



The JOAG Journal

A newsletter by junior officers for junior officers

ORIGINAL FEATURES

Chair Article: [Page 1](#)

Junior Officer Spotlight: [Page 2](#)

Uniform Corner: [Page 3](#)

Admirals Corner: [Page 4](#)

Fitness Corner: [Page 5](#)

Meeting Information: [Page 18](#)

FROM THE COMMITTEES

Officer Promotions: [Page 14-16](#)

New Officers: [Page 17](#)

Merchandise: [Page 19](#)

OFFICER CONTRIBUTIONS

Volunteerism: How USPHS officers can give back: [Page 6](#)

Addressing Children's Health by Revealing Prescription Trends: [Page 7](#)

JOAG Job Shadowing Program: [Page 8](#)

JOAG Survey Results: [Page 9](#)

Junior Officers promoting the USPHSCC: [Page 10](#)

Demonstrating the value of the Corps through Leadership: [Page 13](#)

Editor:

LT Grace Chai

Copy Editors:

LT Benjamin Bishop

LCDR Gene Gunn

LCDR Samantha Fontenelle

LCDR Luis Rodriguez

LCDR David Wright

Letter from the Chair



Dear Junior Officers,

It is both an honor and my humble pleasure to serve as the JOAG Chair for the 2012-2013 operational year. I would like to first take a moment to introduce myself and share my involvement with JOAG. I have been in the Commissioned Corps for a little over 4 years and joined JOAG shortly after obtaining my commission in September 2008. Although I was considered a "newbie" in most regards, I did not let that stop me from throwing myself (literally) into a variety of JOAG committees and workgroups, namely working with the Communications and Publications and the Recruitment and Retention Committees. Some of you may know me from my work with the JOAG Journal, which allowed me to combine my passion for writing with my love for JOAG. This past year, I served as Chair-elect of JOAG and Chair of the Policy and Procedures Committee in preparation for my current position. I have learned a lot over the past several years from my involvement with JOAG and welcome

the experiences I will endeavor upon while in this position.

My priorities as JOAG Chair for this operational year include, but are not limited to:

- Ensure JOAG representation on all Corps-level workgroups and committees
- Continue to identify and advocate issues of concern on behalf of junior officers
- Improve communication among junior officers, particularly in remote locations, while also advocating for increased opportunities for professional collaboration and educational advancement
- Support the strategic initiatives and activities within the Office of the Surgeon General, including the National Prevention Strategy. Endorsed by VADM Regina Benjamin, this strategy aims to guide our nation to the most effective and achievable means for improving the health and well-being for all citizens (for more information, please visit: <http://www.healthcare.gov/prevention/nphpphc/strategy/index.html>)

It is hard to believe that JOAG officially celebrated its ten-year anniversary in 2012. We certainly have come a long way, and have the past JOAG leaders, advisors, and most importantly, the junior officer general body, to thank for making JOAG the successful organization that it is today. I especially want to thank the following past chairs: CDR Michelle (Jordan) Garner, CAPT Jeffrey Salvon-Harmon, CDR Jeffrey Richardson, CDR Michelle Coolidge, CDR Claudine Samanic, CDR Thomas Pryor, CDR Aimee Trefflietti, CDR Maleeka Glover, CDR Diem Kieu-Ngo, LCDR Carlos Bell and LCDR Damon Smith.

[Continued on Page 11](#)

Junior Officer Spotlight

Contributed by LT Amy Luo

Officer: Amy Kolwaite

Rank: LCDR

Category: Nurse

Education: Master of Public Health (MPH), University of Arizona; Master of Science (MS), Arizona State University; Bachelor of Science in Nursing (BSN), Auburn University

Hometown: Atlanta, Georgia

Agency: Centers for Disease Control and Prevention (CDC)

Current Assignment and Duties: I am currently a CDC Preventive Medicine Fellow assigned to the Division of Viral Hepatitis focusing on global hepatitis. The CDC Preventive Medicine Fellowship program provides hands-on experience in public health agencies at the federal, state, and local levels in designing and evaluating programs, developing health policy, conducting community health improvement projects, managing public health projects and developing and applying leadership skills. My current projects include collaborating with other countries to address the burden of hepatitis in their countries, developing guidelines on implementation of hepatitis B birth dose into an immunization program, and looking for new and innovative ways to deliver hepatitis B vaccine to rural and hard to reach areas.

Previous Assignment(s): CDC Epidemic Intelligence Service (EIS) Officer assigned to the Kentucky Department for Public Health. Prior to EIS, I worked as a Pediatric Nurse Practitioner in emergency departments in Atlanta and Phoenix.

How did you find out about the PHS? I learned about the PHS when I was accepted into the EIS program. My EIS supervisors were PHS officers and they shared information on their experiences and reasons for joining the PHS. Their stories solidified my decision to join the PHS.

What are your goals with the PHS? My goal is to combine my background in nursing with the public health leadership skills I have gained through my PHS assignments into a career that addresses critical public health concerns. I plan to stay in PHS throughout my career.

What is your most memorable PHS experience so far? During my time as an EIS officer, I spent three months in



LCDR Amy Kolwaite

Uganda working on a Stop Transmission of Polio (STOP) team, assisting country-level efforts in the global effort to eradicate polio. Another memorable experience was working with two deployment teams conducting field exercises in Kentucky. As a junior officer, it was a privilege to work alongside so many PHS officers from diverse categories and agencies and to learn from their experiences.

What advice would you give to prospective PHS applicants (or other Jr. Officers)? Find mentors in your category who are dedicated to sharing their experiences, providing guidance, and helping you succeed. Also, don't be afraid to volunteer for PHS activities. Volunteering for different committees and projects is a great way to get to know PHS officers throughout the different agencies.

How has PHS changed your career as a nurse? When I finished nursing school, I pictured myself always working in the hospital providing clinical care. Through the PHS, I have learned that there are so many opportunities available for nurses outside the traditional hospital setting. The training I have received and experiences I have gained as a PHS officer have made me look forward to using my public health nursing skills on a more global level.

If you are interested in appearing in the next Junior Officer Spotlight, please contact LT Amy Luo at amy.luo@ihs.gov.

The Operational Dress Uniform (ODU) Parka & Utility Jacket

Contributed by LCDR Gene R. Gunn, Jr.

In our last issue we covered details of the new Operational Dress Uniform (ODU). Given that it is winter, we thought it would be a good idea to take a closer look at the Foul Weather Parka II & Utility Jacket that are worn over the ODU in inclement weather.

Both the Foul Weather Parka II and the Utility Jacket can be worn alone (over the ODU blouse) or can be zipped together for especially cold, wet weather. Like the Black Windbreaker, when worn, they must be zipped at least $\frac{3}{4}$ of the way closed. Both jackets shall be worn with the slide-on embroidered rank centered on the front tab.

