

# PROGRESS

## GW To Lead Effort To Set Up First Responder *READI* Training Center

The George Washington University has received a federal appropriation in the FY 03 budget to establish a national first responder training center on its Loudoun County campus in Virginia. The spending bill approved by Congress provides \$5 million to GW to take the lead in the project in collaboration with George Mason University and Shenandoah University. The funding is for the establishment of a center to train firefighters, EMS personnel, law enforcement and other healthcare providers on how to handle major emergencies, including acts of terrorism.

The Center will be called the Response to Emergencies and Disasters Institute, *READI*, and will focus on providing emergency responders with a thorough understanding of the health and medical requirements to prepare for and respond to acts of terrorism. The center will be at the forefront of developing and demonstrating terrorism preparedness “best practices” for emergency personnel.

“In the months since 9-11, our team at the Medical Center has worked tirelessly to advocate best practices in the healthcare response to terrorism and for an integrated response to homeland security. This project will enable us to implement training programs that will serve as models for first responders confronted with a variety of emergency challenges, including terrorism,” said John F. Williams, GW University provost and vice president for Health Affairs.

“The center will help provide first responders with the information they need to deal with large scale incidents,” echoed Congressman Frank Wolf (R-Va). “Each university brings something to the table. By combining the talents of GW’s medical school and school of public health, George Mason’s nursing school and Shenandoah’s pharmacy school, the center has the potential become a premier training facility.

*Continued on page 15*

## GWUMC Revises Mission, Vision

Coming soon to the GW Medical Center: new posters, bookmarks and fliers reflecting the changes in the Medical Center’s vision and mission. The new posters will replace current ones on the walls of GW Medical Center buildings. The bookmarks will be available to faculty, students and staff and as give-

*Continued on page 15*



Rep. Randy “Duke” Cunningham (R-CA), a prostate cancer survivor, joined District of Columbia Mayor Anthony Williams, center, and GW Medical Center urologist Dr. Michael J. Manyak, right, at a January 27 town hall meeting at GW on prostate cancer.

## Mayor, GW Host Prostate Cancer Summit

Mayor Anthony Williams led a panel of city leaders and healthcare experts taking aim at prostate cancer last month in the latest of several town hall meetings at GW on improving health and healthcare in the District of Columbia. Hosted by the School of Public Health and Health Services, the January 27 session also featured remarks by DC’s Delegate to Congress Eleanor Holmes Norton and Rep. Randy “Duke” Cunningham, a Republican from California who is a prostate cancer survivor. Rep. Cunningham serves on the Subcommittee on the District of Columbia in the House Appropriations Committee. Dr. Michael J. Manyak, professor of Urology and interim chairman of the Department of Urology at GW Medical Center, was among the pros-

tate cancer experts on the panel.

“Prostate cancer occurs only in men, but it’s a problem that concerns us all: men and women,” said Mayor Williams. “Just as we may all join together for the ‘Race for the Cure’ to fight breast cancer, we need the whole community to fight prostate cancer together.”

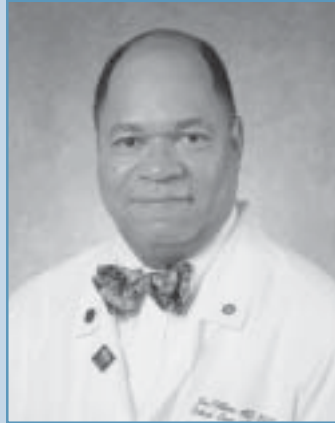
*Continued on page 12*

### Inside this issue

|                            |       |
|----------------------------|-------|
| Provost Perspective .....  | 2     |
| Faculty Corner .....       | 4     |
| Research .....             | 5     |
| Students .....             | 7     |
| Round of Applause .....    | 8-9   |
| Going Global .....         | 10-11 |
| Smallpox .....             | 12-13 |
| Staff Development .....    | 14    |
| Faculty Appointments ..... | 15    |

## Provost Perspective ... *Taking the Lead, Setting the Example*

In the past several months, our country has teetered on the brink of war. As our government sorts out the threat, we as healthcare providers are grappling with how to prepare for these threats and to manage not only what may come, but the fear that accompanies terrorism and creates a new category of patient—the worried well. As an academic health center, we have the unique opportunity, by virtue of our location in the nation's capital, to formulate and implement best practices. That is why I am pleased to announce that GW is in line to receive a \$5 million federal appropriation in the FY 03 budget for GW to lead an effort on our Virginia campus to establish a training center for first responders. Along with George Mason University and Shenandoah University and other regional partners, we will collaborate to provide terrorism prevention and response training for multiple types of first responders, including law enforcement, fire, HAZMAT, EMS and other types of healthcare providers who, because of terrorism, have been thrust into the role of first responders.



It is our intent to use this opportunity to implement the training programs that have distinguished us in this area and to develop model curricula that can be taught on a regional and national basis. In the months since 9-11, our team has worked tirelessly to advocate the need for best practices in the healthcare response to terrorism and in the effort to secure our homeland. We will answer the challenge swiftly and, with our academic expertise, provide the training for our nation's first responders that will prepare them for the challenges ahead. Collaboration

is the key to this endeavor. We welcome the opportunity to work with our Virginia partners in developing this very critical project on our Loudoun County campus.

We also welcomed the opportunity recently to host the District of Columbia's Prostate Cancer Summit. As Mayor Anthony Williams put it, "We need the whole community to fight prostate cancer together." As an academic health center, we have a constituency to serve. Our urban population deserves and demands that the research we do help them live better and healthier lives. Therefore, when you hear us talk about our major push to establish a Cancer Institute, you will hear us repeat some staggering statistics. The mortality rates for African Americans for prostate, lung, breast and colon cancer defy national averages. These figures give us a mandate to answer one question: WHY? There should be a body of research, education and clinical care that addresses the root causes of these urban cancers and why our urban populations are adversely impacted. Just as we intend to collaborate with regional partners in our training of first responders, we intend to define a collaboration of science and scientists that will one day lead us to cures, not just preventative medicine.

