

The Scientist Officer

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Pictured above are Scientist Officers at OBC 112. Front row: LTs Beth Rubenstein and Tia Rodgers. Back row: CDR James Kenney, LT Marsha Samson, LT Oren Mayer, LT Nicholas Wiese, LT Kindra Stokes, and LCDR Shondelle Wilson-Frederick.

Notes from the SciPAC Chair



Fellow Scientist Officers, it's an honor to serve as Chair of SciPAC, which continues to prove itself to be the premier PAC in our Corps. This operating year, which began on September 1, promises its own share of challenges and opportunities, and I propose that the outlook is bright in a number of key areas. Throughout the last six months, SciPAC leadership has actively sought to communicate the unique value that our category offers, and this includes drafting a "fact sheet" that notes our strong contributions (see Scientist Category Fact Sheet, page 3). Some particularly bright areas worth highlighting include the following:

- Scientist Officers are central to public health, not only in direct clinical care, but also for more broadly protecting the health and security of the entire population through epidemiologic investigations, laboratory innovations, and regulatory oversight. Crucially, in a recent Town Hall meeting¹, it was announced that recruitment into the Corps will open for prioritized positions in all categories, which ensures that our contributions can continue to be supported through recruitment of new Scientist Officers.
- Our Officers are unwaveringly proactive in identifying and solving challenges. This includes establishing "Prevention through Active Community Engagements" (PACE)² and the Commissioned Corps Music Ensemble³, as well as routinely having policies and procedures defined that serve as a model for other categories. One critical way for Scientist Officers to continue to be at the forefront of these innovations is to proactively identify ways that we can support the Surgeon General's Priorities⁴.
- Scientists have the greatest number of deployments per Officer, and a greater proportion of Scientists serve on Tier-1 and Tier-2 response teams, compared with the other categories (see page 3). These accomplishments have been publicly heralded by senior Corps leadership on several recent occasions, demonstrating that these contributions are valued^{1,5}. To further this impact, Officers should continue to deploy, and Officers on response teams should particularly ensure that they are fully available when called upon. Further, I would like to see

our category at the top of the rankings for Officers meeting basic readiness. This is essential not only for deployment availability, but also for avoiding adverse consequences for promotion and career progression.

- Although many Scientist Officers are in non-research positions, and our benchmarks do not require publication, our Officers' literature contributions are prolific. When surveyed for the Scientist Bibliography, 144 Officers reported their publications for the 2018 calendar year, which included 463 journal publications, 9 book chapters, and 13 major reports⁶. This productivity is astonishing.

Moving forward, there are a number of things that can be done to sustain this level of excellence. First and foremost, Officers should continue to serve their agencies, fully meeting the priorities and mission unique to each assignment. Beyond this, Officers should maximize readiness, be available to deploy, and support the Surgeon General's priorities and initiatives as applicable for each Officer's billet. Lastly, I encourage all Scientist Officers to respond to Corps surveys, such as the State of the Scientist. We are data-driven Officers, and this key information source has proven valuable time and time again for supporting our Officers and informing senior leaders in ways that are not possible without these insights. It's a privilege to be in a position to highlight our successes, and I've never been more proud to be a Scientist Officer.

CDR Loren Rodgers

References

1. Commissioned Corps Town Hall. October 25, 2019.
2. Prevention through Active Community Engagement. <https://dcp.psc.gov/OSG/pace/>. Updated 4/2/2019.
3. United States Public Health Service Commissioned Corps Music Ensemble. <https://dcp.psc.gov/osg/ensemble/>. Updated 6/28/2019
4. The Surgeon General's Priorities. <https://www.hhs.gov/surgeongeneral/priorities/index.html>. Updated May 14, 2019.
5. "Modernizing the USPHS Commissioned Corps: Initial Findings and Preliminary Strategies" Briefing to the Commissioned Corps. February 11 2019.
6. [Scientist bibliography. 2018.](#)

(Continued on page 3)

Scientist Category Fact Sheet



Commissioned Corps of the US Public Health Service
Scientist Professional Advisory Committee



The Scientist Category

24 OCT 2019



**"...in research and in treatment,
 no equal can be found..."**
 — PHS March

The Scientist Category was the 5th category established by the Commissioned Corps of the USPHS. Strong officership and a culture of leadership are the norm among Scientists.

