SURPRISE

Loading....

The New Name is...
“Come, little leaves” said the Wind one day; “Come to the meadows with me and play. Put on your dresses of red and gold; for summer is past, and the days grow cold.”

- George Cooper

pumpkin spice lattes

crisp air

scarves

warm colors

cozy sweaters

falling leaves

being thankful
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Letter from the Editor
JOAG Leadership 2017

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Bringing physical activity to the daycare curriculum
The First Deployment
Building Stronger Communities
Drug School
Volunteering
Dear Fellow Junior Officers,

It is with great joy that I begin my tenure as the Junior Officer Advisory Group Chair for the 2016-2017 operational year. I am very fortunate to be able to serve alongside a fine group of officers that make up this year’s Executive Committee (EC) and Voting Membership. Here is a little background about each of the EC members.

This year’s Vice Chair is LCDR Kristie Purdy who hails from OK and serves as a dietician for IHS. The Chair-Elect, who was elected to a second term on JOAG, is LT Mekeshia Bates who is stationed in MD and works at DCCPR. During her first term, LT Bates served as the Nurse Liaison. Last year, LT Bates and LCDR Purdy served together as the Outreach Committee Co-Chairs. The Financial Liaison and Scientist PAC Liaison is LCDR Alice Shumate, who works for the CDC in WA. Previously, she served as one of the Membership Committee Co-Chairs. LCDR Chitra Mahadevan, one of the past Communications and Publications Committee Co-Secretaries, is this year’s Executive Secretary. She works for the FDA in MD as a pharmacist. I work as an Engineer at the FDA in MD and I previously served as the Chair of the Policy and Procedures Committee. During my 2012-2014 term as a JOAG voting member, I chaired the Recruitment and Retention Committee and served as a liaison to EPAC. In addition to the EC, JOAG is privileged to have CAPT Sara Newman continuing on as our Senior Advisor. She is a Scientist working at NPS in D.C. I am confident that the diverse backgrounds of each of us, along with our previous experience on JOAG, will enable us to continue to serve junior officers in a resource, advisory, and liaison capacity. However, we cannot accomplish our objectives without the talent, motivation, and effort of all of our voting members.
I am pleased to have the opportunity to work alongside this year’s voting membership. The 2016-2017 team consists of 21 officers who are either LTs or LCDRs and represent all categories and 11 OPDIVS (HRSA, USCG, IHS, FDA, NPS, EPA, OS, CDC, DCCPR, CMS, BOP). This year marks the 15th anniversary of JOAG. On this milestone year, all of the committees will be chaired by voting members for the first time. In addition, this year marks the start of the Readiness and Deployment Committee, which is run by two skilled officers, LCDR Stephanie Magill and LT Kevin Healy, who will continue to build on the foundation established by LCDR Elizabeth Garza and LCDR Elizabeth DeGrange.

Of course, everything that JOAG accomplishes each year to support junior officers and to provide advice to the Surgeon General and other entities regarding the interests of junior officers, could not be done without a dedicated and diligent membership. JOAG has a powerhouse of about 400 officers who actively work on initiatives throughout the year and another 100 officers who serve as mentors to JR or SR COSTEPS, support various activities during the USPHS Scientific and Training Symposium, or engage with our sister services during a number of community service events, many of which involve honoring veterans.

Thank you so much to all of our previous members and welcome to all of our new members. Let’s continue to work together to accomplish great things for junior officers!

Very Respectfully,

LCDR Samantha Spindel

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About JOAG

**Who:** JOAG serves in a resource, advisory, and liaison capacity to assist in the development and coordination of activities related to junior officers in the Commissioned Corps.

**What do we do:** Provide advice and consultation to the Surgeon General and other Corps and non-Corps entities on interests and concerns specific to junior officers

**How do we do it:**
- Support the initiatives of the Surgeon General
- Serve as a resource and support network for junior officers
- Foster the development of junior officers by providing leadership opportunities and promoting professional development and high standards of officership
- Increase the visibility of the Commissioned Corps
## EXECUTIVE COMMITTEE

<table>
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<th>Position</th>
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## VOTING MEMBERS

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Welcome to the first edition of the Junior Officer Chronicles. This is it! It’s finally here! You voted and chose the name for your junior officer publication! As you know, this is our first publication for the 2017 Operational Year and not only do we have a new name, but new leadership and new opportunities to tell YOUR stories.

Autumn is all about transitions, change, reaping the harvest of hard work and giving thanks. In keeping with that theme, you will see some changes in how we report activities in the Chronicles. We are working to shorten the pages but there is just SO MUCH GREAT NEWS TO SHARE!! We are confident that our enhanced content will keep you engaged and excited from cover to cover. I hope that you are all as excited as I am about the upcoming year and all of the changes that 2017 is sure to bring to each of our personal journeys.

As you move forward this year, I challenge you to embrace change, both good and bad. This will require some attitude and effort on everyone’s part. Embracing change can sometimes be difficult but here are a few ways to help you “Embrace the suck” or “Share the love”:

1. **Attitude Adjustment** — Changing your mindset can change your world. Like Podcasts? Try listening to the “Team Never Quit” podcast By Marcus Luttrell and David Rutherford.

2. **Change your surroundings** — The same people, place and things can sometimes lead to the same things. Look for a new group to inspire, teach/learn, or just share with.

3. **Exploration** — Diversion can sometime help with difficult change or direction. Try a new recipe, farmer’s market, or even just a good old hay ride.

4. **Upgrade YOU** — who does not like makeovers? Try before you buy! Pinterest is your friend. Start a board, have family and friends help. Don’t want a new look, how about a new motorcycle helmet?! Upgrade anything and everything….

(Message from the Editor cont. on page 33)
Duty Station Name/Location:
Indian Health Service (IHS), Phoenix Area Office, Office of Environmental Health and Engineering, Western Arizona District Office, Tempe, AZ.

