

IMPACT

MESSAGE FROM THE PRESIDENT

Now that the Navigant consulting group has come and gone, our focus has turned to developing the right plan for the institution based on their recommendations for reducing expenses and generating new revenue.



UTMB President
John D. Stobo

I fully appreciate that the Navigant process wasn't easy. In addition to the extra effort it took on the part of so many to provide information

the consultants needed in order to evaluate our operations, the fact that we brought the firm in was inherently disquieting. That said, I am firmly convinced it was the right thing to do.

We have an ambitious plan for the future, one that depends upon our continued ability to fund growth (facilities and equipment) and service excellence (people and programs). Navigant personnel reaffirmed what we must do to remain good stewards of taxpayer dollars and to generate the resources needed to invest in UTMB's future.

This is different from 1998–99, when our primary focus was on addressing an \$80 million projected shortfall and keeping our doors open. Today, we are looking to build on programs of excellence and ensure that UTMB is in a position to make a difference in the lives of everyone we serve in the years to come.

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You Count participation, overall positive results increase

Employee participation was up this year in the annual You Count! survey, increasing to 68 percent from the 44 percent participation rate in fiscal year 2005. A higher participation rate gives a more accurate picture of how UTMB employees feel about working here.

More good news is that employee satisfaction increased as well—to 67 percent, up from 66 percent in fiscal year 2005.

“Organizations with highly favorable employee attitudes and high levels of employee commitment are better able to withstand economic and other challenges,” said Kathy Shingleton, chief human resources officer. “With UTMB's continued increase in employee satisfaction since 2002, we are better positioned to face challenges, make necessary adjustments and grow stronger toward achieving long-term success.”

Survey responses also remained positive and increased in five of seven major question categories—performance orientation, leadership, teamwork, improvement, employee satisfaction index and employee engagement index. A high employee engagement index is especially important as an indicator of employee commitment to stay at UTMB.

The two remaining categories—professionalism and service orientation—had no change in response from last year.

Two exceptions to the overall positive survey results are: perception that supervisors treat employees with respect, which has remained unchanged since 2005; and managing poor performance. Leadership will work toward improving both of these areas.

Overall, the majority of survey items at UTMB are above the norm for the health care industry. And according to Watson



Counting on the cruise

Celeste Ybarra, a licensed vocational nurse with the University Hospitals and Clinics obstetrics and gynecology clinic, is pictured with UTMB's version of a prize patrol. Ybarra was the lucky winner of the You Count! survey cruise for two. She was on her way to the Nurses Week lunch while the good news was on its way to her department. On hand to present the cruise to Ybarra were David Marshall, chief nursing officer; Kathy Shingleton, chief human resources officer; and Gino Marchi, owner of Marchi Travel who helped coordinate the cruise giveaway. Ybarra's coworkers and nurse manager were also there to congratulate her. As incentive to increase participation, employees who completed the You Count! survey online were eligible for the drawing. The incentive worked, with 8,451 UTMB employees voicing their opinions. That's 68 percent of UTMB's workforce, the highest participation rate yet in the You Count! employee survey.

Wyatt, the third-party administrator of the You Count! survey, UTMB has improved in the following survey areas:

- Perceptions of department management
- Ratings of supervisory performance, especially in the areas of holding employees accountable, coaching, and

communicating goals and assignments.

- Teamwork both within and across work areas

UTMB leadership continues to monitor and evaluate the results of the You Count! survey to improve the UTMB work experience.

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Submissions

We welcome and will consider any submissions for *Impact*. Items that are accepted are subject to editing for style and length. Send your items for *Impact* to the address above and we will do our best to accommodate you. Questions? Call us and someone will be glad to help you.

Fraud & Abuse Hotline

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Your guide to honesty!

- To report suspected waste, abuse and fraud.
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Area couple establishes family resource center, contributes to patient simulation training

By J. Christian Messa

A local couple has established a family resource center at the UTMB Children's Hospital and has contributed to the advancement of patient simulation training for the academic health center's medical students.

Lee and Jim Reinhartsen created the Debbie Reinhartsen Sheffield Family Resource Center and the Kenneth James Reinhartsen Patient Simulation Room in memory of their daughter and son, respectively. The family resource center will serve as a place where the families of young patients can relax to escape the stress related to having loved ones in the hospital. While there, family members can use a health consumer library available in English and Spanish to help them better understand the diseases or injuries related to their relatives' visit to UTMB. Such knowledge can be extremely helpful in the families' efforts to make informed decisions regarding health care services. The Reinhartsens' contribution will also expand the range of toys available to young patients, providing them the diversions they need to have fun and temporarily forget about their health conditions.

The second part of the contribution, the Reinhartsen Patient Simulation Room, will enhance the use of patient simulators and standardized patients at UTMB to teach medical students how to provide compassionate care, all within a high-realism, low-risk medical environment. A leader in patient simulation training, the academic health center is home to the Standardized Patient Program, which features specially trained actors portraying patients with various illnesses for students to diagnose. The program—one of the first of its kind in the United States when it was established in 1971—permits UTMB students to interact with "patients" in their first weeks of training.

Since the actors in the Standardized Patient Program cannot duplicate the physical symptoms associated with illnesses they pretend to have, students rely on technologically advanced virtual-patient manikins to



Jim and Lee Reinhartsen

exhibit those symptoms. These and other simulated patient encounters provide numerous opportunities for UTMB's medical students to hone their assessment and clinical decision-making skills earlier in their academic careers.

The Reinhartsens said they decided to dedicate the family resource center in the name of their daughter, Debbie, since she had been passionate about helping children. They said they chose to name the patient simulation room after their son, Kenneth, as he was known for helping others improve themselves—the same underlying goal of the room.

"Anyone who contributes to UTMB can make a difference in the health and well being of humankind," Jim Reinhartsen said. "We hope that other people will consider investing in the health of those less fortunate than most."

The Reinhartsens' contribution supports the university's Timeless Values, Pioneering Solutions Campaign. This five-year, \$250 million fund-raising initiative will enhance areas of excellence in teaching the art and science of health care; infectious diseases, biodefense and vaccine development; health care access and telehealth; and longevity, chronic diseases and neurological recovery. Jim Reinhartsen is vice chair of the Galveston Regional Committee of the

Dr. Lawrence R. Stanberry, chair of UTMB's Department of Pediatrics, said the Debbie Reinhartsen Sheffield Family Resource Center will be an oasis for anxious families with loved ones who are receiving care at Children's Hospital. "The Reinhartsens' generous contribution will positively impact the lives of many young patients, along with their families, for many years to come," said Stanberry, who also directs the university's Sealy Center for Vaccine Development and holds the John Sealy Distinguished Chair in Pediatrics. "Furthermore, the center will help family members feel more comfortable taking active roles in their children's' health."

Dr. Valerie M. Parisi, dean of the UTMB School of Medicine, thanked the Reinhartsens for supporting the institution's educational mission. "Lee and Jim Reinhartsen are helping us ensure that we have the infrastructure needed to prepare our students for careers as competent, caring physicians," said Parisi, who also serves as UTMB's chief academic officer and vice president for academic program administration and services. "With this patient simulation room, the students can put their classroom knowledge to use in realistic situations and thereby become more comfortable at communicating with and diagnosing their future patients."