The Foul Weather Parka II (**Figure 1a**) is made of 100% nylon with a GORE-TEX® membrane. Waterproof, windproof and breathable GORE-TEX® fabric makes this garment contamination-resistant to diesel fuel, jet fuel, DEET, petroleum, oils and lubricants. The parka features two external cargo pockets, two hand warmer pockets, a stowable hood (**Figure 1b**), hidden map pocket, and elastic and Velcro® wrist closures (**Figure 1c**). Unlike the All Weather

Parka I, this garment has a storm flap at the collar and is longer in length. The Foul Weather Parka II and its accompanying Liner II (ODU Utility Jacket) are designed to fit properly over the new ODU.

The ODU Utility Jacket (**Figure 2a**) features a water-repellent surface that sheds rain and snow. Made of Polartec® fleece material, the Utility Jacket features a full zip-through collar (**Figure 2b**) and two zip-front welt pockets. Waist drawstrings have barrel locks and the cuffs are elastic (**Figure 2c**).

Sizing information regarding both jackets can be found at the following web address: <http://www.uscg.mil/hr/udc/fwparka.asp>.

In addition to being the recurring author of the "Uniform Corner", LCDR Gunn is also JOAG's voting representative on the Uniform Advisory Committee. Please send any ideas for future "Uniform Corner" columns to LCDR Gene Gunn at gene.gunn@fda.hhs.com.



Admiral's Corner

Contributed by LCDR David Wright

RADM Thomas J. McGinnis, R.Ph., is the Chief, Pharmaceutical Operations Directorate, Office of the Assistant Secretary of Defense (HA/TMA), with responsibility for pharmacy operations of the TRICARE Management Activity.

He began his PHS career in 1976 as a COSTEP at St. Elizabeth's Hospital, Washington, D.C. In 1978, he began his career at FDA as a Drug Information Specialist in the Division of Over-the-Counter Drug Evaluation. In 1981, he moved to the Division of Drug Information Resources in the Center for Drug Evaluation and Research, Office of Management. He became Chief of the Drug Information Services Branch in 1983 and in 1985 was appointed acting director of the Division of Drug Information Resources where he was responsible for publishing the FDA's "Orange Book" and other drug information publications.

In 1990, RADM McGinnis helped establish the new Office of Generic Drugs and served as Special Assistant to the Office Director until joining the Office of the Health Affairs, Office of the Commissioner, in 1991. He became Deputy Associate Commissioner for Health Affairs in 1997. Before joining the Office of the Assistant Secretary for Defense, RADM McGinnis served as Director of Pharmacy Affairs, Office of Policy, in the Office of the Commissioner. He served as Agency spokesperson with the press and electronic media on pharmacy related topics, including counterfeiting, bar coding and radio frequency identification on drug products, and prescription drug importation. During his tenure at FDA, he served on numerous Agency committees, represented the Agency at a variety of hearings and conferences, and was a featured speaker on important issues related to FDA and the practice of pharmacy. He also served as Incident Commander of the 250-bed PHS special-needs shelter in Alexandria, LA, during hurricanes Katrina and Rita.

Admiral's Corner: PHS Corps officers serve in various capacities across the Department of Defense (DoD). What skills do they bring that add value to the DoD?

RADM McGinnis: The Department of Health and Human Services (DHHS) has two blanket Memoranda of Agreement (MOA) with DoD; one is with TRICARE Management Activity (TMA) and the other MOA is the Mental Health (MH)/Traumatic Brain Injury (TBI). Currently we have over 270 PHS officers assigned to DoD under the two memoranda.



Rear Admiral Thomas J. McGinnis

The MH/TBI MOA was established to increase behavioral health services available to service members and their family members. PHS officers are detailed to more than 40 Army, Air Force and Navy military treatment facilities (MTFs) to treat service members returning from armed conflicts that are affected by behavioral health issues such as post-traumatic stress disorder, insomnia, anxiety, flashbacks, and depression. Some of the other services provided by PHS officers include psychiatric counseling, family and group therapy, preventive and resiliency building services as well as consultation to the command on behavioral health concerns. The disciplines include social workers, psychologists, nurses, nurse practitioners, psychiatrist, physician assistants, physical therapists, occupational therapists, and speech pathologists. Currently, we have 185 officers assigned under the MH/TBI MOA.

PHS officers bring a wealth of knowledge to TMA offices where they are assigned which include Pharmaceutical Operations Directorate (POD), Office of Chief Medical Officer, Defense Health Information Management System Officers, TRICARE regional office, and Force Health Protection and Readiness. Many of these officers have served in the military prior to their PHS careers. At TMA POD, I serve with 5 other PHS pharmacist officers. Other disciplines serving within TMA include, nurses, physicians, therapists, and health services officers.

[Continued on Page 12](#)

Fitness Corner

Contributed by the Public Health & Community Service Committee



LCDR Kelly Ngan

Officer: LCDR Kelly Summers Ngan

Category: Pharmacy

Education: Doctor of Pharmacy, University of North Carolina at Chapel Hill

Current Location: Baltimore, MD

Agency: Food and Drug Administration (FDA), Center for Drug Evaluation & Research, Office of New Drugs, Silver Spring, MD

What do you do to stay fit?

Everything! I try to view staying fit as both a Service expectation and a personal expectation of mine. My goal is to stay in a place where if I don't do something physically active for more than three days, I just don't "feel right." Also, it's very important for me to mix traditional "working out" with physical activity that is more fun! That's why I participate in the many adult sports team leagues that are offered in Baltimore every year. For example, I play on a recreational co-ed football team every fall & spring and play on a co-ed indoor volleyball team year-round. I also have been on kickball, softball, dodgeball, and beach vol-

leyball teams over the past six years. Many towns, cities, and counties offer such leagues, with varying skill levels. In many cases, you don't need to have played the sport before; you can just join, be active, have fun, and meet new people! Knowing you get to play games while still burning calories is very satisfying.

In addition to recreational sports activities, I also regularly cycle, swim, strength-train, and do yoga at my local gym. I think it is very important to change your workout routines every 3-4 months, especially the intensity levels, to keep your body challenged and working optimally.

What are your fitness accomplishments?

I am most proud of tackling new physical challenges, even if, as an adult, I had never participated in an activity or sport before. It's never too late to try something new! When I first moved to Baltimore in 2005, I had never played football or volleyball or cycled competitively. But within two years, I developed enough playing skills to contribute to my teams winning league championships. Also, I completed my first sprint triathlon, the IronGirl Triathlon in Columbia, MD, in 2007. I went on to compete in several more triathlons over the next three years, each time improving my bike and swim times. In 2010, my older sister, seeing my example, asked me to participate in a sprint triathlon with her as a goal for her 40th birthday. At the time she signed up, she did not exercise regularly and had never really swam or cycled aerobically. Nevertheless, she started training and ultimately, we were able to race together and celebrate her achieving her goals.

