

# DOG House News

Providing Updates from the USPHS Readiness and Deployment Operations Group (RedDOG)

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USPHS Preparedness Coordinator, LCDR Elizabeth DeGrange  
Editor, LT Yvonne M. Santiago



## Preparedness Coordinator's Corner

Hi everyone, and welcome to this edition of the DHN!

I'd be alone if I didn't first mention the Presidential Unit Citation that the Corps received last week. As VADM Murthy noted, "Receiving the PUC is a tremendous honor that our entire service has earned. Throughout our long and proud history, the Commissioned Corps of the U.S. Public Health Service has led on many notable public health achievements and saved countless lives by eradicating disease and responding to disasters. However, the Corps' effort to stem the Ebola outbreak is the most visible and widely recognized global health response in our history."

Hopefully, we'll have more details out soon about what the PUC looks like and when we'll all be able to wear it!

I have never been more proud of the Officers I am lucky enough to serve with, or of the Corps and missions we serve. I am supremely thankful to have met so many of you over the course of the Ebola missions, both at home and abroad.

In other notes, the DHN Team is working on finding a place to post our newsletters online, so that everyone having issues with the PDFs we send might have access, and so we have an archive. And, I'd finally like to remind everyone that COER season is just around the corner, so make sure you're proactive in completing your annual reviews!

All my best, and most respectfully,

-LCDR DeGrange

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## Upcoming Deployments

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## Deployment News

### Aboard and Abroad

By LCDR Matthew Zagula

This year I had the wonderful opportunity to augment to NOAA as the ship's medical officer aboard the Rainier S-221. NOAA regulations stipulate that each of their vessels must have a licensed practitioner aboard for missions across Deep Ocean or certain distances away from land based medical support. The mission I was selected for begins out of Dutch Harbor Alaska, sails to the Arctic Circle for 3 weeks of operations, and then ports in Nome Alaska.

Once I reach Dutch Harbor, I am greeted at the airport by a young Ensign with a classic government van for transport. The beauty of Dutch Harbor is overwhelming with its entire rocky surface covered with a beautiful green carpet of grass. The air is brisk, and the ambient temperatures are in the 50's for daily highs, very typical for July weather I am told. The island near the airport is dominated by one particular animal, the bald eagle! There are more of them than I can count and it is truly an amazing sight to see, but I have a job to perform so no time for bird watching.

We reach the ship, which is docked near the end of the harbor. She is big to me, measuring over 220 feet, but this is a small vessel for open water travel from what I am told. I meet the Captain of the vessel and his team of Ensigns aboard the bridge. All are nice to me in a military sort of way, and I am shown to my quarters. I am housed in a "senior officer stateroom" which is a generous term for a 6 1/2' wide by 12' long single man room with its' own head. After dropping my gear, I am whisked away on a guided tour of the ship. Everything is small, cramped, dull purpose, and mission critical. The crew numbers 50+ and come from various walks of life. Some have been assigned to this ship for 30+ years as Wage Mariners (this is the ocean equivalent to a Civil Servant).

We steam north to the Arctic Circle (and yes, I am an official Blue Nose now) so we may begin our work. The seas are rough to my standard, but are marginalized by the staff aboard. Day to day for me is merely manning the clinic for walk-ins and being available for emergencies. The medical supplies are ample to address most any event, but the clinic space is cramped with all of this equipment. I see a kaleidoscope of ailments during our mission. Nothing severe fortunately, but the threat is always palpable. There is plenty of time for intra-perspective thought and reading while aboard; otherwise every day seems just like the previous. The sunsets are amazing each evening, and do not happen until after 2300 hours this far north in July. We finish our survey mission without adverse event, and steam back to Nome Alaska for some much needed R&R.

Nome Alaska is a golden story for another time.....The End.

