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- The Junior Officer Advisory Group (JOAG) is a public health professional group whose purpose is to provide advice to other Corps and non-Corps entities on interests and concerns specific to junior officers in the United States Public Health Service (USPHS) Commissioned Corps.

- The Junior Officer Chronicles (JOC) is a quarterly publication produced by the JOAG Communications & Publications Committee (CPC) JOC Subcommittee. The 2018-2019 JOC Co-Leads are: LCDR Tara Jatlaoui and LT Roseline Boateng. The CPC Co-Chairs are: LCDR Christine Corser and LCDR Stephanie Kenez and the Executive Committee (EC) Liaison is LT Darby Murphy.

- Send editorial comments and concerns to LCDR Tara Jatlaoui and LT Roseline Boateng.

- To contribute to a future edition, submit articles to LCDR Tara Jatlaoui and LT Roseline Boateng.

- Any opinions or thoughts presented in The Junior Officer Chronicles are solely those of the author and do not represent the USPHS, United States Department of Health and Human Services (HHS), or any other government agency.
Greetings Fellow Junior Officers!

Happy New Year! When this was originally written we were in the middle of a partial government shut-down. Not the best way to start 2019 but it did pass. That situation, where some agencies were funded and some not, was very different from the last significant/long shutdown in 2013, when no agencies were funded. During a shutdown, many Public Health Service (PHS) officers must take on additional roles and responsibilities, while others are limited in what they are permitted to do. We should all strive to be mindful of those differences and endeavor to be as helpful as we can. During those difficult and uncertain periods, we are also presented a great opportunity to showcase the value of the PHS. It is our duty, as officers, to be flexible, accept the good with the bad, have a positive attitude, and continue to do the best job we can day-in and day-out.

We, as Public Health Service officers, fill essential public health, clinical, and leadership roles within the nation’s Federal Government departments and agencies. Networking with others who are also driven by a passion for public service is vital. With PHS officers stationed in over 20 federal departments or agencies across the nation, we have ample opportunities to grow and learn from each other. I challenge you to take some time to reflect upon how you might be able to network with other officers in an agency you are unfamiliar with; get involved in that activity that you keep putting off...NOW is the time! Asking questions, networking, and sharing with one another is not only a great way to understand what other officers across the nation are doing, but provides you with an insight into what opportunities are available to you. If you have a unique position, an unusual detail or work experience, or an exciting story, please share!

As we continue to move forward in 2019, there are many exciting opportunities planned for both JOAG and the Corps. We continue to strengthen our bonds and increase collaboration with other PHS chartered groups, the PACs, and the Chief Professional Officer Board to reduce duplicative efforts and increase communication channels. If you find an area where these efforts can be improved, please bring it to our (JOAG’s Leadership’s: PHS-JOAG@list.nih.gov) attention, as improvements can only be made if we are aware.

The annual COA Symposium in May is quickly approaching and JOAG is in the planning phase of hosting some very exciting events (stay tuned for additional details). While it is sometimes easy to focus on the bad or the unknown, try to remember we have, as a Corps, an amazing mission and significant opportunities to continually highlight the value of the PHS. Again, all we can do is try our best, stay positive, and let whatever we do today be something we can be proud of.

Today, I challenge each of you to step forward, get out of your comfort zone, volunteer, and lead where you can from where you are, for JOAG, your agency, the Corps, and in your personal lives. Do not let your experience (or lack of experience), rank, location, etc. hold you back. Hard work, dedication, a positive attitude, and good communication will help you overcome any obstacle!

I wish you all the best in 2019 and look forward to all we can achieve together for not only JOAG, but also for the Corps, our agencies, the US Government and those who we ultimately serve, the American people.

Yours in Service,

LCDR Chris M. Sheehan, MS, MBA, NREMT

JOAG Chair 2018-19
WE WANT TO SEE YOU!

The 54th United States Public Health Service (USPHS) Scientific and Training Symposium will be held this year in Minneapolis, MN on May 6-9, 2019. While that may seem like a long time away, it will quickly arrive! The annual conference is a marquee event bringing together PHS officers to learn and share the functions and broad scope of activities, research, and opportunities accomplished within the PHS. Details of the upcoming Symposium are available on the Commissioned Officer’s Foundation (COF) website.

JOAG is excited to be spearheading the following events for the upcoming Symposium:

- **JOAG General Member Meeting.** All junior officers are encouraged to attend JOAG’s only in-person meeting of the year. This meeting provides an opportunity for junior officers to meet with senior PHS leadership and we have invited the Surgeon General, Deputy Surgeon General, and Chief Professional Officers. The JOAG meeting will be held on Thursday, May 9 from 0700-0900 CT.

  *JOAG Award Presentations:* During the JOAG General Member Meeting, officers selected for the JOAG Junior Officer of the Year, JOAG Excellence Award, JOAG VADM Richard H. Carmona Inspiration Award, and VADM C. Everett Koop Junior Officer Award will be recognized in a dedicated ceremony.

- **JOAG Junior Officer Career Enhancement Booth:** We will provide information to educate and inform officers of professional development opportunities. Please stay tuned for more information on new initiatives. We will also be selling JOAG merchandise at the booth.

- **JOAG Uniform Inspection Booth:** Please be sure to stop by JOAG’s Uniform Inspection Booth to make sure your uniform is “squared away” for important happenings.

- **Community Service Event:** Please plan to join us as we give back to the local community. Please stay tuned for more information on this event.

- **JOAG “Back to Basics” Presentation:** This presentation will offer guidance to help officers better prepare for deployments. Please stay tuned for more information on this initiative.

- **USPHS Combined Social** (planned jointly with local Commissioned Officers Association (COA) Branch): An evening dedicated to networking across categories with officers attending the Symposium.

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LETTER FROM THE EDITORS

Happy New Year! Welcome to the Winter Edition of the Junior Officer Chronicles (JOC). The energy of a new year allows us to reflect on our recent experiences and to set our sights on opportunities for growth. Every edition we are reminded of why we choose to serve in PHS and how there are always chances to become involved, to contribute and to lead. We hope you find some time to read and reflect on your goals for this year. We hope this edition’s articles inspire you to stretch yourselves out of your comfort zones and create ways to connect with your communities and fellow officers. Consider sharing your experiences, reflections or lessons learned sometime this year with the JOC and you could inspire others into action!

