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What is Unity of Effort?

COL Peter Weina

Unity of Effort is “...coordination and cooperation toward common objectives (even if the participants are not necessarily part of the same command or organization) which is the product of successful unified action” ([JP 1](#)).



COL Peter Weina

Command implies authority and responsibility. “Unity of effort, though, may or may not be perfectly compatible with the responsibility that goes along with unity of command” ([INSS, J. Jones; Unity of Effort Framework Solution Guide; Unity of Effort Framework](#)).

A major goal of WRNMMC leadership is to achieve Unity of Effort with USUHS in multiple clinical and research areas. When some hear of the concept of Unity of Effort, there are naturally several questions that are raised.

- How do we ensure success in an environment where commanders and decision-makers do not have ultimate authority over all the people who will achieve the goals?
- How do we train officers to work in terms of Unity of Effort when the military ethos is primarily based on the Unity of Command?
- How will Unity of Effort be achieved?
- What will Unity of Effort between WRNMMC and USUHS look like?
- How will we, and most especially our patients, be affected?

Some of the answers will be self-apparent and some will be learned along the way. However, WRNMMC is committed to the effort and believes that greater productivity and success can be achieved by Unity of Effort.

“Our Unity of Effort with Uniformed Services University is critical to our success as an

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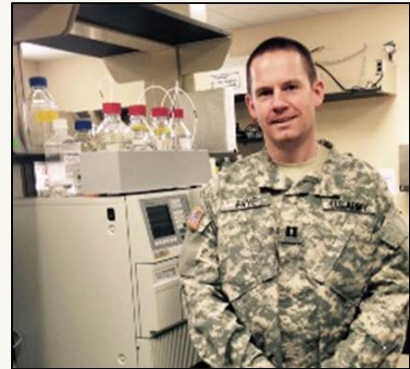
academic, tertiary medical center and integral to our Strategic Plan. The potential of USU/WRNMMC's collaboration with the National Institutes of Health is immense." (BG Clark, the Tower Tribune, March 2015).

Our leaders are marching towards Unity of Effort. It is the future. Let's prepare for it!

Biomedical Research Laboratory

CPT Franz Frye, Acting Chief, smiled when I asked about the Biomedical Research Laboratory and its capabilities. He suggested we take a tour of the facilities. After the tour, I understood why he smiled. He is in charge of a world-class state-of-the-art laboratory.

CPT Frye explained that the BRL has 12,000 square feet of office and laboratory space that houses \$6,000,000 in scientific equipment. There are four full-time research scientists (PhD), several medical laboratory assistants, and (of course) an NCOIC. The laboratory would be the envy of many academic scientists or departments not only because of its size but also its pristine condition, array of analytical equipment, trained staff, and overall ability to support high-tech projects.



CPT Franz Frye

The main purpose of the BRL is to support clinical research at WRNMMC by providing instruments and laboratory method developments to answer clinical questions. However, the BRL is not just for support; it also provides teaching in a variety of areas such as molecular biology and immunology. Additionally, the BRL supports research collaborations with external scientists.



BRL Workshop Students

The BRL has multiple capabilities:

- Immunology
- Gene expression profiles
- DNA sequencing
- Protein assays and proteomics
- High performance liquid chromatography
- Mass spectrometry

These techniques and the related instruments are useful in studying multiple pathologies such as breast cancer, gastroesophageal reflux disease, hepatitis C and other infectious diseases. The BRL findings can be used to support medical hypotheses and advance ideas in the clinical arena.

One upcoming BRL project involves the rapid detection of *Leishmania* parasites. There are over 20 species of *Leishmania*, and their treatment depends upon the stage of disease and the species. Classical identification methods can take up to a week, during which physicians may not know which treatment to provide. Rapid detection and identification of



Leishmania species will facilitate faster diagnosis and more accurate treatment, therefore improving patient care.

CPT Frye says, “Bring us your research questions! We are here to help.”

Farewell CDR Acosta

The Department of Research Programs hosted a farewell luncheon for CDR Ruben Acosta on June 4, 2015. The luncheon was to thank him for his guidance and expertise while serving as Assistant Chief of the Department of Research Programs and to wish him well on his next position where he will serve as a gastroenterologist.

CDR Acosta was presented with a photograph of the WRNMMC Tower Building that was signed by his colleagues. While we are all happy for CDR Acosta, he will definitely be missed. We wish him the best in his new position.



Two Things You Need to Do Before Starting Research

COL Weina, Chief of the Department of Research Programs, encourages all to conduct research. The Department of Research Programs can help you get started and even find funding. However, there are two things you must do before you start research.

1. Go to building 17B (Department of Research Programs), and make an appointment to create a protocol.
2. Do not enroll patients until you get a start letter from COL Weina.

If you remember these two things, your research will start smoothly!

DRP Research Roundtable

Ms. Lisa Thompson, Supervisory Medical Education Specialist of the DRP, introduced the Roundtable and spoke about the Collaborative Institutional Training Initiative (CITI).



