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## *What's Happening in Geriatric Education at UTMB*

*"Today, there are approximately 34 million people over the age of 65 in the United States; by the time the 2000–01 entering class graduates in 2004, that number will have increased by over a million. Whatever area of specialization these graduates choose to pursue, it is likely that they will care for significant numbers of elderly patients. It is crucial then, that medical schools provide students with the attitudes, knowledge, and skills they will need to competently care for older people."*

The Education Committee Writing Group of the American Geriatrics Society. "Core Competencies for the Care of Older Patients: Recommendations of the American Geriatrics Society." *Academic Medicine*, Vol. 75, No. 3, 252-255.

The above quotation illustrates the urgent need for increased gerontology/geriatric content in the undergraduate medical school curriculum. At UTMB, this task has been undertaken by the Sealy Center on Aging and the Office of Educational Development through several avenues including the Association of American Medical Colleges (AAMC) grant funded by the Hartford Foundation, the East Texas Geriatric Education Center, a five-year grant funded by the Health Resources and Services Administration (HRSA), as well as emerging recognition by key medical school administrators of the importance of increasing student exposure and competency in the treatment and management of conditions prominent in the older population.



*Dr. James S. Goodwin, executive director of the ETGEC, instructs on care of the frail elderly.*

### **EAST TEXAS GERIATRIC EDUCATION CENTER**

The UTMB Sealy Center on Aging was recently awarded funding by the Health Resources and Services Administration (HRSA, grant # D31HP80023), U.S. Department of Health and Human Services, to establish the East Texas Geriatric Education Center (ETGEC). Its mission is to provide enhanced interdisciplinary geriatric education and clinical training for health care providers, faculty, and students in health professions within 71 counties in East Texas (see the Sealy Center on Aging Newsletter, Fall 2003 edition). One of 46 GECs in the country, the ETGEC is

partnering with the East Texas AHEC, and affiliated with Lamar University, Sam Houston State University, and Stephen F. Austin State University.

The overarching theme of the ETGEC is to reduce health disparities by increasing delivery of interdisciplinary healthcare services to older minorities, rural and institutionalized elderly in medically underserved areas (MUAs) of East Texas. The ETGEC will provide interdisciplinary geriatric education and training via didactic conferencing, distance learning and web-based modules.

*continued on page 2*

## Organizing the Training Curriculum

The first major objective of the ETGEC is to provide a program for health care providers and faculty who teach in health professions. This program is a comprehensive 12-month, 160-hour certificate level curriculum in basic geriatrics and gerontology leading to a certificate as a "Scholar of Aging." The program will begin in **June 2004**, and features:

- **No registration fee**
- Continuing Education Units (CEUs) available (participants responsible for payment to receive CE credits)
- Education through web-based modules, case studies and distance learning
- Teleconferencing to various sites in East Texas
- Flexible scheduling—Individualized enrollment

Those interested may choose various levels of learning from the full 160-hour program, including 40, 80 or 120-hours of curriculum. Within this program, we will also offer CME and CNE (category 1) credits.

The ETGEC curriculum-planning group developed the curriculum with three broad learning objectives: to increase knowledge and skills in (1) geriatrics, (2) interdisciplinary teamwork (3) health issues for disadvantaged older populations. The curriculum is organized into 12 thematic topics within these broad objectives. Over a year's time, one topic will be highlighted monthly. Monthly activities will include a

3-hour didactic lecture series, teleconferenced to various sites throughout east Texas, interdisciplinary modules, web-based case studies and suggested reading and videos. For example, materials related to mental health (dementia, depression and delirium) will be made available during September when teleconferenced lectures on these topics will be presented (September 10). Participants are encouraged to review materials corresponding to the month's major topic. Monthly topics include Introduction to Aging, Exploring New Models of Care of Older Patients, Interdisciplinary Teamwork in the Care of Older Adults, The Art of Communication, Geriatric Assessment, Mental Health—Dementia, Depression, Delirium, Geriatric Syndromes—Heart Disease, Arthritis, Incontinence, Hip Fractures/Osteoporosis, Pharmacology, Alternative Medicine, Spirituality of Aging - Body, Mind & Spirit, Positive Aging, Health Care of Special Populations—Older Minorities, Rural Elderly, Older Prisoners and Nursing Home Residents, Special Topics: Retirement, Advanced Care Planning, Health Insurance, Health Behaviors: Substance Abuse, Nutrition, Exercise, and Palliative Care/Pain Management, Ethical Issues, End-of-Life Care, and Grief management.

