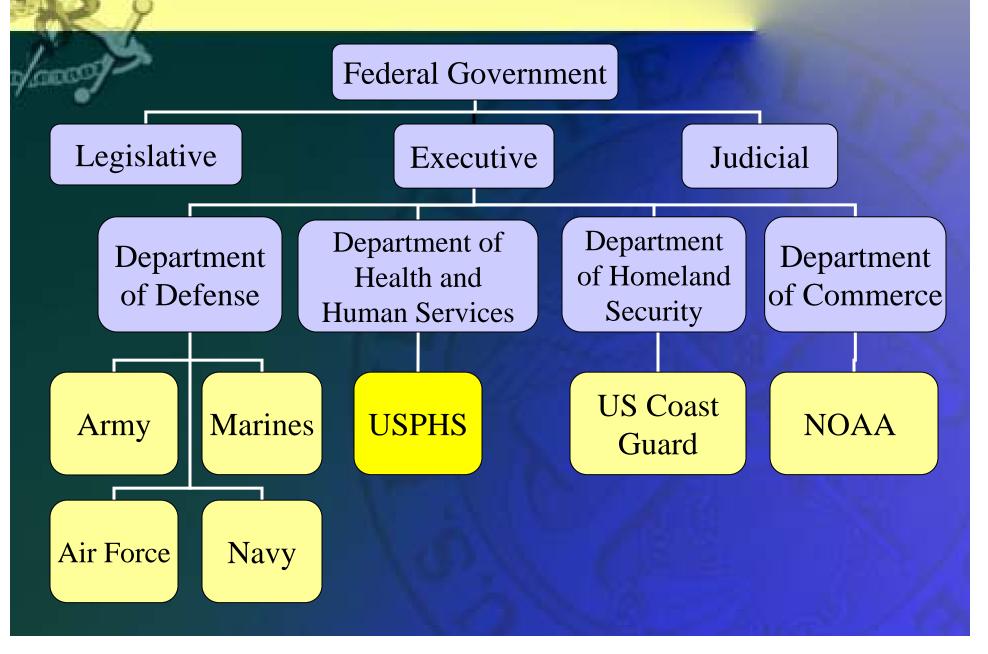


Who are We?

U.S. Public Health Service:

- Highly-trained and mobile health professionals
- The nation's foremost health service
- A principle component of the Department of Health and Human Services

Seven Uniformed Services of the U.S.





The Secretary

Deputy Secretary

Director, Intergovernmental Affairs, & Secretary's Regional Representatives Chief of Staff

Executive Secretary

Assistant Secretary for Health

Assistant Secretary for Administration & Management

Assistant Secretary for Budget, Technology, & Finance

Assistant Secretary for Planning & Evaluation

Assistant Secretary for Legislation

Assistant Secretary for Public Affairs Assistant Secretary, Administration for Children and Families (ACF)

Assistant Secretary, Administration on Aging (AoA)

Administrator, Centers for Medicare & Medicaid Services (CMS)

Director, Agency for Healthcare Research and Quality (AHRQ)

Director, Centers for Disease Control and Prevention (CDC)

Administrator, Agency for Toxic Substances and Disease Registry (ATSDR) Commissioner, Food and Drug Administration (FDA)

Administrator, Health Resources and Services Administration (HRSA)

> Director, Indian Health Service (IHS)

Director, National Institutes of Health (NIH)

Administrator, Substance Abuse and Mental Health Svcs. Administration (SAMHSA)

Director, Program Support Center (PSC)



General Counsel

Assistant Secretary for Public Health Emergency Preparedness

Director, Center for Faith-Based and Community Initiatives

> Director, Office for Civil Rights

Inspector General

Chair, Departmental Appeals Board

USPHS

Part of Department of Health and Human Services

- Led by the Surgeon General
- Dual Personnel System
 - 60,000 employees total
 - 6,000 Commissioned Corps Officers

Kenneth P. Moritsugu, MD, MPH



Acting Surgeon
General of
the United States



To protect, promote, and advance the health and safety of the Nation through:

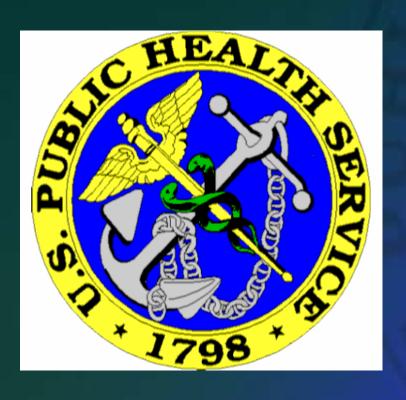
- rapid and effective response to public health needs
- leadership and excellence in public health practices
- advancement of public health science

Our Origins

- 1798 Creation of PHS to provide for care and relief of sick and injured merchant seaman
- 1870 Reorganization to create a Marine Hospital Service
- 1889 Formalized by Congress as the Commissioned Corps
- 1912 Renamed Public Health Service because of broadening responsibilities
- 1939 Became part of the Federal Security Agency
- 1980 Became part of the Department of Health and Human Services

PHS Seal

- Fouled Anchor = seaman in distress
- Caduceus (winged wand with 2 serpents intertwined)



Associated with the Greek god Mercury, used to symbolize trade or commerce (hence, PHS' relationship with merchant seaman and maritime industry)

Later became symbol of medicine

PHS Flag



- Evolved out of the quarantine flag used by the Service on quarantine vessels and stations
- Blue and yellow colors of the PHS represent its roots in maritime and quarantine activities

Where are we located?

Almost anywhere and everywhere in the United States

 Whether you prefer urban or rural - or east west north or south - we have a location for you



Duty Locations Coast to Coast



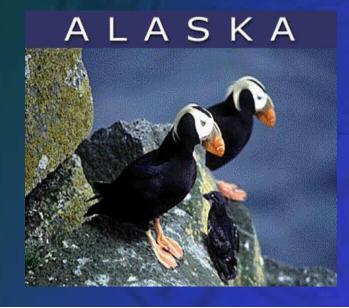
Washington DC



New Mexico



Arizona





Washington



South Dakota

Where do PHS Officers Work?



Where do PHS Pharmacists Work?

- Agency for Healthcare Research and Quality (AHRQ)
- Bureau of Prisons (BOP)
- Centers for Disease Control and Prevention (CDC)
- Food and Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Program Support Center (PSC)
- Office of the Secretary (OS)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- United State Coast Guard (USCG)



Indian Health Service

- Principal Federal healthcare advocate and provider for American Indians and Alaska Natives
- Serves over 550 Federally recognized tribes in 35 States
- Comprehensive healthcare services, including preventive, curative, rehabilitative, and environmental.
- Most IHS facilities are west of the Mississippi
 - Northern Plains States
 - Southwest
 - Pacific Northwest
 - Alaska





http://www.ihs.gov

Health Resources and Services Administration



- Directs national health programs that improve the Nation's health
- Assures equitable access to comprehensive, quality healthcare for all
- Goals:
 - to improve and extend life for people living with HIV/AIDS
 - to provide primary healthcare to medically underserved people
 - to serve women and children through State programs
 - to train a health workforce that is both diverse and motivated to work in underserved communities

http://www.hrsa.gov



U.S. COAST GUARD



- Component of the Department of Homeland Security
- One of the seven Uniformed Services, and is the
- smallest of the five armed services
- Headquarters in Washington, DC
- Opportunities throughout the US
 - New Jersey
 - New York
 - Florida
 - New Orleans
 - California
 - Alaska
 - Puerto Rico



http://www.uscg.mil



U.S. Food and Drug Administration



- FDA's responsibilities involve regulating:
 - -Food
 - -Cosmetics
 - -Medicines and medical devices
 - Radiation-emitting products
 - -Feed and drugs for pets
 - Biological products
 - -Blood Products
 - -Vaccines
- FDA monitors the manufacture, import, transport, storage, and sale of about \$1 trillion worth of products each year http://www.fda.gov