What are your fitness goals for the future?

After taking a break from triathlons for two years, I am ready to jump into another one and hope to complete a new sprint triathlon in fall of 2013. I also would like to spend more time improving my indoor rock climbing skills, as it is another activity that is super fun and exciting, yet involves both cardiovascular intensity and strength. Even though rock climbing can take a lot of energy, I always view sessions as a special "playtime" treat. Finally, I hope to one day find the time to take more martial arts classes...though I may save that new challenge for the next decade of my life!

Visit JOAG at: <http://www.usphs.gov/corpslinks/joag/>

Volunteerism: How USPHS officers can give back

Contributed by LCDR Frank Verni

Volunteerism benefits both society at large and you, the individual officer, by strengthening trust, solidarity, reciprocity among citizens, and by promoting “Esprit de Corps”. Volunteering brings together a diverse range of people from all backgrounds and walks of life. You can gain a rich source of inspiration and enhance your interpersonal skills through interactions with the recipients of your volunteer efforts as well as your fellow officers. Volunteering also offers an incredible networking opportunity. Not only will you develop lasting personal and professional relationships, but it is also a great way to learn about people from all walks of life, different environments, and new industries. Networking is an exciting benefit of volunteering and you can never tell who you will meet, what new information you will learn and how this can collectively impact your life.

As officers of the United States Public Health Service (USPHS), we are ideal candidates for volunteering as our daily work involves making an impact on the public health of our nation. Our training, specialized degrees, experiences and resources allow us to help those in need like no other group can. Our combination of clinical providers (physicians, dentists, behavioral health personnel, nurses, pharmacists, veterinarians) coupled with officers with other science & engineering based degrees allows us to handle a variety of tasks. Our operating divisions (OPDIV) also provide officers with additional skills and resources that are helpful in a volunteer setting.

How do you initiate a volunteer activity? Like others who volunteer, the initiation must be made by the individual, or group of individuals. Excellent ways USPHS officers can coordinate volunteer events are through:

- Professional Advisory Committees (PACs) - Our PACs allow us to consolidate a specific category of officer to share volunteer ideas on a national and international level. Many PAC have lists of officers with specific & unique skill sets that can be called upon as the need arises for a volunteer opportunity. If not in place already, I would suggest assembling a sub-committee to coordinate community outreach events which would include volunteer opportunities.
- Professional Advisory Groups (PAGs) - Our PAGs are another excellent way to group together officers with varying skill sets, educational background and experiences which can provide volunteers for a variety



L to R: LCDR Elena Vaouli, CAPT Jean Kelahan, LCDR Frank Verni @ 2012 Project Homeless Connect in Trenton, NJ

events.

- Local Commissioned Officer Association (COA) Branches - Like PAG local COA branches are another excellent way to group together officers with varying skill sets, educational background and experiences. The major advantage is that all of the officers are located within a specific area which makes coordinating a volunteer event a much easier task.

Finding volunteer opportunities is probably the easiest part of the equation. There are numerous non-profit organizations, homeless shelters, hospitals, national/state/local events, etc. that can greatly benefit from our help. Not to mention that volunteering increases the USPHS's exposure to the public as well as helps the general public understand who we are and what we do.

On a personal note, I want to mention two volunteer events that were performed by the New York Commissioned Officers Association branch (NYCOA). On 6/9/12, officers from NYCOA volunteered at the 2012 Brooklyn Children's Sports & Fitness Expo and on 6/28/12, officers volunteered at the 2012 Project Homeless Connect in Trenton, NJ. At both events, volunteers provided educational resources and health screenings on a variety of topics (see photos attached). In speaking for all of the officers involved, they were both very rewarding events! So I urge you to get your “Boots on the Ground” and enhance the public health of the nation one event at a time...one person at a time.

Addressing Children's Health by Revealing Prescription Trends

Contributed by LCDR Scott Steffen

As a member of the JOAG Welcoming Committee, I get to meet officers very early in their careers. LT Chai was an Officer Basic Course candidate for class 50 in February 2012. I was quite impressed with her at the open house and I knew she was going to go far in her career I just did not know when. Fast forward to the 2012 Scientific and Training Symposium- what an event! I had the privilege to talk to many officers that I met throughout the year, including LT Chai. LT Chai is a team leader in the Division of Epidemiology at the Food and Drug Administration (FDA). An article she spearheaded was published this past June in the journal *Pediatrics*, garnering national attention from several mainstream publications (e.g., USA Today, NY Times, CNN, US News and World Report, Time, WebMD, ABC, NBC, and Fox News). In fact, over 160 articles have cited the publication, "Trends of Outpatient Prescription Drug Utilization in US Children, 2002-2010."

LT Chai explains that until recently, little information was accessible pertaining to the nationwide utilization of drugs among children. LT Chai's background in pediatrics (clinical pharmacist at Children's National Medical Center from 2005-2008) inspired her to look for ways to help advance the health of children on a national level. After joining the FDA, she saw an opportunity to use prescription drug use data, an underutilized field of research, as an additional tool in the arsenal of advancing drug research in children.

Using national prescription databases, the objective in this manuscript was to take a first step in better understanding pediatric drug utilization and provide insight into potential therapeutic needs for future pediatric drug development and research. LT Chai's research uncovered several important trends. From the years of 2002 to 2010, the number of prescriptions dispensed decreased by 7%. Specifically, there were significant decreases in the number of prescriptions. For example, the number of prescriptions issued from 2002-2010 for antibiotics declined by



LT Grace Chai

14% suggesting that large-scale efforts like those by the American Academy of Pediatrics to educate "parents about the futility of treating viral infections with antibiotics" and the concerns of antibiotic-resistant bacteria propagation, provided some benefit. These data also revealed other notable trends. Specifically, the off-label use of proton pump inhibitors (PPIs) and an increase in attention-deficit/hyperactivity disorder (ADHD) medication use. In 2010 alone, over 350,000 PPIs prescriptions were issued for off-label use in infants 12 months and younger where effectiveness has not been demonstrated. Drug utilization data suggesting off-label use of products in children highlight areas for further research.

Studies like these have far-reaching impact and are instrumental to public health in the United States. As LT Chai explains, "By identifying drugs with the highest number of patients, experts can strategically focus on drug products with the highest impact to the pediatric populations." Hopefully, LT Chai's efforts will trigger similar research for other affected populations.