Jim Reinhartsen serves as president of the Bay Area Houston Economic Partnership. The civic leader played a major role in the organization's successes, which included establishing a regional, and later national, coalition to support NASA and the aerospace industry, and starting a successful plan to diversify the economic character of the Clear Lake region. Before joining BAHEP, Reinhartsen was part of the Grumman Aerospace management team and established a manufacturing relationship with energy companies. He serves on the boards of numerous organizations, including Wings Over Houston, the Kenneth James Reinhartsen Memorial Scholarship Fund, the Greater Houston Convention and Visitors Bureau, Space Center Houston and Communities in Schools, a nonprofit organization dedicated to encouraging youth to remain in school.

Lee and Jim Reinhartsen are members of the President's Cabinet, an organization of Houston-Galveston-area community and business leaders, UTMB faculty and staff, and alumni who provide financial resources to help advance the mission of the academic health center.



Work School Program graduates first biotech student through Galveston College partnership

Patrick Newman (center), a UTMB laboratory technician, is the first graduate of the biotech track in the UTMB Work School Program. The biotech program is a joint venture with Galveston College. Newman was enrolled through the Work School Program but received an associate degree from Galveston College. Next, he will begin studies toward a bachelor's degree.

The Work School Program recently graduated its current class. To date, more than 800 employees have participated in the program, which provides money to student employees for payment of in-state tuition, fees and books, as well as stipends for participants in clinical rotations. Financial support through stipends and release time from work allow employees to maintain their full salary while attending classes and doing their clinical work. In return, participants agree to work at UTMB for a specified period following graduation. The length of the work contract depends on how long it takes the participant to complete the degree plan.

The UTMB Work School Program began in 1988 with funding through a grant from the Sealy & Smith Foundation. Initially designed to support UTMB employees interested in pursuing associate degrees in nursing (ADN) at Galveston College, the program has since expanded to support employees in vocational nursing and bachelor's, master's and doctoral degree programs in nursing and allied health professions in colleges across the state.

PRESIDENT'S MESSAGE from Page 1

This won't be easy. The Navigant group has recommended that we set our sights on a \$140 million margin. In other words, we must be able to fully fund depreciation (\$50 million per year) and medical inflation (\$50 million) on a sustainable basis. We must also generate an additional \$40 million per year to invest in our programs of excellence. And we must fund all of this from operations (revenue minus expenses).

To this end, the Navigant group evaluated every area of the institution (hospitals and clinics, the schools, Correctional Managed Care and institutional support services). The consultants didn't tell us anything we don't already know, although it wasn't easy to hear that we have serious productivity issues. But the objective benchmarks they provided confirmed the areas we need to focus on. They developed a road map for us to consider. And they told us we need to pick up the pace in order to achieve our \$140 million target over the next three years.

It's important to note that we have no intention of blindly following Navigant's recommendations. We won't implement any recommendation that runs counter to our mission. There are also a number of recommendations that require further clarification from Navigant before we can evaluate them in a meaningful way. But the majority of them merit our serious consideration.

I have created a Strategic Executive Council (SEC) consisting of the major entity leaders (Drs. Valerie Parisi, Karen Sexton, Ben Raimer and Dean Kinsey), a clinical chair (Dr. Garland Anderson) and a basic sciences chair (Dr. Jim Halpert).

Stay in the loop

Keep up to date on the latest facts regarding the Financial Improvement Plan on web site at www.utmb.edu/president/FIP

Over the next three years, this committee will integrate all major cost-cutting and revenue-enhancement strategies, resolve conflicts, allocate resources and provide strategic direction for UTMB.

I have also asked each entity leader to confer with his or her colleagues, think outside the box and present an action plan based on Navigant's recommendations to the SEC by June 30. The committee expects to have made 75 percent of its decisions by the start of the new fiscal year. No entity plan or strategy will be implemented until the SEC has carefully evaluated its potential impact on the institution as a whole.

The first year of our three-year strategy will focus primarily on achieving cost reductions. This does not mean reducing the level of service. It means "re-engineering" how we do things, looking for ways to do them differently—and better. Given the fact that salaries and benefits account for 70 percent of our expenses, there's no doubt that faculty and staff positions will be affected. The Navigant group has proposed a target in the neighborhood of 1,300 full-time equivalents (or FTEs). However, until the SEC has evaluated the entity leaders' plans, there's no way to say precisely how many positions will be affected or in which areas.

What we do know is that there will be no across-the-board cuts or freezes, and that

we will be able to achieve some of this reduction through unfilled positions, as well as routine turnover and retirements. I know that the likelihood of a reduction in force has been the cause of greatest concern among the campus community and realize the months to come are going to be difficult for everybody. For this reason, we have pledged to make and implement personnel decisions as quickly, compassionately and fully as possible so no one will be left worrying and wondering for long. Our plan is to notify the majority of faculty and staff whose positions will be affected no later than Sept. 1.

It may seem contradictory to refer to this three-year plan as a growth strategy when we're anticipating a reduction in force. But the simple fact is that if we don't continue to expand our academic and clinical enterprises, our margin will once again shrink and we'll be facing the very same financial challenge we face today.

Years two and three will focus almost exclusively on expanding our research and clinical enterprises. With \$104 million in NIH-funded grants, UTMB ranks second among University of Texas System medical schools and 39th in the nation in terms of federal research funding. Currently, research grants account for 12 percent of our \$1.4 billion budget. We firmly believe that the extraordinary science taking place at UTMB positions us to double that percentage in the years to come.

We're also committed to increasing the number of commercially insured patients we see and treat. To do so, we must expand our service area and compete effectively off the island, which is the reason for UTMB's Specialty Care Center at

Victory Lakes. We must also improve our inpatient facilities and hope to begin construction of a specialty care tower on the campus in 2007. Finally, we must address our service and access issues. Until we do, we won't be able to offer the patient-oriented service all of our patients expect and deserve. Drs. Parisi and Kinsey are leading a comprehensive strategic planning process focused on the clinical enterprise and expect to have recommendations to the SEC in August.

Some have asked me why, if we've been able to balance the budget year after year, we're subjecting ourselves to such a difficult and painful undertaking. It is certainly true that we have become adept at addressing financial challenges whenever they arise—challenges such as hurricane-related losses, cuts in state appropriations and shrinking reimbursements for clinical services.

However, in order to fulfill the vision we have for this great institution and the people we serve, we must have a financial foundation we can depend upon from year to year—one that will enable us to recruit and retain outstanding faculty and staff, and provide them with the facilities and resources they need to flourish.

Our vision is worthy, but getting there won't be easy. It will require us to make difficult decisions, work smarter, hold ourselves to a higher standard of accountability than ever before, keep our eyes on the horizon and remain committed to an institution that holds a very special place in Texas medicine. I have faith that together we will succeed.

Medical degrees awarded to 194 new graduates

By Jennifer Reynolds-Sanchez

UTMB's School of Medicine awarded medical degrees to 194 new physicians during the 116th commencement on June 3.

U.S. Surgeon General Richard H. Carmona addressed the class. Carmona

was appointed by President Bush as the 17th Surgeon General, the nation's chief health educator, in 2002.

Born in New York City, Carmona spent much of his childhood living in poverty. He dropped out of high school and enlisted in the U.S. Army in 1967. While enlisted he received his Army General Equivalency Diploma and joined the Army's Special Forces, ultimately

"I know what it is to walk in the shoes of the poor. I have tried to target these populations and give them a voice and I ask you to do the same."

U.S. Surgeon General
Richard Carmona

becoming a combat-decorated Vietnam veteran. He later received the prestigious gold-headed cane as the top graduate in his class at the University of California, San Francisco, School of Medicine in 1979.