For more information or to participate in this program, visit our web site at <http://etgrec.utmb.edu>, or contact Tony DiNuzzo, Ph.D., program director at (409) 772-5367, or (800) 298-7015; or by email, [adinuzzo@utmb.edu](mailto:adinuzzo@utmb.edu).

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## GERIATRIC CURRICULUM AT UTMB

At UTMB, geriatrics content is woven throughout the four-year undergraduate medical school curriculum. Multiple modalities teach and provide experiences to support geriatrics learning objectives. The geriatrics curriculum is comprised of a series of lectures, PBL cases, standardized patient encounters, and community experiences incorporated throughout the curriculum. The Office of Education (OED) has helped develop geriatric curriculum and is currently developing a geriatric week rotation in conjunction with the fourth-year neurology clerkship, to be implemented June 2004.

### *Curriculum Management and Governance Structure*

The four-year curriculum is under the Dean of the School of Medicine, with the assistance of the associate dean for educational affairs, associate dean for regional medical education and director of clinical assessment and professional development, and assistant dean for educational affairs. Additionally, the curriculum committee provides curricular oversight and governance with assistance from these committees: (1) Curriculum Research (2) Operations (3) Course Directors, and (4) Clerkship Directors.

### *Learning Outcomes/Objectives*

Following an institutional retreat and task force reports, the following objectives for geriatrics and gerontology education, adapted from the eight learning objectives of the American Geriatrics Society Core Competencies, were delineated (See Figure 1).

Additional goals of the geriatric/gerontology content infusion include increasing geriatric community experiences in the Practice of Medicine course and clinical clerkships, improving the quality and quantity of problem-based cases portraying persons over the age of 65 years, enhancing clinical skills assessments in geriatric areas, and increasing students' interest in geriatric care.

### *Themes for geriatrics programs*

UTMB has specifically taken an integrative approach to geriatrics in the undergraduate medical school curriculum. The central theme of geriatric medicine is an emphasis on interdisciplinary teamwork.

**Seniors/mentor program**—In 2001, UTMB introduced the Family Home Visit Program as part of the community learning experience in the Practice of Medicine 1 Course. In this program, medicine, OT

**Figure 1. Integrated Curriculum Educational Goals & Learning Objectives for Geriatric and Gerontology Medical Curriculum**

- Objective 1: Understand the biology of aging, including the impact of gender and ethnic variability
- Objective 2: Understand the psychosocial aspects of aging across ethnic groups
- Objective 3: Understand the financing and systems of health care available to older persons
- Objective 4: Identify basic principles of geriatric medicine, including unique aspects of disease presentation, and geriatric pharmacology
- Objective 5: Describe the role of geriatric assessment, health promotion, palliative care and rehabilitation in patient management
- Objective 6: Understand the diagnosis and management of geriatric syndromes, including dementia, delirium, urinary incontinence, malnutrition, osteoporosis, falls, pressure ulcers, pain, dysphasia, dizziness and polypharmacy
- Objective 7: Understand state-of-the-art approaches to geriatric care including in-hospital care, office practice, nursing home and home-care settings
- Objective 8: Understand the importance of geriatric problems and issues to internal medicine, neurology, psychiatry, dermatology, gynecology and surgery

and PT students visit multigenerational community families in their homes. At least one family member must be over age 65.