Duty Station Mission: The mission of the Indian Health Service is to raise the health status of the American Indian and Alaska Native people to the highest possible level. To carry out this mission, the IHS provides comprehensive primary health care and disease prevention services. The Sanitation Facilities Construction (SFC) Program is the environmental engineering component of the IHS health delivery system.

To support the IHS mission, the SFC Program provides the technical and financial assistance to American Indian tribes and Alaska Native villages for the cooperative development and construction of safe water, wastewater, and solid waste systems and related support facilities.¹

Work force:
The Western Arizona District Office—Sanitation Facilities Construction (SFC) division:

- 8 engineers
- 1 inspector
- 7 environmental health officers

- 1 surveyor
- 1 draftsman

* Environmental health officers are not part of SFC

Direct /Service:
Our team serves 13 Federally Recognized Tribes that are primarily located in western Arizona.

The purpose of our division is to provide the technical and financial support system which promotes the development and construction of safe water, wastewater, and solid waste. As an Environmental Engineer, I am tasked with identifying current and/or future sanitation deficiencies with individual homes or the utility system as a
whole. I am currently assigned to the Havasupai Tribe.

The Havasupai Tribe is located at the base of the Grand Canyon. The Supai Village is only accessible via hiking, mule, or helicopter. This characteristic makes the Havasupai Tribe unique when it comes to construction projects. Some sanitation solutions that would be ideal in a normal location, become quickly problematic in a canyon. Some of the past projects include the installation of water storage tanks, an arsenic treatment plant, and some additions to their current lagoon.

**Challenges/Strengths:** One of the biggest challenges is the location of the Tribe. Transporting materials for construction becomes an increasingly important factor when it comes to cost and feasibility. The canyon also creates problems in regards to flooding. This is always a major consideration when planning new projects. One strength of the Havasupai Tribe is their ability to unify to accomplish a common goal.

**Unique Contributions:** As a newly assigned engineer, I have just begun to scratch the surface with the Havasupai Tribe. There are a few upcoming projects that I am eager to begin work on.

**References**


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**Did you know?**

*Havasu* means “blue-green water” and *pai* “people”

http://www.havasupai-nsn.gov/tourism.html
If the Shoe Fits...

LT Kayla Dewitt

The proper fit of a shoe is important to not only enhance performance in fitness but to also prevent injury. However, it is not always an easy undertaking to find the best fitting shoe. In the 1960s, consumers had only one option when selecting sports shoes: the all-purpose sneaker. Today, the shoe shopper has multiple options, including walking, running, and cross training shoes! With so many options of fitness shoes available, it can be overwhelming and confusing to find the best shoe for your personal and fitness needs. Below are a few tips and reminders when shopping for the right shoe:

- **Purchase shoes (or try on) at a specialty store.** A specialty store usually has a staff that is more knowledgeable than the staff at the everyday shoe store.

- **Wear the same type of sock** you plan on wearing during activity with the shoes.

- **Make sure you are able to wiggle all of your toes in the shoes.** There should be about 3/8-1/2 inch between the end of your big toe and the end of your shoe.

- **The shoes should be comfortable right away.** If a shoe is uncomfortable initially, the discomfort will not magically disappear after a run or workout activity.

- **Always re-lace the shoes you try on.** The heel should be snug, but not too tight. The shoe should not slip out when walking or running.

- **If you are involved in an activity more than three times each week,** your shoes should be specific to that activity.

- **Shoes should not be multitasked.** For example, if you are a runner and a basketball player you should have a pair of running shoes and basketball shoes.
• On average, your shoes should be replaced every 300-500 miles, but if your shoes look and feel like they need replaced, take those feet shopping again.

Avoid these mistakes when shopping for shoes:

• **Buying for looks**: Do not buy a shoe based on this week’s fashion trend. Go by feel and fit.

• **Forgetting to ask for deals**: Running clubs sometimes have deals with shoe stores, military discount, etc.

• **Buying the wrong size**: Shoes that are too small or too big can cause blisters.

• **Shopping at the wrong time of day**: Look for shoes at the end of the day or after a workout because that is when your feet are the largest.

• **Assuming your size**: Sizes vary between brands. So, always remember to try on a shoe and adjust if needed.

If you follow these tips and avoid some of the common mistakes discussed above, you are more likely to find the right shoe, which will allow you to enjoy and continue your fitness activity in order to improve your overall health and fitness!

References:

http://www.runnersworld.com/running-shoes/how-to-buy-the-right-running-shoes

http://www.webmd.com/fitness-exercise/features/how-choose-athletic-shoes#1

http://www.aofas.org/footcaremd/how-to/footwear/Pages/10-Points-of-Proper-ShoeFit.aspx
Here are some of the best podcasts for runners according to Happy Fit Momma:

1. Runner’s Connect Run to the Top
2. Another Mother Runner
3. The Rich Roll Podcast
4. Running Story
5. Marathon Training Academy
6. Ben Greenfield Fitness
7. The Marathon Show
8. Trail Runner Nation
9. Endurance Planet
Have you ever noticed someone out of uniform, wearing an “unserviceable” uniform piece or totally missing a uniform component?

Examples of wearing the wrong uniform components include:

- Uniform slacks with the iron wrinkle at the knee
- Pearls instead of gold balls with a Khaki Uniform
- Two different types of uniform materials worn together

I am sure you have seen it all. When you see it, do you consider “what should I do, should I approach the officer, what if they take it the wrong way? I don’t want to be embarrassed and I don’t want to seem disrespectful.” You want to help your fellow officer but are unsure how to proceed. You prepare yourself mentally.

“Excuse me, Ma’am, but if I might speak to you about the earrings you’re wearing in the Khaki uniform.”

“Sir, are you aware of the uniform regulations? You may be wearing your component incorrectly.”

