

**INSIDE THIS
ISSUE**

Letter from the Chair	1
Relationship Between Family Income and Obesity	2, 3
First Experiences of a New USPHS Officer "The Exciting	4-9
National Medical Laboratory Professional Week	10
Consider a Temporary Duty Assignment	11
2017 MLS Junior Officer of the Year	12
2017 MLS Senior Officer of the Year	13
Good Reads	14
New MLS Officers	15
MLS Focus	16
MLSPAG Case Studies	17
2018 COA Symposium	18, 19



Greetings MLSPAG Officers,

On behalf of the MLSPAG, I would like to welcome you to the spring 2018 MLS Newsletter. My name is CDR Babatunde Oloyede it is a privilege and honor to serve as the 2018 Chair for the MLSPAG. I began actively working with MLSPAG in 2011 and have witnessed an upward progression of the growth of our PAG over the years. Since joining MLSPAG, I have served as Co-chair of Professional development and Chair of Stakeholder and community engagement subcommittee.

The time and season have changed for our profession. We have come to this point in our profession not by chance but by deliberate action taken by those that have gone before us. Many have sacrificed their time, money and self for what we enjoy today as Medical Laboratory Professionals. As we rest on their shoulders however, I would like to encourage each and every Medical Laboratory Scientist (MLS) in the Commissioned Corps to be alert and fully engaged in the new wave of development and transformation happening during our time as Medical Laboratory Professionals.

During this year of transformation, my main goal is to ensure that we create sustaining awareness about MLS profession at the local, national and international levels. I want to help MLS officers identify tools for self-development and equip them with Leadership training, Career progression tips and readiness information. The new readiness guidelines demand close attention to the detail by each and every member of the Corps. We therefore need to be willing to embrace the change and choose wisely, those behaviors that will help us to achieve a positive outcome. We are all in this together. We should look out for each other and be your sister's and brother's keepers.

Finally, I would like to thank you for making time to attend our first and second meetings of 2018. I look forward to an exciting and prosperous year in the MLSPAG. However, we need to accomplish this as a team.

Sincerely,

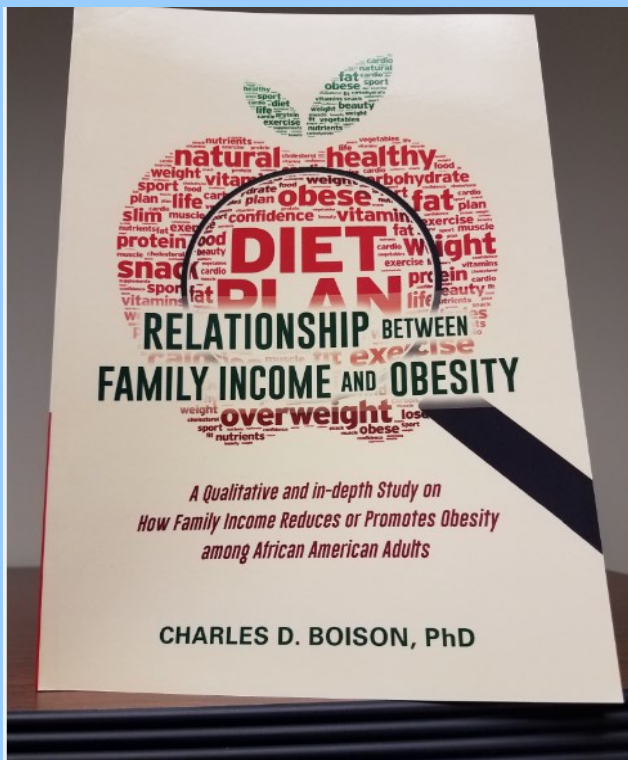
CDR Babatunde Oloyede

2018 MLSPAG Chair

Relationship Between Family Income and Obesity

By: LCDR Charles D. Boison, PhD

And : LCDR Lisa Flores



My special emphasis is that with the upcoming PHS weights and heights standards, calculation and knowledge of BMI and how that contributes to obesity is critical. In Chapter 4 of my book, I provided BMI values from my participants and how that relates to their obesity. It is a simple down-to-earth book from a qualitative research that would provide information to almost all PHS officers as we endeavor to educate our population.

Studies have shown low income African Americans are disproportionately affected by chronic diseases, such as obesity, diabetes, hypertension, and high cholesterol, due to poor eating habits or diets. Some studies have also reported higher rates of obesity amongst high income earners. The purpose of this research is to address the inconsistency and fill the gap in the literature on this topic.