## Feature Articles

### *Are you Fit Enough for this Foreign Badge?*



By LCDR Clifford E. Coleman, USPHS

I had the unique opportunity to qualify for the German Armed Forces Proficiency Badge in the Washington DC area. Known as Das Abzeichen für Leistungen im Truppendienst the badge is a military decoration of the Bundeswehr, the Armed Forces of the Federal Republic of Germany, and is awarded for meeting high standards while completing rigorous land and waterborne military skill requirements. The badge competition improves readiness standards by honing physical fitness and military skills and is an annual requirement for German commissioned officers and non-commissioned officers (NCO). In order to earn the badge one must be very well-rounded in physical fitness and performing military tasks. If a service member is a great swimmer and runner but not good at ruck marching with a heavy pack or can't shoot well enough to achieve German marksmanship standards then they are not going to earn the badge.

For those service members who are able to meet the demanding requirements to qualify they are rewarded with a special skills badge recognizing them for their superior physical abilities and acumen to demonstrate proficiency in various military tasks. Requirements to earn this coveted badge include: (1) Recommendation to participate by your Commanding Officer attesting to satisfactory job performance along with high physical fitness and moral standards (2) weapons qualification (3) first aid testing (4) nuclear, biological and chemical testing (5) German fitness test: 11X10 meter sprints, Chin-up test and 1,000 meter run (6) rucksack march/run with a 33lbs pack and (7) timed swim in uniform. The badge can be awarded to service members of allied forces when the competition is observed and certified by German officers or NCOs. I knew a US Army Sergeant who allowed me to participate with a unit that was participating in the badge competition. The badge is awarded in Bronze, Silver or Gold. I shot at the Bronze level during the weapons qualification therefore I earned the Bronze badge despite scoring Gold or Silver in all other events.

During the nine-millimeter pistol qualification competitors fired in the standing, kneeling and prone positions having only six seconds to fire off two shots when in each of the three firing positions. Additionally, the first shot must be double action which adds an extra degree of difficulty while shooting due to the heavier trigger pull required.

The most challenging event for me was the swim in Operational Dress Uniform. After swimming 100 meters under the four minutes time standard I then had to remove my uniform while treading in deep water and then throw the wet heavy uniform onto the deck of the pool to complete the event. Swimming in a military uniform is like running sprints with a parachute on. My favorite events were the weapons qualification and the 7 1/2 miles rucksack march/run. I found the competition to be a very motivating experience. I enjoyed representing the Commissioned Corps and interacting with German and US soldiers. Those who successfully completed the competition were officially recognized by receiving an award certificate and a badge from the German Armed Forces.

## Preventing Worker Fatigue When Working Long Hours

By Trudi McCleery, MPH

Did you know sleep deprivation impairs performance similar to alcohol intoxication? Researcher Claire Caruso in the NIOSH Division of Applied Research and Technology has reviewed several laboratory studies comparing the performance of young healthy adults when kept awake for long periods of time and after drinking alcohol. These studies report that being awake 17 hours shows similar performance problems like those seen with a blood alcohol level (BAC) of .05% and for 24 hours awake, it is similar to a BAC of 0.10%. In the United States, a BAC of .08% is the level for drunken driving. (Dawson & Reid, 1997; Williamson & Feyer, 2000; Falletti et al. 2003; Arendt et al. 2005; Howard et al., 2007; Yegneswaran & Shapiro, 2007; Elmenhorst et al., 2009)

Claire has developed several important resources for healthcare workers, emergency responders, and PHS Commissioned Corps Officers who may be required to work longer or unusual shifts (such as during deployment). Claire and her NIOSH colleagues collaborated with the Occupational Safety and Health Administration (OSHA) to publish a fact sheet entitled ***Preventing Worker Fatigue among Ebola Healthcare Workers and Responders*** [<http://www.cdc.gov/niosh/topics/ebola/pdfs/preventingworkerfatigueamongebolahcw122914.pdf>].

There is also an online program available -- ***Interim NIOSH training for emergency responders: Reducing risks associated with long work hours***. To access the training, go here <http://www.cdc.gov/niosh/emres/longhourstraining/>. Persons wishing more detailed suggestions for dealing with long work hours, night work, and rotating shifts can see another new online training program -- ***NIOSH training for nurses on shift work and long work hours*** at <http://www.cdc.gov/niosh/docs/2015-115/>. To learn more about worker fatigue and how to prevent it, contact Claire directly at [ccaruso@cdc.gov](mailto:ccaruso@cdc.gov).