Situations like these can be intimidating, particularly when dealing with senior officers. As junior or newly commissioned officers, there may be a tendency to second guess your knowledge of the uniform regulations. However, it is important to remember that senior officers have a responsibility to set the example and be role models for correct and appropriate wear of the USPHS uniform of the day. It also your responsibility as a commissioned officer to support your fellow colleagues in achieving excellence. This opportunity to bridge leadership and comradery should be a positive experience for both parties involved.

There may be several reasons why an Officer’s uniform wear is incorrect. Some examples include shoe wear for medical reasons, living out of a suitcase or sea bag, incorrect interpretation of the uniform regulations or unfortunately, lack of pride toward the uniform, or just an honest mistake.

Although daunting, this is not an area that has to be avoided. The approach to this shouldn’t really matter who points out
the discrepancy, but how it is pointed out.

Regardless of rank, approach people with the idea that whatever the discrepancy, it is an honest mistake. In that approach, the assistance in correcting the issue will more likely be a welcomed one and receive a better reaction. Officers who have an issue with fixing themselves with regard to the wear and appearance of their uniform probably need an attitude adjustment.

"Courtesy among members of the Armed Forces is vital to maintain discipline. Military courtesy means good manners and politeness in dealing with other people. Courteous behavior provides a basis for developing good human relations. The distinction between civilian and military courtesy is that military courtesy was developed in a military atmosphere and has become an integral part of serving in uniform.

Military courtesy is not a one-way street. Mutual respect is a vital part of military courtesy. In the final analysis, military courtesy is the respect shown to each other by members of the same profession."

Submitted on behalf of the JOAG Uniform Committee/Authors: LCDR Donna Chaney and LCDR Theresa Grant

**Current Assignment and Duties:** I am currently assigned to the FDA’s Office of the Commissioner, Office of the Chief Scientist, Office of Scientific Professional Development (OSPD) as a Health Education and Training Specialist. My main duties include developing and coordinating training for the FDA’s scientific staff, managing the Academic Outreach Program, the STEM Mentoring program, and creating tailored text and audio/visual content to engage our target audience.

**Previous Assignment:** My previous duty station in the FDA Office of Science in the Center for Tobacco Products as a Regulatory Health Project Manager was my first assignment as a Commissioned Officer. My original entry on duty was as a JRCOSTEP at the Centers for Disease Control and Prevention in the National Center for HIV, Viral Hepatitis, STD and TB prevention as a Health Communication Specialist. Each experience has shaped the Officer I am today and influences the Officer I hope to become.

**How did you find out about the PHS?** During my first year of graduate school at the Rollins School of Public Health, I attended the American Public Health Association’s (APHA) annual conference. There, I saw several uniformed Officers and inquired about which organization they represented. I learned that the PHS was one of seven uniformed services, where I’d known previously of only five. Learning about the corps changed the course of my life. From there, I sought opportunities to join the Corps.

**What are your goals with the PHS?** I am enjoying my PHS experience. I love the esprit de corps and the shared mission of promoting public health. My goals include completion of my DHSc and assuming various...
leadership positions in the Corps and at my next duty station. I have not yet deployed and hope to do so in the near future.

What is your most memorable PHS experience so far? This is difficult to decide because I’ve had many memorable experiences in the four years that I’ve been with the USPHS. I’d have to say that RADM Carmen Maher’s promotion ceremony in March 2016 is the most memorable experience thus far. It was an honor to see RADM Maher recognized for a career of leadership, service, integrity, and excellence. I was able to serve her as her Aide-de-Camp and Side boy during the ceremony. It was a phenomenal experience.

What advice would you give to prospective PHS applicants? Applying to the USPHS is an endeavor that requires determination and passion for service. My advice would be to network and apply early. I would encourage applicants to leverage contacts within the Federal Government to find open positions and to also reach out to Officers at PHS headquarters to gain an understanding of the application process. I’d then encourage them to maintain frequent contact with Federal and PHS contacts to track the progress of their USPHS application.

What officership opportunities are you currently involved in? I’m currently involved with the COA, Black Commissioned Officers Group, the HSO PAC, Health Promotion/Health Education Subcommittee, and the Health Disparities Subcommittee. My assignments in these groups are usually related to research and/or communications.

What would be your “dream assignment”, why, and where? My dream assignment would be to develop creative (arts-based) interventions as a tool to promote positive health outcomes in at-risk adolescents. This would include, for example, media (film, Public Service Announcement) creation, qualitative research, and development of training materials and/or curricula. Such an assignment would allow me to combine my skills in behavioral science, social marketing and the performing arts to help create science-based interventions to stem negative health outcomes. I would be happy to perform these duties in any of the OpDivs.

What’s your favorite book? One of my favorite books is The Alchemist by Paulo Coelho. The main character “Santiago” embarks on a quest to claim his “personal legend” which is a great treasure and accomplishment.

(Junior Officer Spotlight, cont. on pg 19)
Good Morning Oklahoma City!

Officers demonstrate their support for walking and walkable communities while participating in the 2016 USPHS Scientific and Training Symposium

By: LCDR Tyann Blessington and LT Alyssa Fine

A sunrise walk was the ideal start to a busy Category Day for approximately twenty officers who participated in the JOAG “Good Morning Oklahoma City!” walk. Officers began their two-mile moderate exercise at 06:30 and walked along the Bricktown Canal Trail, a manmade waterway which meanders through Oklahoma City’s historic warehouse district. The canal and foot path features quaint arched bridges, mini-waterfalls, flower gardens, and artwork depicting the city’s pioneering formation as well as future aspirations.

Promoting walking and advocating for walkable communities are priorities of the Office of the Surgeon General. JOAG is a strong supporter of walking and initiated this effort when Vice Admiral Regina Benjamin launched the Everybody Walks campaign in 2013. The JOAG Everybody Walk! Subcommittee promotes a culture that supports walking amongst officers and civilians, educates Americans on the importance of walking and regular exercise, and advocates for walkable communities. In the fall of 2015, Vice Admiral Vivek Murthy announced a new initiative, Step It Up! The Surgeon General’s Call to Action to Promote Walking and Walkable Communities. The new initiative encourages all ages and skill levels to walk; walking does not require expensive equipment; and those with disabilities are encouraged to walk or move with the aid of wheelchairs, walkers, or other mobility assistance devices. Both the Step It Up! and Everybody Walks programs support a healthier and fitter nation.

