 2017. We had the task of introducing Science, Technology, Engineering and Math (STEM) careers to four different classes of 6th graders. Along with discussing our jobs as an Engineer and Scientist, respectively, CDR Gumapas and LCDR Mathew were able to talk about the Corps while sprinkling the message of all the ways in which kids can adhere to the SG’s NPS. Public health messages of receiving flu shots, exercising healthy eating habits, and smoking and opiate abuse prevention were sprinkled-in while discussing STEM careers.

The second event took place at the Lime Kiln Middle School in

Making COA Renewal Easy

This year we have almost 1000 officers who did not renew their COA membership by 1 November, five months into the new fiscal year. These officers were dropped from the COA active roles. This is not markedly more than last year, and most of these officers will eventually renew their membership. COA staff spend an enormous amount of time reaching out to these officers and encouraging them to renew, because COA is a dues-supported organization, and we cannot work for you if we don’t have your support.

We wish we had an easy way of providing for automatic renewal, but we do not want to store credit card information. If you are like me, however, you probably pay most bills online and you set up through your bank or credit union an automatic payment for repetitive bills. I do that with all of my bills that are the same each time: life insurance, health insurance, memberships in the various organizations to which I belong. I will bet that your financial institution will allow you to set up an automatic bill pay so that once a year it transfers to COA the exact amount you owe for dues. You can also do that through a PayPal account.

Please consider making your COA renewal automatic. It will save you and us much trouble, and it will allow us to serve you better by not having to devote so much time to pestering you about membership renewal. If you want to see what we have been doing for you, please go to our COA website and look at the letters we have sent on your behalf at http://www.coausphs.org/advocacy/letters/

Col. Jim Currie, USA (ret.), Ph.D.
Executive Director
One Team, One Mission: A Perspective from Puerto Rico*

CDR David T. Huang

“I’m getting deployed to Puerto Rico,” read the text I sent to CDR Liz Garza, 15 hours before I boarded a plane to San Juan, Puerto Rico (PR), for the Hurricane Irma response on September 8, 2017. Less than forty-eight hours later, “Just landed in Orlando,” read the text CDR Garza sent me, to pre-stage for the same hurricane, but 1,200 miles away in Florida. Little did we know that a common hurricane response would not be the only thread tying us together in the weeks that followed.

Our paths first crossed as Junior Officer Advisory Group (JOAG) voting members from 2014-16, but it wasn’t until the second year of our terms, when we both served on the JOAG Executive Committee (EC), that CDR Garza and I truly connected and became good friends. Months after our JOAG voting member terms officially ended, we stayed close through emails, texts, and phone calls, talking about everything from work to deployments to parenting young children.

In the aftermath of Hurricane Irma, the IRCT (Incident Response Coordination Team) was able to make a significant impact in Puerto Rico and the U.S. Virgin Islands (USVI) by deploying several Disaster Medical Assistance Teams (DMATs) to perform tasks such as emergency department augmentation, dialysis patient treatment, and patient reception for American citizens repatriating from other Caribbean islands to PR. We also supported the evacuation of more than 150 dialysis patients from St. Thomas, which had significant damage to its healthcare infrastructure, to San Juan, as disruptions in dialysis treatment can become life-threatening within two or three days.

A little over a week later, it was apparent that another major hurricane, Maria, was forming and heading toward many of the same Caribbean islands that had been hit by Hurricane Irma, including PR and the USVI. In preparation for the impending storm, HHS personnel in the USVI were evacuated to San Juan and the mainland US, and all medical missions in PR and the USVI were suspended. On the morning before Hurricane Maria hit, I was asked to help load dialysis patients and their family members, all of whom were from St. Thomas, onto evacuation aircraft at the San Juan airport, as it was predicted that Puerto Rico would take a hard hit. At the convention center, we helped patients pack their belongings and provided them with moral support.

Fast forward to a scene at the San Juan airport around noon. We were not at the main passenger terminal, and we had only a single set of jet stairs. We were faced with the daunting task of loading all 130 patients (many of whom were wheelchair-bound) and family members...
Howard County on November 21, 2017. Here, we were greeted by an enthusiastic group of 8th graders who were familiar with our branch since our officers had previously conducted our first opiate abuse prevention lesson in their class as 7th graders. CAPT Culbreath was determined to get their blood flowing and minds engaged as he began the class with a few jumping jacks. CAPT Culbreath and LCDR Mathew discussed our respective careers at the FDA while discussing with the students about the multiple roles our officers’ play at our routine jobs, during deployments and conducting NPS awareness through community outreach. We answered a wide range of questions from the curious “what do you like most about your jobs” to the probing “how much do you get paid”.