## September: National Suicide Prevention Month

SUICIDE is a National Public Health Crisis and one that is preventable. According to the American Foundation for Suicide Prevention (AFSP), someone dies by suicide every 12.9 minutes. It is the 10<sup>th</sup> leading cause of death in America and the third leading cause of death for individuals between the ages 15-24 years old. Suicide is a very serious public health problem impacting our communities both emotionally and economically. The Center for Disease Control (CDC) reports that suicide claims the lives of over 38,000 Americans every year. The number one cause of suicide is untreated depression - Over 800,000 people die by suicide annually according to the World Health Organization (WHO). For every one completed suicide there at least 25 attempts (CDC). The most disturbing news is that there are resources available to prevent this tragedy

September is National suicide prevention month and throughout the month there are numerous community activities to address this important topic. As the suicide prevention coordinator here at Naval Medical Center Portsmouth, VA - we recognize the importance of suicide prevention throughout the year however, in September we have multiple events going on throughout the month. One of the primary activities that our command participates in is the "Out of the Darkness Walk" <https://www.afsp.org/out-of-the-darkness-walks>. The American Foundation for Suicide Prevention (AFSP) hosts this event throughout the nation. I encourage all of our officers to seek out the walk closest to them and form a team to participate - this is an event to promote good mental health and normalize help seeking behaviors.

The Navy is also implementing ASIST workshops to train both civilians and sailors to recognize and intervene with someone who is suicidal. ASIST stands for Applied Suicide Intervention Skills Training. ASIST is an evidenced based program that is distributed by LivingWorks Education. The program is held over a two-day period and the framework consists of group discussions and experiential discussions. The course teaches participants how to intervene with a person who is actively suicidal or may be at risk for suicide. ASIST is available nationwide and in over twenty-two countries. This training would be a valuable tool for caregivers and first responders in crisis situations. To learn more or find a workshop close to you please visit <https://www.livingworks.net>

Suicide leaves behind grief-stricken family members and friends who are left wondering what they could have done differently or why they did not see the signs. These survivors of suicide (SOS) are also at a greater risk to commit suicide themselves; this may be due to the complex grief that accompanies suicide, overwhelming sense of guilt or the unanswered question of "Why" their loved one or friend would commit such an act. As America's health responders, let's all do our part to support and raise awareness of this National Crisis not only in September but all year long.

Marion G. Collins, LCSW/BCD  
LCDR USPHS  
Naval Medical Center Portsmouth  
Command Suicide Prevention Coordinator

## Training Activities/Resources

### New Guidance for First Responders on Improving Survivability in Active Shooter/IED Incidents

<http://www.dhs.gov/publication/iedactive-shooter-guidance-first-responders>

JOAG Hosts Leadership, Public Health and Disaster Preparedness Training Webinar Series from September through June 2016 via webinar link below. Sessions are 60 mins and held on Saturdays. (For CCO's only)

Next Seminar: "Crafting Effective CVs for Better Self Advocacy" by CAPT Ha C. Tang, DO USPHS

[https://collaboration.fda.gov/usphs\\_leadershipnofficership\\_training/](https://collaboration.fda.gov/usphs_leadershipnofficership_training/)

### NACCT North American Academy of Clinical Toxicology Annual Meeting in San Francisco, CA

[http://www.clintox.org/NACCT/2015/NACCT-Mini-Brochure\\_FillRegFrm.pdf](http://www.clintox.org/NACCT/2015/NACCT-Mini-Brochure_FillRegFrm.pdf) to access the meeting program

This organization's annual meeting provides information on a range of toxicological issues from clinical treatment in the emergency room or field to biological agents and WMD's and how to handle various toxicological situations including the opportunity to practice in a state of the art virtual simulation lab that has been part of the conference for the past few years. There is also a large poster presentation that covers case reports and research studies applicable to every situation from BOP and IHS to Deployment related issues. They offer a reduced rate for Active Duty Military/Uniformed Service Personnel.

For more information view the website above.