Federal Bureau of Prisons

- To protect society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, appropriately secure, and which provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.
- Operates a system of Federal penitentiaries across the country
- Settings range from small infirmaries to 500 bed tertiary care hospitals

http://www.bop.gov

J.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health



- Federal focal point for medical research in the U.S.
- Comprised of 27 separateInstitutes and Centers
- 75 buildings on more that300 acres in Bethesda, MD
- Mission: to uncover new knowledge that will lead to better health for everyone



http://www.nih.gov

Centers for Disease Control and Prevention

- Approximately 8,500 employees in 170 occupations
- Conducts epidemiological research and surveillance throughout the world
- Employs researchers and scientists who conduct research on disease, serve on multi-disciplinary epidemic response teams, and provide assistance in domestic or international crises
- Sponsors scientists conducting field research and assigns staff to state and local health departments





Substance Abuse and Mental Health Services Administration (SAMHSA)

- Mission to improve the quality and availability of prevention, treatment, and rehabilitative services in order to reduce illness, death, disability, and cost to society resulting from substance abuse and mental illnesses.
- SAMHSA includes three centers
 - Center for Mental Health Services
 - Center for Substance Abuse Prevention
 - Center for Substance Abuse Treatment



Centers work with States, communities, and private organizations

Bureau of Citizenship and Immigration Services

- Headquarters in Washington, DC
- Opportunities throughout the US
 - New York
 - Florida
 - Texas
 - Arizona
 - California
 - Puerto Rico

http://www.uscis.gov







- Mission: to assure health care security for beneficiaries
- Vision: to open our programs to full partnership with the entire health community to improve quality and efficiency in an evolving health care system.

Goals:

- To provide access to quality care
- To provide services to beneficiaries
- To provide program administration to run CMS programs

http://www.cms.hhs.gov/home/aboutcms.asp

FDA: Safety Evaluator

- Reviewing and evaluating pre-market proposed proprietary drug and biological names and product characteristics to determine the likelihood of confusion with existing products in the marketplace.
- -Reviewing, analyzing, and evaluating the medication error reports for pre-market and post-market drug and biological products which are submitted to the FDA or cited in the scientific literature
- Serving as a scientific advisor on adverse reactions associated with drug and biological products and on the safety of drug and biological products within FDA

IHS: Assistant Chief Pharmacist (Inpatient)

- -Serving as a Clinical Pharmacist for the ICU & Residency Program Director at the Indian Health Service Phoenix Indian Medical Center (PIMC)
- -Directing and coordinating clinical and distributive pharmacy services at this 110-bed facility
- -Providing pharmacotherapy services and distributive pharmacy services for ICU patients
- -Developing and implementing medication use policies
- -Developing and coordinating the ASHP accredited Pharmacy Practice Residency Program at PIMC
- -Optimizing use of the pharmacy budget
- Being an active member of the Pharmacy and Therapeutics Committee

HRSA: Branch Chief for the AIDS Drug Assistance Program (ADAP)

- -Leading a team responsible for monitoring established
 ADAPs to improve health care for individuals and families affected by HIV
- -Establishing ADAP priorities to respond to issues that impact planning and delivery of HIV care services
- Developing strategies for delivering care for HIV/AIDS
- -Guiding grantees to use the most cost-effective methods to purchase medications
- -Assisting grantees in making formulary decisions
- Preparing budget forecasting reports
- Developing on-site program reviews of compliance with ADAP mandates and regulations
- -Addressing medication distribution strategies in resource-poor countries

NIH: Head of the Protocol and Information Office

- -Coordination of the administrative portion of the development and implementation of oncology clinical trials to assure patient safety
- -Optimization of scientific objectives, regulatory compliance, and efficient use of resources
- -Acting as a project manager to develop software to improve the efficiency of oncology clinical trials at the NCI by leveraging technology

Learn more about pharmacist roles at:

Pharmacists Learning and Networking Together (PLANT)

http://www.hhs.gov/pharmacy/planttop2.html

Why Should YOU Be a Part of PHS Pharmacy?

Benefits

- Quality of Practice
- Opportunities for Growth
- Make a Difference
- Quality of Life
- Perks
- Compensation

Quality of Practice

When asked why they became a pharmacist, over 80% of pharmacists answered "to help people"



Quality of Practice

Would you prefer a practice wherein you are included in the *decision* process with other professionals, helping to manage treatment, utilizing the patient's medical record, and counseling every patient about their drug therapy?