**Geriatric standardized patients/simulations**—Geriatric Standardized Patients are used for teaching and assessment. In the Practice of Medicine (POM) 1 & 2 (first and second year courses), students practice history taking and physical exam skills with geriatric standardized patients. In the clinical years, as well as for POM 1 & 2, assessment of student competency occurs with patients of all ages. All students must successfully complete a fourth year competency exam, which includes a minimum of at least one geriatric patient scenario.

**Faculty development programs for geriatrics curriculum**—UTMB's Office of Educational Development sponsors an 18-month Scholars in Education program for faculty that focuses on teaching methods and curriculum development. Each session, geriatric faculty participate as scholars. Additionally, three geriatric faculty have been awarded academic development awards in clinical geriatric education.

**Student interest group**—UTMB started a Geriatric Student Interest Group on campus in 2001. Activities include movie night (movies with seniors as main characters), learning lunches, dinner lectures, grand rounds, and local and national conferences. In 2002, the Geriatric Student Interest Group was chartered as an official campus student organization.

**Palliative care and end-of-life courses**—UTMB does not teach palliative care or end-of-life courses per se. End-of-life issues are part of the Practice of Medicine 2 course, and part of ethics modules presented throughout the curriculum. Three end-of-life care web-based cases have been used in various courses.

### **Pedagogical changes**

Geriatrics serves as a model for discipline-specific content to be integrated at UTMB. This required

recognition of the importance of geriatrics so content was readily accepted within courses and/or clerkships. The template and learning objectives are applicable across the curriculum, and have been applied by other disciplines.

### *Computer technology in the geriatrics program*

Geriatric content has been presented technologically in the curriculum through geriatric web-based interactive cases. Nine cases are completed, and four more are near to completion. These cases are leveled for the learner and used in both the courses and clerkships. As the geriatrics rotation week is being developed for implementation in the fourth-year neurology clerkship, additional cases and web-based instructional media will be employed.

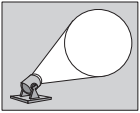
### *Changes in assessment*

Students are responsible for more geriatric-related knowledge and skills on OSCE's and exams. A requirement for graduation is successful completion of a geriatric integrated clinical skills assessment exam. Additionally, data is collected on three cohorts, three data points each, on student attitudes and knowledge toward aging. This instrument was developed at Southern Illinois University (SIU) and adopted for use at UTMB in the ongoing administration of longitudinal measures within the School of Medicine.

### *Clinical Experiences*

Students rotate through the Acute Care of the Elderly (ACE) unit, the geriatric specialty clinics (osteoporosis, falls, incontinence), and county geriatric clinics with geriatric faculty.

For more information on geriatric education at UTMB, please visit our web site at <http://aging.utmb.edu/education/ugme/default.asp>, or contact the Office of Education Development, directed by Dr. Robert Beach, at (409) 772-2791.



## SPOTLIGHT ON NEW EMPLOYEES

### ▶ **NORMA PEREZ, M.D.**



Dr. Perez is currently project director for the Healthy City Assessment Project–Texas City (HCAP-TC), a five-year cohort survey as part of the Center for Population Health and Health Disparities grant. Prior to joining the Sealy Center on Aging, she

assisted with two research projects based on the Texas-Mexico Border and research projects at the University of Texas-Houston Health Science Center. She is also a former clinician in rehabilitation medicine and technical coordinator of evaluation and treatment for a rehabilitation center in Mexico. She received her medical degree from University of Monterrey, Monterrey, Mexico, in 1992. She completed a Residency Program in Rehabilitation Medicine from National Autonomous University of Mexico, Mexico City in Monterrey, Mexico in 1997, and is currently a doctoral candidate with School of Public Health, University of Texas-Houston, specializing in International and Family Health.

Dr. Perez loves to watch the Gulf waters and enjoys playing flute and cooking, especially for her lovely 6-year old daughter, Andrea.