We have several new JOC subcommittee members that we will introduce over the next few editions. Meet two more of the JOC team who help make this publication possible: LT Zera Kwende and LT Jennifer Iverson.

**LT Zera Kwende:** I am a pharmacist from Maryland. I am an alumna of the inaugural class of Notre Dame of Maryland University, School of Pharmacy. I began my USPHS service at the Indian Health Services at Mescalero Indian Hospital where I served as Chief Pharmacist for 3 years. As Chief Pharmacist, I had some amazing experiences like implementing pharmacist-run Hepatitis and Anticoagulation Clinics. I am presently stationed at the Food and Drug Administration in Silver Spring, MD. I manage generic drug applications as a regulatory project manager for the Office of Generic Drugs. I enjoy traveling and exploring in my free time.

**LT Jennifer Iverson:** I am a pharmacist at the Rapid City Service Unit Indian Health Service in Rapid City, SD. I am originally from Colorado and attended pharmacy school at the University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences. In my free time I enjoy hiking and traveling.

We received numerous submissions showcasing the exciting work of our officers. We are very excited to share the stories of leadership, service, integrity and excellence of the Junior Officers. We would like to thank everyone who took time out of their busy schedule to submit, edit or in any way contribute to the publishing of this Winter Edition.

We welcome your feedback for ways we can better serve you. Submissions to be included in the 2019 Spring Edition can be sent to both LCDR Tara Jatlaoui and LT Roseline Boateng with the subject line: “2019 Spring Edition JOC.”

We appreciate your support and thank you for your contribution to JOAG’s premier magazine by junior officers for junior officers.

Happy Reading!
Tara and Roseline, JOC Co-Leads
EXECUTIVE COMMITTEE SPOTLIGHT

LT Darby Murphy

Category: Veterinary
Education: Doctor of Veterinary Medicine (DVM), Master of Public Health (MPH), board certified through the American College of Veterinary Preventive Medicine (ACVPM).
Agency: U.S. Department of Agriculture, Food Safety and Inspection Service
Current duty station: Sturgeon Lake, MN

1. Tell us a little bit about yourself: interests, position, family, hobbies.

I am originally from Eau Claire, WI and attended the University of Wisconsin-Madison where I graduated with a Doctor of Veterinary Medicine degree and a Master of Public Health (MPH) degree. I am also board certified through the American College of Veterinary Preventive Medicine (ACVPM). I am currently a Supervisory Public Health Veterinarian stationed in Minnesota and detailed with the U.S. Department of Agriculture. I am married with small children and we enjoy traveling and spending time outdoors as a family.

2. How did you get involved in Public Health?

I became interested in public health during my fourth year in veterinary school when I took a course highlighting the many ways that veterinarians are involved in public health. After I graduated, I enrolled in a MPH program and began interning at the State Department of Health in their vector-borne disease surveillance program. I also began working in a medical entomology laboratory at the University of Wisconsin-Madison where I completed my MPH capstone project focused on tick-borne disease surveillance. I also completed a residency in veterinary public health and preventive medicine at the University of Minnesota.

3. How long have you been involved with JOAG and what is the most interesting aspect of your involvement with JOAG and/or serving the mission?

I have been involved with JOAG since Fall of 2016. I first reached out to one of the subcommittees within the Public Health and Community Service (PHCS) Committee to get involved with JOAG. I applied to become a JOAG Voting Member in Spring of 2017 and I officially became a Voting Member and Co-Chair of the PHCS committee in Fall of 2017. The role of Voting Member and PHCS committee Co-Chair was a valuable experience for me by providing guidance and support to other junior officers with the goal of promoting health and wellness by implementing and supporting community service activities. Before the next operational year I decided I wanted to gain experience as a JOAG Executive Committee member and applied for the new Executive committee co-Secretary position. Overall, my involvement thus far with JOAG has been an extremely valuable experience in learning new leadership skills as a junior officer.

Continued on next page
4. **What committee do you liaise with and what is that committee doing this operational year?**

I am a liaison to the Communications and Publications (CPC) Committee and the Public Health and Community Service Committee. The CPC Committee is responsible for the dissemination of pertinent Corps-related information to junior officers in a timely and efficient manner. The PHCS Committee provides information and tools to junior officers that promote health and wellness by implementing and supporting community service activities that promote public health and enhance the visibility of USPHS and interaction with other uniformed services.

5. **What do you hope to accomplish/achieve in this position for the operational year?**

I hope to learn new leadership, listening and organizational skills. I also hope to continue to support innovative ways to assist junior officers in their professional and personal lives, connect junior officers to JOAG and ensure all junior officers have access to pertinent information that will improve their daily lives.

6. **What's your favorite piece of advice to share with fellow junior officers?**

Take things one day at a time. Be patient with yourself and remember that big things are not achieved all at once. You are headed down your path at your own pace and with every obstacle you will learn valuable lessons. Also, remember life is fragile, so be sure to make time for the people that matter most to you.

Do you know a junior officer that has a unique duty station? Is the officer a super star at work? Do they work tirelessly to support community endeavors, or just have a story to tell? We want to hear from you! Submit the officer’s name and a short (50 words or less) narrative on why you think this officer’s story should be shared. Submissions should be sent to: LC DR Tara Jatlaoui and LT Roseline Boateng. All submissions will be reviewed and one junior officer will be selected and showcased in each edition of the JOC.
The Joint Service Award Ceremony: A Junior Officer’s Perspective

LT Mouhamed Halwani, Compliance Officer, Food and Drug Administration

LT James Betz, State Liaison, Food and Drug Administration

This past May, the Joint Chiefs of Staff awarded the Department of Defense’s (DoD) Humanitarian Service Medal to qualified members of all branches of the uniformed services for their combined efforts responding to the catastrophic hurricanes that impacted the United States and its territories in 2017. This was the first time in the history of the Commissioned Corps that the medal was awarded for a large-scale deployment. In addition, the Public Health Service (PHS) Outstanding Unit Citation was awarded to both DoD and Commissioned Corps responders, and the Surgeon General’s Exemplary Service Medal was awarded to DoD and PHS leadership who helped spearhead the joint response mission.

