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U.S. Army Public Health Command

Fall 2014



▶ **USAPHC tracks Chikungunya**

PLUS:

- ▶ **USAPHC International Congress**
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ONE HEALTH

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FALL 2014 Vol. 5 No. 4

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(COVER) USAPHC Photo by Graham Snodgrass, Visual Information Division

This image of a female Aedes aegypti mosquito was captured using a unique process developed at USAPHC. Multiple photos of one specimen with various sections in focus are captured and compiled into a single, fully-focused image. This level of detail is helpful in the identification of disease vector arthropods, such as mosquitoes, ticks, and sandflies.



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Public Health Command looks to the future

JANE GERVASONI
EDITOR



John Resta, USAPHC Army Institute of Public Health director and deputy to the commander, addresses employees at the Oct. 9 town hall meeting. (USAPHC photo)

Maj. Gen. Dean G. Sienko, commander of the U.S. Army Public Health Command, hosted a town hall meeting for military and civilian employees at the USAPHC Headquarters on Oct. 9. The meeting provided information on the Army Medical Department Futures Task Force and its implications for the USAPHC.

The task force was established in September 2013 to develop and recommend courses of action to strategically balance and align the U.S. Army Medical Command organizational structure in light of budgetary and strategic changes to the Army.

“Representatives from the U.S. Army Public Health Command participated in the task force and provided input and recommendations to ensure there was no degradation to the delivery of public health services within the Army while meeting TSG’s intent to reorganize the Army MEDCOM to be an agile, streamlined and regionally aligned organization,” said Lt. Col. Scott Newkirk, USAPHC G-3 director of operations and member

of the AMEDD Futures Task Force.

“After almost a year of discussion, analysis and review, the task force developed more than 60 courses of action,” John Resta, USAPHC deputy to the commander and director of the Army Institute of Public Health, explained. “These were presented to the Surgeon General of the Army and commander, U.S. Army Medical Command, Lt. Gen. Patricia D. Horoho, for her decision.”

Horoho approved the transformation of the current regional medical commands into multidisciplinary regional health commands aligned with Army populations to ensure a single point of accountability for health within each region. Thus medical, dental, public health and warrior care would fall under four newly created regional health commands.

“The task force recommended concepts are pre-decisional, meaning that they still require approval at the Department of the Army headquarters level,” Resta said.

So what does this mean for the employees of the USAPHC?

Resta explained that the U.S. Army Public Health Command headquarters would be discontinued and the AIPH would become realigned as a field operating activity under MEDCOM.

“Public Health Command Region-West would be most affected by these changes,” said Resta. “The headquarters would be discontinued at Joint Base Lewis-McChord, and the technical staff would initially move to the JBLM district, while command and control would fall under a regional health command headquartered in Hawaii.”

Other alternatives will be evaluated by the three regional headquar-

ters to ensure a proper distribution of personnel to support the workload but no involuntary job losses are anticipated as a result of this change,” said Resta

With new regional health commands headquartered at Joint Base San Antonio in Texas, Fort Belvoir, Virginia, Tripler Army Medical Center, Hawaii, and Weisbaden Air Base in Germany, some public health districts will be realigned.

“Fort Gordon will realign under the Public Health Region-East while San Diego and Fort Carson will move to the Public Health Region-Central, the former Southern Regional Medical Command,” explained Resta.

“But I do not believe that there will be any significant effect on our workforce because of these changes.”

Establishing the PHR-East’s HQ at Fort Belvoir is also part of the transformation effort.

There are still decisions to be made including the organizational alignment of the Department of Defense Food Analysis and Diagnostic Laboratory, the DOD Cholinesterase Reference Laboratory, and the DOD Military Working Dog Veterinary Services located at JBSA. In addition, the proposed transformation calls for installation non-clinical preventive medicine being aligned under the command and control of the former public health command regions and districts, according to Resta.

As the Army budget and operation tempo change, the MEDCOM and USAPHC will also change, but the changes will take time—at least a year for initial operational capability and another year to achieve full operational capability. ▲

Scientists discuss strategies for making Soldiers stronger at international conference

CHANEL S. WEAVER
PUBLIC AFFAIRS OFFICE

Improving the health and physical performance of Soldiers across the globe was the featured topic of the 3rd International Congress on Soldiers Physical Performance held in Boston Aug. 18–21.

The meeting, which included 325 leading scientists and experts from approximately 30 countries, featured multiple seminars and presentations in which research and recommendations were shared.

Dr. Bradley Nindl, a physiologist and the scientific advisor for the U.S. Army Public Health Command, served as a co-chairperson for the conference.

“This meeting is focused on developing the individual service member,” Nindl said in his opening remarks. “It is our hope that throughout this meeting, and in the coming years, we can continue our scientific work to benefit Soldiers.”

The conference, which is held every three years, is hosted by various countries.

Maj. Gen. Joseph Carvalho Jr., commanding general of the U.S. Army Medical Research and Materiel Command, emphasized the importance of enabling Soldiers to perform at their highest capacity to contribute to the overall security of their nations.

“The fact that you all [our International partners] are singularly focused on improving Soldier performance ... that is the right message,” said Carvalho. “By leading in this international forum, with experts from across the world, we hope to exchange the most current scientific information on Soldiers’ physical performance in a way that facilitates action and progress.”

A key focus of Army Surgeon General Lt. Gen. Patricia D. Horoho is to move Army Medicine from a healthcare system to a system for health. This means moving from a system that is focused on treating the sick and injured to a system focused on preventing disease and injury.

The USAPHC is at the tip of the spear in leading that change.



Dr. Bradley Nindl, scientific advisor for the USAPHC, addresses attendees during the opening ceremony of the 3rd International Congress on Soldier Physical Performance. (Photos by David J. Kamm, Natick Soldier Research, Development and Engineering Center)

“We know that disease, illness, and injury know no borders—they are a common challenge across armies and communities all around the world,” said USAPHC Commander Maj. Gen. Dean G. Sienko, during a recorded video greeting for participants. “Partnerships are a primary focus of Army Public Health Command. We are partnering with academia, scientific organizations, and public health entities at all levels. And, we’re engaged in dialogue with local health officials. Not only do we defend against disease and injury, we take the offense in optimizing physical performance.”

The conference featured 250–260 speakers who presented posters on multiple topics and offered 40 break-out sessions.

During one break-out session, scientists expressed the need to lighten the gear that Soldiers carry in battle.

“The absolute loads Soldiers are carrying are increasing, with many Soldiers carrying 30–50 percent of their body weight,” said Robin Orr, a scientist who spoke from Australia.

These heavy loads can affect mobility. “The more load you carry, the slower you go,” said Orr.

Additionally, scientists reported that heavier loads caused more injuries to the knees, backs, ankles and feet of Soldiers.

To combat such injuries, Dr. Joseph Knapik, a research physiologist with the USAPHC, presented the results of his literature review, which suggested that Soldiers could incorporate varying exercises into their routine to help them adjust to carrying heavier gear.

“Our studies show that a weekly combination of upper body resistance training, aerobic training and load-carriage exercise can assist Soldiers in improv-

ing their load carriage performance,” said Knapik. Attendees at the 3rd ICSPP said the conference was quite beneficial.

“Information was presented on a variety of topics that was directly related to the work we do,” said Veronique Hauschild, an environmental scientist in the USAPHC’s Injury Prevention Program.

Dr. Bruce Jones, a physician-epidemiologist and Injury Prevention Program manager at the USAPHC, enjoyed the opportunities for networking and collaboration.

“It was great to meet scientists from other countries and to see that we had a shared goal of making our Soldiers healthier,” said Bruce Jones.

Sixteen personnel from the USAPHC attended the 3rd ICSPP.