He told the class that by accepting their medical degrees they were creating a sacred trust with their patients and had a responsibility to promote health in their communities.

"I know what it is to walk in the shoes of the poor," he said. "[As the surgeon general] I have tried to target these populations and give them a voice and I ask you to do the same."

The commencement procession was led by members of the UTMB faculty chosen by Dr. Valerie Parisi, dean of the School of Medicine, Dr. Lauree Thomas, associate dean of student affairs and admissions, and the graduating class. Parisi joined UTMB in the fall of 2004 and is one of a handful of female deans of medicine in the nation.



From left to right, UTMB President John D. Stobo, Professor of Family Medicine Dr. Alice O'Donnell, U.S. Surgeon General Richard H. Carmona and Dean of Medicine Dr. Valerie Parisi visit before the School of Medicine commencement ceremony.

UTMB President John D. Stobo presided over the ceremony and Justin Boatsman was selected by his classmates to deliver the class address.

Boatsman also received the William N. and Ida Zinn Alpha Omega Alpha Award Scholarship. William N. Zinn of Galveston established the scholarship fund in 1955. The purpose of the endowment is to provide an annual grant to the graduating student in the School of Medicine with the highest cumulative grade point average at the end of four years.

Brianna Reneé Swinke, senior class president, announced the winner of the Gold-Headed Cane Award, the highest honor awarded to a graduating medical student. Matthew Dacso was chosen by his classmates as the student who best exemplified the ultimate in patient care and received the 2006 Gold-Headed Cane award.

The cane is passed down to a new recipient each year during commencement ceremonies. While the actual cane is displayed at UTMB's Moody Medical Library, a desktop replica is presented to

the winner. The identity of the recipient is a closely guarded secret until the commencement ceremony. Dacso's name is engraved in gold and attached to the cane.

Just being nominated for the award by the student body is a high honor, and joining Dasco as nominees for the award this year were Laura C. McClendon, Kristen Lynn Solana Walkinshaw, David Yung Ming and David Michael Rider.

The fourth-year students also selected four School of Medicine faculty members to conduct the traditional hooding ceremony, which takes place after each graduate receives his or her degree. The hood is the most striking feature of the academic regalia. Its shape, size and colors reflect the degree the graduate has earned and the conferring institution. Being chosen as a "hooder" is the highest honor bestowed upon a faculty member by a graduating class. This year's honors went to Dr. Robert E. Beach, Osler Scholar, professor of internal and family medicine and assistant dean for educational affairs; Dr. James E. Blankenship, Ashbel Smith Professor of Neuroscience and Cell Biology; Dr. Bernard M. Karnath, associ-

Five physicians honored with Ashbel Smith Distinguished Alumnus Award

UTMB presented the Ashbel Smith Distinguished Alumnus Award to five exemplary Texas physicians at the School of Medicine graduation ceremony.

The honorees include Drs. B. Henry Estess Jr., of Dallas; T. David Greer of Henrietta; Frederick Parker Gregg and Bob Stout, both of Houston; and Harmon W. Kelley, of San Antonio.

"These men exemplify the best of the medical profession," said UTMB President John D. Stobo. "Each of these physicians is committed to serving their patients, their profession and their communities."

"We are proud to have them in our UTMB family," Stobo said. "Individually and as a group they represent a true model for the physicians we are training today."

The Ashbel Smith Distinguished Alumnus Award is the highest alumni honor bestowed by the university's School of Medicine alumni association. The award recognizes outstanding service to the medical profession and to humanity. It honors the memory of Dr. Ashbel Smith, a prominent figure in Texas medicine, politics and education. Smith was the driving force behind establishing the University of Texas at Austin in 1881, and a medical department that would later be known as UTMB in Galveston in 1891.

ate professor of internal medicine; and Dr. Brian Miller, associate professor of neuroscience and cell biology.

The graduating class also named Beach the winner of the James W. Powers Memorial Award for his extraordinary contributions toward helping these physicians practice both the art and the science of medicine.

Beach was also chosen by the class to administer the Physician's Oath after the degrees were conferred.

COMMENCEMENT AWARDS

**The William N. and Ida Zinn Alpha
Omega Alpha Award**
Justin Edward Boatsman

**The James W. Powers Memorial
Award**

Robert E. Beach, M.D.
*Paul R. Stalnaker, M.D. Distinguished
Professor of Internal Medicine
Director, Division of Nephrology and
Hypertension
Assistant Dean for Educational Development
Osler Scholar*

2006 Gold-Headed Cane nominees

Matthew Michael Dacso, *2006 recipient*
Laura C. McClendon
David Yung Ming
David Michael Rider
Kristen Lynn Solana Walkinshaw

**American Academy of Neurology
Medical Student Prize**

for Excellence in Neurology
Richard Seawell Clemmons

**AMWA's Glasgow-Rubin
Achievement Citations**

Laura Jane Boeck
Kristin Leigh Casey
Emily Kim Fridlington
Julie Lynn Fridlington
Mira Tawfik Keddis
Daun Johnson Milligan
Katharine Ann Morton
Jennifer Lynn Pike
Hsin-Yi Amy Tang

Herman A. Barnett Memorial Awards

Benjamin Allen Arnold
Carolyn Ann Cushing
Spogmai Komak
Sarah Shabot Muslin
Ruby Navarro Rubio
Terrell Ann Singleton

**Truman Graves Blocker, Jr.
Scholars Awards**

Luke Brewton
Monica Anne McArthur
Julie Danielle Ross
Bradley Wayne Schroeder

Johanna Blumel Memorial Scholarship
Mira Tawfik Keddis

Isabella H. Brackenridge Scholarships
Mira Tawfik Keddis

George T. Bryan Scholarship Award
Brianna Renee Swinke

**John R. Calverley, M.D.
Award for Excellence in Neurology**
Iris Sofia Wingrove



*Brianna Renee
Swinke, senior class
president, right,
presented Matthew
Dacso with the
2006 Gold-Headed
Cane award.*

**Center for Tropical Diseases Medical
Student Award**
Roxana Narat

Dean's Award for Research Excellence
Michael Wayne Michell

**Division of Emergency Medicine
Student Award**
Ira Bickham Wood III

**Distinguished Student Award in
Pediatrics**
Carla Nicole DeJohn

**Claire Donovan Medical Education
Scholarship**
Roxana Narat

**The Donald Duncan Memorial
Scholarship in Anatomy**
Shane Mohammad Pahlavan

**Hamilton Ford Award for Psychiatry
in Medicine**
Win Yee Tcheung

**Thomas W. Freese Memorial Award
for Excellence in Dermatology**
Julie Lynn Fridlington

**Hambrock-McGanity Awards in
Obstetrics and Gynecology**
Justin Edward Boatsman, *First Place*
Scott Edward Hecox, *Second Place*
Emily H. Haas Garmon, *Third Place*

Tonya Johnson Memorial Award
Stephanie Marie Stevenson Chandler

Joseph B. Kass Award for Research
Joslyn Nicole Witherspoon

**Mavis P. Kelsey, M.D., Excellence in
Medicine Award**
David Yung Ming
Mavis P. Kelsey Scholar

**Edward J. and Ellie Weisiger Lefebvre,
Sr., Prize in Geriatric Medicine**
Alvaro Gerardo Moreira

George Edward Longshie Scholarship
Scott Edward Hecox

William L. Marr Award in Medicine
David Yung Ming

**The John P. McGovern Medical
Student Scholarship Awards in
Oslerian Medicine**
Carla Nicole DeJohn
David Yung Ming
Stephen Lawrence Ratcliff
David Michael Rider
Kristen Lynn Solana Walkinshaw