In the Book Review of Relationship between Family Income and Obesity by Col. Jim Currie, USA (ret.), Ph.D., Executive Director Self-published by Charles D. Boison, Ph.D., Dr. Currie states: “The topic is of great relevance to officers in the U.S. Public Health Service and, indeed, to those who are concerned about either obesity or healthcare inequity or both. LCDR Boison’s study centered on residents of Durham, NC, a city in the central part of the State that has a large population of African-Americans making up 38 percent of the residents there.

LCDR Boison determined from his study, with thirty participants from differing educational and economic background, that income level was a “factor in the choice of food purchased and consumed.” He also found educational level influenced family income, the type of foods consumed and the amount of exercise undertaken. LCDR Boison explored the link between fast food and eating at home as they relate to obesity. In answering the question that makes up the title of this book, Boison found that by a ratio of almost 2:1, family income has a significant effect on the type of food consumed.

BIO ON CHARLES D. BOISON

LCDR Charles Boison currently works for the Office of Regulatory Affairs (ORA), Food and Drug Administration (FDA). He is the only USPHS officer stationed at the Richmond, VA Resident Post. LCDR Boison joined the FDA in May, 2015 as Regulatory Officer/Investigator.

Besides LCDR Boison's primary duties, he is also a member of the PHS Rapid Deployment Force (RDF2). He deployed to the Great Plains, Pine Ridge, SD (October 2016) to augment the laboratory staff during their short staffing crisis, and also helped to provide quality healthcare to one of the nations underserved populations. He also deployed during Hurricane Maria to assist in pharmaceutical and medical cache resupply efforts at the ASPR Mission Support Center in Frederick, MD., and helped prepare a "Welcome Package" Manual for subsequent officers to use while deployed.

LCDR Boison serves as an Awards Reviewer for the HS PAC. His review of nomination packages resulted in the selection of the 2016 and 2017 officers of the year for Joseph Garcia Jr. Award.

LCDR Boison earned his doctorate in Public Health, with a specialization in Epidemiology in 2016. This has enabled him organize health promotion seminars for his local communities and thereby advancing the health and safety of our nation. He also participates in Career Fairs for local schools, where he outdoors opportunities and activities of the USPHS Corps.

Prior to being commissioned into the USPHS, he served in the U.S. Navy as a Corpsman. He's achieved several awards while in the U.S Navy and currently with the USPHS.

LCDR Boison served as the MLSAG Co-chair for Communication Subcommittee from 2016 through 2017. He is currently the Chair of MLSPAG Administrative Management and Co-Chair of Retention and Recruitment Subcommittee.

He is the author of *Spiritual Militants*, which was published in Ghana in 1996. He has authored several public health-related articles while on Active Duty.



First Experiences of a New USPHS Officer

“The Exciting Symposium and Deployment Adventure”

By: LT Shercoda “Cody” Smaw



RADM Trent-Adams and LT Smaw

As a new officer in the United States Public Health Service Commissioned Corps (USPHS), I have experienced two memorable events in my first year. One was the 52nd Annual USPHS Scientific and Training Symposium and the other was my deployment. Both were quite different, but had the same lasting positive effect on me that made me proud that I chose to join USPHS. I didn't know what to expect from either but I was hoping that they would be educational, fun, and life changing.

I was really lucky that my job paid for the entire registration, flight, and hotel lodging for the symposium. My supervisor also allowed for me to participate for six days (June 5-June 11, 2017) and I took full advantage of this opportunity. At the airport, I ran into CDR Cheryl Fajardo who was in charge of the Joint Patient Assessment and Tracking System (JPATS) training that I signed up to take at the symposium. I was happy to meet her and she became my Symposium Mentor, Friend, Big Sister and she introduced me to officers and gave me a lot of insight on all the things I can learn at the symposium. CDR Fajardo made the symposium special for me. I thank her for such a great time that I had at the symposium. Immediately after I arrived in Chattanooga, TN and gathered my luggage, I jumped on my reserved shuttle ride and went straight to the Epidemiology Interest Group session. From that first day, I was running from session to session acquiring 21 continuing education credits of training. The training I received was great. My favorite day was Category Day. I have to say HSO Category Day was the best. It was so perfectly organized. It was fun, educational, and I finally got to meet officers that I only spoke with on the phone. I also got to meet my awesome mentor CAPT Todd Alspach for the first time. I will tell any new officer that going to the USPHS Scientific and Training Symposium is a must. You gain so much knowledge on how to be an officer that is beyond what you learned at Officer Basic Course (OBC). Speaking of OBC, I had a chance to see two of my close OBC friends at the symposium, LT Kim Hart (who is also my sorority sister) and LT Jen Carrera. I had a blast with these two officers during our down time.