How about practice settings where you and other providers sit down as a *team* and talk about your patient's drug therapy?

Would you like to really *use* your education to help people and make a difference?





Opportunities for Growth

As a member of a single organization that has pharmacists in every state, you are involved in patient care, new drug approval and monitoring, medical research, healthcare policy, and epidemiology.



Opportunities for Growth

You have opportunities to make an impact on the public health of this entire nation with only *ONE* state license.



Quality of Life

Is it important for you to have *time* to spend with your family and friends, doing the things you enjoy?

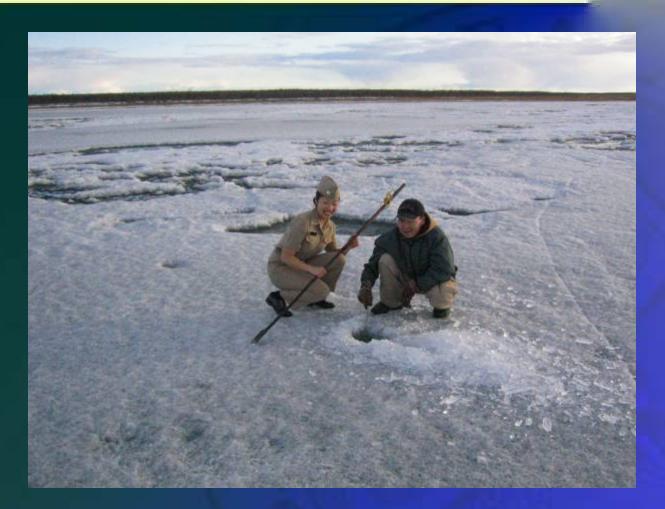


30 days of annual leave may carry over 60 days per year) plus 10 federal holidays!

Sick and maternity leave as medically necessary







Diverse geographical locations

Different agencies/programs









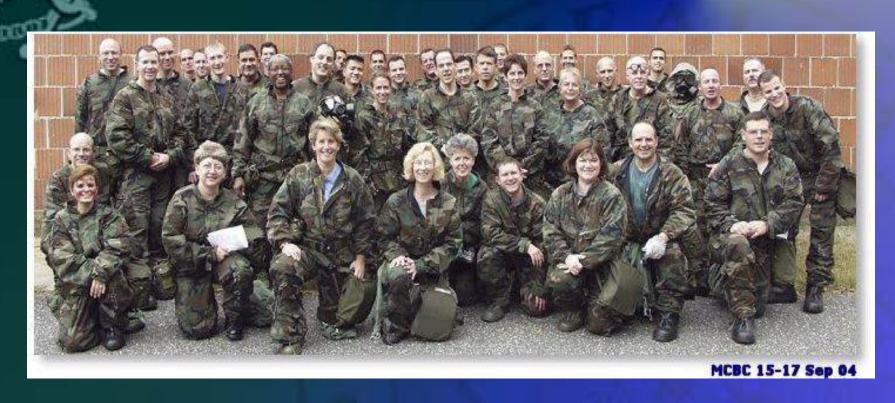


Benefits accompany officers when transferring agencies/programs

Be prepared to enjoy a camaraderie and sense of common purpose unlike anything you have yet experienced.



Office of Force Readiness and Deployment (OFRD)—formerly CCRF



PHS-1 Disaster Medical Assistance Team (DMAT)
PHS-1 Rapid Deployment Force (RDF)

OFRD - Make a Difference



Hurricanes – September 2004





World Trade Center Attacks – Sept 2001



2005 – A Record Year for OFRD Pharmacists



In 2005, hurricanes ravaged many parts of the United States leaving thousands of people homeless and in need of medical care.



Nearly 400 US Public Health Service Pharmacists assisted with relief efforts for Hurricanes Dennis, Emily, Katrina, Rita, and Wilma.