In addition to the USAPHC, the MRMC, and the U.S. Army Research Institute of Environmental Medicine served as hosts of the conference. ▲

Luis Rivera, USAPHC Public Health Assessment Program, discusses how Army Wellness Centers help clients achieve their health and wellness goals during a poster session at the 3rd International Congress on Soldiers Physical Performance held in Boston.



Acting U.S. Surgeon General visits the USAPHC



LYN KUKRAL
PUBLIC AFFAIRS OFFICE

Emphasizing their shared commitment to tobacco-free living, USAPHC Commander Maj. Gen. Dean G. Sienko and Acting U.S. Surgeon General Rear Adm. Boris Lushniak sanction the USAPHC's tobacco-free campus initiative. (Photo by Graham Snodgrass, Visual Information Division)

The proverb “the enemy of my enemy is my friend” applies hands down to two of the top uniformed public health officials in the U.S., both of whom are at war with harmful lifestyle behaviors.

Acting U.S. Surgeon General Rear Adm. Boris Lushniak and Maj. Gen. Dean G. Sienko, commander of U.S. Army Public Health Command, shared a recent strategy session at Aberdeen Proving Ground, Maryland, the home of the USAPHC. Tobacco use, obesity and inactivity are likely to suffer from the encounter.

The two leaders hope to join forces to increase the impact each of their organizations has on reducing preventable deaths in the U.S.

Lushniak, who leads the National Prevention Council, pointed out that tobacco use is the No. 1 preventable cause of death in the U.S., and obesity and low activity are tied for No. 2.

Unfortunately, the Army owns an unhealthy share of the nation's health problems.

Sienko responded that only 23 percent of American youth can meet the weight qualification for entering military service. He frequently cites statistics that

indicate about 31 percent of Soldiers use tobacco, and 69 percent of Soldiers are either overweight or obese, as well as two-thirds of retirees and adult family members.

Joining forces would seem to make sense. “We want to find where we can work together to better the public health infrastructure of our nation,” Lushniak said. “As well, our skill sets and goals are as closely aligned as they can be.”

In the fight against chronic lifestyle diseases like high blood pressure, diabetes, heart attack and stroke—diseases that are preventable—Lushniak emphasized the need for broad partnerships.

“ We want to find where we can work together to better the public health infrastructure of our nation. ”

—Acting U.S. Surgeon General Rear Adm. Boris Lushniak

“It takes more than a village, it takes business, government, faith-based organizations, healthcare—everyone,” he said. “Our priorities aren't anything novel, they're a reemphasis of the familiar.”

In the work of prevention and health promotion, Lushniak advocates a return to simple lifestyle changes.

“Let's go retro,” he said. “Let's begin to walk again, let's start cooking again, let's start breastfeeding again. Let's do the things we know are good for our nation's health. It's not as complicated as people think.”

The Army, through its Performance Triad effort, shares the goal of building good health by making it simple to understand what to do to achieve it.

The USAPHC leads the charge in implementing the Army's Performance Triad initiative. This initiative aims at teaching Soldiers and retirees, their families and Army civilians how to achieve the three elements of good health: getting enough sleep, engaging in activity and eating well.

Lushniak thinks that people want to be empowered to take control of their health, and the goal of public health professionals should be to “get them the right information and let them make the right decision.”

The Public Health Service he leads is one of our country's seven uniformed services. It consists of career professionals who care for the nation's vulnerable populations, respond to routine and emerging public health threats, and protect and promote the health and safety of the U.S. population.

Additionally, Lushniak, a physician certified in preventive medicine and in dermatology, fills the role of our country's top doctor.

“My portfolio includes not just the uniformed service but also the role of ‘the nation's doctor,’ he explained. “The nation's doctor component includes science and communication—taking the best science available and communicating it or translating it for the American public.”

He is passionate about this role. “No one is necessarily going to know the surgeon general's name, but they know the brand. When the surgeon general issues a warning or a call to action, it means something,” he said. “I am overwhelmed with humility that everyone—the press, the public—picks up on that. That power—we call it the bully pulpit—still exists.”

Those who attended the Aberdeen Proving Ground meeting can attest both to the strength of his conviction that prevention is the best way to health (he is an avid cyclist, runner and hiker), and his ability to use the bully pulpit to challenge his hearers to contribute.

“We have to be symbols of health and fitness. In the U.S. Public Health Service, for example, there's no smoking in uniform,” he said. “You who wear the proud uniform of the U.S. Army, should you also not be an example of health and fitness?” ▲



NEWS AND NOTES

FROM AROUND THE COMMAND

The Veterinary Services Portfolio hosted a worldwide veterinary services teleconference Sept. 15 to discuss the Department of Defense Veterinary Services Activity and Army Institute of Public Health implementation policy for the updated Tri-Service Food Code, Technical Bulletin (Medical) 530. All Army veterinary service units will receive guidance during the upcoming months on training, review procedures, reporting expectations and special emphasis on standardization procedures as part of a command inspection program. TB MED 530 is now available on the Army Publishing Directorate's website and has been forwarded to the Air Force and the Navy for posting to their electronic publishing pages. The purpose of the publication is to establish uniform military food safety standards and criteria, procedures and roles for the sanitary control and surveillance of food to mitigate foodborne illness risk factors. The need for a uniform food safety standard became apparent with joint-basing and as public health teams from multiple services evaluated deployment food operations under the control of other services. In addition, the consolidation of service schools and the integration of Army preventive medicine and veterinary services as part of the U.S. Army Public Health Command also motivated the development of this publication.

Dr. Rebecca Benisch, Veterinary Services Portfolio; **Sgt. Jessica Volpe**, Public Health Command Region-North animal care sergeant; **Kevin Harkins** and **Capt. Brian Knott**, Entomology Program; **Brett Huntington** and **Robert Booze**, Health Hazard Assessment Program; and **Lt. Col. Lee Lefkowitz**, Laboratory Sciences Portfolio, participated in the Aberdeen Proving Ground, Maryland, Boy Scout Science, Technology, Engineering and Mathematics program Sept. 13. These technical experts guided Boy Scouts who were

working to earn merit badges in areas including veterinary medicine, pet badges, electricity, entomology awareness and laboratory sciences. In addition, **Mohamed Mughal**, **Health Hazard Assessment Program**, served as the mathematics Nova Award counselor for a Scouting Venturers program called "Numbers Don't Lie" and discussed the military impacts of industrial hygiene.

Mark Williams, Ph.D., Health Effects Research Program, participated in a three-day scientific workshop Sept. 3-5 entitled "Adverse Outcome Pathways: From Research to Regulation," presented by the National Toxicology Program Interagency Center for the Evaluation of Alternative Toxicology Methods and the Physicians Committee for Responsible Medicine. The workshop was held at the National Institutes of Health, Bethesda, Maryland. It brought together stakeholders and partners from academia, industry and federal agencies interested in understanding adverse outcome pathways as well as modes of action of specific chemical compounds, chemical pollutants, ambient atmospheric criteria pollutants and other potential chemical toxicants. A major aim of the workshop was discussion of best practices in programs aimed at developing adverse outcome pathways that may result in improved test guidelines, development of integrated approaches to testing and assessment, and development of new profilers in the quantitative structure-activity relationship toolkit. Proposals were discussed to develop an adverse outcome pathways knowledge base toolset. Additional presentations included the application of adverse outcome pathways in wildlife toxicology, and the chemical risk assessment process and other topics.

Mark Johnson, Ph.D., Toxicology Portfolio director, presented a lecture at the University of Pennsylvania School of Veterinary Medicine in Philadelphia. The lecture titled "Wildlife Toxicology in the 21st Century" discussed issues associated with extrapolation of laboratory data to populations in the field.

Maj. Jay Clasing, Ergonomics Program, completed his participation in the Department of Defense/Veterans Administration Upper Extremity Amputee Clinical Practice Guideline working group with the completion of the guidelines. This is the culmination of a 13-month DOD/VA joint project to develop guidelines for the treatment of individuals with upper extremity amputations. This document will provide clinicians a road map to enhance the care of their patients and maximize their potential. The guideline has been posted on the DOD/VA guideline website, <http://www.healthquality.va.gov/guidelines/rehab/uear/index.asp>.