February is Black History Month when we have a chance to look at the pioneers in our field of medicine and the impact they've made. A good example is Helen Octavia Dickens, MD, who was the first African American woman to become a Fellow of the American College of Surgeons. Just as this noted surgeon paved the way for others after her, so can we act as pioneers in our efforts to unite behind a strategy to address racial disparities in disease and healthcare. It is a part of our mission and will become a part of our legacy.

John F. Williams, MD, EdD

Provost

Vice President for Health Affairs and  
Dean, School of Medicine and Health Sciences

### PROGRESS

is a publication of

The George Washington University Medical Center  
Communications & Marketing Department  
313 Ross Hall • 2300 Eye Street, N.W.  
Washington, DC 20037

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*Photos:* Staff & BioMedical Communications

## Exercise Science Programs Gain Departmental Status

Following a vote by the Faculty Senate, Exercise Science was awarded departmental status within the School of Public Health and Health Services (SPHHS) effective July 1, 2003. Since 1997, Exercise Science has operated as a program within the School, building a national reputation and attracting both undergraduate and graduate students.

This new status adds credibility to Exercise Science and brings with it an increased voice within the School. According to Richard F. Southby, PhD, SPHHS interim dean, "After more than a year of careful discussion and planning, we are delighted by the elevation of one of our core programs to the new Department of Exercise Science. The Department and its distinguished faculty will serve to exemplify the important role exercise, nutrition, fitness and sports medicine have in the health of the public. The courses offered through the department are some of the most sought after in undergraduate and graduate studies at the University. I am confident that the dedicated faculty and staff of our newest department will enable the School to achieve new levels of excellence in all we do."

Donald C. Paup, PhD, director, Exercise Science Programs, adds "Exercise Science is proud to gain departmental status in the SPHHS.

Over the past five years, we have made significant gains in student numbers, revenue, faculty recruitment and program development. Achieving departmental status will provide increased visibility and incentive to continue our growth and mission as only the third Exercise Science Department in the nation to be housed in a school of public health."

The departmental status is also important for students looking for a major; Exercise Science staff hope that the departmental status will also increase the programs' visibility on campus.

While the rigorous programs already attract quality students, Exercise Science expects that becoming a department will increase the number of applicants to the programs and boost the caliber of the students even more. Another benefit would be that, when the Department is in the position to hire additional faculty to accommodate the growing student base, it would

attract a better pool of faculty candidates.

Exercise Science offers two undergraduate majors: Athletic Training and Exercise Science. Exercise Science also offers three secondary fields of study, similar to a minor, coordinated through the other Schools in the University. At the graduate level, a Master of Science in Exercise Science is offered. Courses taught by the five full-time and two nine-month faculty remain at capacity. Currently, the program boasts an all-time high 140 undergraduate and 30 graduate students. Many of the undergraduates continue on to pursue degrees in physical therapy, nursing and medicine, and it is a source of great pride for the program that nearly 100 percent of the Athletic Training graduates leave GW with a job in hand.

Exercise Science is perhaps the most unique program on campus. In addition to courses for its own students, Exercise Science also offers a large number of courses for

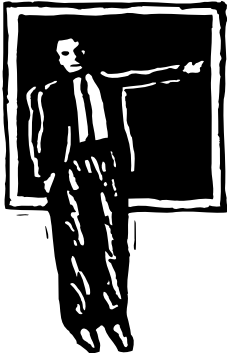
non-Exercise Science majors. Courses such as Issues in Women's Health, Drug Awareness, Human Sexuality and Personal Health and Wellness are filled to capacity semester after semester. Exercise Science also offers a wide range of activity classes, including tennis, swimming, golf, cardio kickboxing, massage, horseback riding, yoga, Pilates, squash, bowling and scuba diving, that are open to the entire University—there are 5,000 non-Exercise Science students taking Exercise Science courses in an academic year. These courses are held in the Smith Center, the new Lerner Health and Wellness Center and in the Exercise Science Building—Building K, located on 23<sup>rd</sup> Street, just across the street from the Medical Center. The program will expand its course offerings to the Mount Vernon Campus, starting with a group of approximately 10 lunchtime classes that begin in fall 2003.

### PARENTI HONORED

David Parenti, MD, professor of Medicine, Microbiology and Tropical Medicine, was one of only a few dozen nominees nationwide for the Association of American Medical Colleges 2002 Humanism in Medicine Award. Dr. Parenti was nominated by some of his students, one of whom wrote: "He teaches compassion and caring not through lectures, but through his own doctor-patient interactions." The actual recipient of the award was Dr. Edwin Bell, a pediatrician from the University of Iowa.



## FACULTY DEVELOPMENT CORNER



*Note: The Faculty Development Corner is a regular Progress item. It features useful tips, book reviews and guest columns focusing on trends and issues in academic medicine.*

Teaching is an important part of being a medical professional. Teaching responsibilities begin early in physicians' careers, when, as residents, they are expected to provide a major part of a medical student's education. These responsibilities continue into practice, where the teaching they offer patients can have a profound influence on their health outcomes.

Though a number of residency programs have recently recognized teaching as an essential skill for their house staff and have instituted teaching skills programs, The George Washington University School of Medicine and Health Sciences is the first to institute a comprehensive teaching curriculum for medical students. The curriculum is called TALKS

## TALKS Program Teaches Medical Students to be Educators

and was developed in 1995 by Larrie Greenberg, MD; Rusty (Gene) Kallenberg, MD; and myself with a grant from the Charles E. Culpeper Foundation. The grant also supported the creation of a TALKS manual to serve as a resource for others interested in developing similar programs. It was distributed in response to requests to more than 120 medical schools in this and other countries.