OFRD Pharmacist Opportunities

- Vaccination Teams
- Temporary Hospitals
- Special NeedsShelters
- General Shelter Clinics
- Mobile Medical Clinics/Pharmacies
- Pharmacist assistance at disaster stricken hospitals





OFRD Pharmacist Opportunities

Incident Regional Coordination Team (formerly SERT)

- Operations, Planning, and Logistics
- Team Leaders and Incident Commanders
- Public Health Assessment and Inspection Teams
- Liaisons
 - State Emergency Operations Center
 - Homeland Security incident Management Group





OFRD - Missions of the Past

2005

 Hurricane Relief for Hurricanes Katrina, Rita, and Wilma

2004

 Hurricane Relief in Florida for Hurricanes Charlie, Frances, Ivan, and Jeanne

2002

 Back fill for pharmacists at National Naval Medical Center in Bethesda, MD

2001

Mass Medication
 Distribution for Anthrax
 Prophylaxis following
 September 11^{th,} 2001





OFRD - Above and Beyond

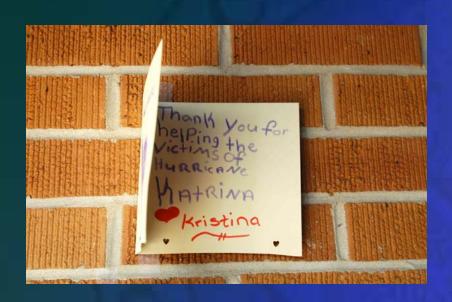




- USPHS pharmacists
 have volunteered to
 serve overseas in
 assisting foreign
 Ministry of Health
 departments to
 establish health care
 systems
 - Thailand (2005)
 - Iraq (2004)
 - Haiti (2004)



Helping those in need



As part of something larger than yourself, you have unique opportunities to make a real difference in people's lives.

Transformation of CC

Goals:

- Increase CC ranks
 - Increase the number of officers by 10 percent, to 6,600 members
- Streamline CC assignment and deployment process
 - Improve response operations and team-oriented deployment process
- Increase CC ability to recruit the best and brightest to defend the nation's public health
 - Change the recruitment process so that it includes stronger personal incentive programs and a better approach for assigning officers

Transformation of CC

- OFRD 4 tiered deployment response team:
- Tier One: Five Rapid Deployment Force teams and ten Incident Regional Coordination Teams (formerly SERTs)
 - expected to report to a point of departure within 12 hours of notification
- Tier Two: Five Applied Public Health Teams and five Mental Health teams
 - expected to report to a point of departure within 36 hours of notification
- Tier Three Every other active duty officer in the Commissioned Corps
 - expected to report to a point of departure within 72 hours of notification
 - deployment on a regular basis, either to augment Tier 1 or Tier 2 teams, or to provide specific requested skills when required
- Tier Four: officers in the Inactive Reserve Corps

Privileges

- Moving expenses are paid by the government
- Commissioned officers may qualify for the G.I. Bill to supplement additional educational pursuits
- Officers may also qualify for housing loans through the Department of Veterans Affairs

Compensation

- Taxable
 - Base Pay
 - Pharmacy Accession Bonus
 - Requires Contract of Service
 - Pharmacy Special Pay
- Non-Taxable
 - Housing Allowance
 - Subsistence

http://www.dod.mil/dfas



Compensation

Please note that
Pharmacist Special Pays
are now in effect!

- Variable Special Pay for Pharmacists
- Board Certification Pay



Compensation

Good News for Recent Graduates!!

The USPHS gives you an entire YEAR from your date of graduation to become licensed.



In the meantime, you get FULLY PAID as a pharmacist!!

Retirement

- After 20 years of active service:
 retired pay = 50% of average base pay during past 36 months
- Non-contributory retirement based on 20-30 year career
- For each additional year of service: retired pay multiplier increases by 2.5% to a maximum of 75% at 30 years of service

Insurance

No-cost healthcare at
Uniformed Services facilities
(for you and your dependents)

no payroll deduction

no deductibles or copays







Insurance

Malpractice insurance is not necessary when practicing in a federal facility

(coverage under the Federal Tort Claims Act)



Privileges

Access to Department of Defense benefits:

- Military bases
- Officer's clubs
- Exchanges
- Guest housing
- Commissaries
- Space-Available travel



Eligibility Criteria

- U.S. citizenship
- Less than 44 years of age
- Graduate of an accredited College or University in United States
- Less than 8 years of active duty in another uniformed service

(waivers <u>may</u> be considered for hard to fill and isolated hardship sites)

Good health

How to Get Started?