The AIPH Industrial Hygiene Equipment Laboratory will receive bulk shipments of 20 noise dosimeters every two weeks from Sept. 15 until Dec. 26, 2014. Once recorded in the equipment section of Defense Occupational and Environmental Health Readiness System-Industrial Hygiene, the dosimeters will be distributed to identified installation industrial hygiene program offices; to Public Health Command regional industrial hygiene division offices; and within the AIPH Industrial Hygiene Field Services Program.

The Health Promotion Operations Program coordinated the opening of the newest Army Wellness Center at Fort Lee, Virginia, Sept. 5. The AIPH Health Promotion Program members and the incoming Ready and Resilient Campaign program manager attended the ribbon-cutting along with Col. Thomas Bundt, Kenner Army Health Clinic commander and Col. Paul Brooks, Fort Lee garrison commander. Cory Erhard, Fort Lee AWC project lead, explained the role of the AWC in the community to the attendees. Tours of the facility were also provided. This AWC will be incorporated in the installation's Community Health Promotion Council.

The USAPHC chaired a preliminary teleconference Sept. 2 including the Ready and Resilient Campaign staff to discuss the way ahead for the Tobacco-Free Living Working Group. The objective is to establish an integrated Army working group to reduce tobacco and maintain force readiness while decreasing long-term health risks associated with tobacco use.

The Deployment Environmental Surveillance Program, at the request of the U.S. Southern Command chief of public health, provided a listing of all deployment occupational and environmental health samples entered into the Defense Occupational and Environmental Health Readiness System-Industrial Hygiene Environmental Health Business Area since 2010 by country, location, date and media for the area of operation, as well as a listing of all surveys entered into DOEHRS-IH or uploaded to the Military Exposure Surveillance Library since 2010. This information will assist in identifying occupational and environmental health surveillance data gaps and encourage the use of additional DOEHRS-IH (EH) current capabilities for survey entry (for example, occupational and environmental health site assessments, entomological, water system, etc.). In addition, the SOUTHCOM is reviewing its deployment occupational and environmental health surveillance activities and possible needs for new force health protection policy guidance.

The Drinking Water and Sanitation Program presented a technical brief titled "Health Risk Management of Water Reuse in Military Contingency Operations" at the 29th Annual WaterReuse Symposium, Dallas, Sept. 9. As the Army's proponent for developing guidance for water provisions in contingency operations, the USAPHC must develop new guidelines for water reuse. The WaterReuse Symposium is one of a few opportunities that offers the specificity and breadth of technical expertise and that allows the USAPHC to remain connected to the rapidly evolving science of water reuse. The leaders in this field are external to the Army and include industrial, academic and other-government agencies, all of whom were represented at the symposium.

PHC Regions get new commanders

The Air Quality Surveillance Program provided a guest lecturer for the Uniformed Services University of the Health Sciences, Bethesda, Maryland, Sept. 23 “Advanced Environmental Health” course at the request of Lt. Col. Christopher Gellasch, the course director. The lecture augmented Gellasch’s lecture on the basics of air pollution and provided students with information on ambient air monitoring and real world examples of air pollution issues.

The Disease Epidemiology Program is monitoring the enterovirus D68, or HEV-D68. Enterovirus respiratory disease is not a reportable condition, but medical treatment facilities should submit outbreak reports in Disease Reporting System internet when HEV-D68 clusters are suspected. Most Army medical center laboratories can test for enterovirus by culture or polymerase chain reaction and can refer specimens to regional or state laboratories for typing. A fact sheet is posted on the USAPHC public website. Generic posters for youth centers and schools, applicable to enterovirus prevention, influenza and respiratory illnesses, and other information can be found on the USAPHC public website at <http://phc.amedd.army.mil/topics/discond/diseases/Pages/EnterovirusD68.aspx>.

The Disease Epidemiology Program continues to monitor the Ebola outbreak. An information paper on vehicle contamination was developed in collaboration with the USAPHC Environmental Health Engineering portfolio. The information paper staffed with the U.S. Army Medical Research and Materiel Command, U.S. Africa Command and U.S. Transportation Command as well as a video and other information can be found on the USAPHC public website at <http://phc.amedd.army.mil/topics/discond/diseases/Pages/EbolaVirusDisease.aspx>.

The Environmental Medicine Program designed and implemented a surveillance program in 2011 for civilian personnel who were present at the Qarmat Ali Water Treatment Plant in 2004, at the request of the Office of the Deputy Assistant Secretary of Defense for Force Health Protection and

Readiness. The program included medical evaluation at select medical treatment facilities. The potential exposure was sodium dichromate, a lung carcinogen. The evaluation included a questionnaire; chest X-ray; pulmonary function tests (at the discretion of the medical provider); a skin exam; and an ear, nose and throat examination for potential non-cancer effects. This scheme parallels the examinations that the Veterans Administration is providing for the veterans present at Qarmat Ali. In 2011, there were no findings associated with exposure. The surveillance frequency is every five years, requiring a follow-up evaluation in 2016. A teleconference was held Sept. 12 to discuss the screening and potential changes to the program in light of current recommendations.

The USAPHC received a certificate of appreciation from the Aberdeen Proving Ground, Maryland, garrison commander, Col. Gregory McClinton, and was recognized as the “APG’s 2014 Activity Most Supportive of Federal Women’s Program Goals.” McClinton said that the USAPHC demonstrates significant contributions to the advancement of women in the workforce and strongly supports the spirit and intent of the Federal Women’s Program’s objectives. ▲

Public Health Command Region-Pacific

In a June 26 ceremony at Public Health Command Region-Pacific, hosted by Maj. Gen. Dean G. Sienko, commander U.S. Army Public Health Command, Col. James E. Cook relinquished command to Col. Timothy G. Bosetti.

Cook, an Army physician with more than 26 years of active service, has held many positions across the United States as well as serving in Bosnia, Iraq and Afghanistan.

“Colonel Cook is passionate about his responsibilities as a commander and is an outstanding mentor who inspires those in his charge,” said Sienko. “I am impressed by his leadership, character and competence.”

Sienko also complimented Cook on his role in the creation of the first-ever Japan Public Health Working Group designed to provide U.S. forces and Japan decision-makers with public health information and

solutions to local emergencies and threats.

Sienko commended the staff at PHCR-Pacific saying that they have all done an outstanding job and are creating a noteworthy legacy of which they should be proud.

Bosetti, an environmental science engineering officer, is a resident graduate of the Army Command and General Staff College and also holds the Joint Planner Staff Officer skill identifier.

“I’m glad to have you on our team,” Sienko said to Bosetti. “You bring all the right experiences, attributes, talents and leadership skills we need to continue supporting the Surgeon General’s transition to a System for Health.”

Cook moves on to become preventive medicine consultant at the Pacific Regional Medical Command. ▲



Maj. Gen. Dean G. Sienko, commander U.S. Army Public Health Command, passes the colors to Col. Timothy G. Bosetti, as Col. James E. Cook and the Soldiers from PHCR-Pacific observe. (USAPHC photo)

Public Health Command Region-West

Col. Casmere Taylor assumed command of the Public Health Command Region-West from Col. Robin King July 9 at Watkins Parade Field, Joint Base Lewis-McChord, Washington. The ceremony was hosted by Maj. Gen. Dean G. Sienko, USAPHC commander.

Sienko lauded King for her efforts in developing Soldiers with both technical- and military-focused training during her three-year command at PHCR-West.

“Your actions ensured the health and welfare of all our DOD beneficiaries by safeguarding quality, safety and wholesomeness of food and water on Army, Navy, Marine, and Air Force installations and ships afloat across the PHCR-W area of operation,” Sienko said. “I thank you for embracing our mission and supporting our efforts to cultivate Healthy People,

Healthy Animals, Healthy Workplaces and Healthy Communities.”