A Joint Services Award Ceremony was organized to honor the mission response partners and to commemorate the occasion. The event was hosted by the Assistant Secretary for Health, ADM Brett P. Giroir, and the invitees included Alex M Azar II, Secretary of Health and Human Services; Dr. Robert Kadlec, Assistant Secretary for Preparedness and Response; VADM Jerome Adams, Surgeon General of the United States; Lieutenant General Jeff Buchanan, Commander, United States Army North (Fifth Army); VADM (ret.) Antonia Novello; members of Congress; and team commanders for PHS response teams.

Successful execution of such a high visibility event of this magnitude required strategic planning and flawless execution. As always, junior officers were there to answer the call. LCDR Yvonne Santiago contributed as the Office of the Surgeon General Liaison, LCDR David Young and LCDR Jessica Kreger handled coordination of volunteers, LCDR James Trinidad oversaw the PHS ensemble and choral, LCDR Elizabeth Cohen dealt with military protocols from the event, and LCDR Roberto Garza acted as the reception lead. The most junior members of the team were LT James Betz and LT Mouhamed Halwani, who acted as the program manager and the executive secretary, respectively. Although assigned specific roles, these officers worked alongside senior members of the planning committee to provide all the required essentials to ensure that the event went off without a hitch. Whether it was creating a program for the event, managing RSVPs, escorting members of Congress to their seats, or troubleshooting last minute problems, junior officers worked relentlessly to provide a ceremony worthy of highlighting the efforts of our prestigious Commissioned Corps.

Despite the magnitude of the event and the nerves involved with so much visibility, the junior officers involved executed their duties flawlessly. Each of these officers displayed leadership and served in their respective roles with steadfast resolve and passion. Their participation in planning this event is an example for other Commissioned Corps junior officers to follow and be willing to volunteer and act effectively when given the opportunity.
Joining in the Holiday Spirit with Our Fellow Uniformed Services

Lcdr Gwendolyn Hudson, Scientist, Immigration and Customs Enforcement

The Holiday season brings about time for celebrations and expressions of gratitude. During a time of the year when many active duty servicemembers are often away from their families and unable to share in such joyful occasions, Joint Base Myer Henderson Hall (JBM-HH) coordinates an annual Thanksgiving Luncheon Cruise. As the JOAG project lead for the Grant Hall Event and co-lead of Public Health Community Service Committee (PHCS), Uniformed Services Community Service Subcommittee, I was personally invited in recognition for the coordination of JOAG PHCS volunteers in support of the quarterly Fort Lesley J. McNair Ulysses S. Grant Hall Open House. Grant Hall was the site of the military tribunal held in the summer of 1865 to seek justice for the assassination of President Abraham Lincoln. PHS Officers and their families have volunteered for each of the quarterly open house events since November 2015.

The 2018 cruise was hosted by the Washington Waterfront Association (WWA), a not-for-profit organization made up of business and community leaders with a vested interest in Southwest D.C., and Entertainment Cruises of Washington. The cruise provides not only servicemembers a festive Thanksgiving meal in a casual environment but also seeks to thank community members and veterans for their ongoing service. This year marked the 17th anniversary of the Thanksgiving Luncheon Cruise, whose attendees included single servicemembers from all branches of the military, select guests and volunteers from the National Capital Region, and retirees from the Armed Forces Retirement Home of DC. The whole preparation and arrangement of the event was donated, including the ship, the food; even the ship’s crew donated their time. Members of the WWA voluntarily served as waiters for the event. For the past five years, JBM-HH Community Relations Officer and Coordinator for the Grant Hall Open House Event, Ms. Leah Rubalcaba, served as liaison to the WWA as part of the Community Relations outreach for JBM-HH.

This year’s cruise was held on Tuesday, November 20, onboard the Entertainment Cruises’ Odyssey ship. One of the highlights of the trip was the greeting and hosting of the event by the current JBM-HH commander, Colonel Kimberly A. Peeples (Pictured with LCDR Hudson), and Command Sergeant Major Stephen M. Harris. As part of the ceremony, the JBM-HH leaders welcomed guests as they boarded the ship. At 1130, an opening ceremony began which included an invocation given by Navy Chaplain Commander Paul Rumery, the presentation of the colors by a Joint Service Color Guard, the singing of the National Anthem by Marine Corps Master Sgt. Kevin Bennear and remarks from Entertainment Cruises officials. Once the ceremony concluded, the ship pushed back at 1200 sharp, set for a luncheon and entertainment event along the Potomac River to Georgetown and back for the next two hours.

Entertainment during the cruise was exceptional and evoked dancing from all, including uniformed personnel and veterans who took turns on the dance floor in celebration of this great occasion.

Photo: Ms. Rubalcaba (JBM-HH Community Relations Officer), Col. Peeples (US Army) and LCDR Hudson (USPHS)
LCDR Josue Sanchez

Category: Nurse
Education: MSN, APRN, FNP
Agency: DHS, ICE Health Service Corps
Current duty station: South Texas Detention Complex, Pearsall TX

1. How did you find out about the PHS?

In 2010, I began employment as a Registered Nurse federal contractor for then legacy DIHS, Division of Immigration Health Services. The opportunity to join the U.S. Public Health Service came in May 2012, when I received my direct commission to serve as a Registered Nurse. The decision to become a PHS officer resulted from direct experiences and relationships with fellow officers, whose integrity and leadership inspired me to join the Commissioned Corps.