- The 339 Scientist Officers are the Corps' premier cadre of **data-driven critical thinkers**

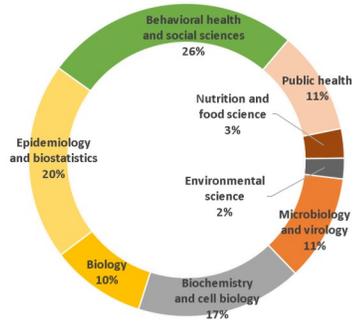
100% have a doctoral degree. **67%** have an additional advanced degree

Lab scientists develop cutting-edge assays to **detect emerging threats**

Psychologists provide direct patient care and develop policies and interventions to ensure underserved patients receive high quality, evidence-based care

Toxicologists assess the health risks for **chemical exposures** and environmental pollutants

Epidemiologists develop data-driven prevention and treatment recommendations that **improve patient outcomes**



Qualifying disciplines of Scientist Officers are **mirrored** within the Medical Service Corps of the Army, Navy, and Air Force, because of their essential role in **national security**.

The PHS authorized hiring of non-physician Scientists in 1902, and in 1945, civil service scientists were allowed to commission into the PHS.

Non-commissioned PhD scientists were instrumental in studies of Rocky Mountain spotted fever, pellagra, meningitis, and Spanish influenza

The precursor to the National Health Survey was started by non-commissioned PhD scientists

Scientist officers have led studies of tularemia, water fluoridation, occupational hearing loss, neurotoxicology, the effects of addiction on the brain, treatment of mental illness, and the biomedical use of lasers.

Scientist CAPT James McTigue was instrumental in drafting Surgeon General C. Everett Koop's landmark Report on AIDS

- Scientist Officers are **cost effective**.
 - Scientists consistently fill billets above their grade.
 - Special pay is not a recruitment tool or motivating factor for billet changes or retention.

Average difference between billet grade and officer rank	BOP:	1.0
	CDC/ATSDR:	1.1
	DOD:	0.4
	FDA:	0.8
	NIH:	1.0

- Scientist Officers are leaders who respond and lead responses.

On 11 FEB 2019, ADM Brett Giroir singled out the Scientist Category for having the **greatest number of deployers** per capita.

"Modernizing the USPHS Commissioned Corps: Initial Findings and Preliminary Strategies" Briefing to the Commissioned Corps, 11 FEB 2019.
https://dcp.psc.gov/Admin_Lookup/PDF/Mod

A greater proportion of scientists serve on Tier-1 or Tier-2 response teams than the rest of the Corps.

Scientists	43%
Other PACs	29%

- Scientist Officers innovate, create, and inspire!

Commissioned Corps Music Ensemble

- Founded by Scientists (<https://dcp.psc.gov/OSG/ensemble/history.aspx>)
- Providing esprit de corps since 2000

Prevention through Active Community Engagement (PACE)

- Started by Scientists in response to VADM Benjamin's National Prevention Strategy
- Scientists comprise **50%** of executive committee and **20%** of regional leads

Battle of the Commissioned Corps Blood Drive

- Conceived and planned by Scientist officers
- Collected 97 pints of blood and raised awareness of Sickle Cell Disease
- Scientists led all categories in blood donations

Scientist Officers from Near and Far Run the 50th Annual AJC Peachtree Road Race

Atlanta marked the 50th running of the Atlanta Journal-Constitution (AJC) Peachtree Road Race this July 4th. The race itself generated record-breaking performances, with Brigid Kosgei (Kenya) crossing the line in 30:21 to break the previously-held women's record of 30:32 and Rhonex Kipruto (Kenya) crossing the line in 27:01 to break the previously-held men's record of 27:04. Two Scientist Officers, 11 Officers from other categories, and numerous family members came out to participate.