At the end of the two events, we were able to outreach to nearly 200 students in the two local county school systems. We are more convinced now than ever that the most effective way to ensure that our nation produces the most number of people entering STEM fields is to teach and inform our young people through school engagements. We have also witnessed first hand that our little known service and NPS strategies are getting more visibility within our local communities through DC COA NPS-PACE community outreach activities.

STRATEGIES from page 12

At the end of the two events, we were able to outreach to nearly 200 students in the two local county school systems. We are more convinced now than ever that the most effective way to ensure that our nation produces the most number of people entering STEM fields is to teach and inform our young people through school engagements. We have also witnessed first hand that our little known service and NPS strategies are getting more visibility within our local communities through DC COA NPS-PACE community outreach activities.
Meet
LCDR Peter Arroyo!

LCDR Peter J. Arroyo, Jr., OTR, OTD, CHT is an Occupational Therapist (OT) assigned to the Bureau of Prisons (BOP), stationed in Rochester, Minnesota. He is the only doctoral-level Certified Hand Therapist (CHT) in the BOP, and because of his expertise, he is consulted by colleagues Bureau-wide. In his current role, he provides hand rehabilitation and occupational therapy services, and he serves as one of only a handful of OTs providing wound-care services in the BOP.

LCDR Arroyo recently completed a two-year appointment as a JOAG voting member; serving as the Co-Chair of the Recruitment and Retention Committee and TPAC Liaison. He is an avid representative of the USPHS.

LCDR Arroyo deployed internationally in support of United States Northern Command Mission (NORTHCOM) to Mexico (2016), a diplomatic mission to increase United States-Mexico international cooperation in the area of emergency management (See attached picture). He is a member of Rapid Deployment Force - Team Three (RDF-3) and deployed twice in 2017 in support of Hurricane Irma (RDF-3) and Hurricane Maria (SAT-2.)

LCDR Arroyo is an active recruiter. His recruiting efforts have resulted in two successful inter-service transfers, two SRCOSTEP applicants, and one BOP officer accession.

In addition, he has done an outstanding job instructing Drill and Ceremony to USPHS officers. LCDR Arroyo has served as Commanding Officer during the BOP Fallen Officer Ceremony (2016 & 2017) and USPHS Officer Promotion Ceremony (2016 & 2017), resulting in strong Commissioned Corps representation and increasing the public image of the USPHS. Finally, he is an active COA member who serves as the appointed Protocol Officer for the North Central COA Branch.

In his free time, LCDR Arroyo is an Advanced Pilot/Tandem Instructor with the United States Hang Gliding and Paragliding Association and a youth wrestling coach.

Important Benefits ...

**The COA Group Insurance Program has coverage designed to help fit your lifestyle and profession. You can learn more about all these plans at www.coainsurance.com/2018.

**Group Term Life Insurance Plan** Get affordable coverage with competitive rates. Coverage is available up to $200,000.00 for you and/or your spouse. Also, take 30 days free to look over your Certificate of Insurance at your leisure.

**Emergency Assistance Plus (EA+)** When something happens to you away from home, EA+ can help by providing you with emergency medical and travel assistance.

**Accidental Death and Dismemberment Insurance Plan (AD&D)** Pays your beneficiary up to $250,000.00** in cash if you die in a covered accident.

**High Limit Term Life Up to $10 Million** Save money and provide financial security for your loved ones. Get your free quote now. Call 1-800-923-9342 x9851.