2. What are your goals with the PHS?

My primary goal with the PHS is to bring greater visibility to the Corps. As officers in our day-to-day jobs, we serve in ways that many Americans do not even know. I am inspired by the Surgeon General’s vision for the Corps, “Better Health through Better Partnerships”. I have found that local Texans are greatly receptive to the value that Public Health Service officers bring to their schools and neighborhoods. In 2017 I achieved a personal milestone of transitioning from an RN to Family Nurse Practitioner (FNP) and received the opportunity to serve and practice with U.S. Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC). Another goal with the PHS is to seek out an opportunity to serve as an FNP for a RedDOG deployment and in Remote Area Medical (RAM) events!

3. What does your current assignment entail?

I am currently detailed to the South Texas Detention Complex, south of San Antonio, TX. As one of only three field Infection Prevention Officers for IHSC, I manage all of the facility’s infectious disease reporting and case management. Facility surveillance includes viruses that are often not seen in the US. For example, in 2018, the Honduran Ministry of Health declared a mumps outbreak, and IHSC has been actively collaborating with our ICE, U.S. Customs Border Protection (CBP), and state health services to ensure appropriate infection control measures are in place to prevent disease transmission. I collaborate routinely with the Texas State Department of Health and Human Services for reporting of HIV and sexually transmitted diseases. The greater portion of my work is managing tuberculosis. I collaborate routinely with Cure TB, an international program that coordinates continuity of care. When patients detained with immigration are deported, this program enables them to continue medication therapy in their country of birth. I am surrounded by an amazing team of nurses, medical providers, and administrators; without their support my work in public health would not be possible.

4. Have you served on any deployments?

I have not served on a PHS deployment. As an officer assigned to IHSC, I routinely TDY to augment critically staffed facilities for 30-60 days annually. I am currently assigned to serve in local RAM events and hope to join a deployment team in the near future.

Continued on next page
5. What is your most memorable PHS experience so far?

Recently in October 2018, I had the opportunity to meet our Surgeon General, VADM Adams, when he visited Austin, TX. I was accompanied by seven other officers who were able to coordinate the meet and greet. I received great encouragement as a junior officer in carrying the torch and demonstrating the value of PHS officers. I even got to take the SG selfie!

6. PHS Collateral duties?

I am the Preventive Action through Community Engagement (PACE) Coordinator for South Texas in Region 6. PACE takes advantage of the expertise of the Corps officer to provide education about the benefits of prevention to the officer’s local community. I am also a member of the Advanced Practice Registered Nurse (APRN) NPAC Sub-committee, and a member of the South Texas COA Chapter.

7. Do you have a personal leadership philosophy or mentor? Is there anyone that inspires you to become a better leader?

As a person of faith, I am a firm believer in servant leadership. I am inspired by the story of Christ, who practiced selfless devotion in attending to the sick, and caring for the poor. His teachings remind me of an old life proverb, “Be the one who does more for others”. I believe this also exemplifies the mission of the PHS, in caring for the underserved. It is, and always will be, a privilege to serve in uniform.
2018 Peace Officer Memorial Mission: National Security Event

CDR Vandna Kishore, Pharmacist, Food and Drug Administration
LCDR Shaun Chapman, Health Services Officer, Health Resources and Services Administration
LCDR Elizabeth Kim, Nurse, Food and Drug Administration,
LCDR Jun Lee, Pharmacist, National Institutes of Health
LCDR Morgan Walker, Pharmacist, Food and Drug Administration
LT John Skender, Environmental Health Officer, Environmental Protection Agency

In 1962, President Kennedy proclaimed May 15 as National Peace Officers Memorial (POM) Day and the respective calendar week as National Police Week. National Police Week pays special recognition to local, state, and federal peace officers who have died, or have been disabled, in the line of duty. In 2018, the 37th annual event was held at the West Front of the U.S. Capitol. In addition to an array of special guests and keynote speakers, President Trump addressed over 40,000 guests, including survivors of the fallen. This year 199 fallen officers were honored.

Planning for this National Event required weeks of preparation from a multi-disciplinary group of professionals. POM 2018 was supported by the Department of Health and Human Services (HHS), Office of the Assistant Secretary for Preparedness and Response (ASPR), and the Office of Emergency Management (OEM). This is a National Security Event. USPHS officers worked alongside the National Disaster Medical System (NDMS) teams to complete HHS’s mission to provide health and medical response resources in support of the response strategy of the Office of Attending Physician to Congress (OAP).

The 2018 POM event drew 40,000 law enforcement officers, their families, and other visitors in attendance, including the President of the United States. This year’s event also yielded the

Continued on next page
REPORT FROM THE RANKS

The highest number of patients seen in our medical tents, resulting in 92 patients requiring medical intervention.

Our mission was to assist logistics personnel in the preparation, transportation, deployment, set up/tear down of equipment, and return/inventory of equipment supporting this HHS response. Ten officers were requested from RedDOG, DCCPR: 1 Pharmacist, 2 Information Technologists, 1 experienced with EMGLOG desk responsibilities, 1 experienced with communication, and 5 General Logistics responders. Officers were deployed between 3 locations: Mission Support Center (MSC) in Frederick, MD, the Humphrey Building in Washington DC, and the Capitol grounds.

The POM event is a great opportunity to prepare for longer deployments. An officer can learn deployment preparation, develop good deployment habits and learn to work with teams from various federal agencies while testing their physical endurance. In the field where heat and humidity can be dangerous, an officer in the POM event will begin to understand the appropriate nutrition needed to keep the body energized while on duty.

In addition to advancing the mission of PHS, missions of this type are great deployment opportunities and experiences for officers. It allows officers to experience, understand, and appreciate the logistical roles of a deployment. Deployments like this will require officers to be away from their duty station for up to 14 days or longer, depending on the event, while providing a great opportunity to serve. POM allows new deployers to vet the adequacy of their deployment planning and packing, practice flexibility, receive training in logistical roles, and learn what roles they may want to fill on potential future deployment teams. Be on the lookout next year for your opportunity to serve!

