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**COSTEP 2008**  
**Bemidji Area IHS**  
**Bemidji, Minnesota**

This was my second experience through the COSTEP program, my first taking place in Sitka, AK. When I came to the Bemidji Area IHS, I assumed that the work performed was going to be very similar to that of Alaska. Although the office environment was comparable, the surveys I performed were quite different. Unfortunately,

the issues in Alaska are more immediate than that of the Bemidji area. Drinking water, indoor plumbing, and household hazardous waste storage are just a few problems that are dealt with on a daily basis in Alaska. However, the issues in the Bemidji Area IHS are just as important but not as transparent. With a greater amount of population served the spread of communicable diseases become an even greater public health concern.

While in Bemidji, I worked individually and in groups to complete surveys on temporary food service operations and Pow Wow grounds; casinos food handling and housekeeping procedures; the health and safety of public buildings; ergonomic work stations; and ventilation turnover rates for healthcare isolation rooms. I also completed 120 respirator fit testing according to the OSHA Standard CFR 1910.134 to ensure healthcare providers would be properly protected and trained to use a respirator when dealing with tuberculosis or pandemic influenza.

With the temporary food vendors and casino kitchens, we assessed or surveyed their facilities to advise on proper food handling procedures and maintain compliance with the 2005 FDA Food Code. The emphasis is to stop or slow environmentally related diseases and injuries. Communicable diseases can spread very fast and without immediate notice at Casino and Pow Wows serving a very large population. Preventative measures are the best defense against the spread of these diseases and the surveys conducted were done to make sure the proper defenses were in place. I enjoyed working with the tribal committees and the casino personnel; they were all very sociable and accommodating to the needs of the surveying process.

The ventilation assessment was conducted to make sure that isolation rooms remain under negative pressure with at least 10 air changes per hour (2003 ASHRAE Healthcare section). Keeping a room at negative pressure allows a tuberculosis patient, for example, to be treated without exposing others.

Respirator fit testing was a major part of my experience while at the Bemidji Area IHS. Hospital or health clinic employees and providers are on the front lines when dealing with communicable diseases and need to have proper infection controls in place. I was



Fellow COSTEP Abby Miller and I conducting fit testing

part of a team that would travel to hospitals and clinics to provide respiratory protection training to ensure proper respirator use and employee protection against communicable diseases. We would use qualitative (the hood) and quantitative (porta-count) methods to ensure that the right respirator was being properly used by the employee or healthcare provider. Fit testing gives the employee or provider confidence that the respirator is protecting them which allows full concentration on the patient.

I very much enjoyed my time in Bemidji, MN. I met some great people and was able to expand my experience within the USPHS/IHS and the environmental health services they provide. I have seen parts of the country, met some exceptional people, and provided services that most careers could not offer. I feel that a career with the USPHS would be a rewarding and dignified profession and I hope to obtain a career within the USPHS after graduation.



Measuring ventilation air flows at the Stockbridge-Munsee Health Clinic.