The Surgeon's General Run and the APFT were loads of fun and ended the symposium on a great note. I served as a cheerleader for my friends taking the APFT and I had 4 officer friends that decided to do it there. I reached picture number 200 at the SG Run. Yes, I took over 200 photos and it was so hard for me to select a few for this article. I know a lot of officers had to go back home and couldn't attend. The weather was great and the run was refreshing. I can't wait for next year's symposium and the SG Run. The next time, I will really be more focused on winning than sightseeing and talking. Yet, I had a blast talking to officers and making new friends. The symposium to me was about learning, networking, and fellowshiping with new and old friends.

On October 1, 2017, I was deployed in response to Hurricanes Harvey, Irma, and Maria. This being my first deployment, I did not know what to expect. I had my bag packed and ready for Puerto Rico. 5 ODU Sets, 2 pairs of boots, 4 MRE's, snacks, canteen, camelpak, poncho that turns into a tent, bundle of socks and underwear, flashlight, sleeping bag, sleeping pad, inflatable pillow ...you name it, I had it. I got my flight information at 11:30 PM the night before and my sorority sister (co-initiate) Donna dropped me off at BWI on her way to church. At the airport, I met LCDR Monique Richards who was also going to Atlanta, GA, our staging area, before going to our perspective locations. LCDR Richards became my deployment officer sister; we stayed in contact during our entire deployment. At any rate, when we arrived in Atlanta, we were told we needed to be "fitted" and my instant reaction was I have another fit test to do. I already did my APFT. Then when we walked in the room there were two types of masks that we needed to be "fit tested" for when we are out in the field. I was like okay; we are going to Puerto Rico. After the fit test we were briefed about the operation in Atlanta. They had so many dialysis patients and needed all hands on deck to help. Then, we all thought that we were going to stay in Atlanta, because we were asked what duties we would like to fulfill. That was short lived because someone asked, "Are we to stay here or be assigned someplace else." Well, we all were assigned to go to other locations. One officer was sent to Shreveport, LS then one to Columbia, SC, and one (LT Smaw) to Jackson, MS.

I have never been to Mississippi before so I was excited and eager to meet the other officers. I was surprised when I got my flight that I had a reservation to pick up my rental car. I knew then that I would be driving a lot and figured hospitals must be some distance. The service access team was led by CDR Tracy Jackson Weaver and CDR Christy Brown who became my mentors. I learned a great deal from them and they became family to me. LCDR Sean Bennett also joined our team as I was leaving. He was a skilled

awesome asset to the team and his fun personality made the experience a blast. I had taken the JPATS Training at the USPHS Scientific and Training Symposium, so I was familiar with the patient tracking. What I did not know I would be doing was case management duties. We had patients from Puerto Rico, ST Thomas, ST Croix, and 1 from Dominica. We visited all the patients in the hospitals where they were being cared for and ensured that all of their needs were met daily. I learned so much on this deployment and I got really connected to the patients. To sum it all up, my deployment experience was rewarding and I felt blessed and honored to be helping patients in need who have lost everything by the devastation of these hurricanes and serving my country. I had two amazing senior officers with me that were great mentors and made my first deployment experience memorable. I look forward to future deployments in my career.



LCDR Jorge Muniz Ortiz and LT Shercodea Smaw at the JPATS Training.



LCDR Oliver Ou and LT Cody Smaw at MOLC

I have been eager to write an article for MLSPAG, but been so busy with my duties from work. In addition, I am the Assistant to the Editor and Contributing Writer for my agency newsletter, so my apologies on this being my first time submitting. I want to thank CAPT Todd Alspach, LCDR David Young, and LCDR Richard Bashay for their warm welcome into the MLSPAG and for encouraging me to participate in PAG activities.



The USDA Family of Officers Lunch with Admiral Goldman (L to R): CAPT Sue Newman, LCDR Jorge Muniz Ortiz, LT Shercoda Smaw, RADM David Goldman, LCDR Oliver Ou and CDR Malaysia Harrell



BCOAG Members at the MOLC Breakfast



LT Cody Smaw, CDR Malaysia Harrell, and CDR Cheryl Fajardo (L to R)



LT Cody Smaw and LT Jen Carrera (L to R)



LT Cody Smaw, CDR Cheryl Fajardo, and LT Kim Hart (L to R)



LT Cody Smaw at BWI Airport before her departure. FYI. I removed that green prayer bracelet on my right wrist after I said my prayer before I entered the airport. Just wanted everyone that may read this article to know that I didn't wear that bracelet the entire time.