Merck Manual Awards
Jim F. Byrd Jr.
Mira Tawfik Keddis
Stephen Lawrence Ratcliff
David Michael Rider

**William Todd Midgett, M.D., Award for
Superior Clinical Practice**
David Yung Ming,
William Todd Midgett Scholar

**William H. Nash, M.D. Endowed
Award in Obstetrics and Gynecology**
Rebecca Jane Stone

**W. D. and Laura Nell Nicholson
Scholarship Award**
David Michael Rider

**Marcel Patterson Prize in
Gastroenterology**
Steven Jay Frachtman
Adam Scott Wood

**Nicholas J. Pisacano, M.D.
Memorial Foundation Award**
David Michael Rider

**The Edward Randall
Medals for Academic Excellence**
Lee Reinhold Droemer
Mark Walter Imig
Ankur Kishor Mehta
Julie Danielle Ross
Kristen Lynn Solana Walkinshaw
Hsin-Yi Amy Tang

**Edgar B. Smith
Endowed Scholarship in Dermatology**
Emily Kim Fridlington

**Society for Academic Emergency
Medicine Award**
Rosalyn Nicole Reades

**The Joseph H. Stjepceovich
Endowed Scholarship**
Spogmai Komak

**The L. Clarke Stout Jr.
Award for Excellence in Pathology**
Norris John Nolan, III

**Texas Chapter of the American
College of Emergency Physicians
Award**
Andrew James French

**The John "Jack" Wallace, M.D. Prize
in Cardiology**
Sheldon Ygnacio Freeberg

**Bennie O. White, M.D., and
Irene C. White Scholarship**
Josephine Escasa Watson

Alpha Omega Alpha
Scott Michael Allen
Thomas Daniel Black
Justin Edward Boatsman*
Laura Jane Boeck

**Inducted as AOA member in their junior year.*

See SOM AWARDS on Page 8

YOUR BENEFITS

Benefits Service Center

Effective July 1, employees no longer need to come to the Benefits Service Center for Annual Enrollment assistance. All services will be provided through one of the following methods:

- A web site dedicated to Annual Enrollment will be available at www.utmb.edu/benefits/ae. This website will also include a PowerPoint and audio benefits presentation covering plan changes for fiscal year 2007.
- UT Touch has been improved to provide easier access to your benefits plans for enrollments, changes and Evidence of Insurability (EOI) at <https://utdirect.utexas.edu/nlogon/sgwww/UTTOUCH>.
- A computer lab on the second floor of the Administration Building will be available 8 a.m.–5 p.m. Monday through Friday during the Annual Enrollment period. Trained personnel will be available to assist you with your online enrollments and changes.
- The Employee Benefits Call Center will be open to handle your Annual Enrollment questions from 8 a.m.–5 p.m. Monday – Friday at (409) 772-2630.

More about UT FLEX

Did you know that pre-tax flex dollars can be used to purchase over-the-counter items as well as prescriptions? Among the over-the-counter items eligible for the UT Flex program are products related to allergy and sinus medications, baby care, contact lenses, cough and cold medicines, diabetes care, digestion, eye and ear care, family planning, select feminine care, first aid, foot care, health monitors and devices, incontinence, medical equipment, treatment of motion sickness and nausea, oral care, pain and fever reducers, skin care, sleep and snoring aids, smoking cessation products, and supports and braces.

Now is the time to evaluate and estimate your out-of-pocket expenses for the upcoming fiscal year. To assist you in estimating your annual out-of-pocket costs, visit the Savings Calculator online at www.payflex.com/utflex/.

If you plan to participate in UT Flex, you must re-enroll during the annual enrollment period, even if you participated this fiscal year. Furthermore, you will need to re-elect the Flex Convenience Card and a new one will be mailed to you by the end of August.

Remember, money deposited in your UT Flex account is non-refundable. Be sure to use the calculator to estimate your expenses for the year and how much you should set aside. Any unused dollars not spent by November 15 will not carry over to the next fiscal year, but will be forfeited and become non-reimbursable.

Annual enrollment is here and now is the time to make changes to your group insurance benefits for the upcoming fiscal year. The annual enrollment period begins July 1 and continues through July 31.

For most UTMB employees and retirees, there will be no significant changes to this year's plans, other than a comparatively small rate increase of 5.5 percent for UT Select, the available PPO plan. Many UTMB employees and retirees who live outside Galveston County will again have an HMO option, but the rates for the HMO plan have increased significantly, and for the first time, there will be an out-of-pocket charge for employee-only coverage as part of the HMO plan.

Please take a few moments to read this overview of your employee benefits. Watch for a newsletter from UT System's Employee Group Insurance (EGI) office and an email or letter containing information about your benefits options and personal identification number (PIN). Both will contain important information on your benefits for the upcoming fiscal year.

HEALTH PLANS

UT Select PPO

- Employee out-of-pocket cost for dependent coverage will increase an average of 5.5 percent.
- No changes in plan co-payments, deductibles or co-insurance.
- Transitional benefits available for members currently receiving treatment for conditions such as pregnancy (third trimester), cancer, heart failure, diabetes, physical therapy, allergy treatments, organ transplant, and behavioral health care, the Transitional Care form is available at www.utsystem.edu/egi. Mailing instructions are on the form.

HMO Blue

- Employee out-of-pocket cost for employee only and dependent coverages will increase by an average of 18–34 percent.
- Participants MUST RE-ENROLL in HMO Blue if they choose to remain

MEDICAL PLAN COST INFORMATION

MONTHLY COSTS FOR FULL-TIME EMPLOYEES

UT Select (Blue Cross/Blue Shield)	Employee Only	Employee/Spouse	Employee/Child	Employee/Family
YOUR out-of-pocket premium costs	\$0	\$149.87	\$156.75	\$295.15
<i>UTMB contribution through premium share</i>	\$348.35	\$530.82	\$465.09	\$648.65

HMO Blue for Houston area	Employee Only	Employee/Spouse	Employee/Child	Employee/Family
YOUR out-of-pocket premium costs	\$40.99	\$249.25	\$250.04	\$444.14
<i>UTMB contribution through premium share</i>	\$392.36	\$598.03	\$523.94	\$730.84

MONTHLY COSTS FOR PART-TIME EMPLOYEES

UT Select (Blue Cross/Blue Shield)	Employee Only	Employee/Spouse	Employee/Child	Employee/Family
YOUR out-of-pocket premium costs	174.17	415.28	\$389.29	\$619.47
<i>UTMB contribution through premium share</i>	174.18	265.41	\$232.55	\$324.33

HMO Blue for Houston area	Employee Only	Employee/Spouse	Employee/Child	Employee/Family
YOUR out-of-pocket premium costs	\$237.17	\$548.26	\$512.01	\$809.56
<i>UTMB contribution through premium share</i>	\$196.18	\$299.02	\$261.97	\$365.42

OTHER PLAN OPTIONS (MONTHLY COSTS FOR FULL-TIME EMPLOYEES)

	Employee Only	Employee/Spouse	Employee/Child	Employee/Family
Delta Dental	\$26.41	\$50.14	\$55.27	\$78.59
Assurance Dental HMO	\$10.05	\$19.10	\$21.11	\$30.15
Superior Vision	\$7.22	\$11.20	\$11.46	\$18.48

in the plan. Failure to re-enroll will result in an automatic default to UT Select.