"TALKS," an acronym for Teaching and Learning Communications Skills, is designed to teach senior students in medicine and other healthcare fields to be educators. It consists of two parts: a series of six workshops and a practicum, in which participants put into practice what they have learned by teaching less-advanced medical students from the freshman and sophomore classes.

"Learning" and "teaching" in the TALKS title reflect the power of teaching as a method of learning. "Communications skills," part of the title to underscore that instruction about doctor-patient communication, is a major thrust of the program. The TALKS title, however, understates the program's breadth. In addition to learning how to teach communication,

participants also learn other educational fundamentals, such as how to give feedback and how to teach a skill. They also learn something a bit more unusual—how to serve as standardized patient-examiners for freshman and sophomore student-learners in high-stakes clinical skills examinations. Using Case Rating Forms, they grade these learners after being interviewed and examined by them in realistic simulations of a clinical encounter. Serving as standardized patients is the first part of the practicum for TALKS seniors. The second part is teaching physical diagnosis (in conjunction with their faculty mentors) to these same less-advanced students in their Practice of Medicine continuity groups.

Overall, the mission given to TALKS students is to help students become more humane and technically adept physicians through teaching. A teaching course such as this one has a special potential to promote the human qualities of

doctoring. There is a strong parallel between the teacher-student and the doctor-patient relationship. Both students and patients are at the bottom end of a power differential—both are vulnerable, but for different reasons. The way physician-teachers treat their students, who look up to them and who need them for help and support, provides these students with an influential and very personal example of how to interact with their patients. With the future doctor-patient relationships of their students very much in mind, the TALKS faculty aspires to establish with them learning partnerships that are safe and supportive. It also shows them the way to establish similar partnerships with those first- and second-year medical students who become their learners.

The TALKS program is offered as an elective to senior medical students. It has been well received and this year, 83 out of a class of 156 have chosen to participate.

*Jim (Benjamin) Blatt, MD*

### GW HOSTS EMERGENCY MEDICINE CONFERENCE

Emergency Medicine research and education is the focus at the Sixth Annual SAEM Mid-Atlantic Regional Meeting

• Sat., March 15, 7:30 a.m.-4 p.m., GWU Media & Public Affairs Building

• Keynote address on the *Future of the Malpractice Crisis*  
Register by February 28.

Faculty—\$75

Residents/Nurses—\$35

Medical Students/PAs—\$25

EMTs/Paramedics—\$10

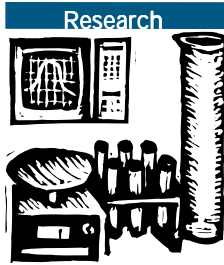
Contact Jeremy Brown, MD, for further information, 202-741-2911, [jbrown@mfa.gwu.edu](mailto:jbrown@mfa.gwu.edu).

*Don't Miss the GWUMC Annual Staff Appreciation Mardis Gras Tuesday, February 25, 4-6 p.m., Marvin Center Ballroom Free Food, Fun, Door Prizes and More*

## CREATING A NEW TRADITION IN RESEARCH

## Student Noted for Research, Sets Sights for Continued Challenges

*The William Beaumont Society is an organization of medical students with a strong interest in research devoted to enhancing the role research plays in the medical education. The William Beaumont Society brings speakers to discuss their research with students, provides information to students about research training opportunities and helps to plan and organize Research Day in March. In keeping with the mission of the William Beaumont Society to promote research in education, this monthly column by Society members highlights the research achievements of students enrolled in the School of Medicine and Health Sciences.*



**T**he Don Glew Poster Award recipient from Research Day 2002 has established an impressive array of research experiences largely due to willingness to tackle challenges and his diligence at exploring the difficult questions. A fourth-year medical student, Marco Ferrone already has paved his way to becoming a clinician and scientist.

Ferrone first began gaining research skills as an undergraduate at Washington University in St. Louis under Dr. Michael Dustin, studying adhesion molecules. In November 1995, Ferrone published

the work in the *Journal of Experimental Medicine*. “Dr. Dustin was excited to have me because I was his first student. He showed me many laboratory techniques, but the most important thing he taught me was how to set up a good experiment.”

After a year studying transplant genetics, Ferrone entered the New York School of Medicine. Upon completing his second year, Ferrone entered the Howard Hughes Research Scholars Cloisters program—a program that takes medical students with a strong interest in research and brings them to the National Institutes of Health (NIH). “By the time you enter the program, you’ve been through a very rigorous screening process. The result is that researchers are eager to have you in their labs.”

Ferrone opted to work with Dr. Allan Weissman studying Ubiquitination, the process through which the body marks proteins to be broken down. “A number of things appealed to me about the project. First, it’s a very exciting topic and relatively new field. There’s a lot of information about transcription factors and the regulation of how proteins get made. Here we address

the other question: how they are broken down.”

“There was also another aspect of the project that appealed to me,” Ferrone explained. “There were parts of the project that hadn’t been worked out yet—Dr. Weissman told me this project had no guarantees and I liked that challenge.” The results from one of his projects were published in the December 2001 issue of *Proceedings* from the National Academy of Sciences. “We showed that the molecule gp78 may be the only E3 responsible for endoplasmic reticulum associated degradation (ERAD) or it may be the parent molecule of a family of similar molecules responsible for ERAD.”

Ferrone was so taken by research challenges that he took an unplanned extra year with the Howard Hughes



Marco Ferrone, MS IV

Cloisters program. “I was fortunate to work with a number of inspiring scientists who were doing amazing research while also being amazing clinicians,” says Ferrone. The next year he transferred to The George Washington University School of Medicine, a place that Ferrone said was supportive of his work as a medical student in a clinical and research setting. He wasted no time in pursuing research challenges. His poster on gp78, the first human ubiquitin ligase discovered to act in the endoplasmic reticulum, garnered him recognition through the Don Glew award. “The research may impact a number of different areas in clinical medicine from oncology to orthopedics,” says Ferrone, who notes that he plans to do his residency in orthopaedic surgery next year. He hopes to find a program that will also allow him to pursue research while doing his residency in Orthopaedic Surgery.