LT Smaw, CAPT Hibbeln, and LCDR Monique Richards for mask fitting (L to R).



CDR Christy Brown, LCDR Sean Bennett, and LT Cody Smaw (L to R)



CDR Christy Brown, LT Cody Smaw, Junior League of Jackson Representative, and CDR Tracy Jackson Weaver (L to R)



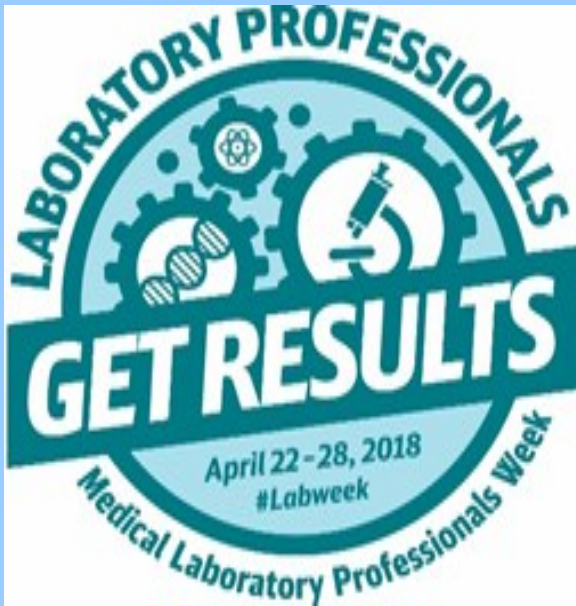
CDR Christy Brown, CDR Tracy Jackson Weaver, LT Cody Smaw and LCDR Sean Bennett (L to R)



LT Cody Smaw and CDR Tracy Jackson Weaver (L to R)

National Medical Laboratory Professional Week

By: LCDR Richard Bashay



National Medical Laboratory Professionals Week starts on April 22-28, 2018, calling attention to the important contributions to health care by Medical Laboratory Science Professionals. The theme of the week is “Get Results.” And get results we do. Laboratory test results comprise about 70% of a patient’s medical record and 80% of decisions doctor’s make regarding patient care are based on diagnostic lab test results. Working behind the scenes, laboratory professionals are a critical component of the health care team. Lab Week recognizes the dedication of these men and women and calls public attention to the vital role that these medical laboratory professionals play in patient care. In USPHS there is approximately 120 of these officers within the HSO category most are part of the Medical Laboratory Science (MLS) PAG.

The **Medical Laboratory Scientist** also known as **Medical Technologists** has the best of both worlds with the challenges and rewards of medicine and science. Medical

Laboratory Scientists work quickly and carefully. They hold life and death in their hands, because the information they give to the doctor influences the medical treatment a patient receives. In their search for data on a patient's health, Medical Laboratory Scientists do much more than examine specimens through a microscope. They operate complex electronic equipment, computers, and precision instruments. Medical Laboratory Scientists are self-sufficient, precise and thorough. They are trouble-shooters who not only report accurate results, but also know when results are incorrect and need to be rechecked. They are a dedicated group of scientist that work diligently to perform tests in the most accurate and detail oriented way possible. It is these characteristics that make Medical Laboratory Scientists invaluable not only in the laboratory but in many other professions. In the USPHS you can find some of these officers working just about anywhere:

NIH as Biological Safety Manager

CDC as Research Medical Technologist

USDA as Program Management Officer (biological scientist specialist)

BOP as Medical Technologist

FDA as Consumer Safety Officer

FDA as Senior Regulatory Management Officer

FDA as Research Officer

FDA as Management and Program Analyst

ICE as Assistant Health Services Administrator

CDC as Lead Public Health Advisor

CMS as Regional Laboratory Consultant

I.H.S. as Blood Bank Supervisor

BOP as Health Informatics Specialist

NIH as Biosafety and Occupational Health Officer

USCG as Senior Ancillary Services Laboratory Officer

These are just a few examples of different types of positions and agencies that our Medical Technologist work in “Getting Results” because WE ARE CorpsSTRONG.

