

# The Signal Newsletter

Atlanta Branch, Commissioned Officers Association of the U.S. Public Health Service

(representing members assigned to Atlanta area federal agencies)

Vol 15 Issue 5

Sep/Oct, 2004

## Calendar of Events

### October 16 (Saturday)

#### **ACOA "Crunch and Run" (CCRF Annual Physical Fitness Test)**

St. Pius High School Track.  
9:00 a.m.

Contact: CAPT Arnold Manangan (770) 488-1869  
AManangan@cdc.gov



### October 19 (Tuesday)

#### **American Heart Association (AHA) Basic Life Support (BLS) for Healthcare Providers Classes (includes Adult and Pediatric skills)**

**8:00 AM to 3:00 PM**

**Location:** Sam Nunn Atlanta Federal Center at 61 Forsyth Street, S.W, Atlanta, 30303 on the 2nd floor conference center

**Contact:** CAPT Annie Fair at (404) 562-7904 or AFair@OSOPHS.DHHS.GOV

### October 22 (Friday)

#### **American Heart Association (AHA) Basic Life Support (BLS) for Healthcare Providers Classes (includes Adult and Pediatric skills)**

**8:00 AM to 3:00 PM 8:00 AM to 3:00 PM**

**Location:** Kroger Center, Columbia Building, Chamblee, GA

**Contact:** CDR Patti Pettis at PPettis@cdc.gov or (404)687-6649

### November 6

#### (Saturday)

#### **ACOA Adopt-A-**

Roadside Clean-up.

Contact: CAPT

O'Connor (404) 498-

[ROConnor@cdc.gov](mailto:ROConnor@cdc.gov) or CAPT (Ret) Lester Sharpton (770) 531-0815



#### **Highway**

9:30 a.m.

Ralph

0322 or

### November 20 (Saturday)

#### **ACOA "Crunch and Run" (CCRF Annual Physical Fitness Test)**

St. Pius High School Track. 9 a.m. Contact: CAPT Arnold Manangan (770) 488-1869 or [AManangan@cdc.gov](mailto:AManangan@cdc.gov)

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**The EHO PAC is please to announce the release of the new EHO Readiness Guide. Check it out at <http://www.ehopac.org/EHOReadinessGuide-final.pdf>**

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#### **Note from the Editor:**

I would like to apologize to the readers of *The Signal Newsletter* for missing the early SEP/OCT 2004 issue release date. I was providing HHS coverage at the Region 4 Operation Center at FEMA. I was also deployed to the Disaster Field Office (DFO) in Orlando, Florida in support of Hurricanes Charley, Frances, and Ivan.



I would like to dedicate this edition to all the Atlanta based Commissioned Officers who supported the victims of the multiple hurricane strikes that has challenged our country this season.

CDR Larry Cseh

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**Health Care News;**  
**By CDR Dan Cline**



Lets get physical.....a bad song but perhaps a new mantra for PHS officers as physical standards, readiness and deployability come to the forefront in carrying out the mission of the PHS Commissioned Corps – to protect the health of Americans. Intertwined in this mission as well as the promotion process, assimilation into the Corps, long term training, limited tour re-evaluation, etc. is the physical exam. Below is information regarding the physical exam specifically geared toward the Atlanta -based commissioned officer.

A complete physical examination is required every 5 years. Each 5 year physical examination is valid through the end of the month from the date signed by the examiner. DD Forms 2807-1 and 2808 are the only acceptable medical forms required for physical examinations intended for the purpose of fitness for duty (5-year PE), assimilation, CCRF, retirement/separation, long term training, limited tour removal and other purposes.

It is the officer's responsibility to ensure that the original copy of the required medical records, all other pertinent medical documents (sent as attachments), and the associated Disclosure statement are forward to the Medical Affairs Branch within appropriate time frames.

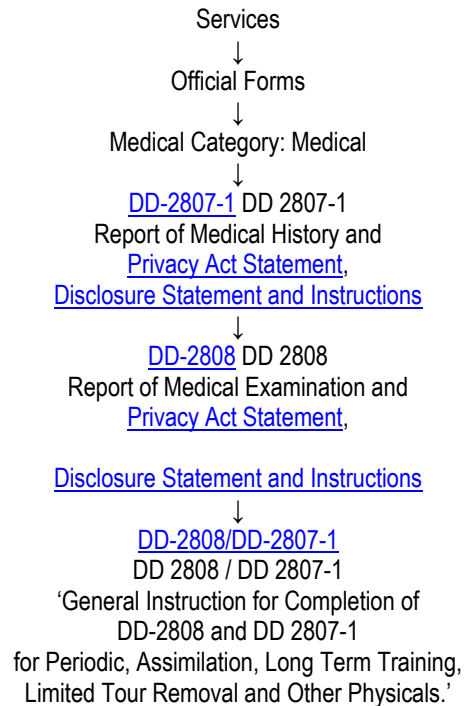
The two forms required for Commissioned Officers to complete a routine physical are DD 2807-1 and DD 2808:

- DD Form 2807-1 "Report of Medical History". This is a self assessment form that should be completed by the officer. It should be reviewed by your provider at the time of your physical and signed by the provider if possible. However, a provider's review and signature is not required.
- DD Form 2808 "Report of Medical Examination". This form should be completed by the provider conducting your physical.
- Also, be sure to download and sign the Required Disclosure Statement and Instructions Statement of Understanding. It should accompany the DD Form 2807-1 and 2808 when sent to the Medical Affairs Branch.