#### STEM CELLS TO TAKE STARRING ROLE AT 2003 RESEARCH DAY

Dr. John D. Gearhart, Institute for Cell Engineering at Johns Hopkins School of Medicine in Baltimore, will keynote the 2003 Research Day, April 25. His seminar is titled “Human Embryonic Germ Cells: Differentiation and Transplantation.” Joining Dr. Gearhart in the stem cell discussion are: Dr. Robert Hawley, Dr. Kenneth Schaffner, Dr. Vittorio Gallo, Dr. Sally Moody and Dr. Timothy McCaffrey.

## Nominees Sought for GW Award

The Joint Committee of Faculty and Students is accepting nominees for the 27th Annual GW Award. Members of the GW community are encouraged to submit names of individuals who have made exceptional contributions to advance the University toward realization of one or more of the following objectives:

- Utilization of the University's historical, geographical and functional relationship to the nation's capital and Washington, DC community.
- Enhancement and development of students' abilities.
- Provision of superior instruction and facilities.
- Provision of a balanced program of student extracurricular activities.
- Demonstration of exceptional competence, integrity and goodwill in the performance of University responsibilities.

To nominate or recommend an outstanding GW community member for the 2003 GW Award, send your nomination form and supporting documentation to the GW Award Selection Committee of the Joint Committee of Faculty and Students, c/o Associate Vice President and Dean of Students Office, Rice Hall, Suite 401. **The deadline for nominations is 5 p.m., Friday, March 7, 2003.** To maintain the integrity of the GW award process, nomination forms, personal statements, credentials and letters of recommendation (no more than two) are placed in a sealed and confidential envelope. Nomination forms and guidelines are also available at the Student Activities Center, Marvin Center 427, and on the first floor lobbies of the Academic Center, Marvin Center and Rice Hall.



## PIONEERING ACTIVIST ON AIDS IN CHINA SPEAKS AT GW

Dr. Wan Yan Hai, a leading AIDS activist and founder of China's first HIV/AIDS counseling hotline more than a decade ago, discussed the continuing AIDS crisis in China and the role of the Internet in battling the disease during a talk at GW last month. His speech, "HIV/AIDS, Personal Websites and Internet Regulations in China," was sponsored by the Medical Center's School of Public Health and Health Services. Dr. Wan argued that wider access and fewer restrictions on the Internet could translate into a better-educated public.

"We must look at the Internet as a public health tool," he said. "It is a tool that can be of great help in the fight against HIV and AIDS."

Dr. Wan is widely considered to be the first Chinese public health official to alert the international community about the dire HIV situation in China. SPHHS Interim Dean Richard Southby introduced him in the Marvin Center's Betts Theater, with the question and answer session moderated by Dr. Richard Skolnik, director of SPHHS' Center for Global Health.

Dr. Wan has been working in HIV/AIDS education, advocacy and research for more than 10 years. He founded China's first HIV/AIDS counseling hotline in 1992 when he was working at the National Health Education Institute, now part of the newly formed Chinese CDC. Dr. Wan was the founder of the non-government HIV/AIDS project known as the "AIZHI Action Project," which recently received official recognition by the Chinese government. The Project is active in education, counseling, opinion polls, research, publishing and conferences aimed at drawing up policy recommendations for the government.

Dr. Wan holds a faculty appointment at the Beijing Modern Management College Department of Health and Anthropology. From 2001 to 2002, he was a Fulbright New Century Scholar and was a visiting scholar at California State University, Northridge Department of Sociology. Dr. Wan has served as a visiting scholar at various higher education institutions, including the University of Southern California's Center for Feminist Research, ONE Institute and China Renmin University Social Psychology Institute.

Dr. Wan is the recipient of the "2002 International Award for Action on HIV/AIDS and Human Rights" by the Canadian HIV/AIDS Legal Network and Human Rights Watch and is also the recipient of the "2002 Defenders' Award by the International League for Human Rights."

Recently, the "AIZHI Action Project" has coordinated a campaign in Henan Province, where hundreds of thousands of rural villagers have contracted HIV through faulty blood collection practices.

### Register Today

for the 15th Annual MS Walk presented by XO Communications Saturday, April 5 or Sunday, April 6. Saturday walk sites begin in Manassas or Oxon Hill; Sunday walk sites are located in Potomac, Reston or Washington. To register or for more information call 202-296-5363 or visit [www.MSandYOU.org](http://www.MSandYOU.org).

*Don't Miss the GWUMC Annual Staff Appreciation Mardis Gras  
Tuesday, February 25, 4-6 p.m., Marvin Center Ballroom  
Free Food, Fun, Door Prizes and More*

## Student, Operation SMILE Team Help Children Realize Dreams

**P**eter Wahba, MS IV, was part of a large medical team that took part in Operation Smile, a program that traveled in late October 2002 through early November to Dujiang-yan, China to provide medical care to children with craniofacial defects.

Wahba's tasks included assisting in patient screenings, unpacking supplies and equipment, organizing and stocking patient wards, supporting hospital ward nurses with airway management and wound care, performing pre-operation screenings, assistance during surgery and assisting in the PACU. Wahba said of his tasks, "My duties may seem a bit mundane; however, when you take these tasks and put them in this new foreign setting with enthusiastic friendly personnel, the learning dimensions and excitement increase exponentially."

Hundreds of patients traveled distances up to more than 100 miles, some on the backs of animals, just to find out if there was even a possibility of surgery, said Wahba. Patient screenings took two days before the final list was posted—Operation Smile performed almost 200 surgeries in four days with only six operating rooms. Patients visiting the clinic ranged in age from a few months to 20 years, with conditions varying from complete cleft palates and lips to severe burns requiring skin grafts around the



Peter Wahba, MS IV, with one of the many children he met through the Operation SMILE program in China during October and November.

eyelids to sustain visual function.