Ms. Lisa Thompson

WRNMMC no longer holds a license for CITI. WRNMMC has moved under the Office of the Under Secretary of Defense (Personnel & Readiness) OUSD (P&R), Research Regulatory Oversight Office (R202) which holds the license for CITI. Therefore, you must register under OUSD (P&R) and not WRNMMC.

Those who conduct research at WRNMMC must complete CITI role-based training in their respective roles every three years with a score no less than 80%. If you completed training after July 2013, you do not have to repeat your training until 2016. Also, Ms. Thompson introduced policy guidance from OUSD



(P&R) concerning the requirements for role-based training in human research protections.

If you have any research investigator-related questions regarding CITI, please contact Ms. Thompson instead of the R202 office. She is the POC for CITI at WRNMMC (lisa.p.thompson5.civ@mail.mil). In her absence, Mr. John Fadoju serves as the POC (john.o.fadoju.ctr@mail.mil).

EIRB/IRBNet Update

Mr. Greg Rose, Research Informatician, reported that the EIRB/IRBNet is projected to operate in its present form until the end of September. However, upcoming events may affect its operation.



Mr. Greg Rose

The current rebid of the new five-year contract with updated requirements will be resolved soon. The DHA (Department of Health Agency) Program Office hopes to award a new contract by 30JUL2015. The EIRB (Electronic Institutional Review Board) will be replaced by Enterprise Research Management and Oversight System (ERMOS). Whichever company wins the bid will have until 01OCT2015 to train customers, transfer existing data, and have authority to operate approved.

The DHA Program Office is working to avoid any disruptions in service. The Program Office set up an additional SharePoint copy of IRBNet contents which it extracted June 12, 2015. The Program Office will be working with leadership about how this will be accessed. However, this SharePoint site is not funded for regular updates.

Note that the DMRN (Defense Medical Research Network) portal with landing page and access link to EIRB/IRBNet moved recently to a new portal link (www.health.mil/dmrn). Please use the new link going forward.

Town Hall Meeting in August (R2O2)

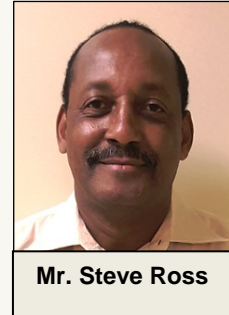
A Town Hall meeting will be held on August 25, 2015 from 1:00 pm to 2:00 pm in the Memorial Auditorium. CAPT John Eckert, Acting Program Director for the Personnel and Readiness Office (Undersecretary of Defense) will present information about the mission of the Research Regulatory Oversight Office (R2O2). Additionally, CAPT Eckert will meet with investigators to foster interaction between R2O2, WRNMMC, and USUHS. If you have questions for the Town Hall meeting, please submit them by email to Ms. Thompson (lisa.p.thompson5.civ@mail.mil).



Department of Research Programs Staff

Mr. Steven Ross, Grants Manager of the DRP (steven.d.ross1.civ@mail.mil), assists in the preparation and processing of funding agreements. He manages the funds that are used to carry out grant/contract goals. One of his duties is to ensure that funds are used to achieve protocol statements in grants and CRADA (collaborative research and development agreements).

Researchers should get to know Mr. Ross because he is the individual who processes agreements for protocols. He is valuable indeed!



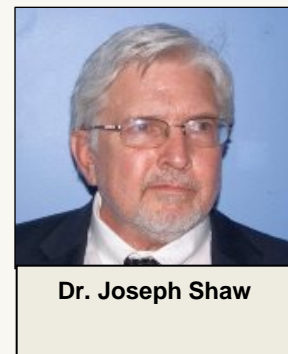
Save the Dates

1. Town Hall Meeting, 25AUG2015 from 1300 to 1400 in the Memorial Auditorium, Building 2
2. DRP Research Roundtable, America Building, 2nd floor, Desert Conference Room, Room 2301
 - Tuesday, 22SEP2015, 1200-1300
 - Tuesday, 20OCT2015, 1200-1300
 - Tuesday, 17NOV2015, 1200-1300
 - Tuesday, 22DEC2015, 1200 -1300

About The Editor

Dr. Joseph J. Shaw (joseph.j.shaw19.ctr@mail.mil) recently joined the staff of the Department of Research Programs as Senior Editor. Dr. Shaw is a former associate professor at Auburn University, AL and a principal scientist in biotechnology (Lexicon Pharmaceuticals). His teaching and research has included botany, microbiology, molecular biology, and genomics.

Dr. Shaw is an Editor in the Life Sciences accredited by the Council of Science Editors. Over the past half-dozen years he has been a scientific/medical writer and editor.



MAJ Walter Reed

In 1901, MAJ Walter Reed, an US Army physician, and his team confirmed the hypothesis that yellow fever is transmitted by mosquitoes. Knowledge of this fact guided development of measures (such as swamp draining and general avoidance of mosquito bites) to prevent the spread of the disease. Successful control of the disease allowed completion of the Panama Canal and paved the way towards understanding many other diseases.



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