JOAG Professional Development Junior Officer Job Shadowing Program: Career Exploration Opportunity for Junior Officers

Contributed by LCDR Shani Smith and LCDR Samuel Schaffzin

As an Officer in the United States Public Health Service (USPHS) Commissioned Corps, you have opportunities to apply your training and expertise to various agencies and areas of interest within the public health arena. Often times you may even find that there are multiple professional development opportunities within your duty station worth exploring or learning more about. Some junior officers expressed a desire to learn firsthand what certain USPHS assignments entail and the day-to-day activities associated with these positions. This is especially helpful to junior officers as they begin to chart their USPHS career, and also may factor into the decision to move to that next assignment.

Job shadowing is a career exploration activity that offers an opportunity to spend time with a senior officer currently working in a junior officer's career field of interest. Currently, there are no formally recognized job shadowing programs in the Corps. As a result, the JOAG Professional Development Mentoring Subcommittee, with the support of the JOAG Executive Committee, created a job shadowing program to encourage junior officers to shadow senior officers. The mission of the job shadowing program was to provide junior officers an opportunity to observe the daily activities of senior officers at their duty stations. The observations made by the junior officers will assist in guiding their professional development.

During the pilot program, Junior and Senior Officer matches were established based upon responses in the job shadowing enrollment forms that are shared through USPHS agency correspondence. The match was made taking into account availability, similar career interests, and USPHS professional activities. These pairings were not limited to officers within the same professional category. The time commitment for the job shadowing was one workday and could have been extended at the request of the junior and senior officer. After the job shadowing event, officers complete a brief online survey to assess the program's effectiveness and recommend potential improvements. All participants in the shadowing program receive certificates of appreciation for their eOPFs.



L to R: LCDR Shani Smith and
CAPT Tejashri Purohit-Sheth

The pilot program was completed at the FDA White Oak Campus in Silver Spring, MD due to the large presence of junior and senior officers on the campus. Currently, the subcommittee is working with the JOAG Executive Committee to promote this opportunity beyond the FDA White Oak Campus.

If you are interested in learning more about the Junior Officer Shadowing Program please contact LCDR Shani Smith shani.smith@fda.hhs.gov or LT Jennifer Cheng-Dobson jennifer_cheng-dobson@nps.gov.

JOAG Policy Development and Information Dissemination Survey Results

Contributed by LCDR Tracy Powell, PhD

In 2011, JOAG's Executive Committee (EC) saw the need to assess the knowledge base of junior officers as it relates to policy development within the United States Public Health Service Commissioned Corps. To complete this task, the EC recommended that a Policy Development & Training workgroup be formed under the umbrella of the JOAG's Policy and Procedures Committee. The workgroup developed an instrument to assess junior officers' knowledge of policy development and to determine future training needs. In late 2010, the Information Dissemination Survey was developed, consisting of 26 questions. The survey was an anonymous, self-reported survey disseminated to junior officers via Survey Monkey. A total of 309 junior officers completed the survey. The results are below.

Rank

Of the respondents, 9.7% (30) were LTJGs, 38.2% (118) were LTs and 51.1% (158) were LCDRs.

Years of Service

Fifty-four percent of the survey participants reported serving between 2-4 years in the Corps.

Represented Agencies

The top three agencies represented by participants were FDA 24.6% (76), IHS 23% (71), and CDC 13.6% (42).

Professional Category

The top three categories represented by respondents were the Health Services 28.8% (89), Pharmacist 19.1% (59), and Nurse 14.9% (46) categories.

Knowledge Assessment

The purpose of this section of the survey was to assess participating officers' knowledge of the Corps' policy development processes and procedures. However, we are aware that since the completion of survey, the Corps has gone through a reorganization. Below are the questions and answers from the knowledge assessment.

Who has signatory authority over instructions and personnel policy memorandums in the Commissioned Corps?

Answer: The Office of the Assistant Secretary for Health has signatory authority over instructions and personnel policy memorandums. (43% answered correctly)

Which office is responsible for policy development?

Answer: Prior to the new structure of the Corps, the Office of

Commissioned Corps Force Management was responsible for policy development under the Office of the Assistant Secretary for Health. However, within the new structure, the Division of Commissioned Corps Personnel and Readiness (DCCPR) is now responsible for policy and is under the Office of the Surgeon General. (38% answered correctly)

Who is responsible for establishing regulations/directives?

Answer: The Secretary establishes all regulations and directives for the Corps. (15% answered correctly)

Which title of the US Code specifically provides guidance to the US Public Health Service?

Answer: Title 42. (54% answered correctly)

What is the website for Commissioned Corps policies?

Answer: Commissioned Corps Management Issuance System (CCMIS). (82% answered correctly)

In what order are major issuances in the Commissioned Corps developed?

Answer: Directives issued by the Secretary, Instructions issued by the Assistant Secretary for Health, Personnel Policy Memorandum (PPM) issued by the Assistant Secretary for Health, Personnel Operations Memorandum (POM) issued by the Surgeon General. (52% answered correctly)

Professional Development Interest

Participants expressed interest in learning more about policy development (84.6%), while 80.8% of participants would be interested in policy development training. Recommendations for training formats are as follows: 74.4% (230) expressed interest in web-based trainings or conference calls; 54.7% (169) preferred in person training; and 27.8% (86) would like breakout sessions at professional conferences.

Among the participants who were interested in participating in policy development trainings, 55% (170) recommended that training not exceed 1 hour, while 24.6% (76) recommended 30 minutes.

As it related to dissemination of information, 98.4% (304) of participants preferred receiving information via email or listserv, particularly the JOAG list serve (95.5%). Regarding social media, 73.1% (226) of respondents currently use social media. Among the them, Facebook appeared to be the most popular form of social media used.

Continued on Page 11

Junior Officers Promoting the Public Health Service Commissioned Corps at the 2012 USA Science and Engineering Festival

Contributed by LCDR Qiao Bobo, LCDR Theodore Garnett and LT Samantha Spindel

Science is cool... and so are scientists and engineers! That was the message of the 2nd USA Science & Engineering Festival, held April 28-29, 2012 at the Washington, D.C. Convention Center. Twenty five USPHS Commissioned Corps officers (23 of whom were Junior Officers), representing 5 categories and 6 agencies, volunteered at the country's largest science festival to raise public awareness of the importance of science and engineering.

With more than 3,000 exhibits and 150 stage shows, the festival celebrated science in much the same way as society celebrates Hollywood personalities, professional athletes and pop stars. The crowd cheered science luminaries including astronauts, Bill Nye the Science Guy, and even the Science Cheerleaders (think molecular biologists, astrophysicists and surgeons who also happen to be current or former NFL and NBA cheerleaders). The organizers clearly did something right because more than 150,000 attendees battled the rain, traffic and crowds to attend the days' events at the Convention Center.