For further information, (including costs, exclusions, limitations, age reductions and terms of coverage that may apply) log on at www.coainsurance.com/2018 or call 1-888-633-6459

*Policies underwritten by Hartford Life Insurance Company, Simsbury, CT 06089
**At age 70, benefits reduce by 50%; At age 75, benefits reduce to 25%.
PHS Commissioned Officers Foundation
Donations Received, December 1, 2017 to January 31, 2018

Donation Levels

Leadership Society. . . . $10,000
President’s Society. . . . $5,000
Founder’s Society. . . . $2,500
Platinum. . . . . . . . . . . . $1,000
Gold. . . . . . . . . . . . . . . . $500
Silver. . . . . . . . . . . . . . . $250
Bronze. . . . . . . . . . . . . . . $100

Visit www.phscof.org/giving to donate online today!
EXECUTIVE DIRECTOR from page 1

by the Surgeon General. COA continues to believe that 30 is too small a number of billets at the VA, and that the VA should be treated the same as the Indian Health Service, the Bureau of Prisons, the Centers for Disease Control, the National Park Service, or anywhere else PHS officers are allowed to work. COA believes that VA billets should be opened to any officers who wish to apply there, in whatever categories the VA needs them.

Realizing that the Trump Administration would be filling numerous high-visibility positions in the public health arena, COA sent letters to the President urging that PHS officers be considered for positions as Director of the Centers for Disease Control and Prevention and Director of the Indian Health Service. Our recommendations were ignored, but we continue to believe that these positions—as well as that of Surgeon General—should not be filled by political appointees.

In February 2017 COA and COF were presented with an award by Arizonans Concerned about Smoking. This advocacy group, founded by long-time COA member Dr. Leland Fairbanks, recognized the Association and the Foundation for divesting its investment portfolios of any stocks and other holdings connected with tobacco companies. This divestment included e-cigarettes, which are primarily manufactured by tobacco companies.

Also in February COA Government Relations Director Judy Rensberger reminded COA members to be careful about claiming a “military deduction” on their State tax returns. “First, read the law,” was Judy’s admonition. As we approach tax season, this remains good advice. States define “military” in different ways. PHS officers are sometimes included, sometimes excluded. The burden is on you to be certain you are entitled to the deduction.

February also saw the death of former Deputy Surgeon General Dr. Faye G. Abdullah, a long-time COA member and a distinguished Public Health Service nurse officer. Dr. Abdullah was remembered with great respect by Corps officers, and her death was memorialized by a public event held at the National Institutes of Health. COF supported the memorial service financially.

April saw the removal from office of Surgeon General Vivek Murthy. VADM Murthy, a political appointee of the Obama administration, survived the purge of political appointees that took place on 20 January and immediately thereafter, when Donald J. Trump was sworn in as President. VADM Murthy was asked to resign his position, and according to press accounts, he was fired when he did not do so. Deputy Surgeon General RADM Sylvia Trent-Adams was immediately elevated to Acting Surgeon General. COA sent a letter to President Trump urging that he follow the law in effect since 1944 and nominate a Surgeon General from the ranks of the Commissioned Corps. From 1889 until 1969 all Surgeons General had come from the professional ranks of the Commissioned Corps. President Richard Nixon was first to depart from this requirement and tradition and nominate a non-Commissioned Corps officer. He got around the law by first appointing his candidate to the Commissioned Corps, then elevating them to Surgeon General. Such action apparently satisfies the letter of the law, but it certainly violates the spirit of it.

May brought Memorial Day and recognition to the Commissioned Corps at the national level. COA had joined the Veterans Day National Committee, and as a member of that group had arranged that the Public Health Service flag be carried into the amphitheater at Arlington National Cemetery on Memorial Day—the first time this had ever occurred. CDR Kun Shen and LCDR Henry Allen had the honor of being the first two PHS officers to carry the Public Health Service and American flags into the amphitheater on this day.

May also saw the first-time participation of the Public Health Service in the District of Columbia Memorial Day parade. Over forty PHS officers participated in the event. Photos and a write-up about the parade can be found in the August issue of Frontline, starting on page 5. Please see this issue of Frontline at http://www.coausphs.org/media/1643/2017-06_coa_newsletter_v8_final-digital-reduced.pdf

May was also very good for the Commissioned Officers Association, as we moved from “Associate Member” to full “Membership” on the Veterans Day National Committee. There were three nominees for two positions at the table: the Air Force Sergeants Association, the American Red Cross, and COA. Based on the quality of the applications, a VDNC committee recommended that COA and the Air Force Sergeants be voted into full Membership on the committee, and they were.