### ▶ **SARAH TOOMBS SMITH, PH.D.**



Dr. Toombs Smith joined the Sealy Center on Aging in December 2003 as our first science editor. She provides individual coaching to faculty, scholars and students. In addition, she provides editorial oversight to our numerous center grant proposals, journal articles and other publications.

She has been at UTMB since 1995, first with the John Sealy Memorial Endowment Fund for Biomedical Research, and then with the Office of

Institutional Research Development. As of May 1, 2004, she holds the position of assistant professor in the Department of Internal Medicine. In addition to giving numerous presentations on various writing topics of interest to Aging faculty, scholars and students, she will be team-teaching a new PMCH graduate class in fall 2004 with Dr. Glenn V. Ostir. The course, entitled “Principles and Practice of Publishing Scientific Research,” will guide students through the process of producing a scientific journal article. Dr. Toombs Smith received her B.S. from Northwestern University, an M.A. from Incarnate Word College, and a Ph.D. in American Literature from the University of Notre Dame.

Dr. Toombs Smith is also a member of the “Family and Friends” Auxiliary of the Friendswood Volunteer Fire Department.

### ▶ **JOANNA CAMPBELL, PH.D.**



Dr. Campbell is an assistant professor with the Department of Preventive Medicine and Community Health, Division of Epidemiology and Biostatistics. She received a B.A. degree in Economics/Mathematics from Columbia University, and her doctorate in Economics from Stanford

University. Dr. Campbell’s primary research focus is on the economics of long term care for the elderly. Her dissertation analyzed the interactions between publicly funded community-based care, institutional care, and unpaid care provided to frail elderly individuals. She is currently pursuing this line of research and investigating changes in health outcomes that may result from incentives for paid home care use. Dr. Campbell was recruited as health economist through a grant from the Agency for Healthcare Research and Quality (R24 HS011618, Health Services Research in Underserved Populations). The position is jointly supported by the Department of Preventive Medicine and Community Health and the Sealy Center on Aging.



## AWARDS

**Congratulations to Drs. James & Jean Goodwin!** Best Doctors Inc.—a company dedicated to keeping consumers informed about the best medical care available to them—has named 75 members from the University of Texas Medical Branch at Galveston (UTMB) among the top specialists in their respective fields in the U.S.

In an annual peer review survey, Best Doctors Inc. asked 35,000 physicians, “If you or a loved one needed a doctor in your specialty, to whom would you refer them?” The results of the survey showed that a great number of UTMB physicians in various fields are considered the best in their field. Among those honored included our very own, **Dr. James S. Goodwin**, chief medical director for the Division of Geriatrics and the Sealy Center on Aging for achievement in Geriatric Medicine, as well as his wife, **Dr. Jean Patricia Goodwin**, for Psychiatry.

For more information about Best Doctors Inc., visit [www.bestdoctors.com](http://www.bestdoctors.com).

**Congratulations to Jean Ann Glass, R.N.C., B.S.N.**, nurse manager for the ACE Unit, named Nurse of the Year in clinical practice from the Texas Nurses Association, District #6. This award is an especially great achievement because it was awarded by her nursing peers.. The same award was won by our own Susan Tyler, APRN, BC, M.S.N., director of Geriatric Services, several years ago for District #9.

Way to go, Jean Ann!

### SCHOLARSHIP AWARDS/RECOGNITION

The following Ph.D. students in the Department of Preventive Medicine and Community Health’s, Clinical Science Program and Health Services Research Track, received awards as part of the 2004 GSBS commencement ceremonies:

#### **Soham Al Snih, M.D., research fellow, Sealy Center on Aging**

Don W. Micks Scholarship in Preventive Medicine and Community Health  
Rose and Harry Walk Research Award