Consider a Temporary Duty Assignment

By: LCDR Jennifer Tate, MPH, MLS(ASCP)CM

In light of all the awesome work MLS officers have contributed to the hurricane responses, I would like to take the time to highlight the importance of rendering aid to our fellow service units in need. Often when officers deploy many do it because that is why we serve, to help people. Deploying to high profile events such as the Puerto Rico response or to the hurricanes and wildfires in the United States, comes high visibility and attention that can make an officer feel a strong sense of accomplishment and pride. These feelings are valid because deployments are a main feature of what makes PHS officers different from civilians. However, I would also like to suggest to officers to not only consider deployments but also consider temporary duty assignments to other agencies in need of assistance.

In January, I completed a two week temporary duty assignment (TDY) at the Yakama Indian Health Service Unit, my first duty station. While at the Yakama IHS service unit, I worked mostly in the Chemistry department, but I also helped out in Hematology, rapid testing, and with phlebotomy. Because the laboratory staffing was short and short for a while, having me there freed up the other techs, especially the lab manager, to get caught up on other tasks that were pushed to the back burner. In return, I was able to complete my 80 clinical hours, work with some new equipment, and reconnect with former coworkers and patients. My advice to all MLS officers, if possible, when a call goes out asking for volunteers to come back to the laboratory and help do not hesitate to answer. Even if you think your service unit would not let you go, you may be surprised at the positive response you may receive. The first step is to ask. Currently, I am stationed at CMS and when I was asked to come back and help at Yakama IHS I immediately thought that the answer would be “no.” However, I sat down with the deputy director and came up with a plan to present to the director on how my workload would be managed before and during my absence and was ultimately approved to go. Similar to deployments, undertaking a temporary assignment to help an agency in need also shows our mobility as a force and our versatility to go from office work to supporting a laboratory, and then returning to the office almost seamlessly. Furthermore, being an officer is about being self-less and helping those who are otherwise forgotten. It is the very essence of our existence. I want to encourage all of us as we move up in ranks and positions that we do not forget why we wear this uniform or the agencies where many of us started our PHS journey at. Being an officer is about putting the needs of others above our own. It is about taking care of the homeland as well as others abroad.

2017 MLS Junior Officer of the Year

LT Julie Smoot



LT Julie M. Smoot has been a Medical Technologist for the Bureau of Prisons at the Federal Medical Center in Lexington, Kentucky for the last 10 years and has been a USPHS officer since 2013. As the Lead Technologist in the laboratory, LT Smoot is the head technologist and administrator of quality control in the Chemistry department. She is a member of the Crisis Support Team at FMC Lexington, which is called upon to assist staff in times of hardship. LT Smoot obtained the National Commission on Correctional Healthcare Professional Certification in order to better perform the duties unique to working as a healthcare professional in a correctional setting which can sometimes be hazardous and emergent. LT Smoot took on supervisory duties when the laboratory was without a supervisor as well as accepting the role of Laboratory Safety Officer and its duties, including a major revision of the laboratory Safety

Manual and Safety Data Sheet books. She developed an Ergonomics Program for the laboratory in order to ensure that laboratory professionals were educated and, therefore less susceptible to injury. She has traveled to several other institutions in the Bureau of Prisons in order to assist, consult, and teach when there was a need for assistance. She was certified to perform National Crime Information Center background checks which are necessary for all visitors before they are permitted to enter a BOP facility.

LT Smoot saved the institution \$10,000 by repairing an instrument in the laboratory and developing maintenance procedures to help prevent further breakdowns. Her normal duties and responsibilities along with these added collateral duties are all performed in a laboratory that is under staffed. The laboratory at FMC Lexington lost three of their five technologists, and their Laboratory Supervisor as a result of moves or promotions during 2016. LT Smoot aided the laboratory in continuing to provide clinical excellence and maintaining a successful College of American Pathologist accreditation during a difficult and stressful time providing a significant professional contribution to the laboratory, FMC Lexington, and the BOP.