Wahba noted that not everyone who came during the two-day screening period could receive surgery. "Those two days flew by as we worked relentlessly to screen everyone with the disturbing thought that only one-third of those screened would be able to have surgeries, based on age requirements and simple logistics—there wasn't enough time to operate on everyone."

Wahba was the only medical student on a team that consisted of plastic surgeons, anesthesiologists, a pediatrician, operating room nurses, ward nurses, one orthodontist, speech pathologist, a child psychologist, biomedical tech-

nician, plastics resident and two high school students.

Many of the Operation Smile team members flew together from Detroit to Tokyo, but other members met them from China, the Philippines, Canada and South Korea. Several of the members had already worked together on previous missions, but they also welcomed the few newcomers, such as Wahba.

The highlight of the trip, Wahba said, was not the newfound medical knowledge he learned but the interaction with the Chinese people and culture. "I learned how much change we can do...the amount of good you can do and how needy everyone is around the world. Just to have that impact was worth the trip."

## Cautionary Steps Urged for Travel

At present, international tensions remain particularly high and are subject to rapid changes. GWUMC is advising its community to seriously consider the timing and location of any international travel they may be planning. GWUMC's International Medicine Programs (IMP) office encourages potential travelers to consult the U.S. Department of State at <http://travel.state.gov> for more information.

Those traveling to a less-developed part of the world are advised to contact Susan Early, GW Travelers Clinic, 202-741-2470, to learn about recommended immunizations and other issues related to their individual health. Potential travelers may also want to visit [www.cdc.gov](http://www.cdc.gov) or [www.triptrep.com](http://www.triptrep.com).

"Should individuals decide to travel abroad, they are advised to leave contact information with their departmental office or appropriate student coordinator," says Huda Ayas, executive director of GWUMC's IMP. "They need to make sure that they register at the U.S. Embassy or Consular in that country; and make sure that they have valid health insurance coverage in case of emergency. Travelers may obtain such coverage by contacting the GWU Office of Risk Management at 202-994-3265."

For additional information, please contact the Office of International Medicine Programs by telephone at 202-994-2796, fax 202-994-0074 or email [imphma@gwumc.edu](mailto:imphma@gwumc.edu).

## Awards and Recognition

**Paul Tschudi, MA, LPC**, director of End-of-Life Care Programs, was awarded the 2003 DC Mental Health Counselors Association Outstanding Service and Contribution to the Counseling Field Award for excellence, dedication and contributions in the field of coping and healing with illness and loss, during a half-day seminar hosted by the DC Mental Health Counselors, Chi Sigma Iota—Rho Theta Chapter (Counseling Honors Society) and GW's Department of Counseling/Human and Organizational Studies.

**John M. Lachin, ScD**, professor of Biostatistics and Epidemiology and Statistics, director of the Graduate Program in Biostatistics and in Epidemiology and co-director of The Biostatistics Center, and **William Rosenberger, PhD**, have been named by the American Association of Publishers to receive the award for The Outstanding Professional and Scholarly Title of 2002 in Mathematics and Statistics, for their book *Randomization in Clinical Trials: Theory and Practice*.

### Academia

**Frederick K. Goodwin, MD**, research professor of Psychiatry, director of the

Psychopharmacology Research Center, GWUMC and host, "The Infinite Mind," an NPR series, presented results of a recent research study at the annual meeting of the American College of Neuropsychopharmacology (ACNP) in December 2002.

**Tsung O. Cheng, MD**, professor of Medicine, was the co-editor of the recently published *Textbook of Congestive Heart Failure*, printed in Chinese—the first largest volume (1150 pages) on the subject ever published in China. Dr. Cheng was also the co-editor of another textbook, *Modern Cardiology*, published recently in China. It was also the largest textbook on cardiology ever published in China and is widely used in all the medical schools throughout the country.

**Sara Rosenbaum, JD**, was named editor of the new Public Health Law Section of *Public Health Reports*, the bi-monthly journal of the U.S. Public Health Service by Ox-

ford University Press. She, **Joel Teitelbaum, JD, LL.M.**, and **Brian Kamoie, JD, MPH**, will undertake editorship responsibilities for the journal. **Teitelbaum**, associate research professor and managing director of the Hirsh Health Law and Policy Program, has been appointed to the advisory board of the Center for the Study of Race and Bioethics at DePaul University College of Law in Chicago.

### In the News

**Neal Barnard, MD**, an adjunct assistant professor of Medicine, was the subject of a *Newsweek* article on his research on treating patients with type 2 diabetes by putting them on aggressive vegetarian diets.

**Gene Cohen, MD**, director of GW's Center on Aging, was quoted by *The Washington Times* about progress being made towards fighting Alzheimer's disease.

In October, 2002, **Martha A. Embrey, MPH**, research associate for the Center for Risk Sciences and Public Health; **Rebecca T. Parkin, PhD, MPH**, an associate professor in the Department of Environmental and Occupational Health and scientific director for the Center for Risk Science and Public Health; and **John M. Balbus, MD, MPH**, published the book *Handbook of*

*CCL Microbes in Drinking Water*.

**C. Wayne Callaway, MD**, associate clinical professor, was quoted by *The New York Times*, about methods of dieting.

**Daniel Ein, MD**, clinical professor of Medicine, was featured in an article in *The Washington Post* about the new allergy drug called Singulair.

**Kenneth Fine, MD**, assistant professor and director of the sports medicine program, was mentioned in a feature in the January 21 Health Section of *The Washington Post* about a woman who tore her ACL.

**Lawrence J. Green, MD**, assistant professor of dermatology, had a letter he wrote featured in *The Washington Post* "Health Interactions" section.

