

Christopher Caler
Student Extern - Summer 2010
Western Carolina University
Phoenix Indian Medical Center
Phoenix Area Indian Health Service

When one thinks of a college internship in Phoenix, one may begin to feel feelings of dread given the intense heat of the area coupled with the season. However, of the two Indian Health Service COSTEP assignments I have now completed, one in Dillingham, AK and the other in Phoenix, AZ, the Phoenix Indian Medical Center (PIMC) was the place to be.

The reason that this service unit is probably the best choice among all COSTEP positions comes from the exposure to a vast variety of tasks, missions, and assignments within the hospital and throughout the state. The program at the hospital is so comprehensive; you barely have enough time to finish one job before moving swiftly to the next. Between hazard assessments, air quality monitoring, accident investigations, hazmat control, inventories, fire drills, briefings, meetings, fit testing, emergency preparedness drills, and maybe a real world emergency or two, almost every day you can expect to be presented with a unique challenge. Field projects carried me to every corner of the state too: Yuma, Chinle, Peach Springs, Salt River, and San Carlos where I found diverse problems and helped implement strategies to mitigate them.



I was able to visit Yuma and assisted in facility inspections of food establishments, casinos, and head start programs for the Cocopah Indian Tribe which all required knowledge from various codes like NFPA, OSHA, or FDA. Our recommendations were then passed along to tribal entities to improve their programs. A lead exposure case involving a child developed unexpectedly, and we cancelled a survey to complete the lead investigation instead. We tested toys, collected soil samples, and ran multiple lead surface tests indoors; however, the source is still being determined. In the evening, I went to help set mosquito traps in order to determine if West Nile Virus was present in the area and later we discovered that indeed it was. Another town that had had vector and disease issues was San Carlos.

Rocky Mountain Spotted Fever had given San Carlos significant trouble in the past, but the threat is ongoing. Outbreaks had hospitalized many children and adults over the last decade especially. Sadly the disease was sometimes fatal as well. To curtail the disease's prevalence, pesticide applications were used around every single home in the community to kill the ticks that carry RMSF. I worked alongside a CDC team, local health department personnel, and other PHS officers to put flea/tick collars on dogs, apply pesticides, and apply tick removal chemicals to animals infested with ticks. Tough work though it was, it was rewarding. Yet another disease always on the radar across the country is rabies.

Salt River is the closest community to PIMC and in addition to the other surveys mentioned already, we worked rabies vaccination clinics, pool inspections, car seat instruction and installation classes, and conducted a fire drill at their health clinic. An updated emergency communication relay system was also discussed, designed, and agreed upon which enhanced their overall emergency preparedness.

Visiting Chinle, with the PIMC emergency management coordinator, we helped control specific scripted events, assessed the town hospital's full scale evacuation, and evaluated their use of the overall incident command system (ICS). We had participated in a state wide tabletop drill a couple weeks before, but it was exciting to see the ICS being used in a full scale drill.

The Havasupai reservation was another incredible part of the state. Located within the northwest section, the Supai tribe had infrastructure within the base of the Grand Canyon itself. Not surprisingly, as one of the seven natural wonders of the world, the GC scenery was breathtaking.



We flew in and out by helicopter to conduct surveys, taught fall prevention to the elderly, and continued to improve the working relationship between PHS/IHS and the tribe.

Establishing and continuously strengthening relationships, like with the Supai, was and is crucial to the overall mission and is an overarching concept found throughout all IHS missions. Helping people in the communities we served, in any way or measure, was worth it. I am honored to have served in the capacity that I did and I would not hesitate to do so again. If you are looking for a place to learn, be challenged, make someone's job a little safer each day, and work with some of the best environmental health and safety has to offer – you need look no further.