The theme of the USPHS exhibit booth was **"Inspiring the Next Generation of Public Health Responders."** In this spirit, our enthusiastic volunteers greeted over 1,000 visitors, many of whom had never heard about the United States Public Health Service. The visitors included high school students, undergraduate and graduate students, as well as teachers, parents, nurses, doctors, and other uniformed service officers from our sister branches. We engaged students about their career interests, promoted our student opportunities, fielded questions about the Commissioned Corps, handed out PHS promotional materials, and directed them to our online resources for additional information. We emphasized jokingly to the students that while we may not carry rifles, we surely know how to use a gene gun!

The event was sponsored by DC COA and supported by Dr. Lesley Russell, Sr. Advisor for Science and Policy for the Office of the Surgeon General, RADM Boris D. Lushniak, Deputy Surgeon General and RADM Christopher G. Halliday, Chief of Staff. Dr. Russell visited our booth on Saturday to show her support and encouragement. It is comforting to know that the future of the PHS is in the hands of such a supportive, charitable, gifted and generous group of officers.

The USPHS representation at this highly attended and visible festival would not have been possible without the hard work of the PHS Science and Engineering Festival Committee, which included LCDR Ted Garnett, LCDR Kun Shen, LT Samantha Spindel and LT Pattama Ulrich and with the full support of DC COA president: CDR Vicky Borders-Hemphill, DC COA Community Outreach Committee Chairpersons: LT Dustin Price and LT Ulrich and Science Fair Judge Subcommittee Chairpersons: CDR Jacqueline Rodriguez and LCDR Yvette Waples. The PHS Science and Engineering Festival Committee, under LCDR Ted Garnett's leadership, is now part of the DC COA Science Fair Judge Subcommittee. DC COA Science Fair Judge Committee also hosts the development of the Surgeon General's Science Award's criteria and implantation plan. Many of the officers mentioned above are part of this initiative. The committee plans to continue its effort for years to come.

The 3rd USA Science & Engineering Festival will be held on April 26-27, 2014 at the Convention Center in Washington, D.C. LCDR Ted Garnett, LT Samantha Spindel, LCDR Kun Shen and LCDR Qiao Bobo have formed a new PHS Science and Engineering Festival Committee to plan for the event. If you're interested in being a volunteer next year, a call for volunteers will be sent out on the DC COA and PACs' listservs.

Many thanks to our volunteer officers: LCDR Qiao Bobo (Scientist, FDA), LCDR Christye Brown (HSO, DOD), CDR Chekesha Clingman (Scientist, FDA), LCDR Carol Corbie (Nurse, HRSA), LCDR Dat Doan (Pharmacist, FDA), LCDR Nga (Nicole) Doan (Pharmacist, FDA), LCDR Dominic Frasca (Scientist, FDA), LCDR Theodore Garnett (Scientist, FDA), LT Tanya Grandison (HSO, HRSA), LT Leo Gumapas (Engineer, NIH), LCDR Jill Hammond (Engineer, FDA), CAPT Omar Hottenstein (Scientist, DOD), LT Simleen Kaur (HSO, FDA), LT Jonathan Kwan (HSO, FDA), LT Jung Lee (Pharmacist, FDA), LT Neil Mafnas (HSO, FDA), LCDR Lana Rossiter, (Scientist, FDA), LCDR Shane Sims (HSO, ASPR/NDMS), LT Samantha Spindel, (Engineer, FDA), LT Nancy Tian (Scientist, ASPR), LT Nadra Tyus (Scientist, HRSA), LTJG Anthony Valloric (Nurse, NIH), LT Sherri Wheeler (Nurse, BOP), LT Niketta Womack (HSO, FDA), LCDR Jyl Woolfolk (HSO, FOH).

Chair Article - Continued from Page 1

These officers have set the stage and paved the way for JOAG to be a viable and trusted advisory group to the Office of the Surgeon General (OSG).

For those of you who are new to the Commissioned Corps, JOAG serves as an advisory group to the OSG, providing input on policies and programs affecting the future of the Corps, specifically as they relate to junior officers. JOAG provides representation on behalf of all junior officers at high-level meetings with PHS leadership. As issues arise within PHS, JOAG communicates this information to the JOAG general body and develops workgroups and committees to discuss and address these specific needs or concerns. JOAG then provides the OSG and PHS leadership with these recommendations from a junior officer perspective.

JOAG is a truly exceptional organization. I am always amazed at the breadth of experience, the organization, expertise, and most importantly, the dedication of the committee chairs and members who have an idea or recognize a need and work to see it implemented on a policy or operational level. I encourage you all to be the change you wish to create and get involved with JOAG. There are a variety of opportunities to get involved, including but not limited to: participation in JOAG general meetings, journeyman series, and local Meet and Greets, in addition to other ad-hoc activities. There is something for everyone, and if we have not developed it yet, feel free to make the recommendation. If you have not already done so, please visit the JOAG website at www.usphs.gov/corpslinks/joag/ for more information to and subscribe to the JOAG listserv.

I also highly encourage junior officers to become familiar with and knowledgeable of the policies being implemented and released. You can familiarize yourself with these policies by visiting the Commissioned Corps and Issuance System (CCMIS) website at <http://dcp.psc.gov/ccmis/>.

JOAG is where it is today because of junior officers like yourself. Remember that what we may lack in rank we will make up for in leadership, integrity, service, and excellence. Continue to strive to make it to the next level, remembering to set the best example possible for those that may come after you. Maintain respect for your peers and senior officers, and strive for excellence in all that you do.

Very Respectfully,
LT Tracy Tilghman
Chair, Junior Officer Advisory Group

JOAG Policy Development - Continued from Page 9

As a result of the survey, the Policy Development & Training workgroup became a formal subcommittee of the Policy and Procedures Committee. The Subcommittee reviewed the survey results and made the following recommendations.

- Invite the Team Lead for the Policy Group to participate in the 2013 JOAG Journeyman Series
- Facilitate a presentation on policy development at the 2013 USPHS Symposium
- Ensure that all JOAG members are signed up for the Commissioned Corps eBulletin.
- Submit articles on policy development updates and trainings in the JOAG Journal.

Special thanks to all the junior officers who participated in the survey.

Admiral's Corner - Continued from Page 4

AC: Many who work at DoD may not be familiar with PHS. Are there any training programs available for civilian and military managers who supervise PHS officers about the PHS personnel system, i.e., for promotions, COERs etc.?

RADM McGinnis: First, as PHS officers, it is our duty to inform those who are not familiar about PHS. Also, the DoD-PHS Liaison regularly coordinates with Division of Commissioned Corps Personnel and Readiness (DCCPR) to schedule training sessions on PHS promotions, awards and COER, etc., that are open to all officers including their supervisors. The announcement for these training sessions is shared via TMA email notification. PHS personnel related information is also posted on the PHS webpage of the Military Health System website at www.health.mil/PHS.

AC: The DoD is an exciting and fluidic work environment. Would you like to highlight any important initiatives of interest in your organization?