**Tee Guidotti, MD, MPH**, chair of the Department of Environmental and Occupational Health, was interviewed January 23 by the online health site Web-MD about possible public health ramifications in the Middle East following a war in Iraq.

**Peter Hotez, PhD, MD**, chair of the Department of Microbiology and Tropical Medicine, was quoted by Reuters Health E-Line about the links between childhood vaccinations and diseases like autism. **Dr. Hotez** also was the keynote speaker for the 2003 International Nutritional Anemia Consultative Group (INACG) Symposium on "Integrating Programs to Move Iron Deficiency and Anemia Control Forward" in Marrakech, Morocco. He

*Continued on page 9*

# Round of Applause

## GW Summer Tour Returns

Register rising 2nd-9th graders now for the summer of a lifetime!

130 enrichment and athletic courses to choose from, the sky's the limit!

To learn more and to register, visit <http://gwired.gwu.edu/summercamp>, call 202-994-CAMP (2267) or email [bcurious@gwu.edu](mailto:bcurious@gwu.edu)



## Round of Applause

*Continued from page 8*

spoke on “Killer Infectious Anemias and Their Approaches to Control Through Biotechnology.” About 1,000 people from the Ministries of Health of African and Middle Eastern Countries attended.

**Judith Hsia, MD**, director of the Lipid Research Center, and **Alan Wasserman, MD**, chair of Department of Medicine and president of Medical Faculty Associates, were Program Chairs of the recently broadcast program, “Beyond Statins: The First New Class of Drugs for Cholesterol Management in 15 years.” It was a live interactive satellite broadcast and webcast. Participation was available at hospitals, medical centers and universities worldwide via the Internet.

**Dan Kaniewski**, executive director of the Center for Emergency Preparedness, was interviewed by the *National Journal* about smallpox vaccination policy.

**Howard Lando, MD**, a clinical professor in the Department of Medicine, was referenced in an article about diabetes and athletics in *The Washington Post* on January 31.

**John Larsen, MD**, interim chair of the Department of Obstetrics and Gynecology and professor of Obstetrics and Gynecology, was featured in *HealthScoutNews Reporter* concerning breast cancer patients remaining fertile.



## Round of Applause

**Claire Lugassy-Barnhill, MD**, associate research professor in Medicine and Pharmacology, was quoted in the January 31, 2003 issue of *Angiogenesis Weekly* regarding a research project on melanoma and glioma cells localized along the outside of microvessels. **Raymond L. Barnhill, MD**, a professor in dermatology and medicine was also mentioned in this article.

**Michael Manyak, MD**, a professor of urology and chair of the Department of Urology, was quoted in a January 17 Reuters article as a member of a U.S. advisory panel urging approval for a Boston Scientific Corporation acid reflux treatment.

**David Michaels, MD**, associate research professor for Environmental and Occupational Health, was quoted by *The New York Times* in an article titled “Advisors Put Under a Microscope,” 12/23/02. **Dr. Michaels** also was mentioned as a participant in an article in *The Washington Daybook* regarding a news briefing held by Environmental Media Services on January 23. The briefing discussed top scientists’ concerns about the influence of politics and ideology on the federal science advisory process under the Bush administration. He was also quoted in an article in *The Detroit Free Press* on

January 25, regarding the U.S. Centers for Disease Control’s statement on how much lead is safe in children’s blood.

**Jerrold Post, MD**, with the Department of Psychiatry and Behavioral Sciences, had several interviews while he was traveling in Israel with Voice of America—both radio and television—on Saddam Hussein. Dr. Post also appeared on German TV and has several more interviews pending with ABC, CNN and the BBC.

**Christina Puchalski, MD, FACP**, director of GWish, was quoted in an article titled “Living on a Prayer,” featured in the December issues of *Advance for Nurses* and *Advance for LPNs*. The article outlined how nurses fit their faith into their profession.

**Sara Rosenbaum, JD**, interim chair of the Department of Health Policy was quoted by *The New York Times* in an article about laws requiring the lowering of drug prices. She also was interviewed on NPR’s Morning Edition, January 14, about a Supreme Court case involving regulation of managed care companies in Kentucky.

**Robert Shesser, MD**, professor and chair of the Department of Emergency Medicine, was featured on ABC’s *Good Morning America* discussing his con-

cerns about the use of the smallpox vaccine.

**Gary Simon, PhD, MD**, director of the Department of Infectious Diseases and vice chairman of the Department of Medicine, was quoted in a recent CNN story about the Norwalk Virus.

**Catherine Turley, EdD, RT**, assistant professor of Health Care Sciences, has been appointed to a three-year term on the Editorial Review Board of *Radiation Therapists*, a professional journal published by the American Society of Radiologic Technologists.

*The Washington Post* published an article on January 16, about the appointment of **John F. Williams, MD, EdD**, vice president for Health Affairs and dean of the School of Medicine and Health Sciences, as University Provost.

During the short-lived crisis in January involving the disappearance of bubonic plague samples from a lab at Texas Tech University, **Gary Simon, MD**, with the Department of Medicine, was interviewed live on national television by Fox News. **Peter Hotez, PhD, MD**, chair of the Department of Microbiology and Tropical Medicine, also received an interview request from the Tribune Broadcasting network before officials announced that the samples had simply been misplaced.

*The Houston Chronicle* mentioned The George Washington University Medical Center study about the outcome of Medicare recipients when their HMOs went out of business.

## GOING GLOBAL



This column is a regular feature of *Progress*, detailing efforts at GW Medical Center to reach beyond U.S. borders to share our medical and healthcare experts throughout the world.

## Jordanian Surgery Resident Hones Skills at GW Medical Center

**A**hmad Bashir, MD, completed medical school in June 2001 and spent the following year in the “rotating internship,” including pediatrics, medicine, surgery and obstetrics and gynecology, required for a permanent license in his native Jordan. He has spent the last six months in the U.S., visiting hospitals across the country and interviewing for residencies for next year.