Photo: CDR Vandna Kishore, LCDR William Brown, LCDR Shaun Chapman, LCDR Kenneth Chen, LCDR Elizabeth Kim, LCDR Jun Lee

LT Deidra Newbrough

Category: Pharmacy
Education: BS in Environmental Health from Colorado State University, PharmD from University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences
Hometown: Rapid City, SD
Agency: Indian Health Service
Current duty station: Northern Navajo Medical Center, Shiprock NM

1. How did you find out about the PHS?

My dad joined the PHS Commissioned Corps as an engineer working for Indian Health Service (IHS) when I was seven years old, so I’ve known about the PHS for almost as long as I can remember. I grew up near reservations in South Dakota and have a lot of family that relies on IHS for care. I’ve always had a desire to give back to the underserved American Indian and Alaska Native population by working as a pharmacist within IHS while also having the ability to respond to public health emergencies, especially with my undergraduate training in Environmental Health. The opportunity to move to different geographic locations or to different operational divisions within HHS, if I ever chose to also appealed to me.

2. What are your goals with the PHS?

My goal is to work to improve antimicrobial stewardship at the local, regional and national levels. Antimicrobial stewardship involves promoting the appropriate use of antimicrobials with the goal of improving patient outcomes, reducing microbial resistance, and decreasing the spread of infections caused by multidrug resistant organisms. I also hope to continue to participate in training future generations of pharmacists as judicious antibiotic stewards.

3. What does your current assignment entail?

Currently, I staff in both the inpatient and outpatient pharmacies at Northern Navajo Medical Center (NNMC). I am also the co-chair of the Antimicrobial Stewardship Committee and a member of the Infection Control Committee. I have several responsibilities in these roles. Most recently I served as Project Lead for the Agency for Healthcare Research and Quality’s Safety Program for Improving Antibiotic Use, which was a yearlong program that involved implementation of a bundle of interventions designed to improve antibiotic use on the Medical Surgical Ward at NNMC. I was responsible for participating in monthly webinars, performing and submitting monthly antibiotic chart reviews, creating and updating hospital specific guidelines for various infectious diseases, submitting data related to the number of Clostridium difficile infections on the unit as well as the total days of therapy of antibiotics throughout the year. I also create and distribute an annual antibiogram, which is a table summarizing the percent of individual bacterial pathogens susceptible to different antimicrobial agents to guide empiric therapy, with the help of our microbiology lab. I have also worked with our infection prevention nurse and surgeons to address compliance with appropriate surgical antibiotic prophylaxis by simplifying nine antibiotic quick-order menus in an effort to decrease rates of surgical site infections. I have been the preceptor for the Infectious Disease intensive rotation for the NNMC PGY1 residency program for the last two years, and have had four pharmacy residents’ complete rotations with me. In this role I am available to the resident throughout the rotation for consultation, daily patient review, project guidance and topic discussions. I am also on the Residency Advisory Committee and participate in resident selection and quarterly meetings to evaluate and improve the residency program at NNMC. I am also a student program...
preceptor.

4. **Have you served on any deployments?**
I have not yet had the opportunity to serve on any deployments, but hope to be able to serve in the future.

5. **What is your most memorable PHS experience so far?**
My most memorable PHS experience so far was the New Year’s Resolution Run which was on New Year’s Eve of 2015, in Anchorage during my residency year. It was my first PHS Athletics Event, my first time running a 5K, and it was run in the dark and on ice. The run featured multiple light and music experiences throughout the course, and most of the participants were adorned with glow in the dark clothing or accessories. I participated with approximately ten other Commissioned Officers in the Aurora Borealis COA.

6. **PHS Collateral duties?**
I don’t have any PHS specific collateral duties yet; almost all of my collateral duty time is consumed by antimicrobial stewardship and precepting pharmacy residents and students.

7. **Do you have a personal leadership philosophy or mentor? Is there anyone that inspires you to become a better leader?**
My personal leadership philosophy is to lead by example, and to focus on continuous self-reflection and self-improvement to be able to meet my own expectations. The person that has influenced me the most and inspired me to become a better leader was my PYG1 Residency Infectious Disease rotation preceptor, Thaddus Wilkerson. Thaddus was a great preceptor and mentor and his passion for improving patient care through antimicrobial stewardship was indisputable. Thaddus was dedicated to being the best pharmacist he could be and his enthusiasm for infectious disease and stewardship was contagious.
Do your Shoes Shine?

LCDR Courtney Drevo, Program Management Officer, Food and Drug Administration

LT Maria Agresta-Workman, Nurse Consultant, Centers for Medicare and Medicaid

A well shined shoe indicates devotion to duty and attention to the smallest detail. Behind those shined shoes lie hours of work and effort. When not in the field, the expectation is to shine the leather to a high gloss. Are your shoes that shiny? While applying polish may seem simple enough, there are some steps you can follow to reach the “spit shine” standard. Give yourself an hour; have polish, water, and a cloth on hand; and follow the steps below:

1. Create a workspace; polishing boots can be messy.
2. Clean your boot and remove all dirt and dust. A horsehair brush works well due to the soft bristles but any brush will do.
3. If your boot has been polished many times before, it may be necessary to remove some of the old polish. This isn’t always necessary, and there is no rule of thumb for stripping old layers; however, a thick polish base layer may start to flake or get dirt embedded in the outermost layer causing imperfections in your mirror surface. Rubbing alcohol on a soft cotton cloth is the best way to remove old polish from the boot. Be careful not to remove all the polish; only strip some of the top layers if there is embedded dirt.
4. You will need an old clean rag and black polish. Clean white undershirts work well.
5. Apply a base coat. This step is only required for new boots. Spread a medium-thick layer of paste polish over the portion of the boot to be spit shined.
6. Allow paste polish to dry for 10 to 15 minutes.
7. Apply the polish coat. Wrap a soft, clean cloth around your index finger. Keep the cloth smooth. Dip your finger into a small amount of water; the cloth should be wet but not dripping. Using a wet cloth prevents the fine coats of polish from sticking to the cloth and encourages the polish to stick to the leather.
8. Buff the dried polish using a circular motion with the wet cloth until it starts to become shiny.
9. With the damp rag still on your finger, apply a fine layer of polish in a circular motion and keep rubbing lightly until a hazy shine develops. After the first heavy coat of polish, only small amounts should be used to build up the shine. Too much polish will cause the established polish base to dissolve.
10. Using the same damp cloth, continue applying thin coats (multiple times), buffing with a small circular motion.
11. Once the shoe has achieved the desired glossy shine, give it a final buff using a clean, dry soft cloth.
12. Oftentimes, the quality of an officer may be measured by how much time, effort, and care is spent on the cleanliness of their shoes and boots. Keep your standards high and shine your shoes often!
Positive Impact of Social Media as a USPHS Officer