#### **Pat Blair, M.S.N., J.D., L.L.M., associate professor, School of Nursing**

Margaret Saunders Travel Award

#### **Frank Lemus, research fellow, Sealy Center on Aging**

GSO Student Award

#### **Carlos Reyes-Ortiz, M.D., research fellow, Sealy Center on Aging**

Curtis W. Lambert Scholarship

#### **Alai Tan, research fellow, Sealy Center on Aging**

GSBS Associates Christina Fleischmann  
Travel Award

The poster entitled “Association between weight change and subsequent lower body disability in older Mexican Americans” presented by **Hina Mahmud, M.D., Soham Al Snih, M.D., Mukaila A. Raji, M.D., Kyriakos S. Markides, Ph.D. and James S. Goodwin, M.D.**, at the American Geriatrics Society Presidential Poster Session in Las Vegas was awarded as the best poster in the Geriatric Syndromes Category.



## IN THE NEWS

### GRANTS AND GRANT ACTIVITIES

**Jean Freeman, Ph.D.**, associate professor, Sealy Center on Aging. Grant# 2RO1 CA072076-07A1, “Evaluating Mammography Claims Data,” *National Institute on Aging, NIH—\$537.939 (three-years, 04/01/04–03/31/07)*.

*Goal:* To use SEER and Medicare claims data to examine screening performance measures over the period 1998–1999. The objectives are to: (1) investigate the relationship between screening performance and the characteristics of radiologists and patients and (2) evaluate whether Medicare claims alone can provide valid measures of performance compared to a linked SEER-Medicare database.

**James S. Goodwin, M.D.**, director, Sealy Center on Aging, director, Division of Geriatrics in Internal Medicine. Grant# 1RO1 CA104949-01, “Use of Claims Data to Study Quality of Cancer Care—Just in Time Information,” *National Institute on Aging, NIH—\$713,475 (four-years, 04/1/04–03/31/08)*.

*Goal:* To examine the use of chemotherapy in older men and women with colon cancer and older women with breast cancer. Using SEER/Medicare linked data, the aims of the study are: (1) to determine the factors influencing whether older colon and breast cancer patients with tumor characteristics for which chemotherapy is generally recommended actually see a medical oncologist and (2) to determine the factors influencing receipt of chemotherapy by the patients who see a medical oncologist.

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## Recent Publications from SCoA Faculty and Students

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Al Snih S., Markides K.S., Ray L.A., Ostir G.V., Goodwin J.S. 2003. "Predictors of recovery in activities of daily living among older Mexican Americans." *Aging Clinical and Experimental Research*, 15, 315-320.

Fisher M.N., Al Snih S., Ostir G.V., Goodwin J.S. 2004. "Positive affect and disability among older Mexican American with arthritis." *Arthritis Care Res* 2004;51:34-39.

Granger C.V., Ottenbacher K.J. 2003. "An analysis of the rate of functional gain that may be expected during inpatient rehabilitation for patients with stroke." In Ed. N. Soroker & H. Ring, *Advances in Physical and Rehabilitation Medicine*. Bologna: Italy, Monduzzi Editore International.

Lackan N.A., Ostir G.V., Freeman J.L., Mahnken J.D., Goodwin J.S. 2004. "Decreasing variation in the use of hospice among older adults with breast, lung, colorectal and prostate cancer." *Medical Care*, 42, 116-122.

Mancuso M., Smith P., Illig S.B., Linn R., Gonzales V., Granger C.V., Ottenbacher K.J. 2003. "Satisfaction with medical rehabilitation in persons with orthopedic impairment." *American Journal of Physical Medicine and Rehabilitation*, 84, 1343-1349.

Ostir G.V., Raji M.J., Ottenbacher K.J., Markides K.S., Goodwin J.S. 2003. "Cognitive function and incidence of stroke in older Mexican Americans." *Journal of Gerontology: Medical Sciences*, 58A(6), 531-535.

Otiniano M.E., Markides K.S., Ottenbacher K.J., Ray L., Du X.L. 2003. "Self-reported diabetic complications and 7-year mortality in Mexican American elders: Findings from a community-based study of five Southwestern states." *Journal of Diabetes and its Complications*, 17, 243-248.