For officers who access healthcare through Emory: anAn officer should never be charged for completion of the two (2) aforementioned forms. Payment for this service using the proper Current Procedural Terminology (CPT) code has been negotiated between MAB, Humana Military, and Emory. If you encounter a situation wherewere payment is requested for completion of the

physical forms, please have the provider's office call CDR Dan Cline, Health Benefits Advisor at (770) 488-1883.

The DD Forms, as well as recently updated line-by-line instructions on how to complete the forms; to include what tests are and are not required for completion of a physical for commissioned officers, can be downloaded from the DCP website as follows:



[Do not to use the JRCOSTEP - Instructions for Completion of DD Form 2807-1]

All Commissioned Corps officers stationed in the Atlanta area that are enrolled in TRICARE Prime Remote will be required to receive their physical exam from their Emory Primary Care Manager (PCM).

Because many Emory PCMs have a large patient base, it is suggested that officers schedule their physicals at least 30 days in advance. Not doing so may result in a delay in the completion of the exam.

Please be aware that the following referrals for specialty care may be required in order to complete the physical exam if the clinic cannot provide the service needed:

- Audiometer Testing
- 12- Lead EKG ≥ age 40
- Flexible Sigmoidoscopy ≥ age 50
- Chest X-ray - required if (+) PPD
- Pulmonary Function Test - if clinically indicated

The vision portion of the exam can be completed by a TRICARE Prime optometrist or ophthalmologist without referral from a PCM.

The PAP smear and mammogram (if required) can be completed by a TRICARE Prime OB/GYN, within one year of the physical exam, without referral from a PCM.

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**To submit information, articles, and op/ed pieces to the ACOA newsletter, please contact the Editors, CDR Larry Cseh at [loc3@cdc.gov](mailto:loc3@cdc.gov) (770)488-3335 or CDR Amy Collins, at [acollins@cdc.gov](mailto:acollins@cdc.gov) (770)488-5808.**

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### WITH A PURPOSE

One of the community service projects that our COA Atlanta Branch has accepted and sustained over the years is the Georgia Adopt-a-Highway program. We have contractually agreed to clean up a section of roadway every quarter, four times a year. We have never failed to meet this obligation, though sometimes we've operated with a minimum amount of volunteers. Thanks in large part to the commitment of the PHS officers in the Atlanta Area.

We "environmentally improve" two-miles along Ponce De Leon Avenue between Briarcliff and Clifton Roads. It is and has been a major transportation artery to and from the city of Atlanta. We are cleaning up part of co-joined park lands, neighborhoods, including three churches. The GA Department of Transportation has erected signs noting our sponsorship; these signs are seen by tens of thousands of motorists and passengers throughout the year. It takes many hours for a single person to clean this section, however eight or more people reduces the time down to approximately an hour. You are encouraged to wear sturdy gloves and appropriate clothing/sun protection. An orange vest is provided for your safety as your group walks along sidewalks or through parks.

ACOA has completed three of our four required clean up

activities. The next scheduled clean up will be November 6<sup>th</sup>, 2004.

**Meeting Place:** 9:30 am Saturday, November 6, 2004.  
The Church of Jesus Christ of Latter-day Saints; 1450 Ponce de Leon Avenue, NE, Atlanta, GA. (near the Virginia Highlands area).

For your volunteer service, we generally provide morning treats, such as: hot beverages, orange juice, and pastries/bagels. This is an ideal family activity as you can all have fun together and contribute to helping keep the environment clean. Anyone is welcome, it is a neat way to network, and there is a unique fellowship aspect.

We encourage you to volunteer once a year. To volunteer, or for additional information, contact:

CAPT Ralph O'Connor ([rao1@cdc.gov](mailto:rao1@cdc.gov)) (404) 498-0322 or  
"Commander Lester" (770) 531-0815.



### Atlanta Area Uniform Change to Winter Dress

Effective the first Monday in October, Monday October 4<sup>th</sup>, the Uniform of the Day for the Fall-Winter period is either Service Dress Blue or Service Dress Blue Sweater (SDBS). An authorized option to the Service Dress Blue Uniform is the Blue Windbreaker Jacket (BWJ) in lieu of the Service Dress Blue coat. Metal rank insignia are worn on the BWJ.