- HMO Blue will no longer be offered in the UT System after fiscal year 2007.

DENTAL PLANS

UT Dental Select (Delta Dental)

- No increase in premiums
 - No change in plan design
- Assurant Dental**
- Heritage Plan will replace the existing

network, establishing a new set of providers

- The \$5 co-payment for an office visit will be waived
- There will be minimal premium changes. Employee only coverage will see a slight decrease while dependent coverage has a slight increase.

UT FLEX

- The grace period has been extended for two and a half months (until Nov. 15) for employees to incur eligible medical expenses. Claims for reim-

bursment from fiscal year 2006 must be filed by Nov. 30.

- You MUST RE-ENROLL for UT Flex during this annual enrollment period if you want to participate for fiscal year 2007, as well as re-select the Flex Convenience Card.
- UT Flex participants will receive new Flex Convenience Cards for fiscal year 2007.

- In order to determine an estimated amount of your UT Flex contributions for fiscal year 2007, use tools such as Savings Calculator and Tax

Reminders

- By now, you should have received a newsletter and a PIN letter (including current coverages and annual enrollment booklet). After you make your selections, watch for your confirmation notice.
- A PowerPoint and audio benefits presentation concerning plan changes for fiscal year 2007 will be available online through Employee Benefits Services at www.utmb.edu/benefits/ae.
- Re-enrollment in UT Flex is required for each year you want to participate. Also, this year you must re-elect the Flex Convenience Card, if you wish to utilize the convenient Flex option.
- The UT Flex grace period has been extended until November 15 for you to incur eligible medical expenses. Claims for reimbursement from Fiscal Year 2006 must be filed by Nov. 30, 2006.
- Evidence of Insurability will be accepted online July 1–July 31 on UT Touch, at <https://utdirect.utexas.edu/nlogon/sgwww/UTTOUCH> or through Employee Benefits Services at www.utmb.edu/benefits/ae.
- Your benefits enrollment and/or changes must be completed by July 31.
- Print a copy of your selections.
- Check your email for the confirmation notice to verify your selections.
- Make your corrections immediately (if necessary), print and verify again.

Credit Wizard located at www.payflex.com/utflex.

OTHER BENEFITS

Medco Prescription Service (UT Select PPO)

- No change in Plan design
- Certain medications were changed from Formulary to Non-Formulary. Plan participants received a list of those medications

CNA Long-Term Care

- No change in plan design

Evidence of Insurability

- Evidence of Insurability forms will be processed electronically on the UT TOUCH web site (<https://utdirect.utexas.edu/nlogon/sgwww/UTTOUCH/>) July 1–31

- Evidence of Insurability must be completed online, printed, and mailed directly to the appropriate vendor during the Annual Enrollment period

Other Optional Coverages: Dental HMO, Vision, Life, Accident, Long- and Short-Term Disability

- No increase in premiums and no change in plan design

HEALTH RISK ASSESSMENT

During annual enrollment this year, UTMB employees will have the opportunity to complete an online health risk assessment (HRA). The free and confidential questionnaire provides employees with a snapshot of how daily lifestyle choices can affect overall health. This effort is part of a pilot program to develop an HRA for all UT System employees.

The assessment takes only a few minutes to complete, and will generate a 12-page report detailing different aspects of your overall health, such as medical history, preventive health care, health status and health risk.

Communication on how to access the online tool and other advantages of the health risk assessment will be available during annual enrollment at www.utmb.edu/benefits/ae.

Epic Systems expert discusses EMR process with campus audience

By Michele Rainford

Emily Barey, director of Nursing Informatics with Epic Systems Corporation, presented Patient Care Redefined – Realizing the Potential of the Electronic Medical Record (EMR) to the campus earlier this month.

UTMB is working closely with Epic to implement the EMR system on campus. The Epic system is being customized by a number of transition teams composed of UTMB clinicians and Information Services staff to fit the unique needs of UTMB.

Barey gave the audience, made up mostly of clinicians, a visual demonstration of the documentation process for a patient within the system. She covered the continuum of care from the initial clinic visit to a subsequent emergency department visit and patient admission, including nurses' notes, doctors' orders, medication history, lab results, vital signs and patient education up to the discharge. That record then becomes available to every clinician who participates in the patient's care.

Barey called it a longitudinal record of a patient's medical care and history at UTMB.

"It is a total team effort approach to enhanced patient care," she said.

Once fully implemented, the system will provide seamless integration with other patient care systems at UTMB from the emergency department to the pharmacy. The notes and orders for each patient



Pictured from left to right are Dr. Michael Warren, Dr. Christopher Mast, Emily Barey, Dr. Poldi Tschirch and Timothy Hilt. Barey is director of nursing informatics with Epic Systems and was a featured speaker during a presentation on campus about making the transition to electronic medical records.

become a part of that patient's electronic chart and are available to all providers who care for the patient at UTMB.

Barey describes it as a journey—one that will continue. "Where we start today is not necessarily where we'll be in 10 or even 30 days down the road. The coaching

and support of staff must be maintained along the way."

"'Go live' is the beginning, not the end. Subject matter experts should remain in place to continue to help with issues that may develop even after the system has been implemented."

On behalf of the EMR Leadership team, Dr. Poldi Tschirch, director of nursing informatics, reviewed EMR project goals and rollout plan for the EMR for the rest of fiscal year 2006 and beyond. Later this summer, EpicRx Inpatient, the pharmacy component of the EMR along with the Inpatient Medication Administration Record (MAR) will be implemented. MyChart, the patient web portal that links patients and providers through the EMR, will be activated on a clinic-by-clinic basis as each clinic goes live with the EMR.

UTMB is in the third year of a five-year implementation plan for the EMR. Since 2004, UTMB has implemented several major components of the EMR including the lab and radiology result system and surgery scheduling. All the community based clinics and certain outpatient areas in the Primary Care Pavilion are now using the EMR. The outpatient EMR specialty clinics in the Primary Care Pavilion will follow. After which, Inpatient Order Entry then Inpatient Documentation will rollout in fiscal year 2007.

The question-and-answer session that followed the presentation exceeded its time allotment as audience members took advantage of the opportunity to ask their EMR questions. And from the variety of questions asked, it's quite obvious that UTMB clinicians are already embracing the potential of the EMR.

SOM AWARDS from Page 5

Alpha Omega Alpha (cont.)

Bryan Christopher Bruner
Kristin Leigh Casey
Richard Seawell Clemmons
Joseph Allen Conley IV
Carolyn Ann Cushing
Carla Nicole DeJohn
James Edward Dimaala
Lee Reinhold Droemer
Andrew James French
Emily Kim Fridlington*
Julie Lynn Fridlington
Scott Edward Hecox*
Mira Tawfik Keddis*
Ankur Kishor Mehta
Daun Johnson Milligan

David Yung Ming
Marlene Elena Morales
Katharine Ann Morton
Audrey Ngoc Nguyen
Norris John Nolan III
Shane Mohammad Pahlavan
Jennifer Lynn Pike*
Rosalyn Nicole Reades
Bradley Wayne Schroeder
Donna Lynn Simmons
Kristen Lynn Solana Walkinshaw
Daniel Lee Stahl
Hsin-Yi Amy Tang*
Win Yee Teheung

**Inducted as AOA member in their junior year.*

Phi Kappa Phi Honor Society

Laura Jane Boeck
James Edward Dimaala

Emily Kim Fridlington
Julie Lynn Fridlington
Daun Johnson Milligan
Katharine Ann Morton
Jennifer Lynn Pike
Kristen Lynn Solana Walkinshaw
Hsin-Yi Amy Tang