LCDR Steven Galvez: JOAG Social Media Co-Chair, Twitter Platform Lead

LCDR Phillip O’Bourke, PharmD: JOAG Social Media Co-Chair, Facebook Platform Lead

LT Joellen Friedman, PharmD: JOAG Social Media Co-Chair, Instagram Platform Lead

Social media is an important part of self-expression as well as keeping in touch with others that we may not see every day. As United States Public Health Service Commissioned Corps officers, we certainly have colleagues from Officer Basic Course, deployments, trainings, and different duty stations across the country and the world that we want to keep in touch with and share our lives with. Your social media buddies may be someone to discuss your frustrations of rural living, your COA conference roommate, or the missing piece to your next permanent change of station (PCS)!

Social media content can be useful, self-defining, and impactful. People want to share interesting or useful information that defines who they are and how they live their lives in order to make a difference for something they care about. When sharing content on social media, getting the right message, to the right audience, at the right time, is critical to changing behavior.

There are four “rules” to consider in making the most of your posts on social media: mobility, time, engagement, and service. Most social media users today use only mobile devices, so consider this in the formatting of your content. You have a short period of time—seconds—to catch people’s attention. Make your content valuable and useful, and make it easy to share if you want your message to carry beyond your circles. Be fun, surprising, witty, and sincere. Don’t feel obligated to lose your personality even though you are an officer. Tell an engaging story or one that others can empathize with to evoke an emotional reaction. Think about your relationship with your audience; Facebook might be for your close friends but Instagram might be for the broader public with different experiences. Overall, think about how sharing this content will reflect on you, your agency, and the Corps.

Facebook has many different tools you can employ to get your message to the people you want to impact. For example, Facebook Live video streams will notify every one of your friends, so the longer you are live, the more users that are bound to see you. After you finish the video, it will be published on your page for others to watch later. Facebook Groups and Pages both gather people together to view content, but in different ways. Pages rely on individuals “liking” that page and engaging with the content as it is posted, which might not reach as many people due to the internal algorithms. Groups are better for creating a community or network of people who want to participate in sharing content. Groups also have more privacy options, like a Closed group that allows you to approve members or a Secret group that you invite your exclusive selectees directly.

Twitter has a character limit. Your posts should get right to the point in order to start a conversation. With Instagram, each post must be accompanied by a photo or video. It is best used to highlight events that you can take pictures of, like sporting events or gatherings, while Facebook might be better for long written stories without a specific image to relate to.

This guide is brought to you by the JOAG Social Media Subcommittee Co-Chairs who encourage you to show PHS pride through social media as well as engage with others in our community!

Twitter Platform @PHS_JOAG https://twitter.com/PHS_JOAG

Facebook https://www.facebook.com/groups/usphs.joag/

Instagram Platform @PHS_JOAG https://www.instagram.com/PHS_JOAG/

The JOAG Executive Committee would like to remind everyone to be mindful when posting on social media and that our posts always should be becoming of an officer. Please remember to not share any Personally Identifiable Information (PII). Remember the importance of operational security and not disclose deployment details that might jeopardize the mission/response or safety of anyone.
Junior Officers Promoting Physical Therapy Month at the National Institutes of Health

LT Kerry Quinn, Physical Therapist, National Institutes of Health
LT Zavera Brandon, Physical Therapist, National Institutes of Health

In observation of National Physical Therapy Month, in October 2018, the physical therapy Section of the Rehabilitation Medicine Department at the National Institutes of Health (NIH) highlighted the role physical therapists play in promoting a healthy lifestyle and well-being.

Physical Therapists are licensed medical professionals who work with patients following an illness or injury and provide interventions to allow patients to be as independent as possible. We work in a variety of healthcare settings, including outpatient clinics, private practices, hospitals, rehabilitation facilities, nursing homes, home healthcare, sports/fitness settings, schools, hospice facilities, occupational settings, government agencies and research centers. We also treat diverse patient populations with diverse illnesses—from infants with developmental needs to adolescent athletes with sports injuries to older adults recovering from joint replacements. Physical Therapists help people maximize quality of life by providing a holistic approach through addressing physical, psychological, emotional and social wellbeing.

At NIH, we celebrated physical therapy month in October by authoring an article in the NIH newsletter about the role of physical therapy. The NIH listserv announcements highlighted our physical therapy booths at the NIH Work/Life Event and the National Eye Institute’s 5K run/walk, allowing patients, families and NIH staff members to obtain various educational handouts.

Additionally, at the NIH Clinical Center, our team continues to educate other healthcare providers, patients and families on the vital role physical therapists play in combatting the deadly Opioid Epidemic. Most recently, we collaborated with our communications department for weekly posts educating followers on the Opioid Epidemic. Our focus is to emphasize that although Americans continue to be prescribed and misuse opioids at an alarming rate, physical therapy remains a safe and effective alternative to opioids for treatment of chronic pain conditions. The 2016 Centers for Disease Control and Prevention Guideline for Prescribing Opioids for Chronic Pain indeed recommended physical therapy as a non-pharmacologic treatment option for chronic pain, citing high-quality evidence to support this recommendation.

Due to the innovative research and treatment offered at NIH, we have the unique opportunity to improve the health and well-being of patients and their families throughout the United States as well as the international community through education and interventions. As junior officers, we look forward to continuing to promote USPHS and the Therapist Category.