RADM McGinnis: TRICARE Pharmaceutical Operations Directorate (POD) has been at the forefront of many initiatives to control rising pharmacy benefit costs and to improve health outcomes. I'd like to highlight two programs in particular; the first, expanded vaccine coverage for our beneficiaries. TRICARE retail network pharmacies are authorized providers for the administration of TRICARE covered vaccines in the retail pharmacy setting. The TRICARE pharmacy benefit covers all preventative care vaccines that are recommended by the Centers for Disease Control and Prevention at no cost to TRICARE beneficiaries. Over 1 million vaccines have been administered under this program since December 2009. The other is the Federal Ceiling Pricing (FCP) program that was implemented in 2009 through Congressional authority, where by the DoD is able to obtain federal discounts for TRICARE prescriptions filled in the retail pharmacy venue. To date, the FCP program has collected over \$5.3B in refunds from drug manufacturers since fiscal year 2009.

AC: In 2012, many PHS officers deployed in accordance with our mission. Do you foresee a greater number of DoD agencies permitting Corp officers to participate in disaster response?

RADM McGinnis: The number and discipline of PHS officers deployed is contingent upon the requirements of

the mission. With the exception of a hand full of PHS officers who are considered mission critical, all PHS officers at TMA are on deployment rosters. It is important for officers to keep their supervisors informed of their roster on-call status. A notification is usually sent by OFRD a few days ahead of the on-call month, which is a good time for officers to inform and seek concurrence for deployment. Should an officer be called to support a DHHS mission, they should always inform their supervisor and the PHS-DoD Liaison prior to deploying. Voluntary deployment missions need supervisory approval.

AC: In light of the President's Affordable Care Act, there may be a need for expansion of healthcare providers. How can other disciplines in the Corps help fill this need at the DoD?

RADM McGinnis: The Affordable Care Act expands access to healthcare however it had little impact on the TRICARE benefits. Additional legislation, the TRICARE Dependent Coverage Extension Act, created TRICARE Young Adult, a premium-based program that extended health benefits for adult children of TRICARE beneficiaries up to age 26.

AC: Communication at all levels is the key to success in every organization. What is the best advice you can offer to the next generation of Corps officers?

RADM McGinnis: I encourage every officer whether a new call to active duty or a much senior officer to participate in mentoring programs. As mentors, officers will have the opportunity to share their knowledge and expertise as well as enhance their leadership skills through the development of others. This opportunity will contribute to another officer's success. For mentees, a personal relationship with their mentors can help foster professional relationships, identify strengths and areas of opportunities for professional enhancement, and assist in achieving career goals. The mentoring program will help shape and develop future leaders of the PHS Commissioned Corps. I currently mentor several officers and some of the senior officers have several other mentors. This is the best way to use mentoring to its fullest since different people provide different perspectives.

If you have ideas and questions for the next Admiral's Corner, please contact LCDR David Wright at david.wright@tma.osd.mil.

Demonstrating Value of the Corps through Leadership

Contributed by LCDRs Elizabeth Garza and Heidi Hudson

The JOAG's *Journeyman Speaker Series (JSS)* is a bi-monthly hour-long speaker series hosted by the organization's Professional Development Committee, which provides information on career advancement and officership to Junior Officers. In 2011, two distinguished USPHS senior officers, RADM Scott Giberson and RADM (ret) Robert C. Williams, P.E., DEE shared their wisdom for successful professional development with junior officers in presentations focusing on officership and leadership.

Looking at our core value of leadership, how do we as Junior Officers strive to provide vision and purpose in public health through inspiration, dedication, and loyalty? One way is to learn from great leaders around us like RADM (ret) Robert C. Williams, P.E., DEE, former Deputy Surgeon General, who served over 34 years in uniformed service in environmental engineering and public health. RADM (ret) Williams discussed several key leadership principles in his presentation *Public Health Leadership in Challenging Environments* including:

- Vision, Focus, Drive, Commitment, Determination – to do the “unbelievable”
- Communication – leaders need to be effective in all forms of communication
- Flexibility
- Empathy & Patriotic call to duty
- Persuasive use of health statistics to translate science into public health action
- Owning responsibility – right way and wrong way to exert your authority
- Diplomacy and Humility
- Honor and Courage
- Integrity above all

RADM (ret) Williams gave examples how junior officers can apply the aforementioned leadership principles through stories and photos of well-known leaders within and outside of the USPHS Commissioned Corps. He also gave



Rear Admiral Robert Williams (ret)

officers a few “rules” on leadership:

- Tell the truth: it takes fewer words, it's easiest to tell, easiest to remember
- Have respect for higher level positions (even though you may not respect the person)
- Control your emotions; anger rarely succeeds
- Pick your fights: some things are worth fighting for
- Challenge those things that are illegal, immoral or bad public health practice
- Training and experience can make you an outstanding leader, but only you can choose your integrity.

“The USPHS Commissioned Corps needs leadership from each of us – all of you!”

Leadership, Service, Excellence and Integrity!

**The presentations covered in this article may be found on the JOAG Resource Page.*

Visit JOAG at: <http://www.usphs.gov/corpslinks/joag/>

JOAG Congratulates all Junior Officers on their recent/upcoming promotions!

(Promotion Cycles Aug 2012–March 2013)

To Commander (O-5)

Dental

Daniel Thomas Barcomb	01/01/2013
Mandie Lynn Smith	10/01/2012

Engineer

Jill Rochelle Hammond	01/01/2013
Benjamin Albert Marnell	10/01/2012
Janis Marie Mccarroll	01/01/2013
Michael Garrett Roberts	01/01/2013
Steven Karl Sauer	10/01/2012
Varsha B. Savalia	01/01/2013
Daniel Neil Webster	10/01/2012

Environmental Health Officer

Derek A Newcomer	11/01/2012
Michelle E. Noonan-Smith	01/01/2013
Carolyn Jean Oyster	10/01/2012
Troy Lee Ritter	10/01/2012
Charles David Woodlee	01/01/2013

Health Services Officer

Ann Marie Arnett	01/01/2013
Allyson A. Brown	01/01/2013
Rebecca A. Bunnell	10/01/2012
Luis A. Carrion	01/01/2013
Julie Anne Chodacki	01/01/2013
Darrlyn W. Cornelius-Averha	10/01/2012
Ulgen Semaye Fideli	02/01/2013
Anna S. Johnson	01/01/2013
Kristin J. Kelly	10/01/2012
Kara Nichelle Ellis Lampasone	01/01/2013
Kenneth Matthew Monahan	01/01/2013
Cara Ann Nichols	10/01/2012
Melanie Renee Ross	10/01/2012
Karen S Russell	10/01/2012

To Lieutenant Commander (O-4)