Most notable was the participation of DC-area Scientist Officer, CDR David Huang. David attended graduate school in and developed a love for running in Atlanta but had not run in the Peachtree Road Race since 2006. Upon hearing this year marked the 50th running of the race, "I knew this was the perfect opportunity to return and despite being in town for less than 24 hours, I had a great experience," said David. "The crowds, bands, and atmosphere were just as I remembered them – and maybe even better. And I hit my goal time right on the dot." CDR Huang, along with CDR Jason Hymer (EHO), and LT Sandy Miller (ENG) were featured in a USPHS Athletics tweet for the event: "USPHS was well represented at the 50th running of the world's largest 10K race, the Peachtree Road Race in Atlanta on July 4th. A total of 12 PHS Officers and 1 civilian participated in the race, which had 60,636 finishers."



The sheer size of the race and different start waves unfortunately thwarted efforts to meet up as a single PHS Athletics Team, but all successfully completed the race, sweaty, smiling, and celebrating in Piedmont Park. We look forward to the AJC Peachtree Road Race continuing to be a regular USPHS Athletics event!

By CDR Alison Halpin and CDR David Huang

CDR Alison Halpin and husband, Sean Halpin, at the start line



CDR Jason Hymer (Environmental Health Officer), CDR David Huang, (Scientist) and LT Sandy Miller (Engineer) before the race.



The view at the start line of the 50th Annual AJC Peachtree Road Race

Tier 1 Regional Incident Support Team-National Capital Region (RIST-NCR) Welcomes Scientist Officers

The Regional Incident Support Team-National Capital Region (RIST-NCR) is a U.S. Public Health Service Tier 1 Deployment Team. The team has deployed more than 65 times since forming in 2009, most recently to support the 2019 National Independence Day Celebration. Recently, under the Readiness and Deployment Operations Group's (RedDOG) guidance, RIST-NCR restructured, resulting in a new team with the opportunities to deploy even more often to support additional partners and stakeholders in the National Capital Region.

The new RIST-NCR will be comprised of 60 trained Officers who will serve on the Red Team or the Blue Team. Each team includes three branches: Information Management, Resource Coordination, and Agency Representatives (Liaison Officers). Team members will be assigned to a branch, take corresponding trainings, and serve in the related role when deployed. Each team is on call in alternating four-month periods. When on-call, team members are active 24/7 and expected to deploy for up to two weeks within 12 hours of notification. Currently, there are ten Scientist Officers in RIST-NCR.

Response Roles

During deployments, Officers from each branch within RIST-NCR will support the U.S. Department of Health and Human Services (HHS) Secretary's Operation Center (SOC) and the Incident Management Team (IMT). Officers within the SOC will serve the Information Management and Resource Coordination Sections while other Officers will support the IMT from external locations as agency representatives.

Within the Information Management Section, officers will assist in providing strategic-level situational awareness for the public health, medical, and human services response. These officers will provide HHS senior leaders with decision support by collecting and analyzing information and data to support Critical Information Requests, develop situation reports and senior leadership briefings, provide geospatial representation of incident data, and exchange information to support downrange IMTs.

Officers within the Resource Coordination Section will support hybrid operations and logistic functions by fulfilling requests for health and medical resources; monitoring and tracking the mobilization, deployment, ongoing status, and redeployment of teams, equipment, and suppliers; and working to identify and address gaps in resources for operational requirements.



RIST-NCR Agency Representatives (left to right) CDR Jonathan Kwan (Health Services), CAPT Sally Hu (Scientist), CDR James Kenney (Scientist), and CDR Vicky Chan (Pharmacist) with National Capital Emergency Coordinator Mr. Glenn Blanchette (center) during the 2019 National Independence Day Celebration.

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Tier 1 Regional Incident Support Team-National Capital Region, continued from page 5

Agency representatives will serve as a central point of coordination and communication between the SOC and IMT and federal partners, such as the Federal Emergency Management Agency and the National Park Service, as well as other state and local partners. These Officers will be vital to maintaining real time situational awareness for SOC and IMT command staff and communicating HHS operational intent and actions to our partner agencies.