One of the U.S. Department of Health and Human Services Healthy People 2020 objectives is to incorporate exercise into people’s daily lives, such as encouraging walking and cycling to work and school. Regular physical activity can reduce the burden of chronic diseases including heart disease, diabetes, and some cancers. Walking and other physical activities can also improve mobility, prevent falls, reduce depression, aid in cognitive abilities, and encourage social interaction. In combination with muscle-strengthening activities (two or more days a week), adults are recommended to complete 150 minutes of moderate-intensity aerobic activity, 75 minutes of vigorous-intensity aerobic activity, or a combination of the two each week. Children and adolescents are recommended to complete at least one hour of physical activity every day (CDC, 2015 and 2016).

Encouraging walking and building walkable communities also have a positive impact on the economy and the environment of a region, including increasing home values and improving localized air quality. Oklahoma City’s Bricktown Canal Trail is in itself a success story on how communities can benefit from integrating walkable paths into development projects. Prior to the redevelopment, the neighborhood was struggling; residents avoided walking in the area due to crime, vacant buildings, and lack of amenities within walkable distances. In 1999, the canal and trails were constructed after voters approved measures to revamp the city’s downtown though a one-cent sales tax that raised more than $350 million (Marini, 2012).

“We enjoyed a brisk, uplifting walk through the gardens and parks of the beautiful city. While it is our job to protect, promote and advance the health of our nation, JOAG helps us remember our own personal wellness is a top priority!” — CAPT Sara Newman, JOAG Senior Advisor

“There were plenty of flora and fauna to view during our walk. We passed waterways where ducks and geese were busy with their morning routines. Butterflies fluttered between manicured flower gardens and native brush. And of course there was a squirrel or two running around. All of these interactions help me to reflect on recent activities, prioritize my schedule, and remind me of the intricate web between public health, the environment, and society.”

— LCDR Tyann Blessington
Good Morning Oklahoma City! (Cont.)

The Step It Up! Initiative recognizes that successful walkable communities require participation and support of many sectors of society, including community leaders, land management, city planning, transportation, recreation, education, business, nonprofit organizations, communications, healthcare, and public health.

USPHS officers can support the development of walkable communities in a number of ways:

• Meet with state and local government officials, including representatives from the transportation, parks and recreation, and public health departments, to provide information on the importance of physical activity, street and park design, and health promotion activities.

• Visit local businesses to discuss worksite programs and community engagement in walking initiatives, emphasizing the benefits to employee health, wellness and productivity.

• Ally with nonprofit organizations, colleges and universities, hospitals, and other partners to establish walking groups, health promotion campaigns, and develop common goals and strategic plans to improve the accessibility and convenience of walking.

“It felt really amazing to get out early and start the day with a refreshing walk with fellow Corps Officers and their families.”
— LT Toni Hallman

“An early morning walk through the garden kept me calm and composed for my presentation today. Isn’t walking the best way to harness those stomach butterflies?”
— LCDR Oliver Ou

“I thoroughly enjoyed the event, both for social purposes and for my physical health. I would encourage JOAG to continue this type of event.”
— CDR Matthew Weinburke

“The Bricktown Canal Trail is a great example of the infrastructure that makes cities more walkable. Partnering with local groups to enhance sidewalks, parks, and signage can lead to sustained, long-term improvements in physical activity levels and health.”
— LT Alyssa Fine
The Alchemist challenges the reader to consider the interconnectedness of all things, the importance of being true to oneself and the idea that each individual creates his own reality. I consider myself a hope multiplier and similarly believe that we each can find “great treasure” within.

(Walkable Communities cont. from Page 18)

- The Safe Routes to School National Partnership recently released a report entitled *Making Strides* that details how each state is doing in their support for active transportation. Take a look at the report to determine how your duty station state is doing overall and where improvements are most needed. The analysis may help determine a good place to start when advocating for walking and walkable communities.

We hope that more USPHS Officers will join the Surgeon General’s call to promote walking and walkable communities. Walking events do not require many resources and they can be effective with small or large numbers of participants. Walking in uniform or while wearing PHS Pride gear is a great way to familiarize your community with the Public Health Service. Walking is also an excellent way to interact with neighbors, assess community health needs, and develop solutions to better serve the public, while demonstrating that healthy living is achievable for all.

**References:**


6. Trip Advisor. 2016. *Bricktown River Walk.* Available at: [https://www.tripadvisor.com/LocationPhotoDirectLink-g51560-d108485-i31870259-Bricktown-Oklahoma_City_Oklahoma.html](https://www.tripadvisor.com/LocationPhotoDirectLink-g51560-d108485-i31870259-Bricktown-Oklahoma_City_Oklahoma.html)

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Bringing physical activity into the daycare curriculum
LCDR Camille Mitchell

In the Fall of 2015, I heard about this “Train the Trainer” session being offered by a non-profit organization called “Be Active Kids.” The idea of a movement guide that assists daycare teachers to bring instruction and physical activity together was intriguing. This was one of the best trainings I have ever received and now I am a trainer for “Be Active Kids.” Being a trainer means that you give back to the community by either hosting a community engagement event or providing a three-hour training at a daycare. The movement guide provides activities from 6 weeks and up learn space awareness and practice locomotor skills (i.e. hopping, skipping); manipulative skills (catching or kicking a ball); and non-locomotor skill (balancing).

As I was preparing for my first training at a local daycare for twenty-eight daycare providers, I enlisted a fellow officer to help me bring the different parts of the movement guide to life. I needed to see if I could take everyday materials (i.e. tape, hula hoops, colored paper and markers) and use them to add activity to routine learning events like singing nursery rhymes. LCDR Renee Smith and I tested out some of the examples from the movement guide listed below.