- Visit http://www.usphs.gov
- Fill out an online application
- Pursue employment with any of the Commissioned Corps affiliated Agencies
 - http://dcp.psc.gov/VATS/rept_select.htm
 - http://www.usphs.gov/html/other_federal_jobs.html

STUDENT OPPORTUNITIES

Commissioned Officer Student
Training and Extern Program
(COSTEP)

JR COSTEP Program

- Serve for periods ranging from 31 to 120 days
- No obligation to serve in the Commissioned Corps after graduation



 Credit given for JRCOSTEP time for pay and retirement purposes

SR COSTEP Program

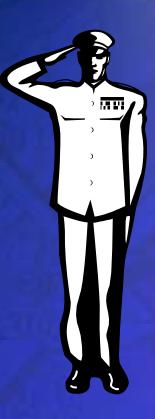
 Assists students financially during their final academic year in return for an agreement to work for the PHS Commissioned Corps after graduation for twice the time sponsored



Assigned to the sponsoring agency upon graduation

COSTEP Benefits

- Basic pay (taxable)
 - Ensign (pay grade O-1) officer
- Allowances (non-taxable)
 - Housing Allowance
 - Subsistence
- Prior service in a Uniformed Service will count towards years of service for pay



Application Acceptance Dates

Junior COSTEP

- 1 June 30 Sept (for positions during the following 1 Jan 30 April)
- 1 Sept 31 Dec (for positions during the following 1 May 31 August)
- 1 Jan 30 April (for positions during the following 1 Sept -31 Dec.)
- Applicants for JRCOSTEP who are currently in the next-tolast year of their professional education may also apply for SRCOSTEP. To apply for both programs, you may submit a single application packet.

Senior COSTEP

- Applications must be postmarked by 31 Dec. for applicant whose final year begins in the fall of the succeeding year
 - Example: 12/31/2006 for students entering their last year of pharmacy school in September 2007



Food and Drug Administration
http://www.fda.gov/cder/Offices/DDI/pharmstudent.htm

Bureau of Prisons

http://www.hhs.gov/pharmacy/bop/index.htm

Indian Health Service

http://www.pharmacy.ihs.gov/

National Institutes of Health

http://www.training.nih.gov/student

Post-Graduate Opportunities

- Indian Health Service Residencies
 http://www.ihs.gov/medicalprograms/pharmacy/resident/resprgm.asp
- National Institutes of Health http://clinicalcenter.nih.gov/phar/resident/
 - Ambulatory Fellowship (2 years)
 - Pharmacokinetics Fellowship (2 slots)
 - Oncology Specialty Residency

Ask any USPHS Pharmacist what we think of our career, and we will tell you that we made the <u>right</u> choice!

You can, too!

PHS Hall of Fame

RADM Fred Paavola
Commander of AZ-1 DMAT

Look where we've "retired" to! CAPT Bill Boyce

Oregon State University Director

CAPT James Minor

Gilead Pharmaceuticals

Gordon Johnston

VP Regulatory Affairs at

GPhA

RADM Richard Bertin

Executive Director of the Board of Pharmaceutical Specialties

CAPT Jerry Phillips

Drug Safety Institute

RADM Jerry Halperin

Food, Drug, and Law Institute, President and CEO

Ensign Lucinda Maine

Mive VP of AACP

Thanks for Your Interest in the USPHS!



How Do I Apply Again???

- Fill out an online application http://www.usphs.gov
- Pharmacy's Best Kept Secret
 http://www.hhs.gov/pharmacy/pdf/secret1.pdf
- Pursue employment with any of the Commissioned Corps affiliated Agencies http://dcp.psc.gov/VATS/rept_select.htm http://www.usphs.gov/html/other_federal_jobs-html





www.USPHS.GOV or 800.279.1605