2017 MLS Senior Officer of the Year

CDR Robin Goodwin



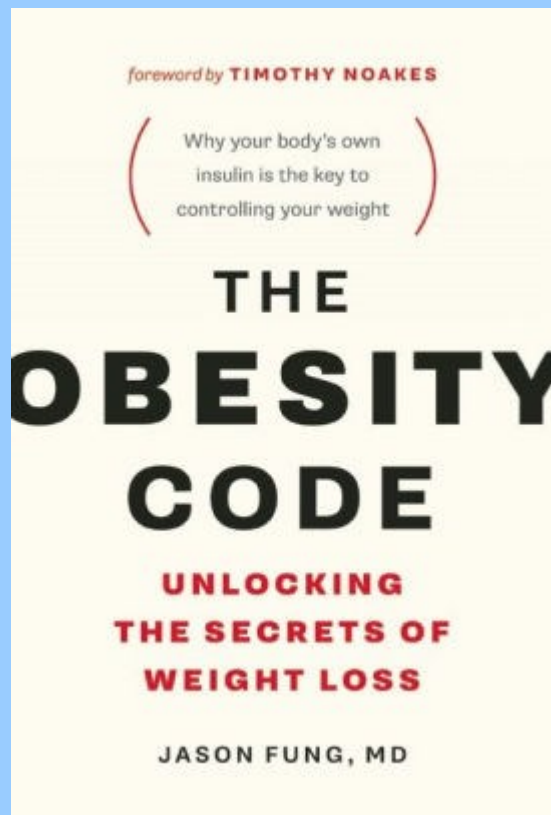
CDR Goodwin is the Quality Management Coordinator for the Lawton Indian Hospital laboratory to include, Chemistry, Hematology, Urinalysis, Serology, Blood Bank, and the Reference Laboratory. Each year CDR Goodwin develops and maintains a Comprehensive Quality Management Plan for the laboratory to be in compliance with the Joint Commission and the College of American Pathologists accreditation agencies. This involves defining and monitoring all Quality Management issues which entails research, collecting data, monthly reporting, and corrective action when required. She is the point of contact for the Hospital Performance Improvement Committee, Emergency Department Throughput Committee, Environment of Care, and Infection Control. Evidence of her excellent work was shown when the Laboratory passed a very stringent inspection by the College of American Pathologists with a 99.6% compliance rate of 3000 standards. She meets with the Laboratory Director and the Laboratory Supervisor monthly to discuss issues that might affect patient care.

CDR Goodwin has been the site manager for Abbott's Competency Assessment Training and Testing since 2007. This site is a comprehensive list of training courses and competency assessments in every field of the laboratory and provides current and up-to-date information. There are 140 lectures and trainings with testing in fields, such as, chemistry, hematology, urinalysis, coagulation, microbiology, phlebotomy, blood banking, patient safety, and specimen collection. She has managed a total of 31 employees; 11 Women's Health Providers, 15 Medical Technologists, and 5 phlebotomists. There have been a total of 1,191 assignments completed for the Lawton Indian Hospital's Employees with an average score of 96.6%. CDR Goodwin continuously encourages staff to complete trainings, documents and tracks courses customizes trainings for the staff being tested and CE completions. CDR Goodwin customizes trainings for the staff being tested. She is also a site manager for the Competency Assessment College of American Pathologists for other educational trainings. Continued professional development ensures the individuals of LIH continue to be competent in their professions and provides patients with a higher level of healthcare.

CDR Goodwin has exhibited great depth and knowledge of the laboratory operation. She has been delegated many exceptionally difficult duties and has shown leadership and commitment by managing her responsibilities effectively and efficiently. CDR Goodwin is an exceptional Officer. Due to her outstanding leadership and management skills I highly recommend her for the MLSPAG Senior Officer of the Year.

GOOD READS by CDR Toni Bledsoe

The Obesity Code: Unlocking the Secrets of Weight Loss by Jason Fung, MD



The CDC National Center for Health Statistics reported on the prevalence of obesity in the United States among adults and youth in a November 2015 Data Brief. The report used population data from 2011 – 2014. Overall the prevalence of obesity was 36.5% in the total adult population. The prevalence on obesity in adult females was 38.3% compared to 34.3% in adult males. The overall prevalence of obesity in youth (2 – 19 years of age) was reported to be 17.0%. A breakdown of rates of obesity by age group found 8.9% (2 – 5 yrs.), 17.5% (6 – 11 yrs.) and 20.5% (12 – 19 yrs.).

In summary, there has been a significant increase in the prevalence of obesity in adults: 30.5% (1999) to 36.5% (2014) and in youths: 13.9% (1999) to 17.0% (2014). With all of the nutrition information on low fat, low carbohydrate and low calorie diets to encourage weight loss in combination with other healthy lifestyle factors such as cardiovascular exercise, strength training and stress management, why do we still see this upward trend in obesity? How did obesity become an epidemic?

Dr. Jung is a Toronto physician whose medical practice focuses on treating patients with kidney disease. Many of his patients had the underlying cause of Type 2 diabetes associated with their

kidney dysfunction. Dr. Jung's book re-examines and challenges our understanding of nutrition and the condition of human obesity. As part of this re-examination, Dr. Jung delves into the link between weight loss and insulin resistance as an underlying cause of Type 2 diabetes. The book explores multiple factors potentially involved in Type 2 diabetes and obesity. Dr. Jung discusses the shift in the American diet beginning in 1977 to an increased consumption of carbohydrates and decreased consumption of naturally occurring fats. He also notes that around 1977, the incidence of obesity dramatically increased. Dr. Jung also examines the genetic factor, hormones, diets, exercise, sleep deprivation and stress and their roles in the complex model of the body's homeostasis.