**Lily Pad:** Focuses on understanding location and how one can get from one place to another. We placed X’s on the floor with blue tape spaced apart. There was a start and end point. The daycare providers jumped and hopped from one X to another, and discussed using different color tape or numbers. We tried both the tape and hula hoops for this exercise.

During the April 5, 2016 training, some of the providers were slightly defensive and that was a huge hurdle to get over. Luckily, the daycare providers participated in active trivia where the answers (A,B,C,D) were placed around the room. Once the question was read, each team selected one person to move to their answer. The trivia questions discussed the amount of physical activity toddlers actually receive during the day. The teachers were very surprised by the amount considering the children go outside for free play for an hour every day. After discussing what the children were actually doing during this free time, the teachers realized that the toddlers were spending a large amount of their outside time stationary. As a result, we noticed a change in the teacher’s interest in the movement guide, because they could see where they could incorporate movement into their lesson plan.

The successful training with daycare was inspiration for me to take some of the activities and try them at home with my two-year-old. I purchased a pool noodle Dollar Tree and a cheap ball, which I taped together to give him an object to strike or jump up and touch. He jumped up and down for 20 minutes and asked to do it at least once a day.
FDA’s Office of Regulatory Affairs Corps Officers Attend “Drug School”

Written by: LCDR Chaltu Wakijra and LT Rachael Cook
Edited by LCDR Collins Mason

The Food and Drug Administration (FDA), Office of Regulatory Affairs (ORA) is grooming the next set of consumer safety officers (CSOs, also known as investigators) charged with ensuring the safety of the nation’s drug supply by conducting inspections at national and international drug companies. ORA is the field branch for the FDA. It supports the FDA’s other divisions and product centers by training and providing the personnel who conduct the majority of the FDA’s field work, including inspections, field exams, product recall audit checks, sample collections, and investigations.

This past July, we were part of a group of eight PHS officers (1 nurse and 7 pharmacists) who attended the initial training to become full-fledged and certified FDA drug investigators. We are part of the latest addition to the cadre of trained Corps officers to successfully complete DG230, also known as Basic Drug School. This, and future training allows us to expand our commitment to and knowledge of public health.

As drug investigators, we have taken on an important and much needed challenge by applying our formal education and diverse career background within a regulatory environment. Previously, we served at other agencies such as IHS, BOP, and ASPR. At our previous agencies, we saved lives dispensing drugs and providing patient care. We have come full circle, and now save lives by ensuring that the drug products we would have previously dispensed are manufactured safely.

Conducting drug investigations is a challenging and exciting job. It requires an intricate understanding of the Food Drug and Cosmetic Act, other Public Health laws, current good manufacturing practices (cGMPs), as well as the ability to apply these regulations. Drug investigators are required to pay attention to detail and use a nuanced approach to identify and inform regulated firms of product, process, and practice related deficiencies that can affect the safety or quality of a drug product. We are required to put in long hours, travel domestically and internationally for multiple weeks, take extensive regulatory notes, gain quick familiarity with diverse manufacturing processes, and write timely, factual reports of our findings for the agency to evaluate and utilize to take action when warranted.

What’s truly exciting about our job is that we never know where our next assignment will be or what type of firm we’ll get to inspect. No two firms are alike. Our work occurs in diverse settings such as compounding pharmacies, drug manufacturers, drug repackagers and relabelers, biotechnology firms, positron emissions topography firms, and contract testing laboratories (just to name a few!). The manufacturing processes can range from simple to complex, open to closed, and the inspected firm can range in size from a small office to a huge complex that requires multiple days to conduct a walk through.
While in Drug School, we learned about a wide variety of topics including quality control principles, complaints and failure investigations, process validation, contract manufacturing, controlling drug components and containers, inspectional techniques, process design, qualification, and continued verification, cleaning validation, how the United States Pharmacopeia (USP) applies to our inspections, analytical and microbiology laboratories, expiration dating and stability testing, cross contamination, and data integrity. We will be returning in September to complete the remaining two weeks of Drug School which will include active pharmaceutical inspections, pre-approval inspections, and sterile inspections. We are excited to expand our knowledge of drug inspections and hope to educate other PHS pharmacists on yet another opportunity available to them. We feel that the skills we have as pharmacists make us uniquely suited for drug investigator work.

Pictured from left to right:

LT Dien Nguyen, LT Dustin Tran, LT Rachael Moliver, LCDR Abby Mozeke-Baker, LT Ronan King, LT Tenzin Jangchup, LCDR Kristin Abaonza, LT Rachael Cook, LCDR Chaltu Wakijra
As a nation, we have seen an ever-increasing rate of morbidity and mortality due to preventable diseases. To address this issue, the Office of the Surgeon General (OSG) has developed the National Prevention Strategy (NPS) that clearly identifies a plan to a healthier and happier nation. However, the NPS does not clearly define how prevention information or training should be provided to the public. Furthermore, there is no mention of a role for the USPHS Commissioned Corps in the implementation of the NPS. The Commissioned Corps, by far, is the most capable asset the United States Government possesses for a mission such as this, but the potential contributions of the Commissioned Corps have largely been kept on the sideline.

The Commissioned Corps consists of more than 6700 officers that represent 11 different categories of training including: Physicians, Nurses, Scientists, Engineers, Dentists, Pharmacists, Veterinarians, Therapists, Dieticians, Environmental Health Officers, and Health Service Officers. This diversity in training means that there are 11 different viewpoints from which to approach the NPS, resulting in a multitude of opportunities to engage the public about the NPS and the benefits of prevention, which has been a cornerstone of the OSG.