June saw the 2017 Scientific and Training Symposium in Chattanooga, TN. This was a terrific event, preceded by a two-day Remote Area Medical event at which PHS officers provided clinical services to almost 900 members of the greater-Chattanooga community. Highlights of the Symposium included a “visit” from the first Surgeon General, Dr. John M. Woodworth, portrayed by sometime-actor and long-time COA member (and Foundation Trustee) CAPT (ret.) Jim Minor. Among Symposium speakers were Acting Surgeon General RADM Sylvia Trent-Adams and DCCPR Director RADM Joan Hunter, who announced that the Commissioned Corps would soon begin enforcing the long-ignored height/weight standards for PHS officers. Other speakers included Dr. Jim Marks of the Robert Wood Johnson Foundation; Dr. Erika Lee, a historian who discussed Angel Island at the Anchor & Caduceus Dinner; RADM (ret.) Ali Khan of the University of Nebraska Medical School; RADM (Dr.) Anne Schuchat, Deputy Director of the Centers for Disease Control and Prevention; and RADM (ret.) (Dr.) Boris Lushniak, former Acting Surgeon General, current COF Trustee, and Dean of the School of Public Health at the University of Maryland.

June also saw United States Senators Chris Coons (D-DE) and Johnny Isakson (R-GA) recognized with the Congressional Public Health Leadership Award for 2016. These two legislators had co-sponsored Senate resolution 540, which passed the Senate unanimously on July 14, 2016. This resolution recognized the work of PHS officers and commended the Commissioned Corps for its efforts on behalf of Public Health. COA was instrumental in working with staff for the two Senators in drafting the resolution, which can be found on the COA website at http://www.coausphs.org/media/1367/coons-isakson-uphsc-resolution2.pdf

see EXECUTIVE DIRECTOR on page 19

January /February 2018 | Page 17
led Task Force 3 (TF3) which was sent to East Lee County High School. Like the other task forces, TF3’s mission was to support the special needs evacuees and their caregivers. The mission of TF3 was complicated because the shelter was filled to capacity with nearly 5,000 evacuees, including 300 with special needs. There were many challenges over the next few days—identifying patients and providing adequate segregation and care while not separating them from caregivers. Another challenge was the loss of power, which caused sewage lift stations to malfunction, toilets to back up, and potable water to be unavailable. CDR Simms noted that numerous TF3 members skipped meals so evacuees could eat.

To ensure that patient areas remained sanitary and functioning, several TF3 members donned protective gear to clean restrooms and other areas to prevent further public health concerns. After three weeks in the field, RDF-5 demobilized, turning over operations to RDF’s 1, 2, and 3. Dr. Kadlec visited with the team again, and RDF-5 members conducted a hotwash session of the various missions and lessons-learned over the recent three weeks in the field. The group returned home on September 14.

Hurricane Maria—Puerto Rico

Less than two weeks after demobilization, RDF-5 Command Staff were once again developing rosters for Hurricane Maria. This was part of RDF Coqui-1 which was a combination of RDF-4 and RDF-5 officers deploying for up to four weeks in Puerto Rico. The 38 officers from RDF-5 rostered for Coqui-1, most of whom had just returned from deployment, had to quickly re-pack MREs and replenish their deployment bags before travelling to Puerto Rico.

Other team members deployed in support of the Maria response for IRCT operations in several different capacities. Some were assigned to Atlanta, helping in Florida for those displaced and evacuated from the Virgin Islands or Puerto Rico. They also staffed ASPR warehouse missions. Many officers were deployed for a total of seven weeks during this extraordinary Atlantic hurricane season.

Team members took care of people displaced from their homes in Texas, Florida, the US Virgin Islands, and Puerto Rico. They traveled via commercial flights, military transport aircraft, helicopters, buses, vans, and cars. During the Harvey and Irma response, members slept in at least seven different places in three weeks and rode out a Category 4 hurricane while sheltered with displaced community members. Some members are still in the field in support of continuing relief efforts in Atlanta as of January 2018. This hurricane season has rewritten the book on deployment hurdles and reinforced the necessity for USPHS officers to maintain readiness to deploy for ever-changing and challenging conditions to serve the needs of those affected by disasters.