King will continue to serve the command as the Food Protection Program manager at the USAPHC headquarters at Aberdeen Proving Ground, Maryland.

Sienko also welcomed Taylor back to the USAPHC after his assignment at the Walter Reed National Medical Center, and he encouraged Taylor to empower his team with a clear vision, guidance and honest feedback.

“PHCR-W is a great organization that does extraordinary things to keep people, animals and communities healthy—leading the way in proactive approaches to public health,” Sienko said. “It is an honor to be part of such a highly skilled, professional and dedicated team.” ▲



Maj. Gen. Dean G. Sienko, commander USAPHC, passes the colors to Col. Casmere Taylor during the ceremony July 9 at Joint Base Lewis-McChord, Washington. (USAPHC photo)

Public Health Command Region–North



Maj. Gen. Dean G. Sienko, commander U.S. Army Public Health Command, passes the colors to Col. Jacqueline Chando at the PHCR–North change of command ceremony. (Photo by Christina Graber, Visual Information Division)

The change of command ceremony at PHCR–North, Fort Meade, Maryland, was hosted by Maj. Gen. Dean G. Sienko, USAPHC Commander, July 16. Outgoing commander, Col. Michael Bell, relinquished command to Col. Jacqueline Chando.

Bell earned his Doctor of Medicine degree from the Uniformed Services University of the Health Sciences and completed his internship in internal medicine at Madigan Army Medical Center, Fort Lewis, Washington. His assignments have sent him around the globe.

“Colonel Bell has represented U.S. Army Public Health Command with great distinction as a regional commander,” Sienko said.

Bell’s new assignment is medical officer in the Division of Communicable Diseases, Alert and Response Operations at the World Health Organization (European Office) in Copenhagen, Denmark.

As he welcomed Chando, Sienko provided advice and encouraged her to empower her team and find innovative ways to support the warfighter. He advised her to continue to “foster an environment where recognition is encouraged and Soldiers and staff feel appreciated.”

Sienko also commended the Soldiers, civilians and families of the command who did an outstanding job with their support and commitment to the mission.

“PHCR–North is a great organization that continues to do extraordinary things—leading the way in proactive approaches to public health,” Sienko said. ▲

Public Health Command Region–South

PHIL REIDINGER
AMEDDC&S Public Affairs

Col. Robert von Tersch assumed command of Public Health Command – Region South during a ceremony at MacArthur Parade Field at Fort Sam Houston, Texas, on July 24 hosted by Maj. Gen. Dean Sienko, USAPHC commander.

Von Tersch replaced Col. Timothy Stevenson who has been reassigned as the assistant Veterinary Corps Chief. Stevenson, a veterinary officer who specializes in epidemiology, also was responsible for the operations of the Defense Department Food Analysis and Diagnostic Laboratory at Fort Sam Houston, as the commander of the southern region.

Von Tersch said that the chance to lead Pubic Health Command Region–South is rewarding and, as a scientist and epidemiologist, an especially satisfying opportunity to improve lives and the environment to prevent disease and improve public health.

The PHCR–South is responsible for promoting health and preventing disease, injury and disability in Soldiers, military retirees and the families as well as providing veterinary services for Army and Defense department veterinary missions in 11 southeastern states, Puerto Rico, Guantanamo and Honduras. ▲



Maj. Gen. Dean G. Sienko, commander U.S. Army Public Health Command, passes the colors to Col. Robert von Tersch during a ceremony at MacArthur Parade Field. (AMEDDC&S photo)

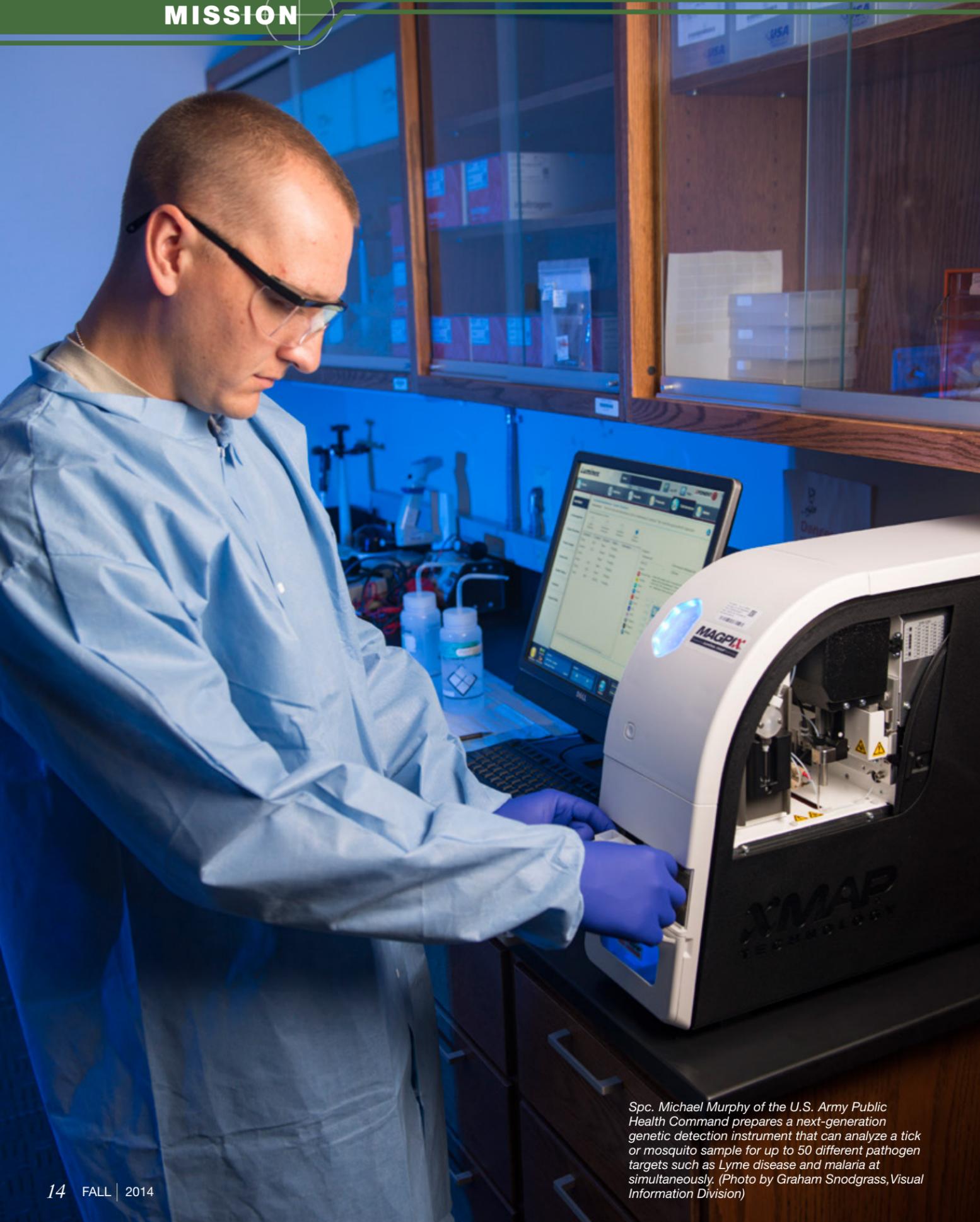
PHCR–Europe opens new lab



U.S. Army Public Health Command Region–Europe Laboratory Director Heinz Stahl points out some of the new features in the unit's renovated soil testing laboratory at Landstuhl Regional Medical Center to PHCR–E Deputy Commander Col. Randall Rietcheck and Europe Regional Medical Command Commander Brig. Gen. Norvell Coots after a ceremony dedicating the facility Oct. 15. The labs, which conduct soil and water testing for units throughout Europe, Africa and the Middle East, are housed in a building that was originally built as a barracks for the German Army in 1938. The ceremony also dedicated the new customer service wing to Dr. Charles Statham who was the laboratory director for more than 20 years before retiring recently. (U.S. Army photo by Ed Drohan)