One way for officers to contribute to this effort is through their participation in the NPS-Prevention through Active Community Engagement (NPS-PACE) Program. The NPS-PACE program takes advantage of the expertise of the Commissioned Corps officer and utilizes it to provide education about the benefits of prevention to the officer’s local community. Examples of this type of community engagement can be found in several locations across the country through numerous Commissioned Officers Association (COA) Branches. Many of the events that have occurred, to date, have been public school based and have provided an excellent opportunity to introduce the lessons of the NPS to children that range in grades from kindergarten through high school. School districts across the country are facing ever shrinking budgets while being mandated with the maintenance of the same educational requirements. Unfortunately, exercise and health-related classes become the victim of budget cuts due to the lack of standardized testing requirements in these educational fields. However, this is an area of opportunity for the Commissioned Corps to step up and provide leadership to our individual communities.

Since the NPS-PACE program’s inception on January 4, 2013, eighty-four (84) events have been conducted in thirteen (13) states, educating 14,960 people on multiple aspects of the NPS. The following describes the nature of NPS-PACE activities conducted in NPS-PACE’s most active regions.

**Washington DC Metro Area**

DCCOA NPS-PACE Subcommittee has conducted over 58 NPS-PACE events, educating at least 10,662 people on at least one aspect of the NPS. Event types range from career fairs, NPS-PACE developed lessons and public health education booths. Notable contributions are listed below:

- Set up the Adopt a Highway program in which NPS-PACE adopts a one-mile stretch of highway (Route 650, New Hampshire Ave, Silver Spring, MD) in front of FDA Headquarters. In exchange for cleaning road four (4) times a year, NPS-PACE program has a sign bearing the name United States Public Health Service. The sign provides great visibility for the Corps to over 10,000 motorists on a daily basis.
• Organized three (3) consecutive public health education booths during Maryland Day at the University of Maryland in College Park, MD. More than 80,000 people attend Maryland Day, and at least 500 people visit the USPHS public health education booth every year.

• Organized twenty (20) Career Day Events and presented on various careers within USPHS at public schools and the Montgomery County College and Career Expo, reaching out to 3,150 individuals.

Atlanta

The Atlanta COA Branch has been active with the NPS-PACE program through developing lesson plans and conducting four (4) NPS-PACE events at Woodward Academy Middle School located in Atlanta, GA.

• On November 21, 2013, eighty-four individuals participated in a “Contagion” case study to learn about outbreak investigation and hand hygiene.

• On May 16, 2014, 240 individuals participated in a case study activity about nutrition and obesity.

• Established a pen pal program where officers and students exchanged letters during the spring semester in anticipation for a meet and greet with students at their school. Officers discussed the importance of not smoking, getting physical activity every day, and eating fruits and vegetables.

• On November 4, 2015, 290 participated in a case study about Ebola to learn about vulnerable populations, define a potential Ebola outbreak, identify roles and responsibilities of an Incident Command System, and describe a system to mitigate community exposure.

Baltimore

NPS-PACE’s most widely attended event of Fall is the Maryland Science, Technology, Engineering, and Math (STEM) Career Fair for girls at Bryn Mawr School, Baltimore, MD conducted every year around mid-November. The Career Fair aimed to increase the number of women engaged in STEM fields, and it attracted over 400 participants from 40 different Maryland schools, ranging from elementary to high school.

• USPHS Commissioned Corps officers were represented from the Health Services, Medical, Therapist, Scientist, and Nursing categories, and this diverse group drew upon their wide range of experiences and expertise to inform students (and parents) about the career options within the USPHS and the FDA.

• Officers discussed the numerous STEM career fields within the Corps and the role of STEM careers in responding to the Surgeon General’s National Prevention Strategy.

• The various Agencies where officers are stationed were also addressed, with a focus on the FDA.

• Students were educated about the approval process of new drugs at the FDA by playing a critical thinking game in
which they considered information on the risks and benefits of different hypothetical drugs to decide whether or not they would approve that drug.

- The game sparked a great deal of interest and discussion. Notably, several attendees inquired about student opportunities and training in the USPHS, including the COSTEP programs.

**Cincinnati**

An NPS-PACE branch was formed within the last year. They implemented a hand washing event with 34 individuals using the Healthy Hands Lesson Plan during the National Institutes of Occupational Safety and Health (NIOSH) Bring Your Child to Work Day on August 7, 2015.

**New England**

NPS-PACE’s most recent branch has conducted six (6) events since May 9, 2016 in the New England area, educating 515 individuals on at least one aspect of the NPS.

- Implemented Sun Safety Awareness Lesson twice
- Implemented Hand Hygiene and Healthy Eating Lesson
- Developed a presentation that consisted of low -

The activities described by USPHS Officers in the Washington DC Metro Area, Atlanta, Baltimore, Cincinnati, and the New England Area are prime examples of how the NPS-PACE program functions as a conduit for officers to reach out to their community and share a part of the National Prevention Strategy as it fits with their expertise. To further this goal, the NPS-PACE program is constantly looking for new officers to help participate, build, and expand the program to new areas. If you are interested in learning more about the PACE program, please contact us at through the following link: https://sites.google.com/a/nps-pace.com/nps-pace/contact-us

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**Quote of the Quarter**

*Service to others is the rent you pay for your room here on earth.*

Muhammad Ali
Protecting Yourself during Deployments: Safety is Your Responsibility!

LCDR Ibad Khan

In order to explore this year’s theme of “Advancing Deployment Readiness”, I want to address an important but often forgotten theme—safety. “Wait a second”, you retort, “I’ve been deployed before and I clearly recall each of my deployments – despite their diverse missions and locales – had a Safety Officer prominently featured in the organizational structure.” Right you are! However, what I would like to draw attention to is that it is easy to forget that safety is all of our responsibility. Deployments can be stressful and overwhelming. Adding unfamiliar locations can storm when it comes to conditions or actions.