The Gold Humanism Honor Society

Justin Edward Boatsman
Bryan Christopher Bruner
Jim F. Byrd, Jr.
Matthew Michael Dacso
Carla Nicole DeJohn
Lee Reinhold Droemer
Emily Kim Fridlington
Julie Lynn Fridlington
Mira Tawfik Keddis
Kris Cheryl Lukauskis

Andrew Arthur Martin
Laura C. McClendon
David Yung Ming
Norris John Nolan III
Shane Mohammad Pahlavan
Jennifer Lynn Pike
Stephen Lawrence Ratcliff
David Michael Rider
Nathaniel Ray Rylander
Kimberly Lynn Shilling
Crystal Ann Acevedo Sierra
Kristen Lynn Solana Walkinshaw
Brianna Renee Swinke
Hsin-Yi Amy Tang
Win Yee Teheung
Julie Carter Williams
Iris Sofia Wingrove
Ira Bickham Wood III

New system bringing changes to employee management, compensation tools

By Michele Rainford

Beginning late September, the new Human Capital Management system (HCM)—the PeopleSoft component that supports employee and human resources functions—will be implemented at UTMB.

The transition to PeopleSoft HCM is being managed by teams in Finance Administrative Systems, Payroll Services and Human Resources, as well as managers and members of the Entity Administrative Service Teams. It's taken a tremendous amount of planning, collaboration and cooperation to get user input, design the process and system, test it, develop training and provide for ongoing user support. In the end, the goal is to ensure a smooth evolution to the new tools.

Why make the change? The current Human Resource Management System is becoming difficult to sustain and does not support the flexibility that we need in our environment. The new HCM system uses standard calculations that adhere to legal requirements and best practices in the health care industry. The HCM system brings important updates, new capabilities and enhanced features to campus. It provides some great benefits for employees, including easier-to-read and more detailed pay stubs, and the ability to securely access and update personal information, look up and track accruals, track use of time off, and view pay history.

In addition, employees who participate in the UT Saver 403(b) Tax-Sheltered Annuity Plan (TSA) and the UT Saver 457(b) Deferred Compensation Plan (DCP) will see a much-requested benefit: the system will allow deductions to be

Changes to overtime rate calculation explained

In the past, UTMB has used the legacy Human Resource Management System (HRMS) and a unique, nonstandard method for calculating employee overtime earnings; our old method resulted in excess overtime payments to employees. The issue came to light during planning and development of the PeopleSoft Human Capital Management (HCM) system. To see detailed examples of how the overtime calculation differs between HCM and the current legacy system for both exempt and nonexempt employees, please visit the HCM web site at http://intranet.utmb.edu/peoplesoft/Human_capitalMgmtsystem/default.htm.

Other small changes will also affect pay and compensation. The HCM system will carry the hourly rate calculation out to six decimal places, the industry standard, resulting in more accurate pay for time worked. It will annualize the pay period gross amount, causing a few cents' increase in withholding tax and therefore a few cents decrease in net pay. Employees who work part time will see a very slight reduction in leave time granted (the current system calculates accruals by rounding up to the next quarter hour; the new system calculates on actual percent time appointed with no rounding).

Bottom line, what does it mean? For employees who do not regularly earn overtime pay, the changes described above, may make a few cents difference on each pay check. For those who earn overtime pay, the extent of the impact depends on how long they've been at UTMB (i.e. how much longevity pay they receive) and how much overtime they work in a given pay period.

Take as an example an exempt employee who earns \$62,000 a year and \$220 a month in longevity pay. In a two-week pay period, imagine the employee worked 9.25 hours of overtime. With HRMS, overtime pay would have been about \$432. With the new calculation, overtime pay would be about \$415, or \$17 less.

Take as another example a nonexempt employee who earns \$53,971 a year and \$260 a month in longevity pay. In a two-week pay period, imagine the employee worked 11.25 hours of overtime and earned \$302.80 for shift and on-call pay. HRMS overtime pay would have been about \$554. With the new calculation, overtime pay would be about \$473, or \$81 less.

The rate change will be effective for the first biweekly pay check delivered in October 2006. For details and to see more sample calculations, visit the HCM web site at http://intranet.utmb.edu/peoplesoft/Human_capitalMgmtsystem/default.htm.

withdrawn from both the first and the second bi-weekly pay check. The current monthly contribution will be split into two equal amounts taken from each check,

granting employees an opportunity to maximize their contributions (for those who desire to do so, up to the IRS maximum), invest contributions sooner, consistently

invest a set dollar amount, and have more flexibility in budgeting. In the months when there are three bi-weekly paychecks, no additional amount will be deducted from the third check.

The PeopleSoft HCM also integrates seamlessly with KRONOS, the time capture system used to collect and record time worked and time paid. The marriage of these two tools will help to further consolidate and unify UTMB's suite of administrative applications.

One other important change is that some employees will see a small to moderate decrease in their net or take-home pay due to an adjustment in the overtime rate calculation. Those who earn large amounts of overtime and receive the most longevity pay and other additional compensation will see the largest impact. Our nonstandard calculation rate benefited some employees, but collectively, those cents and dollars generated a considerable additional expense to the institution. See the box, which offers additional information and examples of the impact of the change.

The calculation rate change will be effective for the first biweekly pay check delivered in October 2006. Visit the HCM web site at http://intranet.utmb.edu/peoplesoft/Human_capitalMgmtsystem/ for information about this tool and to see examples of overtime pay calculations.

For information on KRONOS, visit <http://www.utmb.edu/time/>.

If you have questions or need more information, please call the Administrative Systems Help Desk (formerly referred to as the PSAsk Help desk) at (409) 747-7275. Call the Employee Benefits Center at (409) 772-2630 for specific questions on the TSA and DCP.

New PET/CT center provides newest technology, earlier diagnosis

By Judie Kinonen

UTMB is opening a positron emission tomography/computed tomography (PET/CT) center, which will provide earlier and more precise diagnosis of cancer and other diseases. The center is the first of its kind in Galveston and will open for patients on May 15, 2006.

The purchase of the PET/CT scanner and the construction of a building to house the machine and related equipment were funded by part of a \$9 million gift from The Sealy & Smith Foundation in Galveston to upgrade and expand UTMB's radiology

services. The foundation's gift also enabled the university to purchase a new magnetic resonance imaging (MRI) machine for the UTMB Primary Care Pavilion and a CT scanner for the Emergency Department.

Conveniently located across from UTMB's Orthopaedic Clinic in Rebecca Sealy Hospital, the new center offers patients drive-up access from Market Street.

The PET/CT machine will reveal both the anatomy and the physiology of cancer, neurological disorders and other illnesses faster than was possible with earlier technology. The machine will show radiologists, oncolo-

gists, neurologists, cardiologists, surgeons and other specialists moving images that reveal how a patient's illness has progressed in the body.

"The PET/CT will benefit a lot of patients," said Dr. Fernando Cesani, the director of the new UTMB PET/CT facility. "You can discover tumors and evaluate numerous other conditions that were not caught by other imaging methods."

The equipment is also capable of detecting a cancer growth or brain tumor earlier in their development, when they are more treatable, said associate professor of radiolo-

gy Cesani said. The equipment can also be used as a tool to diagnose Alzheimer's disease, dementia, the cause of seizures, heart problems, and a wide array of other illnesses.