U.S. Army Public Health Command Region–Europe Commander Col. James Boles, U.S. Army Corps of Engineers Europe District Commander Col. Matthew Tyler and Europe Regional Medical Command Commander Brig. Gen. Norvell Coots cut the ribbon, officially opening the PHCR-E renovated laboratory facility on Landstuhl Regional Medical Center Oct. 15. (U.S. Army photo by Phillip Jones)





Spc. Michael Murphy of the U.S. Army Public Health Command prepares a next-generation genetic detection instrument that can analyze a tick or mosquito sample for up to 50 different pathogen targets such as Lyme disease and malaria at simultaneously. (Photo by Graham Snodgrass, Visual Information Division)

USAPHC lab capabilities enhanced to improve health protection

JANE GERVASONI
EDITOR

U.S. Army Public Health Command laboratories around the world will soon have additional molecular diagnostic equipment that strengthens their biosurveillance capabilities.

Public health threats including vector-borne diseases such as malaria and West Nile virus are widespread. The increased ability to rapidly identify these and other public health threats will be available using this new equipment.

The equipment also will standardize the ability of the six laboratories USAPHC operates to analyze and interpret data related to disease activity and threats to human and animal health.

In turn, making disease and vector identification easier, faster and more accurate significantly expands Soldier protection from public health threats.

Equipping USAPHC laboratories with this cutting-edge diagnostic equipment results from a partnership with the Joint Program Executive Office for Chemical and Biological Defense at Aberdeen Proving Ground, Maryland.

“The two JPEO-CBD programs providing equipment, maintenance and training of personnel are the Joint United States Forces Korea Portal and Integrated Threat Recognition, known as JUPITR, and the Global Biosurveillance Technology Initiative,” explained Maj. Michael Desena, USAPHC liaison with the JPEO-CBD. “This collaborative approach advances cooperation initiatives between the medical and chem-bio communities.”

“All six USAPHC laboratories, as well as a new environmental testing facility being established on the Korean peninsula, will receive the state-of-the-art laboratory testing equipment,” said Lt. Col. Kelly Halverson, USAPHC Laboratory Services Portfolio director. “All the laboratories will now have the same analytical capabilities, ensuring consistent and comparable laboratory results no matter which laboratory performs the analysis.”

“The need for biosurveillance and diagnostic laboratory capabilities in the Korean peninsula led to this part-

nership. It will provide the ability to generate and share public health information and conduct real-time U.S. and Republic of Korea collaboration,” Desena added.

The partnership with the JPEO-CBD has other benefits as well.

“Training on the equipment for USAPHC personnel, as well as maintenance of the equipment, will be provided by JPEO-CBD,” according to Desena. “Laboratory personnel will be equipped to work in any of the laboratories around the world performing analyses with state-of-the-art equipment.”

“The new equipment will enhance information sharing around the globe,” said Halverson. “It will also allow us to support new customers.

“This equipment will allow us to test environmental, occupational health and public health threats ... with a high degree of accuracy,” said Halverson. “Our scientists will be able to validate their results using more than one type of equipment and if necessary, further studies can be performed by laboratories in the U.S.”

The USAPHC has additional capabilities that will benefit overseas laboratories and their personnel.

“The Army Public Health Command, as a partner in the biosurveillance effort, also provides training and certification on international shipping and transport of samples through its Environmental Health Engineering Portfolio in addition to laboratory analyses,” explained Halverson. “This is a collaborative effort that delivers the best possible services to protect our Soldiers and Army civilians worldwide.”

This biosurveillance capability adds to the global network of military laboratories in which the USAPHC and the Department of Defense will have the ability to collect, ship, receive, analyze and report on environmental and public health samples from around the globe, said Halverson. ▲

USAPHC leads Army efforts for public health accreditation

CHANEL S. WEAVER
PUBLIC AFFAIRS OFFICE

The U.S. Army Public Health Command has always been committed to upholding the highest standards of public health practice, preventing disease, prolonging life and promoting health in Army beneficiaries.

To meet these commitments, the command is working with representatives from across the Army to enable Army preventive medicine departments to have their work validated by a third-party entity specifically focused on public health practice. The Public Health Accreditation Board program is a voluntary national public health department accreditation effort and is the first, and currently the only, national accrediting body for governmental public health departments.

PHAB is a nonprofit organization dedicated to improving and protecting the health of the public by advancing the quality and performance of tribal, state, local and territorial public health departments. PHAB and its accreditation program were developed in response to an identified need by public health practitioners and academicians for national performance standards and third-party validation of governmental public health practice. The program launched in fall 2011 after several years of consensus-based development.

“Achieving accreditation from PHAB represents a public health department’s commitment to meet standards of quality public health practice,” said Lauren Shirey, accreditation lead and lead program evaluator at the USAPHC.

One of the goals of PHAB accreditation is to certify that a public health department has the necessary capacity to assure or directly deliver the 10 essential public health services as defined by the U.S. Centers for Disease Control and Prevention, outlined below:

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.



Lauren Shirey, a USAPHC program evaluator, meets with the Irwin Army Community Hospital Department of Public Health accreditation team at Fort Riley, Kansas to discuss the accreditation process. (Photo by Kristen Bourland, Fort Riley Department of Public Health)

Although an increasing number of state and local public health departments are accredited by PHAB and, as of early October, over 300 more are in process, Army public health/preventive medicine facilities lack this third-party endorsement.

USAPHC is currently facilitating an interdisciplinary team of public health-affiliated representatives from across the Army, including Office of the Surgeon General, other MEDCOM and USAPHC personnel, in updating the PHAB Standards and Measures for Army use. The proposed Army-specific PHAB Standards and Measures are expected to be released for public comment in a 30-45 day period in December or January. The final Army version is expected to be published by PHAB in summer 2015.

“Our goal is to ensure that Army public health and preventive medicine departments interested in applying the national public health department performance standards to their work and pursuing PHAB accreditation will have standards that are optimally suited to Army public health and that consistent definitions are used in doing so,” said Shirey.

USAPHC is also assisting the Fort Riley, Kansas, Department of Public Health (preventive medicine depart-

ment) staff in their voluntary effort to achieve PHAB accreditation.

This department is the first known Army entity to pursue PHAB accreditation. The Fort Riley team submitted its initial application to PHAB in August and is slated to submit their final application by summer 2015. “We are conducting a case study of the process at Fort Riley, and supporting them throughout the accreditation preparation and review process,” said Shirey. “Our goal is for Fort Riley to be a model for public health accreditation and continuous quality improvement at other sites across the Army,” said Shirey.

Although the entire process will take about two years to complete, USAPHC personnel said it is well worth the effort.

“We value consistency and quality in our work, continuous process improvement, performance management and third-party validation of our efforts, and the PHAB accreditation program offers a meaningful way for Army public health to demonstrate this,” said John Resta, director of the Army Institute of Public Health. ▲

USAPHC Crosswalk with the 10 Essential Public Health Services. This graphic illustrates the 10 essential public health services and core functions. (Photo Graphic, Joyce Kopatch, U.S. Army Public Health Command)



What does the military eat?

JANE GERVASONI
EDITOR

The U.S. Army Public Health Command takes its job of watching over the food for the military very seriously. From farmers markets and commissaries to Meals, Ready-to-Eat, veterinary food inspectors from the USAPHC keep a close eye on the safety and quality of the food products used by Soldiers and their family members.

“In the U.S. and in unusual locations around the globe, veterinary food inspectors assess and monitor food supplies from farm to table,” explained Chief Warrant Officer 5 Christopher Finch, USAPHC master food safety officer.