Dr. Jung proposes a new model of obesity and identifies insulin as the major driver in weight gain. Dr. Jung's premise for successful weight loss is summarized as: 1) Diet-decrease refined sugars/ carbohydrates, increase natural fats, moderate proteins; increase protective factors such as fiber and vinegar (reduces insulin spikes) 2) Stop snacking between meals to reduce insulin stimulation; 3) Intermittent fasting to help break insulin resistance; 4) Sleep hygiene and meditation to reduce cortisol (cortisol raises insulin levels).

The Obesity Code is an insightful and thought-provoking book which challenges the current standard approach to nutrition, weight gain/ loss, and combatting the obesity epidemic.

New MLS Officers

By: LT Angela Hatzenbuhler



LT Vanessa Stefka (L) and LT Torrey Ward (R)

My name is Vanessa Stefka and I have been a Medical Laboratory Scientist for 10 years. I have been a part of the U.S Medical Center for Federal Prisoners Referral Laboratory team for the past 5 years. I have specialty experience in Hematology, and I currently assist in bone marrow biopsy procedures as well as performing all laboratory testing for the network of prisons assigned to USMCFP. I am also a part of the Evidence Recovery Team here at USMCFP. I have one young son and a new baby girl due any day now! I enjoy spending time with my family and antique hunting with my husband. I am excited to be a part of the USPHS!

My name is Torrey Ward and I have been a Medical Laboratory Scientist for 11 years. I currently work at the U.S. Medical Center for Federal Prisoners Medical Referral Laboratory, which performs routine and complex laboratory testing for 42 other institutions. We are currently preparing to bring on Molecular Viral Load testing and Flow Cytometry for the entire Bureau of Prisons which is very exciting! I enjoy being outdoors and spending time with my family. I decided to make the jump from civil service to PHS and I am enjoying being a part of the Commissioned Corps and am looking forward to a new and exciting journey.

MLS Focus:

LCDR Lundy Patrick, MPH (CPH), MT (ASCP)

Education: Degrees, Universities, Dates:

BS Medical Technology, Brescia University, Owensboro, KY 1996.

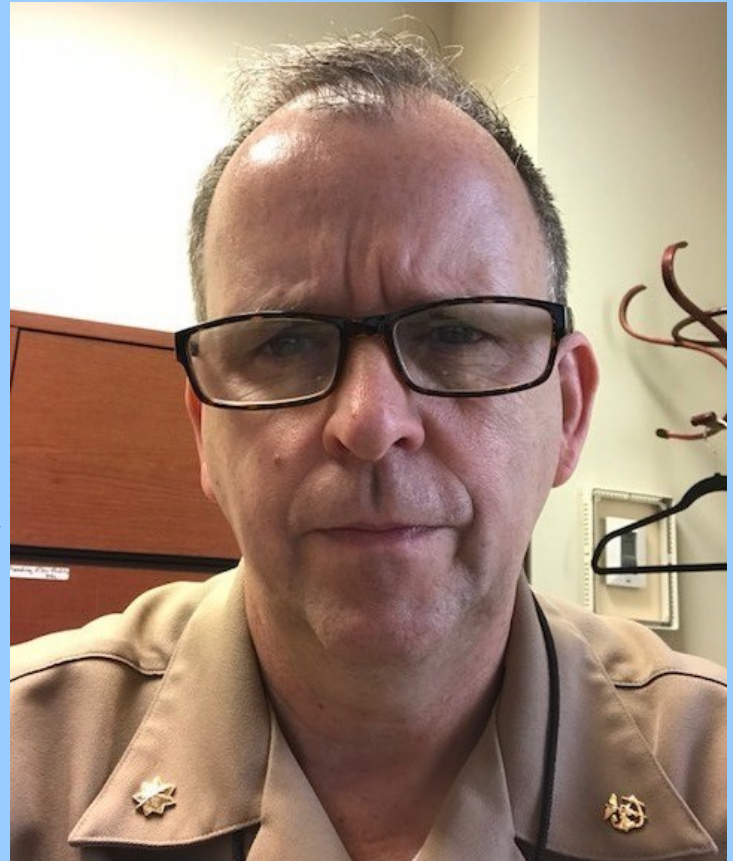
MPH University of South Florida, 2016.