IADEMARCO from page 1

Defense Attaché’s Office, and obtained CDC media clearance, realizing the event would surely hit the press. Iademarco’s previous experience living overseas, seconded to the U.S. Mission to Vietnam in Hanoi, gave him experience in navigating the various steps. In conferring the honor on 6 December, the president of Molise, Vincenzo Cotugno, called attention to the lifetime contributions Iademarco has made to public health in the field of tuberculosis, HIV, and influenza. Proud of the connection to Molise, Cotugno recognized Iademarco’s serving as an Assistant Surgeon General of the U.S. Public Health Service and as Director of CDC’s Center for Surveillance, Epidemiology and Laboratory Services. Before a crowd of about 400, Iademarco spoke of cultural continuity across the centuries and recognized the contributions of the village to his career success. During the ceremony, Iademarco was seated next to the ranking regional officers of the Italian Coast Guard and the Army.

*Article I, Section 9 of the United States Constitution: “No Title of Nobility shall be granted by the United States: And no Person holding any Office of Profit or Trust under them, shall, without the Consent of the Congress, accept of any present, Emolument, Office, or Title, of any kind whatever, from any King, Prince, or foreign State.”*
President Trump nominated Dr. Jerome Adams, an Indiana-based physician and State Health Commissioner with ties to Vice President Pence, to become Surgeon General. His nomination sailed through the Senate with no opposition, and he was confirmed on 4 August. COA has established what we believe are good relations with him and look forward to working with him during his tenure. We anticipate that his relationship with the Vice President will be good for the Commissioned Corps.

PHS officers mobilized and deployed when multiple hurricanes hit the mainland United States, Puerto Rico, and the U.S. Virgin Islands. Such deployments are where the Commissioned Corps proves its value to the country. Despite the usual insults from American Airlines, which distinguished itself by charging extra for supplies being carried to storm-ravaged parts of its own headquarters State of Texas, PHS officers deployed and helped those affected adversely by the weather and its aftermath. The Commissioned Officers Foundation (COF) responded by establishing a fund to provide financial assistance to PHS officers whose homes were damaged by these events and ultimately provided checks to two officers. This fund will continue.

LCDR David Schwab and others organized the best-ever fundraising golf tournament for the Foundation, netting over $6000 after expenses. This was the tenth year that LCDR Schwab has organized the charity tournament, and he was recognized for his work by being given the Dr. Robert Brutsche Award at the Joint COA/COF Board meeting in September. LCDR Schwab was the first junior officer ever to receive the award, which usually goes to admirals and captains.

In October Deputy Surgeon General RADM Sylvia Trent-Adams was honored with the prestigious Florence Nightingale Medal from the International Committee of the Red Cross, the only 2017 medal recipient from the United States. She was recognized for her many contributions to public health and to the activities of the Red Cross.

October was also the month of “Physician Assistant Week,” which COA helped celebrate. COA Executive Director Jim Currie was approached by former COA Board member CAPT Josef Rivero, a PA assigned to the National Institutes of Health. CAPT Rivero asked Jim to identify a member of Congress who would introduce a resolution recommending Physician Assistant Week. With help from COA Deputy Executive Director John McElligott, COA identified the only PA in the Congress, Rep. Karen Bass (D-CA,) who was recognized by the American Medical Association with its Distinguished Service Award. The AMA describes this award as its “top honor,” and we are so proud that a PHS officer received it. RADM (ret.) Lushniak serves as a Trustee for our Foundation and continues to be fully involved in PHS Commissioned Corps activities.

So, that’s 2017 for you. There was much more that happened at the local level during the year. Much of it can be found in the digital pages of Frontline, which can be accessed on the COA website at http://www.coausphs.org/.

We at COA and COF are proud to work for you every day of the week. Please go to our website at http://www.coausphs.org/advocacy/letters/ to see some of our outreach on your behalf.


RADM (ret.) Blue Spruce Honored

Long-time COA member RADM (ret.) George Blue Spruce has been honored by the City of Cincinnati. On June 22, 2017, Mayor John Cranley issued a proclamation declaring that the day would be “Dr. George Blue Spruce Day.” The announcement was made as Cincinnati hosted the 27th conference of the Society of American Indian Dentists. RADM Blue Spruce founded the organization and served as its President for sixteen years. He now serves as President Emeritus. RADM Blue Spruce was the first Native American dentist in the United States. He is a member of the Pueblo tribe and served in the U.S. Public Health Service from 1958 until 1986.
On November 10, 2017, USPHS officers stationed at the U.S. Centers for Disease Control and Prevention (CDC) in Lusaka, Zambia, commemorated Veterans Day by teaching their Zambian colleagues about the history and meaning behind the holiday.