References:

(1) https://www.wcpt.org/what-is-physical-therapy
(2) http://www.apta.org/PTCareers/RoleofaPT/

Photo: LT Kerry Quinn and LT Zavera Brandon providing educational handouts to event participants
Global Health Track Conducts 3rd Annual Site Visit with Global Health Leaders

LCDR Alyson Rose-Wood, Health Services Officer, Centers for Disease Control and Prevention

LCDR Felicia Warren, Health Services Officer, Centers for Disease Control and Prevention

The Public Health Professional Advisory Group (PHPAG) Global Health Track is the only USPHS group focused on global health. Established in 2013, it serves as an interdisciplinary resource for officers of all categories working in — or interested in — the field of global health. Since 2017, the group has nearly doubled in size. The now 80+ member group currently has representation geographically around the world from seven USPHS categories: Engineers, Environmental Health, Health Services, Medical, Nurses, Pharmacists, and Scientists and provides resources to officers of all ranks.

The group’s overarching objectives are to: foster professional development opportunities in global health and enhance interpersonal connections and share global health resources. The group hosts one in-person site visit each calendar year, which is its cornerstone activity. In 2016, the group met with global health leaders in the US government by visiting Washington, D.C. (U.S. Department of State, HHS Office of Global Affairs, and CDC Washington). In 2017, officers visited the CDC Headquarters in Atlanta, Georgia to learn about its domestic and overseas global health programs.

On November 9th, 2018, eleven officers participated in a one-day, in-person site visit in New York City, New York. Of note, eight of the eleven officers self-paid and took leave to travel from as far away as South Dakota and Minnesota to participate in the day’s activities. During the site visit, officers met with leaders of organizations that USPHS may collaborate with during an international deployment. The two objectives of the day were to: promote discussion on global health topics and introduce key stakeholders and meet with other officers currently working or interested in global health programs.

During the site visit, the officers met with leaders from the Council on Foreign Relations (CFR), United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), United Nations International Children’s Emergency Fund (UNICEF), United Nations High Commissioner for Refugees (UNHCR), United Nations Medical Support Section/Division of Field Support (UN MSS/DFS), and Médecins Sans Frontières (MSF). During these meetings, officers discussed topics such as the integration and intersection of health and foreign relations as well as national disasters and conflict coordination.

The Global Health Track continues to expand the diversity of its membership (e.g., diversity in rank, Category, experience, duty location). For more information, please contact Global Health Co-Leads: LCDRs Alyson Rose-Wood (ifd6@cdc.gov) and Felicia Warren (fwarren@cdc.gov).
Making a Difference in the Lives of Service Members

LCDR Carla Chase, DVBIC Outcomes Section Chief, Defense and Veterans Brain Injury Center - Department of Defense

Working in the Department of Defense (DoD) has been a wonderful experience for me. Prior to and since joining the USPHS Commissioned Corps, I have worked as a speech pathologist in five military treatment facilities across the U.S., to include Hawaii. In 2017, I was privileged to be selected as the section chief for the Office of Outcomes and Assessment at the Defense and Veterans Brain Injury Center (DVBIC). Between 2000-2018, the total number of documented traumatic brain injuries (TBIs) within the DoD worldwide has been 383,947. Although many of the TBIs diagnosed are classified in the mild range and most individuals recover, nearly 30% of the service members who have sustained a TBI have persistent symptoms. DVBIC staff are paving the way for and promoting: good health care for service members diagnosed with TBI, excellent service delivery for providers, and ways for preserving the fighting military force through their daily efforts.

DVBIC originated in 1992 as a result of the first Persian Gulf War and currently supports a network of 22 military treatment facilities, operating out of 17 military treatment facilities and five Department of Veterans Affairs medical centers. The services delivered differ at each site; however, many of them include conducting research, providing clinical support and care to service members, and aiding service members, veterans and their families by increasing brain injury awareness, prevention, and management using the latest evidenced-based clinical practice resources and interventions.

In August 2018, U.S. Navy CAPT Scott W. Pyne was assigned as new Division Chief of DVBIC. He is lead for managing the military health system (MHS) TBI Pathway of Care. DVBIC teams of Mission Support Office, Research, Clinical Affairs, and Education collaborate with many stakeholders to include the Army, Navy, Air Force, Marines, the National Intrepid Centers of Excellence (NICoE) and TBI Clinics across the DoD. They work closely with United States Universities (USU), Medical Research and Material Command (MRMC), and other Defense Health Agency arms to provide a unified message from the TBI Community to address the burden of symptoms that TBI can cause some individuals. Ms. Kathy Lee, the Deputy Chief of DVBIC has assisted CAPT Pyne in carrying the torch to promote state-of-the-science care from point of injury to reintegration for individuals inside the military community who sustained a TBI. The DVBIC teams combine their effort and resources to share with stakeholders and end users to maintain optimal health awareness to protect our military, veterans, and beneficiaries from the effects of TBI.

My experiences at DVBIC and in the DoD have taught me how to care for members of the community and their families. There are many service members who are affected by TBI each year. DVBIC’s leadership has played a crucial role in advancing and standardizing TBI care for many individuals in the DoD arena. Their work has impacted thousands of active duty military members, veterans, family members, and caregivers in a positive way. I am proud to be a part of the DVBIC team.
Transitional Assistance Program (TAP): Recruiting Uniformed Service Members into the Public Health Service

LT Amanda Schaupp, Environmental Health Officer, Food and Drug Administration

Did you know that the Junior Officer Advisory Group has a dedicated subcommittee actively recruiting separating service members? The Transitional Assistance Program (TAP) Subcommittee, housed under the Recruitment and Retention (R&R) Committee, provides information about career opportunities in the Public Health Service (PHS) to qualified separating uniformed service members. TAP Subcommittee recruiters meet this mission by attending career fairs and separation seminars at military installations.

I was a prior Air Force service member in the medical field. In my experience, many Armed Service members are not familiar with PHS, which highlights the TAP Subcommittee’s critical role in providing information and recruiting. While I was working through my own transition process from the Air Force to PHS, medical officers and enlisted alike would frequently ask me, “What is the Public Health Service?” Once I explained the mission and values of PHS, many would get excited, and some stated they wish they had known about PHS earlier in their career. I was fortunate enough to have met my PHS mentor in graduate school; had he not introduced me to this career opportunity, I likely would not have joined PHS and be where I am today.

