U.S. Public Health Service Commissioned Corps

America's Health Responders



In Officio Salutis (In the Service of Health)

- The U.S. Public Health Service (USPHS) Commissioned Corp traces its origins back to 1798 and was recognized by Congress in 1889 as the USPHS Commissioned Corps.
- As one of the eight uniformed services and America's Health Responders, the USPHS Commissioned Corps is the first in line to defend the nation's public health against threats large and small.
- The USPHS Commissioned Corps is part of the U.S. Department of Health and Human Services (HHS) and led by the Assistant Secretary for Health. The U.S. Surgeon General and the Deputy Surgeon General provide operational command.

What We Do: Protect, Promote and Advance the Health and Safety of our Nation

- Provide Essential Healthcare Services to underserved and vulnerable populations.
- **Deploy for Public Health Emergencies**. As the cornerstone of U.S. crisis response, Public Health Service officers deploy to natural disasters, disease outbreaks, global public health emergencies, and serve on humanitarian assistance missions.
- Lead Public Health Programs and Policy Development. Public Health Service officers leverage their extensive experience, skills, and networks to provide expert leadership within HHS and throughout the federal government.
- Advance Innovation and Science. Clinicians and research scientists work at the forefront of the battles against the COVID-19 response, Ebola, cancer, food safety, HIV, mental health and more.

Professions include but are not limited to:

- Audiologist
- Clinical Psychologist
- Clinical Social Worker
- Dental Hygienist
- Dentist
- Dietician
- Engineer
- Epidemiologist
- Environmental Health Specialist
- Health Informatics Specialist
- Health Information Management
 Specialist

- Healthcare Administrator
- Industrial Hygienist
- Medical Health Record Administrator
- Medical Technologist or Clinical Laboratory Scientist
- Nurse Practitioner
- Occupational Health and Safety Specialist
- Occupational Therapist
- Optometrist
- Pharmacist

- Physical Therapist
- Physician
- Physician Assistant
- Podiatrist
- Public Health Professional
- Registered Nurse
- Respiratory Therapist
- Scientist
- Speech-Language Pathologist
- Veterinarian

Where We Work

There are approximately 5,500 Public Health Service officers who work in more than 800 locations across all 50 states and overseas. Public Health Service officers are assigned to federal agencies in U.S. Department of Health and Human Services or other federal Departments with a common mission to provide essential health services.

Learn more about the USPHS Commissioned Corps at www.usphs.gov For deployment-related inquiries, please email PHSDeployment@hhs.gov

USPHS Commissioned Corps Components

The USPHS Commissioned Corps has two main components: Active Duty Regular Corps and Ready Reserve Corps.

In the Active Duty Regular Corps, the Public Health **Emergency Response** Strike Team (PHERST) is the first team on the ground, within 8 hours.

Ready Reserve Corps supports the Active Duty Regular Corps' capacity to respond to regional, national, and global health emergencies and improve access to health services.

Active Duty **Regular Corps** Serves on the frontline of national and global public health Ready emergencies Reserve PHERST Corps First on the ground Supports capacity of Active Duty Corps

Deployment Authorities

Public Health Service officers may be authorized by the HHS Secretary to deploy in the following circumstances:

- A national emergency declared by the President under the National Emergencies Act (50 U.S.C. § 1621 et seq.). •
- An emergency or major disaster declared by the President under the Robert T. Stafford Disaster Relief and • Emergency Assistance Act (42 U.S.C. § 5121 et seq.).
- A public health emergency declared by the Secretary under 42 U.S.C. § 247d. •
- Any emergency that, in the judgment of the Secretary, is appropriate for the deployment of Public Health Service • officers.

Deployment Response Capabilities

Operational coordination: Establish and maintain a unified Health and social services: Restore and improve health and coordinated operational structure integrating all stakeholders and supporting the execution of Core Capabilities.

Operational communications: Ensure the capacity for timely communications in support of security, situational awareness, and operations, by any and all means available, among and between affected communities in the impact area and all response forces.

Intelligence and information sharing: Provide timely, accurate, and actionable information resulting from the planning, direction, collection, exploitation, processing, analysis, production, dissemination, evaluation, and feedback of available information.

and social services networks to promote the resilience, independence, health (including behavioral health), and well-being of the whole community.

Environmental response/health and safety: Conduct appropriate measures to ensure the protection of the health and safety of the public, environment, and responders.

Mass care services: Provide life-sustaining and human services to the affected population, including hydration, feeding, sheltering, temporary housing, evacuee support, reunification.

Public health and medical services: Provide lifesaving medical treatments via targeted public health, medical, and behavioral health resources.