CDC Zambia was established in December 2000. The office works with Zambia’s government and Ministry of Health to build sustainable public health capacity to combat the epidemic of HIV/AIDS and other diseases of epidemic potential. CDC Zambia staff members are substantially involved with national program efforts in HIV prevention, care, and treatment; tuberculosis; malaria; laboratory capacity; surveillance; and public health workforce development.

Five USPHS officers currently serve at CDC Zambia: CAPT Margaret Riggs (Associate Director, Office of Health Information and Epidemiology), CDR Idong Essiet-Gibson (Deputy Associate Director, Office of Health Information and Epidemiology), CDR Ellen Yard (Resident Advisor, Field Epidemiology Training Program), LCDR Danielle Barradas (Branch Chief, Epidemiology and Surveillance), and LCDR Mary Boyd (Deputy Associate Director, Office of Programs).

The Veterans Day program started with CDR Yard providing an overview of the history and meaning of the observance. This proved to be educational for both American and Zambian colleagues, as the group explored some of the nuances of the holiday that are often overlooked during modern day celebrations. There was discussion on the similarities and differences between Veterans Day and similar holidays across the world, such as Armistice Day.
Training the Next Generation of Implementation Researchers for Health Equity

by CDR Helen Cox, Dr. Melissa Green Parker, LCDR Xinzhi Zhang

On August 30-31, 2017, the Center for Translation Research and Implementation Science (CTRIS), a part of the National Heart, Lung, and Blood Institute (NHLBI), hosted a workshop entitled “Training the Next Generation of Implementation Researchers for Health Equity.” CDR Helen Cox and Dr. Melissa Green Parker co-chaired the workshop.

Held on the NIH campus in Building 35A Porter Neuroscience Research Center, this workshop convened more than thirty thought-leaders and experts in the fields of implementation science, prevention science, health inequities research, and training and research workforce development. The workshop sought to address best practices for designing and executing implementation research training programs; approaches to increase participation in implementation research to address health inequities, with an emphasis on late-stage T4 translation research; innovative training methods and models, including team science approaches, for T4 translation researchers focused on reducing health inequities across various healthcare settings; and best practices for developing and sustaining a mentor pool for individuals who conduct implementation research.

CAPT Michael M. Engelgau delivered the closing remarks and summarized the recommendations from the workshop panel. Now retired, RADM Helena O. Mishoe, Assistant Surgeon General, Director for the Office of Research Training and Minority Health at NHLBI, was recognized for her lifetime contributions to research training in minority health.

Health inequities research is crucial for making progress in eliminating preventable differences in outcomes in non-communicable diseases such as cardiovascular disease, lung diseases, blood disorders, stroke, mental health, and diabetes. These inequities cause significant preventable morbidity and mortality in racial, ethnic, rural, and low-income populations across the United States. Evidence-based interventions and approaches that can eliminate disparities, as well as sustainable implementation and scale-up of proven-effective interventions, have the potential to close marked gaps in health outcomes in the United States. Advancing health inequities research along with increasing the pool and expertise of researchers engaged in evidence-based scientific research efforts is critical.

The workshop also featured the Inaugural Dr. Elijah Saunders & Dr. Levi Watkins Memorial Lecture on August 30, 2017. The lecture was delivered by Dr. Lisa A. Cooper, M.D., MPH, FACP, Bloomberg Distinguished Professor, James F. Fries Professor of Medicine, Director, Johns Hopkins Center for Health Equity, Johns Hopkins University School of Medicine and Bloomberg School of Public Health. In addition to being remarkable cardiovascular specialists and visionaries for health equity, Drs. Elijah Saunders and Levi Watkins were compassionate leaders who were committed to training and mentoring the next generation of medical doctors and researchers. This inaugural lecture and workshop honored their legacies.
by LCDR George Pourakis, MD, MPH

CDR George Pourakis, M.D., was recently honored by Stony Brook University as one of its “alumni under forty years old whose careers have had a significant impact.”