But monitoring food supplies is only part of the job.

USAPHC veterinary food inspectors are involved in many aspects of the Operational Rations or in military terms, OPRATS. These pre-packaged foods are available to the Army and other services and designed for quick distribution, preparation and use in the field.

OPRATS are standard pack, individual or group ration purchased by Defense Logistics Agency Troop Support for the purpose of feeding military troops during training or in an operational environment. They include, but are not limited to, Unitized Group Rations, Kosher Meals, Halal



Chief Warrant Officer 4 William Warren, and Master Sgt. Lennard Bookman, Veterinary Portfolio Food Protection Program, discuss Operational Rations packaging requirements. (Photo by Graham Snodgrass, Visual Information Division)

Meals, Survival Rations and Meals, Ready-to-Eat better known as MREs.

Veterinary food inspectors also look at other OPRATS as well.

“Unitized Group Rations provide high quality group meals for warfighters in the field and come in several different types. UGR-A rations are those prepared onsite or nearby Soldiers who are to be fed,” said Chief Warrant Officer 4 William Warren, Operational Rations Section chief at USAPHC. “The foods for these meals come from preapproved distributors who are inspected regularly to ensure quality and safety.

“Commanders select which OPRATS to use based on the operational environment,” Warren said.

The primary customer for UGR-B rations is the Marine Corps, prompting a name change to UGR-M rations. These are unit-sized prepackaged rations that are preserved or canned and are most often heated on location in field kitchens.

Warren explained that they are commonly served in field locations or in garrisons where adequate refrigeration and freezer facilities are not available. It is a hybrid meal kit designed to feed a group of 50 personnel for

one meal. There are other UGRs, including a tray-based heat and serve called a UGR-Heat & Serve, which also feeds about 50. It can be heated by immersion in a high-temperature water bath and is used when a field kitchen is not available. The UGR-Express serves 18 people with a self-heating module and disposable accessories.

First Strike Rations, equal to about three MREs, are part of a group called assault rations and are designed to give mobile Soldiers a variety of foods that are lightweight, high calorie and easy to consume. Both the ingredients and the assembly plants have been inspected by Veterinary Corps officers.

“When OPRATS are assembled, our veterinary food inspectors perform regular inspections to ensure contractual requirements are met. They check everything from packaging, number and weight of individual items to the taste, color and texture of food items, and they “accept” the rations on behalf of the DOD,” explained Warren.

In deployed situations, OPRATS can be stored for long periods under adverse conditions that may ultimately affect the quality of the food items. That is one reason regular inspections by veterinary food inspectors occur, according to Master Sgt. Lennard Bookman, non-commissioned officer in charge at the USAPHC Veterinary Services Portfolio.

“DLA Troop Support, in collaboration with U.S. Army Natick Soldier Research, Development and Engineering Center and all the services, maintains specific requirements for what is included in each ration type and for how each ration is to be inspected for deterioration over time or in extreme temperatures,” explained Warren. “But our inspectors often have suggestions for improvements in storage, packaging and other aspects as they perform audits for DLA.”

“During audits, inspectors sometimes find items where the packaging has not protected the food item as expected,” Bookman said. “Package seals that leak and allow contamina-

tion from air, moisture and possible microorganisms or containers that allow crackers to break don’t provide quality rations for our Soldiers.”

“Master Sgt. Bookman and I use our experience and suggestions from other inspectors to recommend packaging changes and by collaborating with a Joint Services Operational Rations forum including DLA, the Joint Culinary Center of Excellence, NSRDEC and other organizations, new and better methods for packing, storing and shipping the OPRATS are designed,” said Warren.

“OPRATS occasionally have product failures at assembly plants that cause us to reject them, but the expertise provided by the veterinary food inspectors at the Army Public Health Command helps to minimize problems and increase the quality of military meals,” Warren said. ▲



Meals, Ready-to-Eat, better known as MREs, are one of many types of operational rations available to the Army and the other services. (Photo by Graham Snodgrass, Visual Information Division)

Food inspection sergeant supports Marines in the Pacific

PUBLIC HEALTH COMMAND REGION-PACIFIC

At the request of 1st Battalion, 5th Marine Regiment, Marines Rotational Force-Darwin and on only a four day notice, Sgt. Brigetta Fisher, food inspection specialist from Okinawa Branch, Public Health Command District-Japan, deployed to conduct on-location Operational Rations inspections at Robertson Barracks, Darwin, Australia, in the Fall of 2014.

Operational Rations or OPRATs consist of a standard pack, individual or group ration, purchased by Defense Logistics Agency Troop Support for the purpose of feeding military troops during training or in an operational environment. These rations are vital for the sustainment of the force when standard mobile kitchens or dining facilities are not available, according to Fisher.

For this mission, Fisher examined several lots of Meals Ready-To-Eat or MREs which remained from a late summer exercise known as Koolendong 2014, one of the many joint-training engagements and community outreach activities conducted by the MRF-D and the Australian Defense Force.

Fisher explained that she verified the quantity of rations in stock and conducted both closed package and destructive open package inspections of the MREs to verify the integrity of the packaging, to confirm that the contents met contractual requirements in quantity and type, and to determine the overall quality and whole-

someness of the ration.

“Working together with Marine food managers and following Army regulations, 1,144 cases of MREs exhibited damage or degradation and were removed from the inventory prior to consumption,” Fisher said. “This is done to reduce the likelihood of a foodborne illness during future troop feeding initiatives.”

The serviceable or wholesome rations that met Army regulations were returned to the appropriate rations supply warehouse for future issuance and troop consumption.

In training environments, deterioration of OPRATs and other subsistence items may occur.

Both the rations and the storage facility infrastructure and conditions need to be monitored closely by food managers and Army military food inspectors who represent the first line of defense in protecting the warfighter. Both food managers and military food inspectors need to be aware of each other’s requirements and standards, according to Lt. Col. Claire Cornelius, Public Health Command District-Japan commander.

“Both the Marines and Fisher capitalized on this joint venture by including training on their respective areas,” Cornelius said. “This mission highlighted how U.S. Army Public Health Command is trained and ready to respond to the force protection and public health needs of our multi-service partners in the Pacific and across the globe.” ▲



Inspections of operational rations verify the integrity and wholesomeness of the rations.



In training environments, deterioration of OPRATs may occur and should be monitored by subject matter experts. During this inspection, a total of 1,144 cases were deemed unserviceable and removed from the inventory prior to consumption, preventing possible foodborne illness. (USAPHC photos)

AAALAC visits USAPHC

JANE GERVASONI
EDITOR

The U.S. Army Public Health Command Animal Care and Use Program has proven that their personnel are committed to setting, achieving and maintaining high standards for animal care and use. A site visit by the Association for Assessment and Accreditation of Laboratory Animal Care International evaluators representatives to the vivarium and toxicology laboratory facilities at the USAPHC on July 11 confirmed the organization’s accreditation.

“AAALAC is a private, nonprofit organization that promotes the humane treatment of animals used in science,” said Gene Sinar, USAPHC Quality Systems and Regulatory Compliance chief. “Their evaluators assess our facilities as well as those of other local, state and federal agencies regularly.”

AAALAC evaluators assessed the USAPHC animal program to assure animal welfare and ultimately to result in better research practices and outcomes, according to Mark Johnson, the Toxicology Portfolio director.

“We are held to high levels of accountability by the Department of Defense, but we try to go above and beyond the requirements of the law,” said Sinar. “We have proven our commitment to the responsible care and use of animals in science by having been AAALAC accredited since 1973.”

The accreditation process required that the USAPHC perform a self-evaluation prior to the visit by Dorcas O’Rourke, veterinarian and AAALAC council member emeritus, and Michael Huerkamp, a veterinarian specializing in animal care and an ad hoc specialist for AAALAC.