Engineer

Quentin Brad Allen	01/01/2013
Leonard C. Brown	01/01/2013
Jason Alvin Schneider	10/01/2012
Charles Daniel Thompson	01/01/2013
Tristan Thomas Woster	01/01/2013

Environmental Health Officer

Travis R Bowser	10/01/2012
Thida G Buttke	01/01/2013
Hristu Bogdan Chepa	10/01/2012
Christopher Andrew Fletcher	01/01/2013
Valerie Sue Herrera	01/01/2013
Brian M. Lefferts	01/01/2013
Holly Lynn Sebastian	01/01/2013
Racquel Y Stephenson	01/01/2013
Kelli Louise Wilkinson	01/01/2013

Health Services Officer

Paula M. Arango	01/01/2013
Olin E Bakke	01/01/2013
Isaac Mutch Bell	10/01/2012
Kendra Nicole Bishop	01/01/2013
Donna K Chaney	10/01/2012
Anita Edwards	01/01/2013
Natalie Katrina Gibson	01/01/2013
Stacy M. Harper	10/01/2012
Joe Merritt Hill	01/01/2013
Arthur Grant Hurst	10/01/2012
Brandon Terrance Johnson	01/01/2013
Vesnier Adam Lugo	10/01/2012
Valerie Brown Marshall	01/01/2013
Steven Richard Miller	10/01/2012
Dina Beth Passman	10/01/2012
Melinda Ruiz	10/01/2012

JOAG Congratulates all Junior Officers on their recent/upcoming promotions!

(Promotion Cycles Aug 2012–March 2013)

To Commander (O-5)

Health Services Officer

Shane S. Sims	01/01/2013
Camille Sharmila Soondar	10/01/2012
Willie Tompkins JR	10/01/2012
Thiep Thanh Vo	10/01/2012

Medical Officer

Michael Lee Bartholomew	10/01/2012
John F. Beltrami	09/01/2012
Paul T. Cantey	08/01/2012
Sylvie Israel Cohen	10/01/2012
Jon C Stucki	09/01/2012
David E Sugerman	10/01/2012

Nurse

Grafton George Adams	10/01/2012
Evelyn Blaemire	10/01/2012
Tonya Sue Brown-Stobbe	09/01/2012
Scott Alan Colburn	01/01/2013
Joyce T. Davis	01/01/2013
Christine Marie Fallon	01/01/2013
Monique Shantear Frazier	01/01/2013
Maria Grace Gomes	10/01/2012
Shelly E. Hollandsworth	10/01/2012
Anitra Johnson	03/01/2013
Timothy John Kiniry	01/01/2013
Charles Mathew Lovell	10/01/2012
Megan Janette Mackey	10/01/2012
Megan Sarah Mattingly	09/01/2012
Carol A. Mcalman	10/01/2012
Lisa Diane Meyers	10/01/2012
Rosa Maria Peralta	01/01/2013
Nicole Dawniel Plass	01/01/2013
Jennifer Paulette Pope	10/01/2012

To Lieutenant Commander (O-4)

Health Services Officer

Avena Denise Russell	01/01/2013
Brent Thomas Stephen	01/01/2013
Sharyl Marie Trail	10/01/2012
Rebekah Anne Van Raaphorst	01/01/2013
Debra Lynn Wagner	01/01/2013
Tina Rokhsareh Walther	01/01/2013
David Alan Wheeler	10/01/2012
Harold I White	01/01/2013
Jonathan L. Whitehart	10/01/2012

Nurse

Christine Renee Collins	01/01/2013
Adrienne Janell Hall	01/01/2013
Kristi Beth Henaghan	01/01/2013
Lakeisha Watkins Hicks	01/01/2013
Sophia Hsu	10/01/2012
Solveig F Johnson	10/01/2012
Jacob Samuel Malouf	10/01/2012
Keith Gary Marin	10/01/2012
Stacey Reid Mcbryde	01/01/2013
Andrew Nyabaro Nyabwari	10/01/2012
Tina Suzanne Objio	01/01/2013
Katherine Ann Oconnor	01/01/2013
Ebb Anthony Olwell	10/01/2012
Jeneen Nicole Ratliff	10/01/2012
Bernadine Laverne Russell	01/01/2013
Theresa Dianne Stenmark	10/01/2012
Pattama Saengsawang Ulrich	10/01/2012
Ihsan F. Umrani	10/01/2012
Denise Lynn Vanmeter	01/01/2013

Pharmacist

Daniel Wayne Conant	10/01/2012
Eric Kyei Oduro	10/01/2012

JOAG Congratulates all Junior Officers on their recent/upcoming promotions!

(Promotion Cycles Aug 2012–March 2013)

To Commander (O-5)

Nurse

Tarah Sage Somers	10/01/2012
Lisa Jennifer Lynn Townshend-Bulson	10/01/2012
Duane Edward Wagner	10/01/2012
Viven Denise Walker-Marable	01/01/2013

Pharmacist

Karen Dianne Abraham-Burrell	08/01/2012
Peter Anthony Laluk	10/01/2012
Zachery Lee Miller	01/01/2013
Hyun Joo Son	10/01/2012
Alice Sze-Man Tsao	10/01/2012

Scientist

Minglei Cui	02/01/2013
Adrienne Juanita Goodrich-Doctor	10/01/2012
Keisher Highsmith	10/01/2012
Matthew William Murphy	10/01/2012

Therapist

Stanley Wayne Bennett	02/01/2013
Gwendolyn Hanchey Hall	03/01/2013
Amy Humann Hesselgesser	10/01/2012
Michael Gregory McClain	10/01/2012

Veterinarian

Heather Dawn Bairbrake	09/01/2012
------------------------	------------

To Lieutenant Commander (O-4)

Pharmacist

Jennie Zsuya Wong	01/01/2013
-------------------	------------

Scientist

Jessica Cole	10/01/2012
Yoran Grant	10/01/2012
Mark Frederick Miller	01/01/2013
Matthew Cannon Steele	01/01/2013
Eboni Monique Taylor	01/01/2013

Therapist

Alice A Hopper	10/01/2012
----------------	------------

JOAG's mission is to provide advice and consultation to the Surgeon General, Chief Professional Officers, Professional Advisory Committees, & other Commissioned Corps groups on issues relating to professional practice and personnel activities affecting Junior Officers in the USPHS Commissioned Corps.

JOAG Welcomes 110 Newly Commissioned Officers!