Here’s what LCDR Pourakis has to say to COA members about the experiences that have led him to this place in his career.

As a son of immigrants who came to this land of opportunity, I was raised to place a high value on education and the doors that it could open for me. However, as the son of a Greek Orthodox priest and a kindergarten teacher, there were financial limitations to my options for higher education. Nonetheless, I was very fortunate to attend two very fine institutions of higher learning within the state university system in New York for both college and medical school (Binghamton and Stony Brook).

As I progressed through my education and career, I felt that the promise of the American Dream had been fully realized in me. My attendance at state universities did not sacrifice in any way the quality of my education or the opportunities that I would be afforded upon graduation. This realization instilled within me a profound appreciation for public education. In America, financial constraints should not limit the height of one’s dreams. Public universities, like those I attended, make this possible.

Over the years, I have tried to show my appreciation by remaining committed to my alma mater. When assigned to the US Coast Guard, I precepted several Stony Brook Preventive Medicine Residents doing clinical rotations in my clinic. I would also return to campus on an annual basis to give informational talks about the Corps to medical students and residents. I have continued this commitment through my transfer to HRSA and now at CMS.

Recently, a little of that appreciation was returned to me in a truly flattering gesture. The recognition I received from Stony Brook will only serve to reinforce my efforts to support and promote the value of public education in our country.

Appreciation for Public Education Reciprocated: USPHS Medical Officer receives 40 Under 40 Award from Alma Mater

The program then continued with each officer providing their own unique perspective of what it meant to them to serve as an officer in the USPHS, including their reason for joining the Corps and a synopsis of their history and deployments.

The program included an interactive picture taking session. The officers all dressed in uniform for the event, showcasing the service khaki, service dress blue, summer white, and the operational dress uniform. Each staff member in the office took turns taking a commemorative “Veterans Day 2017” photo with the USPHS officers. The program concluded with refreshments, where each USPHS officer contributed their favorite Veterans Day dish to share with colleagues.

Aurora Borealis COA Proudly Recognizes a Senior and Junior Officer of the Branch

by CDR Anne Marie Bott and LCDR Katie Jacques

The Aurora Borealis (Alaska) COA is proud to announce the recipients of the 2017 Senior and Junior Officer of the Branch Awards. This award is presented annually to officers who model leadership and officership within the branch and community. On 20 December 2017, CDR Brittany Keener and LCDR Darrell Acheson were honored as the Senior and Junior Officer of the Branch, respectively, by branch President LCDR Katie Jacques.

CDR Brittany Keener was a leader in the creation of the Standard Operating Procedures to augment the bylaws and allow for continuity with changes in the Executive Committee. She co-led initiating a Promotion Ceremony to honor promoted and retired officers, assisted in raising $700 for the branch with professional portraits, and actively co-leads the branch’s PHS Athletics Committee. CDR Keener is an exemplary officer in her actions and ensures high visibility for PHS, leading eight PHS Athletic qualifying events, and participating in twenty-two events within the past three years.

LCDR Darrell Acheson displayed model leadership developing a newly-formed position, Community Outreach Lead. In this lead role, he was tasked to oversee all community affiliated volunteer efforts and events for the Aurora Borealis branch. LCDR Acheson increased the involvement and diverse opportunities for the local branch and helped provide officers with formalized COA recognition. A new outreach opportunity that came of this position was partnering with the first Ronald McDonald House (RMH) in Alaska. The Aurora Borealis branch provided monthly support for the RMH by serving meals, conducting craft activities for the children, and delivering a health-related message.

Both CDR Brittany Keener and LCDR Darrell Acheson are proudly recognized by the Aurora Borealis branch of the COA for going above and beyond their duties for the branch and their fellow officers!

PUERTO RICO from page 13

onto the aircraft, with a “wheels up” deadline of 1500. Along with the normal Puerto Rico heat and humidity, winds that were starting to pick up. It was a grueling task that I’m proud to say we successfully completed, working with staff from the IRCT, several DMATs, and personnel from the Federal Emergency Management Agency.

CDR Garza emailed me later that evening to let me know that she and her team were about to receive those same patients in Miami. It was a touching reminder of what IRCT leadership had been telling me all along: One team, one mission!