Peek, M.K., Markides, K.S. 2003. "Blood pressure concordance among older Mexican American married couples." *Journal of the American Geriatrics Society*, 51, 1-5.

Patel K.V., Eschbach K., Rudkin L.L., Peek M.K., & Markides K.S. 2003. "Neighborhood context and self-rated health in older Mexican Americans." *Annals of Epidemiology*, 13, 620-628.

Raji M.A., Al Snih S., Ray L.A., Patel K.V., Markides K.S. 2004. "Cognitive Status and Incident Disability in Older Mexican Americans." *Ethnicity & Disease*, 14, 26-31.

Raji M.A., Kuo Y.F., Salazar J., Satish S., Goodwin J.S. 2004. "Ethnic differences in antihypertensive medication use in the elderly." *Annals of Pharmacotherapy*, 38, 209-14.

Raji M.A. 2004. "Of Cigarettes and Flat Tires." *Canadian Medical Association Journal*, 17, 170-174.

Raji M.A., Al Snih S., Ray L.A., Patel K.V., Markides K.S. 2004. "Early mental ability may predict future ability to live independently." *Ethnicity & Disease*, 14, 158-159.

Sheffield-Moore M., Urban R.J. 2004. "An overview of the endocrinology of skeletal muscle." *Trends in Endocrinology and Metabolism*, 15,110-115.

Tooth L.R., Ottenbacher K.J., Smith P.M., Illig S.B., Linn R.T., Gonzales V.A., Granger C.V. 2003. "Effect of functional gain on satisfaction with medical rehabilitation after stroke." *American Journal of Physical Medicine and Rehabilitation*, 82:9, 692-699.

Tooth L., Ottenbacher K.J., Smith P.M., Illig S.B., Linn R.T., Granger C.V. 2004. "Satisfaction with medical rehabilitation after spinal cord injury." *Spine*, 29:2, 211-219.

Zhang L., Abreu B.C., Seale G., Masel B., Christiansen C.H., Ottenbacher K.J. 2003. "A virtual reality environment for evaluation of a daily living skill in brain injury rehabilitation: Reliability and validity." *Archives of Physical Medicine and Rehabilitation*, 84, 1118-1124.

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### PEPPER CENTER RECRUITMENT

To help determine why muscle function deteriorates with age, researchers with the Pepper Center are recruiting volunteers 60 years old or older, and in good general health. For information, please contact: Susan Minello (409) 772-8350, Roxana Hirst (409) 772-3588, or use our toll free number, (800)298-7015.

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### THE SEALY CENTER ON AGING VOLUNTEER REGISTRY

There are more than 700 volunteers who have joined the UTMB Sealy Center on Aging Volunteer Registry to participate in a variety of UTMB research projects. If you are 55 or older, and would like information on becoming a volunteer, please call Roxana Hirst or Susan Minello, registry coordinators at (409) 772-3588 or toll free (800) 298-7015.

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## HEALTH INITIATIVE PROGRAM: GERIATRIC EMPLOYEES GET “HEALTHY!”

What makes an employee happy? What drives employee fulfillment? How can leadership help keep employees motivated and stress levels to minimum in the presence of budget cuts and increasing workloads?

In January of last year, Geriatric Services, the Sealy Center on Aging, and the Division of Geriatrics within the Department of Internal Medicine decided to turn their focus toward employee health for answers to these common questions. Jenny Lanier with Geriatric Services teamed up with Julie Dial, M.A., CES, exercise physiologist and disease management coordinator with Preventive Medicine and Community Health, from the Field House. Together they developed a health promotion program for employees outlining healthy habits to deal with the day-to-day stress of work, home and play.