Take for instance my deployment this year to Flint, Michigan in response to the water lead crisis. In addition to the usual stress of a deployment, deployers had to face several inches of snow and ice on multiple days. Even though I have responded to various types of public health emergencies (e.g. infectious disease outbreaks, natural disasters, etc.), I have never deployed in snowy and icy conditions. Also, as an Atlanta native, I’m not used to such inclement weather. The key here is that the Safety Officer does his or her best to ensure safe conditions at the duty station and your lodging site and to keep all deployers informed of hazards. However, the Safety Officer cannot account for every moment of your day. It’s critical that every officer pays close attention to their surroundings and exercises situational awareness to be a steward of safety for themselves as well as fellow deployers. Individuals will have varying degrees of hazard risk assessment based on what they are used to. For some officers, driving in the conditions we encountered in Flint was difficult but something they were used to doing every year. But for me it was a novel experience. Being self-aware of one’s strengths and limitations is essential in proper risk management.

Increasingly, PHS officers are being deployed internationally as well as to US territories outside the continental United States. In addition to environmental hazards, these locations can pose a safety risk to individuals who may not be familiar with local cultural sensitivities. Whether it’s local cultural considerations or environmental hazards, deployers can face threats to their safety that may not be overtly conspicuous. In my experience, Safety Officers have always done a remarkable job in providing deployers instructions on how to work in the safest way possible. However, it would be crucial for all of us to remember that safety is everyone’s responsibility.
The First Deployment - One Officer’s Perspective

LCDR Zewditu Demissie

In 2006, Department of Health and Human Services Secretary Michael Leavitt implemented the USPHS Commissioned Corps tiered response system. The resulting system consists of three Tier levels: Tier 1 and Tier 2 response teams and Tier 3 response rosters, each on call every 5 months. In November 2015, I joined a Tier 1 team as an epidemiologist. In August 2016, I was rostered for my first deployment. Prepping for one’s first PHS deployment can be a nerve wracking experience. This article provides some advice on how to prepare, how to determine what to pack, what you can expect on deployment, and the pleasant surprises that may be experienced.

Your best resources for preparing for deployment are deployment checklists and your fellow teammates. If you have children or pets that need to be taken care of while you are deployed, develop a roster of family and friends who can assist. Pay upcoming bills. If you live alone, prepare your home for your absence (e.g. thermostat, automatic lights, etc.). If you have a home alarm, make sure your emergency contact has your keys and remembers your alarm code and any needed passwords. Bring cash; small bills are preferred. Your deployment team may ask for officers to extend, with supervisory approval, if the response goes beyond two weeks. Talk with your supervisor about this possibility before you deploy.

A number of things may be unknown leading up to your deployment, such as where you will sleep and what you will eat. This will influence how you choose to pack. Do come prepared. I brought both bed sheets and a sleeping bag. I was very glad I did. A couple nights, I slept with sheets stuffed inside a sleeping bag that was inside another sleeping bag. Do not pack just for the current outdoor weather of your deployment location. First, the weather could change during your deployment. Second, you never know what the indoor temperatures will be. Also, bring snacks with you, especially if you have certain dietary needs. Refer to RedDOG’s deployment checklist and any documentation from your team for packing guidance. Have your go bag ready as boots on the ground are often needed ASAP.

Expect to work long hours during your deployment; 12-hour shifts are typical. While on shift, you may be
standing, walking, lifting, etc. Maintaining physical fitness and deployment readiness are not just administrative hurdles; it helps prepare you for field work. You may not have the privacy you are used to. Do not expect separate office space. You may share sleeping quarters and shower facilities.

Deployments are often filled with pleasant experiences. I am so thankful for how other officers took me under their wing and gave me deployment and career advice. I hope these bonds last throughout my PHS career. I also found myself bonding with certain residents affected by the disaster. I miss the hugs given by one of our child residents. The deployment helped me assess and strengthen my resiliency and adaptability. Overall, I have found deployment to be a rewarding experience. Your fellow officers offer a wealth of experience and encouragement; reach out to them if you are interested in a deployment team.

**References**

Deployment Teams:  
https://dcp.psc.gov/ccmis/ReDDOG/REDDOG_current_teams_m.aspx

Deployment Checklist:  
Volunteering: A Few Hours Can Make a Large Impact
LT Katelyn Overstreet

Myself and five other JOAG officers recently had the opportunity to volunteer at Mt. Zion Food Pantry, a local food pantry located inside the Mt. Zion United Methodist Church in Highland, Maryland. I was able to find the volunteer opportunity through the website www.volunteerhoward.org. After the call for volunteers was issued, I was astounded and pleased to have such a large interest in the event!

We arrived at 8:00 A.M. and were immediately put to work putting a specific number of meats and other frozen food items into plastic bags for later distribution. Shortly afterwards, we were each tasked to man a food station for items such as pasta, canned goods, snacks, produce and meat. Then the families arrived, checked in, and were given a shopping cart. We greeted each family and helped them select their food items, making conversation and helping them place their food choices in their carts.

Whenever the food supplies for our station ran low, there was a more experienced volunteer available to retrieve more food for us. The families were allowed to take an unlimited number of produce. Any remaining produce was then delivered to another organization in need by the food pantry volunteers. After all of the families had gone through our mini grocery store, we washed down the tables and packed them away and stored any leftover nonperishable food. We wrapped up around 11:45 A.M., and in less than four hours we were able to help provide food for 92 families, a total of 421 people! Talk about a productive Saturday morning!

The seasoned volunteers at the site are dedicated and passionate, building their food pantry from the ground up and coordinating food donations from local food banks and grocery stores and money donations from their church. They have sacrificed countless hours every third Friday night of each month and every third Saturday morning to prepare and run the food pantry.