Pre-planned Events

RIST-NCR provides invaluable support to the IMT and SOC for up to four pre-planned events in the Washington D.C. area annually. These events include the President's State of the Union Address to Congress, the Presidential Inauguration, the National Independence Day Celebration, and the Peace Officer Memorial. Two to four days prior to a pre-planned event, RIST-NCR Officers are deployed to Washington, D.C., to begin preparations. The IMT coordinates all deployed Emergency Support Function (ESF-8) resources and includes Health & Human Services full-time staff, National Disaster Medical System intermittent staff, and other Commissioned Corps Officers. Event preparations in the IMT include an event brief, expectations, the generation of an Incident Action Plan, deployment role specific training, and a great deal of behind the scenes planning with keen attention to detail. These preplanned events provide a great opportunity for RIST-NCR experienced members to mentor team members in new deployment roles. Five RIST-NCR Officers deployed for the most recent pre-planned event, the 2019 National Independence Day Celebration, where they served as agency representatives for the D.C. Department of Health's Health Emergency Coordination Center, the D.C. Homeland Security and Emergency Management Agency's (HSEMA) Multi-Agency Coordination Center, or in HSEMA's Office of Unified Communication's Unified Medical Command.

Scientist Officer Perspective

CDR Qiao Bobo, in the Scientist Category, agreed. CDR Bobo has deployed 10 times for RIST-NCR during the past 5 years in various roles including admin/finance, information management, liaison Officer, and Critical Infrastructure Protection Duty Officer. She has deployed for planned national security events such as the State of Union Address, National Independence Day Celebration and a Presidential Inauguration, as well as for national emergencies including Hurricanes Maria, Irma and Michael. Since joining the team, she also has participated in four week-long hands-on training activities and in online and classroom training courses. According to CDR Bobo, "Officers in RIST-NCR have access to significant training opportunities and shadow more experienced Officers during deployments."

How to Apply

If you are stationed in the National Capital Region, interested in deploying to manage emergency incidents and National Special Security Events, and want to develop your leadership skills, the RIST-NCR is the right team for you. As the team commander, CAPT Sally Hu, has said, "RIST-NCR allows me to serve our country while being able to take care of my agency and family as well as improving my leadership and communication skills."

Currently, RIST-NCR is recruiting. If you are interested in or want to know more about RIST-NCR, please contact CAPT Sally Hu at sally.h.hu.mil@mail.mil and CDR Simleen Kaur at Simleen.Kaur@fda.hhs.gov.

By CDR James Kenney, CDR Qiao Bobo, CAPT James Cowher, and CAPT Sally Hu

Scientist Officers Present and Network at ACE Annual Meeting

The American College of Epidemiology (ACE) is the professional organization dedicated to continued education and advocacy for epidemiologists in their efforts to promote good science and public health (<https://www.acepidemiology.org/>). This year's annual meeting had a theme of "Real-World Epidemiologic Evidence in Policy and Practice" and was held at the Hilton Pasadena in Pasadena, California, from September 7–10, 2019.

Several Scientist Officers were involved in various aspects of the this year's meeting. CAPT Diana Bensyl served on the program committee and is also the President-elect of the organization. CAPT Michael King served as the facilitator for a data visualization workshop, while CDR David Huang co-led a lunchtime roundtable on developing Healthy People 2030. Finally, LCDR Hilda Razzaghi presented a poster titled, "Diabetes prevalence among U.S. adults with disabilities: National Health and Nutrition Examination Survey, 2013-2016."

In addition to the usual scientific, keynote, and plenary sessions common to most scientific conferences, the ACE annual meeting traditionally holds a reception and awards ceremony at a location unique to the host city. This year's event was held at the beautiful and historic Athenaeum on the campus of the California Institute of Technology, also in Pasadena. Scientist Officers, CAPT Bensyl, CDR Huang, and LCDR Razzaghi, attended and enjoyed camaraderie and networking over delicious fare.

See you at the ACE annual meeting next year in College Park, Maryland!

By CDR David Huang



CDR David Huang and CAPT Diana Bensyl



LCDR Hilda Razzaghi, CAPT Diana Bensyl, and CDR David Huang before the ACE Annual Meeting Reception & Awards Ceremony

SciPAC Fist Bumps

CDR Erika Odom, a Scientist Officer at the U.S. Centers for Disease Control and Prevention (CDC), is receiving a celebratory fist bump. At the HHS Ignite Fall Innovation Day (September 10), CDR Erika Odom presented the work that she and the Stroke Continuum of Care Champions Team conducted over the course of the summer through the Health and Human Services (HHS) Ignite Accelerator Program. Her presentation, in the style of a 5-minute elevator, was attended by over 200 in-person attendees and around 150 virtual participants. After conducting over 20 stakeholder interviews, the Team pitched the development of a tool that allows non-funded states to gain valuable insight into the CDC's Paul Coverdell National Acute Stroke Program's (PCNASP) data elements and best practices for quality improvement in stroke care. CDR Odom will continue leading the development of the tool through her work with PCNASP in the Division for Heart Disease and Stroke Prevention at CDC.