"We're extremely pleased that the PET/CT facility will soon be ready to accept patients and thereby significantly help UTMB physicians diagnose illnesses quickly and accurately," said John W. Kelso, president of The Sealy & Smith Foundation. "The Sealy & Smith Foundation is committed to ensuring that UTMB is equipped to provide the best possible health care to the citizens of Galveston and to all patients seeking care at UTMB."

'Orphan disease' gets attention at brain injury conference

By Judie Kinonen

Internationally renowned experts in brain trauma recently gathered in Galveston for the sixth annual Galveston Brain Injury Conference, an invitational event sponsored by UTMB, Galveston's Transitional Learning Center—which provides rehabilitation for those who have suffered an acute brain injury—and the UTMB Center for Rehabilitation Sciences.

"Despite the fact that, annually, more than 200,000 Americans become disabled from a traumatic brain injury, it is an 'orphan' disease—largely ignored by the public and the medical field," said Dr. Brent Masel, TLC president.

This year's conference focused on issues affecting children with traumatic brain injury. About 30,000 children and adolescents suffer a disabling brain injury each year.

During the conference, the Robert L. Moody Prize for Distinguished Initiatives in Brain Injury Research and Rehabilitation was presented to Barbara Wilson of the United Kingdom, a world-renowned researcher, clinician and teacher



Dr. Brent Masel, left, and Dr. Charles Christensen, right, present the Robert L. Moody Prize for Distinguished Initiatives in Brain Injury Research and Rehabilitation to Barbara Wilson.

in the field of neurorehabilitation.

Wilson established The Oliver Zangwill Centre for Neuropsychological Rehabilitation in Ely, England, where she now serves as director of research. She has published 16 books, 8 widely used neuropsychological tests and more than 250 journal articles and chapters, mostly on rehabilitation. She also founded and serves as editor-in-chief for the journal *Neuropsychological Rehabilitation*.

Wilson joined about 40 of the nation's top

educators and physicians at the conference, said Dr. Charles Christensen, dean of the UTMB School of Allied Health Sciences. "Children with traumatic brain injury present the medical community with a wide range of challenges, and we're excited about bringing together the world's premier experts in rehabilitation to discuss ways to meet those special challenges," Christensen said.

Dr. Roberta DePompei from the University of Akron in Ohio and a past recipient of the Robert L. Moody Prize,

facilitated the conference. DePompei is an expert in brain injury and is recognized for her research and for developing clinical techniques to help pediatric brain injury patients to communicate and to reintegrate into schools.

DePompei said that while there are hundreds of important pediatric issues that could be discussed, the conference chose to focus on the neuropsychological, and neurophysical issues, and on development, assessment and outcome. The group also discussed these children's transition into schools and into adulthood.

The information these professionals share will be useful for both research and for the practicing physician. "Pediatric and adolescent traumatic brain injury is the orphan of the orphan—their needs left unmet by the medical field, insurance industry and the school systems," Masel said. "I am delighted that the Galveston Brain Injury Conference can be the venue to bring together the very best in this field, and serve as a catalyst to address the issues of this forgotten population."

Nanotubes used for first time to send signals to nerve cells

By Jim Kelly

Texas scientists have added one more trick to the amazing repertoire of carbon nanotubes—the ability to carry electrical signals to nerve cells.

Nanotubes, tiny hollow carbon filaments about one ten-thousandth the diameter of a human hair, are already famed as one of the most versatile materials ever discovered. A hundred times as strong as steel and one-sixth as dense, able to conduct electricity better than copper or to substitute for silicon in semiconductor chips, carbon nanotubes have been proposed as the basis for everything from elevator cables that could lift payloads into Earth orbit to computers smaller than human cells.

Thin films of carbon nanotubes deposited on transparent plastic can also serve as a surface on which cells can grow. And as researchers at UTMB and Rice University suggest in a paper published in the May

issue of the *Journal of Nanoscience and Nanotechnology*, these nanotube films could potentially serve as an electrical interface between living tissue and prosthetic devices or biomedical instruments.

"As far as I know, we're the first group to show that you can have some kind of electrical communication between these two things, by stimulating cells through our transparent conductive layer," said Todd Pappas, director of sensory and molecular neuroengineering at UTMB's Center for Biomedical Engineering and one of the study's senior authors. Pappas and UTMB research associate Anton Liopo collaborated on the work with James Tour, director of the Carbon Nanotechnology Laboratory at Rice's Richard E. Smalley Institute for Nanoscale Science and Technology, Rice postdoctoral fellow Michael Stewart and Rice graduate student Jared Hudson.

The group employed two different types of

cells in their experiments: neuroblastoma cells commonly used in test-tube experiments and neurons cultured from experimental rats. Both cell types were placed on 10-layer-thick "mats" of single-walled carbon nanotubes (SWNTs) deposited on transparent plastic. This enabled the researchers to use a microscope to position a tiny electrode next to individual cells and record their responses to electrical pulses transmitted through the SWNTs.

In addition to their electrical stimulation experiments, the scientists also studied how different kinds of SWNTs affected the growth and development of neuroblastoma cells. They compared cells placed on mats made of "functionalized" SWNTs, carbon nanotubes with additional molecules attached to their surfaces that may be used to guide cell growth or customize nanotube electrical properties, to cells cultured on unmodified "native" carbon nanotubes and conventional tissue culture plastic.

"Native carbon nanotubes support neuron attachment and growth well—as we expected, better than the two types of functionalized nanotubes we tested," Pappas said. "Next we want to find a way to functionalize the nanotubes to make neuron attachment and communication better and make these surfaces more biocompatible."

Another avenue Pappas wants to explore is finding out whether nanotubes are sensitive enough to record ongoing electrical activity in cells. "Where we want to get to is a device that can both sense and deliver stimuli to cells for things like prosthetic control," Pappas said. "I think it's definitely doable, and we're pursuing that with Jim Tour and his group. It's great to be able to work with a guy who's on the cutting edge of nanoelectronics technology—he seems to develop something new every week, and it's really become a great interaction."



JSC, UTMB agree to increase collaboration

NASA's Johnson Space Center in Houston and UTMB have launched a new Space Act Agreement that will make possible increased collaboration and knowledge sharing between the two institutions.

JSC Director Michael Coats (pictured above, right) and UTMB President John D. Stobo (left) signed the agreement in May in a ceremony at the space center. "This Space Act Agreement will make future joint projects a simple matter, facilitating more collaboration," said Judith Robinson, associate director of the Space Life Sciences Directorate at JSC.

Longtime partners in space medicine and space physiology, scientists and physicians at JSC and UTMB have previously teamed to perform ground-based studies on the adverse physiological effects of prolonged exposure to microgravity and on the effects of artificial gravity on humans.

"We're excited about the prospects of contributing to the Vision for Space Exploration," said Dr. Adrian Perachio, executive director for strategic research Collaborations at UTMB. "The collaborative research studies and education programs also hold great promise for treatment here on Earth."

UTMB's Flight Analog Research Unit and JSC are using long-term bed-rest studies to learn more about the unfavorable effects of microgravity. Countermeasures to these effects can be initially tested in bed-rest subjects at a far lower cost than in flight experiments with astronauts. Scientists and physicians also are studying the effects of artificial gravity using a NASA-supplied human centrifuge at UTMB.

UTMB physicians also consult with JSC flight surgeons on the health of astronauts on the International Space Station and assist NASA's Space Life Sciences Directorate in developing medical care standards for astronauts. In turn, JSC flight surgeons and scientists organize courses and provide research opportunities in the JSC laboratories for UTMB students and participate in the Space Medicine Grand Rounds Internet seminar series and in the UTMB/JSC Aerospace Medicine Residency Program.