(September – December 2012)

Contributed by the JOAG Welcoming Committee

ATSDR

LT Ayana Anderson
LT Theresa Ann Grant

BOP

LCDR Beatrice Lunsford-Wilkins
LT Kelly Marie Faith
LT Mark Arena
LT Negassi Mebrahtu Bire
LT Jennifer Conn
LT Francelyse Paul
LT Wayne Weissinger
LTJG Cassidy Burchett
LTJG Camillus Ezeike
LTJG Alex Abimbola Folami
LTJG Amaryllis Johnson
LTJG Lirissia Yulchell Mccoy
LTJG Okezie Okoli
LTJG Jerome Ranson Simpson
LTJG Jennifer Underwood
LTJG Eric Wilson
LTJG Michael Addison Meador
ENS Rachel Channer
ENS Robert Chavarin
ENS Stephanie Hagelsieb
ENS Ramona Kistler
ENS Jennifer Petro
ENS Charles Thomas
ENS Mark Ubbens
ENS Jasmine Wanders
ENS Shukriya Zarif
ENS Chelsea Patricia True
ENS Eric Wong

CDC

LT Corey Campbell
LT Travis Mann
LT Avi Stein

CMS

LT Ellen Imani Dieujuste

DHS

LCDR Jason Benedict
Buenaventura
LCDR M Masih Soltani
LT Yandace Brown

LT George Chow
LT Debra A. Cooper
LT Lisa Ellis
LT Karly Anne Gomez
LT Peter Thomas Hughes
LT Luis Iturriaga
LT Joseph Newcomb
LT Michael John Reed
LT Diana Yi Fei Wong
LTJG Shannon Best
LTJG Cynthia Matilde Cabello
LTJG Steven Essien

DOD

LCDR Christopher Perdue
LT Jennifer Cockrill

DOD TMA

LCDR Jessica Schultzfischer
LT Trami Nguyen
LT Rosson Smith
LT Monique Worrell
LT Cara Alexander

FDA

LCDR Jamila Abdullah Mwidau
LT Henry Allen
LT Oluwaseun Adekemi Asante
LT Onieka Carpenter
LT Matthew Adam Johnson
LT Rana Kim
LT Christina Lee Kirby
LT Richard Anthony Lyght
LT Justin Mathew
LT Osamede Onaghise
LT Shawn Marie Shermer
LT Ruby Tiwari
LT Anne Crandall Tobenkin,

HRSA

LCDR Deborah S. Belsky

IHS

LCDR Sherry Hammock
LCDR John Andrew Lang
LT Holly Anderson-Caldwell
LT Jonathan Boress

LT Jason Brown
LT Rose Gaikowski
LT Dustin Hampton
LT Kathryn Elizabeth Hanlon
LT Ross Hanson
LT Paul Hoffman
LT James Keith Ireland,
LT Nicole Lawrence
LT Benjamin Le
LT Peter Littlehat
LT Weston Wayne Lovelle
LT Monica Murie
LT Dustin Joseph Oxford
LT Antonio Parameswaran
LT Mary Lee Petersen
LT Randal Sherron
LT Jamie Ann Smith
LT Travis Robert Spaeth
LT Ann Truong
LT Brad Weekley
LT Billita Williams

IHS

LTJG Trevor Baird
LTJG Timothy Schmidt
LTJG Kendra Vieira

INTERIOR

LT Danielle Elise Buttke

NIH

LCDR Joseph Raymond Fontana
LT Kristen Cole
LT Corey Allen Cosgrove
LT Cynda Hall
LT Ick Ho Kim
LT Sarah Lee
LTJG Leslie Poudrier

OS

LT Alyson Rose-Wood
LTJG Toni Lachanda Hallman
LTJG Donnamarie Spencer

Visit JOAG at: <http://www.usphs.gov/corpslinks/joag/>

Merchandise



JOAG Medallion

The JOAG Medallion serves as a constant reminder that we are officers in the Commissioned Corps. It also serves to remind us of certain characteristics an officer must have: generosity, elevation of mind, goodness, nobility, camaraderie, and the continuity of these ideals through time.

Buy one for \$10 and get a 2nd coin 1/2 off (plus shipping and handling)

PHS Core Values Coin

The PHS Core Values Coin serves to remind all officers of the four Commissioned Corps Values of Leadership, Service, Integrity, and Excellence.

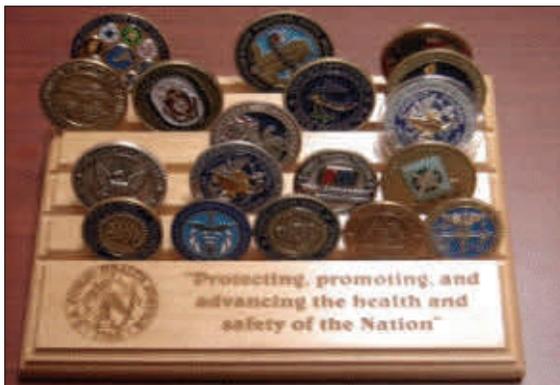
Buy one for \$10 and get a 2nd coin 1/2 off (plus shipping and handling)



USPHS Coin Rack

This solid pacific coast maple coin rack measures 7"x9" and has five rows that can hold military and USPHS coins. It has the USPHS seal and mission laser engraved on the front.

\$26 and receive a free coin with purchase (plus shipping and handling)



Interested in ordering? Visit the Merchandise section of the JOAG website to view the order form and instructions:

<http://www.usphs.gov/corpslinks/JOAG/merchandise.aspx>

For questions related to purchasing items please or contact LCDR Tina Walther, JOAG Financial Liaison at Tina.Walther@fda.hhs.gov.

Visit JOAG at: <http://www.usphs.gov/corpslinks/joag/>

JOIN OUR MEETINGS

JOAG General Meeting and Journeyman Series 2013

Apr 12, 2013: JOAG Membership Meeting, 1300-1500 EDT

May 22, 2013: General Meeting at COF Symposium

Jul 12, 2013: Journeyman Speaker Series, 1300-1400 EDT

Aug 9, 2013: JOAG General Membership Meeting, 1300-1500 EDT

Sept 13, 2013: Journeyman Speaker Series, 1300-1400 EDT

Join us for JOAG's monthly meetings via teleconference on the second Friday of each month.

By Conference Call: (218) 936-4700
Passcode: 791-9605#

Miss a JOAG Meeting? Don't despair! JOAG meetings are recorded. Audio recordings are available "on demand" by e-mailing LCDR Hiren Patel at Hiren.Patel@fda.hhs.gov

Any opinions or thoughts presented in the JOAG Journal are solely those of the author and do not represent the U.S. Public Health Service (USPHS), United States Department of Health and Human Services (HHS), or any other government agency.

This newsletter has been provided by the JOAG Communications & Publications Committee. For more information on how to contribute to future editions, please contact Committee Chairs LCDR Gene Gunn at Gene.Gunn@fda.hhs.gov, LCDR Willy Lanier at William.Lanier@fda.hhs.gov, or JOAG Editing Subcommittee Lead LCDR David Wright at David.Wright@tma.osd.mil

Visit JOAG at: <http://www.usphs.gov/corpslinks/joag/>