CDR Mark Scheckelhoff, a Scientist Officer at the Department of Defense (DoD), is receiving a celebratory Fist Bump for his recent participation and presentation as part of the Combat Support Panel at the Military Health Systems and Research Symposium. The panel was chaired by Maj Gen Payne, the Assistant Director for Combat Support within the Defense Health Agency (DHA), and was focused on DHA's efforts and initiatives to enhance the support provided to the Combatant Commanders and the Services. CDR Scheckelhoff presented multiple initiatives including innovative platforms that provide timely, actionable disease surveillance information in a secure environment. He also presented information pertaining to ongoing efforts to develop and utilize predictive modeling to inform the potential risks of infectious diseases in a region.



Hannah Foster (CDC ORISE fellow), CDR Erika Odom (Scientist Officer), Ed Simcox (HHS Chief Technology Officer)



COL Audra Taylor (Army, Armed Services Blood Program), CDR Mark Scheckelhoff (USPHS, Armed Forces Surveillance Branch), and Maj Gen Lee Payne (Air Force, Combat Support Agency)

Scientist Officers Engage with Mission of Mercy Dental Clinic to Promote Public Health

Since the death of Deamonte Driver, a 12-year-old boy from Prince George's County who died from an untreated dental infection in 2007, the state of Maryland has seen improvements in its oral health programs and policies. Although the Affordable Care Act included dental coverage for children and for pregnant women in Maryland, many adults still lack dental coverage. According to the U.S. Department of Health and Human Services (HHS), many individuals do not seek dental services for reasons such as cost, lack of dental insurance, fear of dental procedures or lack of awareness. The Maryland Department of Health and Mental Hygiene reported that in 2012 almost twenty percent of Maryland residents surveyed had not visited a dentist within the past five years and seven percent had not visited a dentist in more than five years.

The University of Maryland basketball court at XFINITY Center was transformed into a mobile dental clinic on September 13 and 14, 2019 with 100 dental chairs, providing \$1 million of free dental care to 1,000 underserved, uninsured, or underinsured adults.



Approximately 800 volunteers, including licensed dentists, hygienists, and dental assistants, provided state of art dental services, including cleanings, fillings, extractions, root canals, and oral hygiene education. The dental clinic was part of the two-day Mission of Mercy (MOM) and Health Equity Festival, sponsored by the University of Maryland School of Public Health's Center for Health Equity and Catholic Charities of the Archdiocese of Washington. The event also provided a number of health screenings and services, including blood pressure, glucose and cholesterol checks, flu shots, vision exams, HIV screenings; and one-on-one consultations with attorneys, nutritionists and counselors.

PHS Officers volunteered to fill multiple roles (e.g. coordinating clinical volunteers, recording patient-discharge information, distributing equipment/instruments to dentists) during the multi-day event. CAPT Lee (Pharmacy Officer) and CDR Cui (Scientist Officer) checked in clinicians, directed volunteers to their area, labelled each clinical working station, set up the orientation area with colored T shirts, and gave the Tip Sheet to a Lead volunteer who conducted an orientation. On the way out, CAPT Lee and CDR Cui met the former Acting Surgeon General, RADM (Ret) Boris D. Lushniak (current Dean of School of Public Health, University Maryland). RADM (Ret) Lushniak highly praised the PHS Officer's involvement in the MOM mission and said that he is always proud to see Officers dedicating to the mission of PHS, i.e. "protect, promote, and advance the health and safety of our Nation".

By CDR Minglei Cui

CDR Minglei Cui, RADM (Ret.) Boris D. Lushniak (former Acting Surgeon General; current Dean of School of Public Health, University of Maryland, and CAPT Christina Lee at the front entrance of the University of Maryland XFINITY Center where the MOM Dental Clinic was held.