Dr. Bashir is visiting GW as an observer through The International Medicine Programs, headed by executive director Huda Ayas. Before coming to Washington, Dr. Bashir spent two months in Chicago, a month in Cleveland and two weeks in Baltimore. Following two weeks here at GW, he will travel to Houston and then home to Jordan. Dr. Bashir’s sister lives in Iowa City, IA, and provides him with a “home base” as he crisscrosses the country, supplementing his medical education and preparing for next year.

While Dr. Bashir hopes to complete his surgical residency in the U.S., he has found the application process challenging because he did not attend medical school in the U.S. However, he is confident that the paperwork obstacles can be over-



Dr. Ahmad Bashir, above and far right, learned much working with Dr.

Stanley Knoll, shown performing surgery, left, in the picture at right, with Dr. Bashir observing.

come. Completing a residency here in the U.S. is important, says Dr. Bashir, “because the U.S. is the only country in the world that offers an established program with a specific number of required cases and a research component. It is my dream to complete my residency in the U.S. and then return to Jordan to join my father’s general surgery practice.”

## GW, APHA Form Task Force to Target Healthcare Needs in Afghanistan

The George Washington University’s International Medicine Programs, in collaboration with the American Public Health Association, recently formed a task force to address the needs of Afghanistan Health Care facilities and services. Together they will utilize their resources to identify the major impediments to and opportunities for improving the health and development of Afghani people. The task force includes Huda M. Ayas, executive director, International Medicine Programs; Muhiuddin Haider, PhD, assistant professor, Global Health; Rachel Mazzotta

executive director, The Ronald Reagan Institute of Emergency Medicine; Elaine M. Murphy, PhD, senior associate, Center for Global

Health; Allan K. Jones, PhD, director, Education and Global Health Resources, The American Public Health Association; Laurence Laumonier-

Ickx, MD, principal program associate, Management Sciences for Health; and Zohra Rasekh, MPH, president of the Global Watch Group.

The task force will assess the existing emergency health services, provide healthcare training, evaluate mental health services, and focus on maternal and child health services. They plan to educate the public, train traditional birth attendants and explore setting up a school of public health to address major issues. The long-term goal of the task force is to expand preventive and public health systems to improve the lives of Afghani people.

### GW Professor Visits Tunisia

Dr. Rebecca Parkin, associate research professor, Department of Environmental and Occupational Health, traveled to Tunisia in December as a delegate of a select team of U.S. scientists invited to the Iranian-U.S. Water Conversation and Recycling Symposium. Dr. Parkin presented her recent work on early identification of emerging contaminants in drinking water and contributed public health perspectives to the interdisciplinary discussions and site visit. At the end of the trip, delegates met with the Secretary of the State of Tunisia to lay the foundation for a similar collaboration between the U. S. and Tunisian scientific communities.

GOING GLOBAL



This column is a regular feature of *Progress*, detailing efforts at GW Medical Center to reach beyond U.S. borders to share our medical and healthcare experts throughout the world.

## Exchange Program Welcomes Drum Tower Fellows

The GW Medical Center has had a working relationship with Drum Tower Hospital in Nanjing, China for five years. The east-west relationship began as an exchange program, affiliated with Operation Smile and designed to build a critical care program/service in Nanjing.

Associate Professor Dr. Michael Seneff, Anesthesiology and Critical Care, and Huda Ayas, executive director, The International Medicine Programs, were instrumental in developing this relationship, conducting the initial site visit and needs assessment and establishing professional relationships. The International Medicine Programs continue to coordinate with Drum Tower Hospital.

Through this relationship, GW Medical Center has provided education and training materials to physicians at Drum Tower Hospital. GW physicians continue to keep in contact with their Chinese counterparts electronically and to assist them with medical issues as they arise. Through GW's efforts, Drum Tower Hospital now has an established critical care service that has been recognized



Dr. Qin Gu

by the local government as a quality service.

As part of this ongoing relationship, GW also provides "hands-on" training for Chinese physicians from Drum Tower Hospital. GW currently is hosting two physicians from China—Dr. Qin Gu, a critical care physician, and Dr. Xin Xu, an anesthesiologist—for three months. This is the fourth time that GW has had visiting physicians from Nanjing.

According to Dr. Gu, the Intensive Care Unit (ICU) at Drum Tower Hospital is different from the ICU here at GW. During her three-month stay at GW, Dr. Gu is observing the ICU, attending morning rounds and sitting in on lectures to learn new techniques she can take back and use in China. This is Dr. Gu's

second visit to GW; about three years ago she spent one month here but wanted to return to and spend more time in the U.S.

Dr. Gu describes their experience as extremely useful. Both welcomed the chance to come to the U.S. and Dr. Gu praises the relationship with GW. "The doctors here have always been very responsive and helpful in answering questions about patients and following up by sending additional information to the doctors in China," says Dr. Gu. "This relationship has been rewarding as it has helped me in my patient care."

"These visits are invaluable," says Dr. Gu. "The phy-

sicians at the Drum Tower Hospital are grateful for the support and information the GW physicians share with them."



Dr. Xin Xu



In January, a delegation from the Tehran University School of Public Health met with Interim Dean of the School of Public Health and Health Services Dr. Richard Southby to formalize a memo of understanding between the two universities.

## Smallpox Vaccine, Issues Reviewed at Grand Rounds

Smallpox was the topic of the day at a recent Grand Rounds lecture in GW Hospital's Auditorium. Bruno Petinaux, MD, Emergency Medicine, GW Medical Center, laid out the history of smallpox, its effects on the body, the vaccination process and possible side effects. What follows are excerpts from the PowerPoint slide presentation that accompanied Dr. Petinaux's talk.

1754—First use of smallpox as a biological weapon.