Background: Hometown, Family, Hobbies:

I am from Hawesville, KY (aka 'Tiny Town USA' LOL). Have two grown daughters who still live in Kentucky as well as a Step-Daughter here in South Florida. Two grand-children. Married. Wife is from Cuba so we are culturally well-rounded! No pets at the moment; way too busy-lol! I enjoy music and play guitar!

Interesting Fact:

Some people have asked about my name. Lundy was my grandfather's name. He passed when my father was very young, so I never met him. Sometimes it is confusing since my last name is Patrick and people get it the other way around.



Current Agency: Food and Drug Agency, Miami Lakes, FL

Current Assignment and what you like most about it: Miami Lakes, FL. Year-round Sunshine and cultural diversity with great restaurants and nightlife.

Job Title: Imports Compliance Officer

What I like most about my job: I like the daily challenges it offers! A learning experience each day!

Duties: Multiple, to include Mentoring of new Compliance Officers as well as Investigators in the field, daily correspondence with Import industry leaders throughout the nation as well as scientific experts throughout the various Federal and State agencies.

Previous Assignments: Consumer Safety Officer, FDA.

MLSPAG Case Studies

- MLSPAG Case Study #1 (Hematology)
- MLSPAG Case Study #2 (Blood Banking)
- MLSPAG Case Study #3 (Chemistry)
- MLSPAG Case Study #4 (Urinalysis)
- MLSPAG Case Study #5 (Microbiology)
- MLSPAG Case Study #6 (Coagulation)
- MLSPAG Case Study #7 (Hematology)
- MLSPAG Case Study #8 (Visual Inspection of Blood Components)
- MLSPAG Case Study #9 (Microbiology/Urinalysis)
- MLSPAG Case Study #10 (Microbiology/Urinalysis)
- MLSPAG Case Study #11 (Urinalysis)
- MLSPAG Case Study #12 (Random Questions)
- MLSPAG Case Study #13 (Blood Banking)
- MLSPAG Case Study #14 (Hematology)

All Case Studies are located at: Max.gov

<https://community.max.gov/display/HHS/MLSPAG+Training%2C+Education%2C+and+Mentorship>

MLSPAG Case Studies

Reminder: Each course is worth 1 CE credit: You must achieve an **80% or better** on the quiz and submit answers to the MLSPAG TEM's email address:

MLSPAGTEaM@gmail.com or Richard.Bashay@fda.hhs.gov to get Certificate of Participation

QUESTIONS: Please contact **LCDR Richard Bashay** or **CDR Karen Romancito**

USPHS Scientific and Training Symposium

"Ensuring Health for Generations to Come: Science Matters"

June 4-7, 2018

Renaissance Dallas Addison Hotel

For more information: <https://www.phscof.org/symposium.html>

See page 17 for Information on USPHS Joint Combined Social!

MLSPAG Announcement!!

On behalf of Admin/Mgmt Subcommittee

Any MLSPAG officer whose **Name, Rank, Discipline, Agency, email etc.** have **changed** since **August 2016**

Please contact:

Charles Boison at

charles.boison@fda.hhs.gov

USPHS COMBINED *Social*

WEDNESDAY JUNE 6, 2018

FREE
7PM-MIDNIGHT

///FOOD/DRINK AVAILABLE
FOR PURCHASE
///LIVE DJ
///SPECIAL RAFFLE FOR PRIZES
Anchor & Caduceus ticket & Free Symposium Registration

UNION  PARK

5076 Addison Circle • Addison, Tx

COA Sponsored



ALL CATEGORIES
WELCOME

WORK HARD...PLAY HARD

JOIN THE MLSPAG

MEETINGS

*Join us via
teleconference*

*every second Thursday
of every other*

month @ 1400 EST

1-866-882-1054

Passcode: 2066464



To submit an article for the MLSPAG

LCDR Lisa Flores

lisa.flores@fda.hhs.gov

Editors: CAPT Todd Alspach, CDR Toni Bledsoe,

**CDR Cara Nichols, LCDR Charles Boison, LCDR Leah Ferrier, LT
Angela Hatzenbuhler, and LT David Hamilton**

Medical Laboratory Scientist Professional Advisory Group Coin
Order Form

**[http://usphs-hso.org/sites/default/files/hso_docs/
pags/mlspag/mlspag_coin_order_form.pdf](http://usphs-hso.org/sites/default/files/hso_docs/pags/mlspag/mlspag_coin_order_form.pdf)**