The self-evaluation provided background information on USAPHC animal use programs and facilities including protocols or study plans and other study related “Having objective outside observers review the self-evaluation of our operations and programs helps us to better understand our own procedures,” explained Lt. Col. Dawn Fitzhugh, attending veterinarian with the USAPHC QSARC. “The visit brought all the members of our team together to focus on best practices.”

The USAPHC has a history of successful assessments, according to O’Rourke who commended the command’s institutional commitment to the animal care program through the upgraded and well-maintained facilities.

“The command has an engaged and interactive Institutional Animal Care and Use Committee with good protocols, safety plans and outstanding documentation,” O’Rourke said. “The veterinary care program is excellent, and there is an overall spirit

of collaboration in the animal care program.”

The visitors made one suggestion for improvement to make the program even better.

“Every program has room for improvement,” explained Sinar. “Until we get our new laboratory building and new facilities, we will need to continue to follow our current strict protocols and look for ways to improve.”

“We are grateful for your visit and the assessment of our program,” said John J. Resta, Army Institute of Public Health director during the outbrief to the AAALAC visitors. “We take your comments very seriously, and plan to do all we can to make our program better.” ▲



We have proven our commitment to the responsible care and use of animals in science by having been AAALAC accredited since 1973.

—Gene Sinar, USAPHC Quality Systems and Regulatory Compliance chief



Public Health Command tracks emerging mosquito-borne disease

PUBLIC AFFAIRS OFFICE
U.S. ARMY PUBLIC HEALTH COMMAND

The U.S. Army Public Health Command is responding rapidly to an emerging viral infection that is threatening the United States. Although the chikungunya virus is not new, its emergence in the Caribbean makes it a disease of concern to the U.S. mainland.

Chikungunya is spread by two species of mosquitoes that are commonly found in the U.S., according to entomologists at the USAPHC.

“Chikungunya is most often spread to people by *Aedes aegypti* and *Aedes albopictus* mosquitoes,” explained Capt. Heather Ferguson, USAPHC entomologist. “If an infected person is bitten by a mosquito, that mosquito may spread the virus by biting another person.”

One way public health experts monitor the spread of chikungunya is by tracking reports from medical providers of the cases that occur in people.

“Isolating human cases from further bites of mosquitoes, if done efficiently and in time, can help stop the spread of the infection,” said Farida Mahmood, entomologist at Public Health Command Region-South.

Experts also track the location of mosquitoes that carry the chikungunya virus.

“Installation preventive medicine personnel collect mosquitoes from traps and then send them

to USAPHC laboratories where they can be identified, prepared and tested to determine if the virus is present,” according to Ferguson.

“Surveillance of mosquito populations in and around installations is done with the goal of finding the presences of the virus before human cases occur. If the virus is found in the mosquitoes in an area, intensive, focused control efforts can be initiated. By targeting those mosquitoes actively carrying the virus the Army can maximize its resources and achieve the best possible results. Ongoing surveillance is also our means of evaluating our surveillance efforts,” explained Capt. Brian Knott, another USAPHC entomologist.

“The mosquitoes that carry the virus bite mostly during the daytime,” said Knott. “Understanding the behavior of the vector can help in educating Soldiers about prevention.”

Most individuals have been taught to expect mosquito bites at dawn and dusk. Mosquitoes that are active during the day require the extension of preventive measures throughout the day—things like wearing

insect repellent with DEET and light-colored, long-sleeved shirts and long pants.

“Educating Soldiers and their families about how to protect themselves from chikungunya is extremely important should the virus continue to spread to the U.S. mainland,” according to Knott.

Other preventive measures include stopping mosquitoes from reproducing.

“Removal of all container breeding sites is key to prevention of chikungunya,” said Knott. “Educating installation preventive medicine personnel and families about the need to empty water from old tires and other outdoor containers that collect water is a vital piece of our mission.”

Since the mosquitoes that carry chikungunya are container-breeders, this trait helps entomologists and installation environmental personnel conduct surveillance.

“Carbon dioxide-baited traps are used to collect mosquitoes for surveillance on installations,” said Knott. “In addition, deploying the new lethal ovitrap can help cut down on the numbers of these mosquitoes by killing the females who use the trap to lay their eggs.”

Controlling mosquito populations and monitoring human populations for the disease contribute equally to protecting Soldiers and families.

“Surveillance of any disease vectors involves cooperation across the military public health system—the entomological sciences and laboratory programs detect infected mosquitoes, while the Disease Epidemiology Program monitors human outbreaks and case reports in our Army population,” said Lt. Col. Laura Pacha, a USAPHC physician and epidemiologist.

The CDC has reported travel-related cases of chikungunya in the U.S., most brought in by travelers from the Caribbean, where the disease appeared for the first time this year. Outbreaks of the disease previously occurred in countries in Africa, Asia and Europe. Two cases of locally-acquired chikungunya were recently reported in Florida, the first in the continental United States.

“Army preventive medicine personnel are aware of the disease, and USAPHC experts are working with our colleagues in the Department of Defense to provide additional awareness and training and to put reporting mechanisms in place,” according to John Ambrose, USAPHC epidemiologist.

“Chikungunya mimics dengue fever, another mosquito-borne illness,” Ambrose said. “For public health surveillance purposes, lab testing is needed because it’s that testing that distinguishes it from dengue.”

While testing patients for the virus is done in hospital laboratories, testing of mosquitoes to see if they carry the virus is done in USAPHC laboratories once they have been collected in surveillance traps.

“Currently, our laboratories can test for chikungunya virus, and capabilities exist for both identification and testing of the virus,” explained PHCR-South’s Mahmood.

“Once an outbreak occurs in our area of operations, the process of collecting information on the location and coordinating it with the locations of infected mosquitoes can begin,” said Pacha. “With this information, Army public health professionals are better able to help protect Soldiers and their families from this illness.”

For more information on chikungunya, visit these websites:

U.S. Army Public Health Command, http://phc.amedd.army.mil/PHCResourceLibrary/Chikungunya_FS_18-029-0714.pfd

Armed Forces Pest Management Board, <http://afpmb.org/sites/default/files/pubs/techguides/tg47.pdf>

U.S. Centers for Disease Control and Prevention, <http://www.cdc.gov/chikungunya/index.html>



The *Aedes albopictus* mosquito can also spread the chikungunya virus. (Photo by Graham Snodgrass, Visual Information Division)

ORISE program benefits both Army and students

PUBLIC AFFAIRS OFFICE
U.S. ARMY PUBLIC HEALTH COMMAND

“There is no other summer internship opportunity quite like it,” said Jacqueline Owens, management analyst and ORISE Program coordinator at the U.S. Army Public Health Command, Aberdeen Proving Ground, Maryland. “ORISE provides such a unique experience for a student—one they can’t get anywhere else.”

The Oak Ridge Institute for Science and Education is an educational fellowship program established worldwide in 1992, according to Owens. It helps to meet the needs of the U.S. Army by providing additional workforce and offers job training for college students or post-graduates. Owens says the USAPHC has the greatest number of ORISE participants on APG.

This summer, the USAPHC hosted 34 ORISE students, assigning them to G-staff and Science, Technology, Engineering and Mathematics, or STEM, fields in which the command’s technical professionals work. Under the guidance of public health experts, the students are exposed to what a worldwide public health organization does.

Many ORISE participants are very familiar with STEM disciplines, Owens said. At the USAPHC, ORISE participants can work in many different fields. Amanda Rice, whose father works at the USAPHC and alerted her to the ORISE opportunity, works with security and intelligence. Kristina Dziki supported the USAPHC laboratory, and Anthony Bungler worked in the Deployment Environmental Surveillance Program.

Participants have the opportunity to work on diverse tasks that aid the command’s mission. Bungler cross-checked air, soil, water and waste samples in a Department of Defense database and assembled sample kits for Soldiers in the field. Dziki operated bio-detection equipment and helped in lab projects in biodefense.