CAPT Christina Lee and CDR Minglei Cui at the MOM Dental Clinic at the University of Maryland XFINITY Center.

Surviving the “COBRA” Alley! - An Officer’s Experience with FEMA’s “Emergency Medical Operations (EMO) for CBRNE Incidents” Training

From September 15–19, 2019, I along with other seven Public Health Service (PHS) Officers successfully completed the “Emergency Medical Operations (EMO) for Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) Incidents” training in Center for Domestic Preparedness (CDP) in Anniston, AL.

Surrounded by longleaf pine forest covering 9,000 foothill acres, the training facility is rather isolated, but its panoramic view is simply breathtaking. CDP has become a training center for the nation’s emergency responders since June 1998. In its Chemical, Ordnance, Biological and Radiological (COBRA) facility, CDP offers the only program in the nation featuring civilian training in toxic chemical and biological environments. In fact, nerve agents are present in the facility and are the most toxic of all the weaponized military agents. A tiny amount of these agents can cause sudden loss of consciousness, seizures, apnea, and death. In addition, CDP’s Noble Training Facility is the only hospital facility in the nation dedicated to training hospital and healthcare professionals in disaster preparedness and response.

Working along with other emergency response providers such as fire fighters, Emergency Medical Technicians (EMTs), paramedics, nurses and physicians from state and local governments, we learned and practiced many critical skills such as:

- Applying Incident Command System (ICS) principles focusing on medical operations,
- Recognizing the CBRNE threat and associated symptoms of exposure,
- Identifying the appropriate personal protection equipment (PPE) levels when responding to a CBRNE incident or mass casualty incident,
- Learning how to use self-contained breathing apparatus (SCBA),
- Performing scenario-based triage using SALT (Sort, Assess, Lifesaving Interventions, and Treatment and/or Transport),
- Decontaminating both ambulatory and non-ambulatory patients, and
- Tracking and transporting patients.



PHS Officers receiving the “Emergency Medical Operations (EMO) for CBRNE Incidents” training at the Noble Training Facility in Anniston, AL. Officers LT Patrick Kelly, CAPT John Su, CDR Robyn Neblett Fanfair, CDR Agam Rao, LCDR Alyssa Givens, LCDR Oliver Ou, and LCDR Margaret Whelpley. Not shown: LT Li Juan Polvadore

(Continued on page 11)

Surviving the “COBRA” Alley!, continued from page 10

This weeklong course included classroom lecture and hands-on training, and then culminated with a live-agent training in the COBRA facility. Our physical health was constantly monitored by taking vital signs including pulse rate, temperature, respiration rate, and other key factors. For the live-agent training, our blood cholinesterase and pupil diameters were also monitored. It was such a joyful feeling when I finally received the Certificate of Completion! I would like to thank Commissioned Corps Headquarters (CCHQ) for providing this training opportunity and give a special shout out to CDR Robert Horsch from Readiness and Deployment Branch (RDB) for coordinating this event.

By LCDR Oliver Ou



LCDR Oliver Ou wearing Level B Personal Protection Equipment during the “Emergency Medical Operations for CBRNE Incidents” training. This level of protection consists of a positive pressure air respirator with emergency self-contained breathing apparatus, chemical resistant gloves (double layered), clothing that is resistant to chemicals, and chemical resistant steel-toe boots.

Spook-Tacular Mentoring at the D.C. Halloween Party

On October 26th, four Scientists and a spouse met at Dave and Buster's in Silver Spring, Maryland for the Annual Halloween Party hosted by the D.C. Socials Team. The small group of Officers of varying ranks naturally evolved in an informal mentoring session. We casually discussed how to be a strong candidate for temporary and permanent promotions. Specifically, Officers discussed how to strengthen COER and Officer Statement narratives as well as how to organize information and documents in the CV and eOPF, respectively, to aid the promotion package review process.

As a fairly new Officer, I've found that connecting with fellow Scientists tends to quell my daunting thoughts of promotion. They have been in my shoes before, and they graciously share their successes, challenges, and advice. Our Officers are always willing to encourage one another to ensure that we are the best Officers that we can be whether it's promotion season or not.

