



History of the Public Health Service (PHS)



In 1798, Congress established the U.S. Marine Hospital Service (MHS), which was the predecessor to today's U.S. Public Health Service (USPHS). Its original mission was to provide health care to sick and injured merchant seamen. In 1870, the MHS was reorganized as a national hospital system with centralized administration under a medical officer; the U.S. Surgeon General. Today, the mission of the USPHS is to provide highly trained and mobile health professionals who carry out programs to promote the health of the Nation; understand and prevent disease and injury; assure safe and effective drugs and medical devices; deliver health services to Federal beneficiaries; and furnish health expertise in time of war or other national or international emergencies.

In 1889 legislation formalized the uniformed services component of the MHS into the Commissioned Corps. As the services of the MHS broadened, in 1902, congress changed the name of the service to the Public Health and Marine Hospital Service, and again in 1912 to just the Public Health Service. One of the seven uniformed services, the USPHS is staffed by approximately 6,000 uniquely expert and diverse public health professionals who can respond to both the current and long-term health needs of the Nation. These specialized professionals are known as Commissioned Corps Officers. Today, the USPHS is a component of the U.S. Department of Health and Human Services (HHS).

The USPHS is also composed of eight agencies. They are the Agency for Health Care Policy and Research (AHCPR), Agency for Toxic Substances and Disease Registry (ATSDR), 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), and Substances Abuse and Mental Health Services Administration (SAMHSA). These agencies each have unique missions, but generally fulfill one or more of the following core responsibilities:

- Biomedical, behavioral and health services research
- Food and drug safety
- Health education
- Epidemiological surveillance and vital health statistics
- Health policy and reform
- International efforts
- Health care delivery and assessment
- Allocation of health care resources and expansion