LT Travelle Mason and I attended a resource fair at the Alameda Coast Guard Base during the Valor Far West Games in June 2018. The goal of the Valor Games is to introduce and promote adaptive sports participation to disabled veterans. We discussed PHS opportunities with service members in the process of separating from their current service but planning to stay active duty. We even encountered a handful of attendees who knew about PHS and told us how important our mission is to the nation. In addition, we met a veteran who served as a PHS nurse in a hospital at a US installation during the Vietnam War!

Maybe you are a bit nervous about recruiting at TAP events; perhaps you have never been on a military base or could use a refresher on military customs and traditions. Do not worry – we have a mentorship program to assist specifically with this! The mentorship program will pair you with an officer who is familiar with topics such as saluting and identifying ranks of fellow service members.

TAP events are unique opportunities for recruiting separating military members into the PHS. If you live close to a military facility, the TAP Subcommittee could use your help. Come join the subcommittee to recruit (especially in our highest need categories: medical and dental) and spread the word about PHS! If you are interested in recruiting with the TAP Subcommittee or our mentoring program, please contact LCDRs Kari Harris (k2xharris@bop.gov) and Mary Demby (mary.l.demby.mil@mail.mil).
USPHS Rx for Change Tobacco Cessation Training Program for FDA Pharmacy Students

LCDR Andrew Kim, Pharmacist, Food and Drug Administration

The USPHS-Rx for Change: Tobacco Cessation Training Program is a free online-based program that uses up-to-date modules to train anyone to provide tobacco cessation interventions. The goals of this program are to reduce tobacco use, increase the number of people providing evidence-based tobacco cessation interventions and provide up-to-date modules concerning tobacco use, products, cessation therapy and resources.

While precepting pharmacy students, LCDR Andrew Kim recognized an opportunity to train the pharmacy students that were on rotations at FDA every month and with LCDR Christine Corser, they started the tobacco cessation program for pharmacy students in January 2018. The students would go through the Five A’s module which is comprehensive training program designed to improve the quality of tobacco cessation counseling accessible through the Purdue University Tobacco Cessation training program and sign a tobacco free pledge to demonstrate their commitment to ending the tobacco use epidemic in the United States. During the training, additional counseling tips are provided, students perform a live skills demonstration, and complete a skills assessment with an evaluator. In the one year since the program was started, 5 other officers (CDR Vincent Sansone, LCDR Malik Imam, LCDR Sasha Latonis, LT Briana Rider, and LT Surjit Basi) have joined to be evaluators and over 90 pharmacy students have completed the program. By completing the online modules and live skills demonstration, the students receive a certificate from the USPHS Rx for Change program and are equipped with the basic skills to perform meaningful tobacco interventions and promote the Surgeon General’s health priority of tobacco free living.

Go to the following site for more information:
https://dcp.psc.gov/OSG/pharmacy/sharedresources_tctp.aspx
Room/Ride Share Program is now available!

To help offset the cost of attending the annual USPHS Symposium, JOAG offers the Officer Room/Ride Share Program. The online sign-up tool is accessible on max.gov by clicking here: Room/Ride Share Sign-Up Sheet.

Room/Ride Share Sign-Up Instructions:

Officers must be registered on the max.gov website to access the Room/Ride Share sign-up sheet. If this is your first time accessing max.gov, please click and follow the prompts provided under “Register Now” in green on the top right-hand corner of your screen.

Please use Internet Explorer in order to edit Room/Ride Share Sign-up sheet.

Please enter your name, email address, phone number, and other pertinent information listed on the spreadsheet. Officers will use the information provided to contact each other accordingly.

Once roommate and/or carpool option(s) are identified and confirmed, please remove your information from the spreadsheet.

Questions regarding the Room/Ride Share Program can be directed to Outreach Committee Volunteer Coordinator Co-leads, LCDR Ryan Presto at Ryan.Presto@fda.hhs.gov and LT Taneshia Shelton taneshia.shelton@nih.gov

Registration for the Symposium is open!

FREE REGISTRATION sponsored by COA for Junior Officers/Civil Servants. Apply through online registration by choosing “Scholarship Application” prior to the deadline of March 11, 2019.

Eligibility Criteria:

PHS officer at grade O-3 and below or civil servant at GS 10/11 and below.

AND

Must be a dues paying member of the Commissioned Officers Association of the USPHS.

Hotel room is booked separately from registration. You can reserve a room at or near the host hotel, Minneapolis Convention Center and Hyatt Regency. Please visit the 54th USPHS Scientific and Training Symposium for details regarding registration.

We encourage everyone to make travel arrangements as early as possible to attend the 54th USPHS Scientific and Training Symposium on May 6-9, 2019. This conference provides fantastic opportunities for category networking, as well as continuing education credits to meet credentialing and licensure requirements for various disciplines.

If you have any questions on JOAG’s Symposium planning activities and/or are interested in volunteering for any of the aforementioned JOAG events, please contact LT Sandra Carpio, Outreach Committee’s Planning Subcommittee Lead, at Sandra.Carpio@fda.hhs.gov.

We look forward to seeing you in Minneapolis!
10-16 March 2019| Patient Safety Awareness Week
11-17 March 2019| Brain Awareness Week
17-23 March 2019| National Poison Prevention Week
20 March 2019| National Native American HIV/AIDS Awareness Day
26 March 2019| American Diabetes Alert Day
26 March 2019| Purple Day for Epilepsy Awareness
1-7 April 2019| National Public Health Week
7 April 2019| World Health Day
10 April 2019| National Youth HIV/AIDS Awareness Day
11 April 2019| National Alcohol Screening Day
24 April 2019| World Meningitis Day
1-7 May 2019| National Physical Education and Sport Week
5 May 2019| World Hand Hygiene Day
5-11 May 2019| North American Occupational Safety and Health Week
6-9 May 2019| **USPHS Scientific and Training Symposium**
12-18 May 2019| National Women’s Health Week
19 May 2019| National Asian and Pacific Islander HIV/AIDS Awareness Day
Share your photos and ideas with the rest of your junior officers across all social media platforms with the #hashtag #JOAG throughout the year!