DrDolphin.org provides resource for parents, children

UTMB and the Department of Pediatrics recently launched www.drddolphin.org, a child-friendly site to help guide children and parents to health information, events, and fun and games. The site features Dr. Dolphin, the Children's Hospital mascot, and makes it easy for parents to find nearby UTMB clinics or to make appointments with UTMB physicians.

"We've created a site where parents can find accurate information about children's health, accessing to our services and how UTMB Children's Hospital is working with our community," said Dr. Christine Turley, vice chair for clinical services in the Department of Pediatrics.

Visitors to the site can learn more about UTMB clinical services, research studies, including the need for research volunteers, and education programs. Some information on DrDolphin.org is available in Spanish. For information, visit the web site or call (409) 772-1580.

Walk From Obesity set for September

The Center for Weight Management is joining in a nationwide event to raise money for research, education, prevention and treatment of the life-threatening disease of obesity. On Sept. 30, walkers in Galveston will join others around the country in the Walk From Obesity.

In cities all across America, obesity sufferers and survivors alike will be joining forces and walking. Many will be walking on behalf of those unable to do so, because obesity has stolen their mobility, dignity and hope.

The ASBS Foundation's Walk From Obesity was established to give hope to those needing it most. Walkers raise money by asking friends, family, and co-workers to sponsor them. In addition to walker income, funds are raised through sponsorship, matching gifts, corporate contributions, and other fund-raising activities.

For information about the local effort, contact Karen Bigley at (409) 986-5273.

Professionalism Project Awards seeks nominations

The President's Office is announcing five to seven Professionalism Project Awards open to the entire UTMB community. The awards, not to exceed \$5,000 each, are to be given to entities, departments and/or work groups to fund initiatives that



From left to right are Dr. Nancy Eisen, a physician at the Galveston Family HealthCare Clinic, Dr. Chris Mast, assistant professor of family medicine and co-physician director for the EMR, and Maria "Vicky" Gomez, nurse practitioner at the Galveston clinic.

Adult community-based clinics complete transition to EMR

By Michele Rainford

On May 1, the UTMB adult community based clinics on 39th Street in Galveston and in Texas City went live with the outpatient Electronic Medical Record (EMR) system. With this recent accomplishment all community based clinics are now up and running with the EMR. The first area to go live with the EMR was Island Pediatrics in 2005. A systematic rollout to the other community based clinics followed.

The new system gives clinicians a single electronic patient record for each patient that is complete, legible, secure and always available.

The system creates a safer environment for patients through the use of clinical decision support tools including alerts and reminders. All clinical documentation, in these clinics, is now being done in Epic, the EMR system being implemented at UTMB. This will help to improve patient care and safety and provide improved access to medical record information, which will in turn, increase the adherence to regulatory documentation and compliance.

UTMB is in the third year of a five-year, multi-phased plan to transition to electronic patient records from paper records in its hospitals and clinics.

target one or more of the UTMB Professionalism Charter commitments. These commitments outline the expectations of a UTMB culture that values integrity, compassion and respect.

The projects should include the participation of employees from all levels, and projects that include multidisciplinary and/or cross-functional initiatives are encouraged.

At the end of one year, the projects will be judged and the most innovative and effective initiative will be selected for a prestigious President's Professionalism Award at the first Professionalism Summit.

Go online to www.utmb.edu/professionalism

for the proposal form or additional information. Proposals must be submitted by July 31.

OF NOTE

Dr. Yogesh Awasthi, professor of biochemistry and molecular biology, traveled to Lucknow, India, to visit the Industrial Toxicology Research Center and the Department of Biochemistry for collaborative studies and to present the seminar titled "Lipid Peroxidation and Signaling."

Dr. Werner Braun, professor of biochem-

See *BRIEFS* on Page 12



Enjoying the daily commute

The varieties of bicycles on the racks across campus is as diverse as the cars in any parking lot. Road bikes, mountain bikes, traditional cruisers, new bikes and older bikes, all serving the same purpose: to get their riders to work in a more energy-conscious and economical way. Judging by the increasing number of bicycles locked to racks on campus, hundreds of employees and students are opting to pedal their way to campus each day.

They travel from a few blocks away, to as far away as Dickinson and Spanish Grant. Some leave their bikes on the Bolivar side of the ferry landing, ride them on the boat and bicycle to work. During Bike to Work week, the university encouraged employees to try bicycle commuting and supported the effort with additional bike racks. Pictured from left to right are just a few of UTMB's bicycle commuters: Craig Kelso, John Koloen, Tom Curtis, Renne Tagert, Terra Cantrell, Ron Whitmore, James Rice and Dwight Wolf. Simon Lewis is sitting in front.

Bike to Work Week was Cantrell's first attempt at a bicycle commute. "This week has been my first committed biking experience and I have really enjoyed the serenity of biking to work," she said. "The sunrises on Galveston Island are breathless when you don't have a strong head wind."

BRIEFS from Page 11

istry and molecular biology, was invited to speak at the North Louisiana Partnership for Innovation at the CERT Institute for Biomedical Informatics Symposium/BioResearch Day at Louisiana Tech University.

Dr. Darrell H. Carney, professor of biochemistry and molecular biology, presented the seminar titled "TP508 Receptor Presentation" to the Orthologic Corporation in Tempe, Ariz.

Dr. Jerry C. Daniels, professor and associate chair of internal medicine, recently was honored at the American College of Physicians meeting in Philadelphia where he received his Mastership in the college.

Monica Davis, outpatient services associate for Island Pediatrics, was selected OSA of the Year. The award is presented to an outpatient services associate who has proven him- or herself in all aspects of the job, from big projects to the small daily tasks that make a difference. OSAs of the Year demonstrate compassion, courtesy, accountability, respect and efficiency in all they do.

Dr. Jason Hall, assistant professor of bio-

chemistry and molecular biology, presented the seminar titled "Characterization of a Sodium-Coupled Dicarboxylate Carrier Protein from *S. aureus*" at Kent State University.

Dr. Cheryl Lehman, a clinical nurse specialist in geriatric services, has been selected as a Hartford Institute/AJN Geriatric Nursing Research Scholar for Summer 2006. She will be one of 12 participants in the Summer Geriatric Nursing Research Seminar of the John A. Hartford Institute for Geriatric Nursing at New York University, July 16-21.

Dr. Satish K. Srivastava, professor of biochemistry and molecular biology, presented the abstract titled "Aldose Reductase Inhibition Prevents Bacterial Lipopolysaccharides-Induced Cytotoxic Signals in Human Lens Epithelial Cells" at the Association for Research in Vision and Ophthalmology meeting in Florida.

Dr. John Wiktorowicz, associate professor of biochemistry and molecular biology, attended the Golden Capitol Network Conference, where he presented the paper titled "Protein ProFiler: An Innovative Discovery Platform for Proteomics."

UTMB IMPACT

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Galveston, Texas 77555-0144
Telephone (409) 772-2618

June 2006

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ADDRESS CORRECTIONS

If you're an employee and would like to make an address correction, please contact your department administrator. He or she is the only person authorized to make changes to the main employee database (our source for employee labels) on your behalf.

If you receive *Impact* off campus and would like to make an address correction or let us know that you receive a duplicate copy of the newsletter, please send your request in writing to the *Impact* editor with a phone number where you can be reached.

Here for the health of Texas.