The program was developed with the following key components:

- Three-month initial time frame
- A health educator and exercise physiologist available to employees throughout the program for consultation and motivation
- A department coordinator to centralize announcements of events
- Kickoff meetings on campus and at off-site clinics to take waist and hip measurements and to discuss reasonable goal setting and program details
- At home or UTMB Alumni Field House program options
- Monitoring through biweekly emails to the exercise physiologist and through data collection from a log located at the Alumni Field House and/or a health maintenance calendar kept for the at home program participants
- “Salad Only” guidelines for any lunches catered by the department
- Pedometers for people to wear at work
- Monthly noon brown bag lunch meetings with a variety of health topics
- Waist and hip measurements taken at end of three months and collaborative data collected
- Final celebration meeting to review data and summarize success

Once established, employees brought their own creativity and motivation to the program:

- Physical Therapists Niki Sinclair, PT, CCCE, and Rebecca Galloway, PT, offered Aerobics, dance, and kick boxing classes three nights a week in one of the conference rooms.
- In the second month, Doris Glanz, coordinator II, special programs in Senior Services, coordinated a walking relay on the third Floor of Jennie Sealy, where participants signed up to walk for 15 minute intervals for the entire day as part of their 15 minute break. The event provided a healthy alternative to more sedentary activities which employees usually engage in during their regular break from work. Participants walked a total of 40 miles throughout the day.
- Other employee activities included “Create your own Smoothie Day” and “Healthy Pot Luck Lunch Day.”
- A monthly health topic was presented at the monthly Geriatric all staff meeting.



### UPCOMING EVENTS

#### 8<sup>TH</sup> ANNUAL FORUM ON AGING

Once again, the Sealy Center on Aging in conjunction with the Office of the Vice President for Research, will be sponsoring the Forum on Aging. The event is scheduled for Wednesday, Sept. 15, 2004, from 5–7 p.m. in the Levin Hall Dining Room. This poster forum is designed to educate gerontology researchers and the UTMB community about the types of aging research, programs and educational initiatives conducted at UTMB. The Forum also highlights resources available from the Sealy Center on Aging, and throughout UTMB and the Galveston-Houston area.

Everyone is invited to attend so please mark your calendars. All guests and participants will view posters representing a wide variety of topics, with adjoining study areas and visits with presenters. Monetary prizes will be awarded for the best student posters. Wine and cheese will be served.

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## Information

Contact Tony DiNuzzo, Ph.D. at (409) 772-5367 or Maricela Tamayo at the Sealy Center on Aging, (409) 747-0008, for information regarding items in this issue.

**THE SEALY CENTER ON AGING** at UTMB has openings for predoctoral and postdoctoral positions for Fall of 2005. Funded by a training grant from the National Institute on Aging, these research positions focus on the health of older minorities, with a particular emphasis on older Hispanics. Fellows will collaborate with any of more than 15 Center faculty with over \$42 million in aging research in the areas of medical outcomes, health service utilization, social epidemiology, psychosocial stress, and health promotion as they pertain to older minorities. The salary stipend for predoctoral positions is \$21,840 and ranges from \$35,568–\$51,036 for postdoctoral positions depending on experience level. Applicants must be U.S. citizens or permanent residents. Applicants should send a letter stating research interests, relevant prior training, and a curriculum vitae to: Karl Eschbach, Ph.D., Sealy Center on Aging, The University of Texas Medical Branch, 301 University Blvd., Galveston, TX, 77555-0460. Email: [kaeschba@utmb.edu](mailto:kaeschba@utmb.edu).

UTMB is an equal opportunity, affirmative action institution which proudly values diversity.

**Donations and Bequests** UTMB's Sealy Center on Aging welcomes contributions to further geriatric research, education and training. You can help by contributing to the Fund for the Study of Aging, or contact us for information on how to select a particular program to support. Donations can be made to honor an individual and are deductible for income tax purposes to the extent allowed by law. Donations and bequests may be sent to:

The Fund for the Study of Aging  
The Sealy Center on Aging  
UTMB Office of University Advancement  
301 University Blvd.  
Galveston, TX 77555-0842

Please direct inquiries to: (409) 772-3950.

For more information on the Sealy Center on Aging, please go to our web site: <http://aging.utmb.edu>