“It’s more than just bench work, though,” said Dziki, “I was able to be involved in the management and organization of the labs, not just the lab itself and collecting data.”

The majority of ORISE participants seem to have common ambitions of extending their knowledge, gaining experience for future employment, interacting with new people, and getting exposed to government careers.

“This job was very good in helping me to get my foot in the door,” said Rice, “And it’s great for me and my government career to build up experience in this field.”

“What folks know here (at USAPHC) is amazing,” says Owens, “You’re sitting next to Ph.D. scientists and engineers. It’s a remarkable summer internship, and you get paid for it.”

Rice, majoring in intelligence analysis at American University, learned a great deal from online training courses and the security clearance process. Dziki, a bioengineer major at the University of Maryland, was grateful to have found a job with the unique intersection of health and technology.

And Bungler, who majors in music education, built valuable skills working with scientists.

“Regardless that I’m pursuing music education at Towson,” says Bungler, “I have learned matchless skills like operating government computers and programs. But I especially love the experience I had with meeting new people and interacting with them in a workplace setting.”

Many participants like Dziki had solid skills to offer as a result of previous training; she contributed two years of engineering school and fast learning capabilities. Bungler said that he and the ORISE students he worked with stayed organized, got projects moving along and done on time.

In return, the Army benefited from the hard work and dedication of these ORISE participants, Owens said.

“We value the young because youth most times comes with an openness; a willingness and yearning to learn ... they bring that with them,” Owens says, “They give us fresh new ideas that we may have not considered, and we are always grateful for their attentive shadowing and hard work.”

More information about the ORISE program is available at www.oraui.org. ▲

Monica Bullock, USAPHC ORISE Intern, contributed to this article.

Amanda Rice, Oak Ridge Institute for Science and Education intern, discusses security procedures with Capt. Tamika McKenzie, U.S. Army Public Health Command G-1 officer-in-charge. (Photo by Graham Snodgrass, Visual Information Division)



Staff ride emphasizes spiritual fitness, resiliency

JANE GERVASONI
EDITOR



Lt. Col. David Bowerman, U.S. Army Public Health Command chaplain, explains the historical significance of the monument honoring civilian employees of Edgewood Arsenal, now Aberdeen Proving Ground–South “who made the supreme sacrifice for their country.” (Photos by Graham Snodgrass Visual Information Division)

In a clearing surrounded by trees behind building 1675 on Aberdeen Proving Ground–South is a cemetery containing 167 graves. Many of the headstones are those of infants or young children of military personnel who served at APG.

“Looking at the headstones, one can only imagine the grief and despair felt by the parents and families left behind and wonder how they continued in their service to the nation after experiencing such losses,” said Lt. Col. David Bowerman, U.S. Army Public Health Command chaplain.

Bowerman explained that building 1675, now the home of the USAPHC Environmental Health Engineering and Health Risk Management portfolios, had originally been part of a 29-building complex that included the World War I post hospital, and that the cemetery behind the building held some of those who had died in the hospital.

The hospital was one stop on a staff ride held Aug. 28 that included a tour of many USAPHC buildings with information about their history. It was organized by Bowerman to combine history, resilience and spiritual fitness by incorporating how previous military and civilian used their personal resources to persevere.

The Army defines resiliency as the mental, physical, emotional and behavioral ability to face and cope with

adversity, adapt to change, recover, learn and grow from setbacks.

More than 40 civilians who attended the ride were challenged to understand the resiliency of those who lived and worked at APG–South from its beginning in World War I through the many conflicts leading to our present day.

Bowerman described the trials endured by former inhabitants of APG as “moral injury,” a kind of post-traumatic stress that is a normal reaction to crime, accidents and similar world-changing events that cause people to question the way they perceive their world.

One thing that healing moral injuries requires is that the injured person tell his/her story to a sympathetic listener.

“I think the way we can recover is by taking one step at a time and having people who listen as part of a growth process,” said Melinda Battle-Henson, administrative assistant in USAPHC’s Health Hazard Assessment Program.

Bowerman agreed.

“From the Susquehannock Indians who were decimated by smallpox to those buried in the cemetery who died from the 1918 influenza epidemic to the civilian workers who died in the 1945 explosion and fire in building 5158, we can learn lessons to help us be resilient in the future,” Bowerman said. ▲



Mark Gallihue, center, culture resource manager for Aberdeen Proving Ground, explains features of the Gunpowder Meeting House Methodist Church, erected in 1773, the oldest surviving structure of its kind in the area.

Soldier becomes citizen

At 9:30 a.m. on July 3, Pvt. Rachel Lee, Public Health Command District–Western Pacific veterinary food inspector in Guam, officially became a U.S. citizen.

During the first Independence Day naturalization ceremony of 2014 at the U.S. District Court of Guam, Lee, who is originally from South Korea, was selected to lead all 53 new citizens in the Pledge of Allegiance to the U.S. Flag. Many of her fellow Soldiers from the Western Pacific District attended the ceremony to support her.

Chief Judge Frances Tydingco-Gatewood administered the Oath to the new citizens, who were presented to the court by U.S. Citizenship and Immigration Services–Guam field director Stephen P. Green. Judge Vernon P. Perez, Guam Superior Court, was the guest speaker. Lee was the only active duty military member to take the oath of citizenship at the ceremony. ▲

Lt. Col. Robert S. Dole, Public Health Command District–Western Pacific commander, contributed to this article.



Flanked by Judge Vernon P. Perez and Chief Judge Frances Tydingco-Gatewood, Pvt. Lee displays her citizenship certificate with members of Public Health Command District–Western Pacific who came out to support her. (Photo courtesy PHCD–Western Pacific)

Award for excellence presented

JANE GERVASONI
EDITOR

Awards ceremonies usually honor current employees who have performed exceptionally and contributed to the mission of a command. A U.S. Army Public Health Command award ceremony at the Aberdeen Proving Ground South chapel Sept. 18 honored current employees, but also recognized the service of a former employee.

Evelyn “Bell” Riley was the first public affairs officer to serve at the U.S. Army Environmental Hygiene Agency, one of the predecessor organizations of the USAPHC. Riley retired in 2003 with 52 years of government service, more than 40 of them at the USAEHA and its successor organizations.

To honor her, the command initiated an award to recognize general and special staff employees who reflect her “excellence in innovation and collaboration in support of the USAPHC mission.”

David Davis, USAPHC chief information officer, received the first annual Evelyn “Bell” Riley Award from Maj. Gen. Dean G. Sienko, USAPHC commander, for consistently demonstrating the best qualities of leadership in support of the command mission.

According to the award citation, Riley fostered administrative excellence and was a model of organizational dedication, selfless service and professional excellence who served as a mentor and role model and exhibited outstanding leadership.



David Davis, USAPHC chief information officer, received the first annual Evelyn “Bell” Riley Award from Maj. Gen. Dean G. Sienko, commander of the U. S. Army Public Health Command, at a ceremony Sept. 18 in the Aberdeen Proving Ground South chapel. (U.S. Army Public Health Command photo by Graham Snodgrass)

“This is a good day. We get to recognize two long-term employees—one, Bell Riley, and the other, Dave Davis,” said John Resta, USAPHC’s Army Institute of Public Health director and deputy to the commander, who assisted in the presentation.

“Bell was the first public affairs officer at the Army Environmental Hygiene Agency, but that was one of her last jobs,” Resta said. “Prior to that, she was responsible for all of the technical documents the organization produced.

“During her career, she was both a role model and a mentor, who touched many of us who had the privilege of knowing her. She had a steel determina-

tion to make this place better, and Dave Davis has many of the same characteristics,” explained Resta.

“We would not be where we are today (at the USAPHC) without his support—our phones wouldn’t work, we wouldn’t have computers, and we wouldn’t be able to communicate. He has a relentless passion to make things happen.”

Both Sienko and Resta commended Davis for outstanding achievements and dedication to duty. ▲