The staff was very receptive to having us return for another volunteer event and appreciative to the help we provided that day. I would like to make this a reoccurring volunteer event, at least quarterly, if not more frequently, and I have already reached out to a point of contact for the site about having us return in November. ■
Shades of Autumn

ACORN  BONFIRE  CANDY
CORN  CORNUCOPIA  DAY
ELECTION  FAMILY  GHOST
HALLOWEEN  HARVEST  HAY
LEAVES  NOVEMBER  OCTOBER
PUMPKIN  RIDE  SCARECROW
SMORES  SWEATERS  THANKSGIVING
VAMPIRE  VETERANS  WITCH
Slow Cooker Hearty Chicken Minestrone

Serves 6 to 8

For the broth:
1 1/2 pounds bone-in chicken thighs
1 medium leek, sliced into 1/2-inch rounds and rinsed
1 (15-ounce) can diced tomatoes
3 medium carrots, peeled and cut into 1/4-inch rounds
2 celery stalks, cut into 1/4-inch pieces
3 cloves garlic, minced
1 bay leaf
1 teaspoon salt, plus more as needed
Pepper
1 quart (4 cups) low-sodium chicken broth
2 cups water

To finish:
1 cup whole-wheat pasta shells
1 bunch red Swiss chard
1/2 head green cabbage or 4 cups of shredded cabbage
1 medium zucchini
1 (15-ounce) can garbanzo beans, drained and rinsed

For the broth:
Place the chicken, leek, tomatoes and their juices, carrots, celery, garlic, bay leaf, and 1 teaspoon salt in the insert of a large slow cooker (at least 4 quarts). Season with pepper and add the broth and water. Cover and cook on low for 6 hours or high for 4 hours. Meanwhile, prep the other vegetables and cook the pasta.

To finish:
Cook the pasta shells according to package directions. Drain and rinse in cold water, then store in the refrigerator.

Remove the stems from the chard. Cut the leaves crosswise into 1-inch-wide pieces. Place in a large bowl. Core the cabbage, thinly slice, and add to the bowl of chard. Halve the zucchini lengthwise, then cut crosswise into 1/4-inch pieces and add to the bowl. Refrigerate until the broth is ready. (The pasta can be cooked and the vegetables prepared up to a day in advance.)

When the broth is ready, remove the chicken and bay leaf to a plate and let cool slightly. Meanwhile, add the bowl of vegetables to the broth and stir to combine. Cover the slow cooker, turn the heat to high if not already on high, and cook until the greens are tender but not mushy, 20 to 30 minutes.

Remove the chicken meat from the bones and discard the skin, bones, and bay leaf. Shred the meat into bite-sized pieces. Stir the garbanzos, chicken, and cooked pasta into the soup. Taste and season with salt and pepper as needed.

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Records & Documentation

Prior service members...Interested in getting or replacing copies of your service records? Below are some resources that you can use to keep your records up to date, remember your service, and pass down to your children as family keepsakes:

Replace Military Records/DD 214 (Proof of Service): Two methods for requesting military records:


Paper method. Mail or Fax a Standard Form SF-180 (see address below). Print, sign, and date all copies of paper forms before submitting them.

**NPAC Mailing Address:**
National Personnel Records Center
Military Personnel Records
9700 Page Avenue
St. Louis, MO 63132-5100
phone: 314-801-0800
fax: 314-801-9195

Cold War Recognition Certificate:

“You got mail”

Holidays for Heroes 2016

Assist a service member, veteran and/or their families this year by providing cards they can send home to their loved ones this holiday season. The deadline for all cards including Hanukkah, Christmas and Kwanzaa is Friday, November 30, 2016. Here’s how it works:

Create a bundle that contains:
- 3 blank holiday cards (same holiday per bundle—no glitter)
- 3 blank envelopes with postage stamps
- 1 short message to the service member (Include only our first name)
- Bundle with a ribbon :)

Please drop off or mail completed bundles to:
American Red Cross In the National Capital Region
**ATTN: Holiday Mail for Heroes**
8550 Arlington Blvd
Fairfax, VA 22031

For information: American Red Cross ([https://www.facebook.com/RedCrossWRNMMC/](https://www.facebook.com/RedCrossWRNMMC/)) at 301 295 1538 if you have any questions!
5. **Honey Don’t List** – Throw that “Honey Do List away” and do what you WANT to do. Check out some local DIY channels or take a class at your local Home Depot/Lowes! A little paint in the kitchen can change your world.

6. **Become your own superhero** – Push yourself beyond your mental limits. You will never know how strong you are until you are tested. Try running a 5K, take Salsa dancing lessons, volunteer at your local VA. Did you know that helping others and pushing your personal boundaries ultimately make YOU stronger?

7. **Friends & Family Day Everyday** – Family and friends offer opportunities for growth and support. Finding innovative and experienced minds can change your focus and make stress melt away like ice cream on a summer day.

Remember this publication belongs to all junior officers! Become part of the changes here at JOC, JOAG, and the Corps. Not seeing the kind of stories you would like to see? Let us know and we will make that CHANGE happen. Get involved with JOAG, and most importantly get out into your communities and represent the Corps.

*We thank you in advance for allowing us to serve you this operational year and look forward to another amazing year of reporting, uplifting, educating, and supporting our JOAG family!*  ■
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 is a quarterly publication produced by the JOAG Communications & Publications Committee (CPC). The 2016-2017 Co-Chairs are LCDR Beth Osterink and LT Katie Bante and the CPC EC Liaison is LCDR Chitra Mahadevan.

Send editorial comments and concerns to either LT Katie Bante (Katie.Bante@tananachiefs.org) or LCDR Daveta Bailey (Daveta.Bailey@fda.hhs.gov).

To contribute to a future edition, submit articles electronically to joagcpcsubmissions@fda.hhs.gov.

Any opinions or thoughts presented within 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.

To all the officers who have deployed this quarter:
- Louisiana Floods 2016—Baton Rogue
- HHS—Zika Virus
- Hurricane Matthew
- Indian Health Service—Great Plains Mission

Solution

C + + + + A + P O + W + + + S
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@PHS_JOAG

The Junior Officer Advisory Group is a public health professional group advising the Surgeon General on issues affecting junior officers of the USPHS.

dcp.psc.gov/osg/JOAG/