The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) at NIH has launched a Spanish-language website to provide free information on health topics, including maternal and infant care, obesity, fertility/infertility, and pregnancy. The website is available at <http://www.nichd.nih.gov/espanol> The new site offers the latest research, as well as Spanish-language podcasts and monthly updates of Spanish news stories that highlight NICHD science.

### New CPH Pilot on Alternate Eligibility for Public Health Professionals

The National Board of Public Health Examiners (NBPHE) is pleased to announce a pilot program to assess whether the knowledge and skills assessed by the Certified in Public Health (CPH) Exam are relevant to public health practice and can be acquired by individuals working as public health professionals. Individuals who have a **bachelor's degree and at least five subsequent years' public health work experience** will be eligible to take the CPH exam during the computer-based testing period of **October 1-31, 2015**. Most Public Health Service officers qualify under the pilot program eligibility.

Because robust participation is needed to evaluate the results of this pilot program, participants will be charged a **discounted rate of \$150**. The regular price is \$385.

Individuals participating in the pilot who pass the exam will be certified in public health. Take this opportunity to set yourself apart. Passing the CPH Exam may be another feather in your cap for promotion within the Commissioned Corps.

Additional information, including test locations and the exam content outline, can be found on the NBPHE website at [www.nbphe.org](http://www.nbphe.org). In addition to study resources available from the NBPHE, the Association of Schools and Programs of Public Health will supply complementary access to its ASPPH CPH Study Guide.

**Registration for the October 2015 CPH Exam is now open.**

### REMINDER FOR ALL COMMISSIONED OFFICERS

1. Check your Tier: Review the RedDOG website and verify your deployment Tier. Do you have one listed? Is it correct? If the answers these questions are no, send us an email so we can address it email [RedDOG-Response@hhs.gov](mailto:RedDOG-Response@hhs.gov)
2. Check your contact numbers: Are your contact numbers correct? Due to the fluid nature of mobilizations, we sometimes will need to reach out to you on the fly with changes to your orders and /or itinerary. Having an off duty number and mobile number on file is critical so we provide you with up to date information and directives while you are in transit.
3. Check your email addresses: Provide us with a primary and secondary email address. It is imperative that you can access your primary email remotely (on deployment using a personal laptop tethered to hotel Wi-Fi or a personal hotspot as an example) and that the email service provider accepts attachments from outside networks.

## Upcoming Events

Register Now for the 2015 AMSUS Meeting in San Antonio, TX

### REMINDER UPCOMING DEPLOYMENTS

- Deployments in Support of Missions in Guinea & Sierra Leone
- Papal Visit to Washington D.C., NYC and Philadelphia (Missions Fully Staffed)
- 2016 State of the Union Address



From Left to Right: LCDR Elizabeth DeGrange, CAPT Jose Belardo, CAPT Calvin Edwards, CAPT Dan Beck, VADM Vivek Murthy, Dr. Karen DeSalvo, RADM Boris Lushniak, RADM Scott Giberson, RADM Sylvia Trent-Adams, CAPT Dean Coppola, LT Laura Annetta and LT Fleisher

## RedDOG Newsletter Team

- |                        |                         |
|------------------------|-------------------------|
| CAPT Jane Kreis        | LCDR Elizabeth DeGrange |
| CDR Scott Conner       | LCDR Pattama Ulrich     |
| LCDR Anastasia Shields | LCDR Molly Rutledge     |
| LCDR Marion Collins    | LCDR Chiara Rodriguez   |
| LT Yvonne M. Santiago  | LT Brian Lees           |
| LT Teisha Robertson    | LT Simleen Kaur         |
| LTJG Stephanie Mros    | LT Melanie Moore        |

Interested in submitting an article to feature in any of the sections?

- \* Articles are due by the 15<sup>th</sup> of each month
- \* Please include a title and state your name in the “by” line.
- \* Pictures are welcome!

To join the Deployment Working Group send an email to [RedDOG-Training@hhs.gov](mailto:RedDOG-Training@hhs.gov) and cc [reddoghousenews@gmail.com](mailto:reddoghousenews@gmail.com)