Ironically, the Washington Nationals playing in the World Series was broadcast on multiple televisions in the bar area of Dave and Buster's that night. The Cinderella story of the Nationals' season this year reinforced the advice given by the Officers at the Halloween Party. We can achieve our goals with grit, determination, and hard work despite the hiccups we may experience along the way.

By LT Lacreisha Ejike-King



LCDR Alesha Harris, and LT Lacreisha Ejike-King



LCDR Tyann Blessington, CDR Lana Rossiter, LT Lacreisha Ejike-King, and Clinton Rossiter

Atlanta's Annual Halloween Spook-tacular



Atlanta Scientists held an annual Halloween Party on October 26, 2019 at the home of Science Officer, LT Ana Lauer. The family-friendly event was a screaming success with 17 adults (14 Science Officers) and 6 children in attendance. The home was decorated inside and out in Halloween décor to welcome guests in their costumes. A good time was had by all as Officers and their guests mingled throughout the event. Conversations continued well into the night. Also, a new inside joke may have been born for all those in attendance, because you never know when you will have to deal with projectile salsa.

By LCDR NaTasha Hollis, LT Ana Lauer, and LCDR Hilda Razzaghi

New Scientist Officers



LT Marisa Hast is an Officer with the Epidemic Intelligence Service with the Parasitic Diseases Branch at the Centers for Disease Control and Prevention. She focuses on neglected tropical disease and health disparities. She completed her PhD at the Johns Hopkins Bloomberg School of Public Health in infectious disease Epidemiology, where she focused on barriers to malaria control in northern Zambia. Prior to that, she earned her MPH at the Emory Rollins School of Public Health and worked at CDC for the Haiti Health Systems Recovery Office following the 2010 earthquake and cholera outbreak. LT Hast lives in Atlanta and likes hiking, travel, and tapas.



LT Nicholas Deputy, PhD, MPH, is a second year Epidemic Intelligence Service (EIS) Officer in the Division of Adolescent and School Health at the Centers for Disease Control and Prevention (CDC). As an EIS Officer, LT Deputy analyzes data from the Youth Risk Behavior Surveillance System to better understand prescription opioid misuse and other health risk behaviors among high school youth. LT Deputy has also participated in Epidemiologic Assistance (Epi-Aid) investigations in response to increases in HIV clusters among persons who inject drugs. LT Deputy earned his PhD in Nutrition and Health Sciences from Emory University and his MPH in Epidemiology and Social/Behavioral Sciences from Boston University School of Public Health. He received his Call to Active Duty in June 2019 and was a part of OBC 110 (the greatest that there's ever been!).



LT Beth Rubenstein is an Epidemic Intelligence Service (EIS) Officer assigned to the Malaria Branch at the Centers for Disease Control and Prevention (CDC). For the past fifteen years, she has supported the implementation and evaluation of health and social protection programs in sub-Saharan Africa, southeast Asia, and Latin America. Recent projects include assessing the health impact of microcredit in Indonesia, estimating the number of children separated from their families in post-hurricane Haiti, and measuring the burden of acute illness at district hospitals in Ghana. LT Rubenstein holds a PhD in Epidemiology from Columbia University and an MPH and an MBA from Johns Hopkins University.



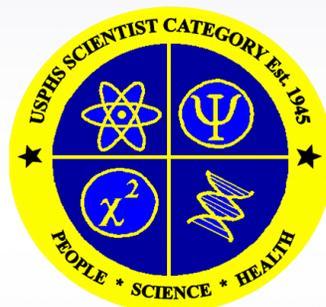
LT Rebecca Woodruff is an Epidemic Intelligence Service Officer at CDC's Division for Heart Disease and Stroke Prevention in Atlanta, GA, where her work currently focuses on dietary sodium as a risk factor for cardiovascular disease. A behavioral scientist by training, LT Woodruff earned her PhD in Behavioral Science and Health Education from Emory University, her MPH in Health Behavior from the University of North Carolina at Chapel Hill, and her AB from Bryn Mawr College. She joined the United States Public Health Service Commissioned Corps in July as part of Officer Basic Course 111.

If you would like to submit an advertisement, announcement, article, or photo to *The Scientist Officer*, please contact the

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Check out past issues of *The Scientist Officer* at:

<https://dcp.psc.gov/osg/scientist/newsletter.aspx>



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