Officers also may elect to wear the following alternatives: Winter Blue, Summer Blue ("Salt



and Pepper"), or Summer Khaki. The Army Black V-neck Sweater is authorized for wear with

the Summer Blue and Summer Khaki uniforms.



Remember that officers in the Washington, DC, area wear the Uniform of the Day prescribed by the Surgeon General, who is the Local Uniform Authority for the DC area. The uniform of the day memorandum for the

Washington, DC, area is on the CCMIS website, <http://dcp.psc.gov>.



### TSP Features for Uniformed Services

The TSP open season is October 15, 2004 thru December 31, 2004. Commissioned Officers can elect to begin participating in the TSP or change their allotments during this open season by using form TSP-U-1 and mailing it to the Compensation Branch. The Compensation Branch will not accept faxed forms so mail them to:

**Office of Commissioned Corps Support Services  
Compensation Branch  
5600 Fishers Lane, room 4-50  
Rockville, MD 20857-0001**

For 2005 the maximum contribution was raised to 10% of your base pay. As stated on your September pay stub ***"TSP-U-1s received will be processed for the 12/2004 payroll cycle, forms received after 12/10/2004 will be processed for the 01/2005 payroll cycle"***

For more information and TSP forms check out their web site at [www.tsp.gov](http://www.tsp.gov). Remember to look at the uniform service pages, not the civilian.

Any other payroll questions contact the Compensation Branch at 301-594-2963.

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**Reminder the new Fax number to submit current professional license is (240) 453-6142. The fax numbers for entry into OPFs are still (301) 480-1436 or (301) 480-1407. Remember to list in the upper left hand corner Name, Rank, Category and PHS #.**

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## Charley, Frances and Ivan come to visit By CDR Larry Cseh

On August 15<sup>th</sup>, 2004 I was enjoying a quite Sunday with my family when I received a phone call from CAPT Annie Fair, asking if I was available to cover a five day shift at the Region 4 Operation Center of FEMA. The Regional Operation Center (ROC) was activated (stood up) on August 11<sup>th</sup> in anticipation to the arrival of Hurricanes Bonnie and Charley with the Florida Coast. You may have remembered the articles in several of *The Signal* asking for volunteers to man the HHS desk at the FEMA ROC in preparation for the 2004 hurricane season. For those of you who desire to volunteer, CAPT Clara Cobb, Acting Regional Health Administrator oversees the Emergency Support Function (ESF) – 8 or health and medical services for HHS during disasters. She has three teams of volunteers who are on a one week on – call schedule that rotates every three weeks. These teams are required to cover 24/7 coverage when the ROC is activated and usually have two officers per twelve hour shift. These officers facilitate medical and health aid requests by the state where a disaster is declared. They serve as the liaison between the FEMA and HHS. They also share the desk with personnel from NDMS/DHS.

I was assigned the 0700 to 1900 shift working with CAPT Bo Kimsey; the night shift was covered by CAPT Annie Fair and LCDR Nita Sood. Due to the heavy workload, we usually arrived early and stayed late after our shifts to ensure proper exchange of information. As requests came into FEMA operations they would be assigned to the appropriate ESF desk to determine associated costs and approval of resources. The ESF-8 staff kept in contact with CAPT Cobb, leading the Secretary's Emergency Response Team (SERT) team in Florida and with HHS as they fill the mission requests. The ROC usually maintains control of the administrative portion of the response until a Disaster Field Office (DFO) can be opened in the area impacted. The ROC closed and transferred control to the DFO in Orlando on August 20 and we returned to our normal duties.

On August 27<sup>th</sup> team members were able to receive an orientation to the FEMA ROC in preparation to working there. Because of our experience at working at the ROC CAPT Kimsey, CDR Weir, and my name was suggested to HHS as potential replacements at the DFO in Orlando.

On August 27<sup>th</sup> I received verbal orders with electronic to follow inviting me to the DFO on Sunday August 29<sup>th</sup>. On arrival, I was

introduced to CAPT Mike Milner SERT team leader and LCDR Dana Nemeth the other Liaison Officer. We were providing coverage from 0700 to 1900 with the expectation of doing 24/7 if Hurricane Frances hit Florida.



Our FEMA Branch Chief was CDR Tom Bowman (the officer to the right in the photo) who oversaw ESF-8 (HHS and NDMS), ESF-10 (EPA), ESF-4 (USFS) and Search and Rescue.

Action Request Forms (ARFs) from the state ranged from Direct Patient Care (providing RNs, MDs etc to local hospitals and shelters) to technical assistance (Vector Control, Injury surveillance, Environmental Health). We facilitated a contract between GSA and a state contractor to commence spraying for mosquitoes to reduce the opportunity to spread West Nile Virus.

As Hurricane Charley approached, the FEMA DFO decided to relocate back to Atlanta since the projected path and strength made the location as unsafe for personnel. Joined by LCDR Nemeth (BOP in NC) (photo above) we continued to cover various shifts through Labor Day weekend



After returning to work, the unthinkable happened. Hurricane Frances was now driving towards Florida. I was re-activated back to Orlando (still awaiting written travel orders) to re-open the DFO with CAPT Cobb, RADM Ron Banks, KC Decker, CDR Tom Mignone, CDR Tom Burns, and LT Kate Robbins. We continued to process state requests for aid due to Charley, new requests due to Frances, and provided logistic support for the six PHS medical teams (12 members per team) that were working at medically-strained special needs shelters. If this wasn't challenging enough, here came Ivan. The State and HHS decided to protect special needs shelter patients by consolidating their location from multiple areas across the state. The SERT team set-up a As I was sitting at my desk eating my lunch, I received a call from HHS's travel contractor who told me that she was working on my travel taking me back to Orlando. CAPT Cobb arranged for me to return to FI since I had supervisory permission and returned home for five nights I could return for a 14 day deployment. I also had the experience of the tasking we were working on for Charley and Frances. Instead of flying back to Orlando I chose to drive down with RADM Ron Bank and KC Decker, SERT Team member from HHS. I was teamed up with CDR Tom Mignone, CDR Tom Burns, and LT Kate Robbins. We

reopened the DFO office and continued to liaison with the state, FEMA, and SERT Team. We provided tracking to the 6 twelve man PHS medical teams that was working at special needs shelters. We also facilitated, reported and tracked tasking from both Charley and Frances. When the state decided to request a large special needs shelter to house all their special needs patients in one location, the SERT team used the tracking system for the 431 medical providers and reassigned them to the Orlando Convention Center "Mega Shelter".

The Mega Shelter was spatially capable of housing 8000 special needs patients. Medical providers came from HHS, VA, DOD, and NDMS. The shelter had two DMAT teams equipment



and a fully stocked pharmacy, respiratory treatment and acute care areas. Luckily, Ivan changed directions, shelter patients remained in their home location, and medical staffing was reduced in Orlando or re-assigned to other locations.

I trained two replacements, CDR Deborah Healy (FOH - DOE) (photo to the right) and LTJG Tom Janisky (BOP) for the Florida DFO. The FEMA ROC in Atlanta dealt with the other states within Region-4 affected by Hurricane Ivan, I flew back to Atlanta on September 20, but kept myself available to the DFO, ROC, and CDC DEOC for any clarifications on the ongoing missions.



I can remember a call from my wife, Margie saying how she hated that I missed the ACOA picnic that I helped to plan. I told her that as I was working on September 11<sup>th</sup>, I felt close to my ACOA partners when I looked around the Mega Shelter and saw CDR Amy Collins who just transferred from a special needs shelter in West Palm Beach; or CDR Linda West who spent

hours helping to track all the HHS assets working in the Orlando area. I remembered that when ever I called the Region 4 ROC or the Secretary's Operation Center in DC, it was comforting to deal with other Atlanta officers. It was a pleasure working with the high caliber of officers during this response no matter if they were covering a phone at the ROC, being a FEMA Community Relations person, conducting a rapid needs assessment from CDC, or providing direct patient care. The common theme for the

officers was dedication to help the State and the residents in these extraordinary circumstances to return them to a normal life as quickly as possible.

### PHOTOS from the Region 4 ROC



CAPT Annie Fair and LCDR Nita Sood 19:00 – 0700 Shift Hurricane Charley



CAPT Bo Kimsey, CDR Larry Cseh, CAPT Annie Fair and LCDR Nita Sood Shift change at the FEMA Region 4 ROC Hurricane Charley



DMAT Tents at MEGA Shelter



CAPT Cristino Rodriguez DFO Orlando

### Documenting Your Immunizations and Tests

**Under the new readiness standards, officers are required to record immunizations, titers, and test results by logging onto the OFRD website. Officers also must send a paper copy of results to the Medical Affairs Branch (MAB).** The printout of the AIMS Surveillance Record provided by CDC's Occupational Health Clinic is accepted by MAB as proof of immunizations and/or titers. A health care provider's signature is not required for the AIMS report. However, all other documented proof of immunizations provided to MAB must include the date, type and dose of vaccine(s) administered, and the health care professional's name, title/rank and signature. Officers may request a temporary or permanent waiver of the immunization requirements by following the procedure outlined in the Manual Circular #377.

**Medical Affairs Branch  
Attn: Medical Evaluations Section  
5600 Fishers Lane, Room 4C-04  
Rockville, MD 20857-0001**