1796—Jenner noted that cowpox infection in humans protected against smallpox.

1967—WHO began the smallpox eradication program.

1977—Last naturally occurring case of smallpox.

1978—Human case of smallpox in a lab in the UK.

("The last case of smallpox was an accidental exposure in a lab in Iraq," according to Dr. Petinaux.)



Lead presenter Dr. Bruno Petinaux, right, and Dr. Yolanda Haywood discuss national smallpox issues with White House Fellow Dr. Cesar Aristeiguieta following the GW Grand Rounds.

## Vaccine

The vaccine is given into the right upper arm area using 15-25 stabs into the skin into an area of 5 mm in diameter

Between 66-84 percent of vaccines will form a reaction

Full immunity is provided in more than 95 percent of the vaccines for 5-10 years

It is a live vaccinia virus vaccine—due to the vaccine being a live vaccine, accidental auto or contact inoculation of other cutaneous sites may occur (common sites are the face, eyelid, nose, mouth)

It produces mostly only cutaneous disease

### CDC Guidelines

If the vaccine is given successfully within 3-4 days of source exposure, smallpox can be avoided

Once vaccinated, the contact must monitor their fever curve for 14 days—if the temperature rises over 101.5F, the contact is assumed to have been infected and must be strictly isolated

Day 3-4—the area becomes red and itches and will begin to form a vesicle

Day 7-11—the fluid-filled vesicle on a red base enlarges, become umbilicated and then pustular; fever in 33 percent

Day 14—the pustule dries, redness decreases

Day 21—the scab falls off and the area, at first pink-colored, will become flesh-colored

### To avoid contact inoculation

- Wash hands after touching the site
- Cover the vaccination site from day 2-21 with a 2X2 gauze pad taped over with another dressing over it, wearing a long-sleeved shirt
- Wash all clothing, especially towels, in warm water after use
- Change dressings in special areas and dispose in a safe manner

## Prostate Cancer Summit

*Continued from page 1*

Officials underscored the urgency in fighting a disease that, per capita, hits the District of Columbia harder than any other city in America. And while the mortality rate among those with prostate cancer is around 10 percent nationwide, the mortality rate locally is closer to one in six.

"A lot of this is due of problems with finding adequate healthcare," said Francisco Semiao in an interview. A 2002 MPH graduate from SPHHS, Semiao is

now program manager for Comprehensive Cancer Control at the District of Columbia Department of Health. "There's a problem with access, there's a problem with followup, and a lot of the diagnoses that are made come at a later stage in the disease."

Rep. Cunningham, a Navy combat pilot during the Vietnam War, described the fear he experienced upon getting his diagnosis of prostate cancer. "I was shot

down over Hanoi," he said. "And that comes in second compared to how I felt when my doctor said, 'Duke, you've got cancer.'"

The session on prostate cancer was third in a series of town hall meetings hosted by the Mayor on health issues in the District of Columbia. The previous meeting was also held at GW and focused on improving medical care for the District's uninsured.

# Smallpox

*Smallpox is a DNA Virus of the genus Orthopoxvirus*

*Smallpox is the only virus of this family to cause systemic disease in humans*

*Monkeypox, cowpox and vaccinia only cause cutaneous lesions*

Smallpox is primarily transmitted via inhalation—once inhaled into the oropharynx, it replicates locally for 3 days

After local lymphnode replication, the virus enters the lymphatic system and continues replication

After an incubation period (7-19 days), the virus spills over into the bloodstream causing a viremia

Onset of prodromal symptoms—day 10-14—weakness, back pain, headache, cough, fever, other nonspecific flu-like symptoms

Along with the development of prodromal symptoms, the rash will also occur (typically as the fever curve is falling)

Rash begins in the oral cavity first and develops over the face, fore-arms and hands

With the onset of the rash, patients become infective to contacts—this is most pronounced while the patient has oral lesions as titers within the saliva are very high making droplets produced by the patient very infectious

Scabs are thought to be less infectious due to the proteinaceous matrix in the scab around the virus

Patient stops being infectious when all scabs have fallen off; extremities are usually last—takes up to 3-4 weeks

Death occurs from overwhelming viremia causing organ failure

Mortality rate in unvaccinated population is 30 percent; in a population of unvaccinated contacts, the secondary attack rate has been estimated to be between 37-88 percent

## Who is at Risk

Face-to-face contact under two meters

Direct medical caregivers, those processing or collecting laboratory specimens, handling linen or waste

Exposure to fine particle aerosol from a cough

## Understanding the Other Bioterror Agent: Ricin

By now, most have heard plenty about smallpox and anthrax, but what about some of the other potential bioterror agents? Anti-terror police recently found traces of ricin, a deadly toxin, during a raid on a suspected terrorist hideout in North London. Subsequent reports suggested terrorists may have been planning to use ricin to poison the food supply of troops at a British military base. *Progress* sat down with Tee Guidotti, MD, MPH, DABT, chair of the Department of Environmental and Occupational Health, to find out more about ricin.

### *Q: How easy it is to acquire this substance?*

A: It is not difficult to extract ricin from castor beans - it is left behind in the bean residue after the castor oil is extracted. But it takes someone who knows what they are doing and lots of castor beans.

### *Q: How potent is it, and what are the symptoms of ricin poisoning?*

A: Ricin is one of the most potent poisons known to humankind. Ricin toxicity is, in essence, a total shutdown of the cellular machinery of the body. This is achieved by inhibiting protein synthesis. There is a lag time of eight hours or more and then one organ system after another starts to fail, including the lungs, liver and kidneys.

### *Q: Is there any treatment or antidote?*

A: No antidote is available. A toxoid is under investigation but is probably not going to result in a practical treatment. Ingestion of the castor beans itself is often treated by gastric lavage (stomach pump) and activated charcoal; and victims who are symptomatic can be put on life support. However, even with all this scary hype, people who just eat or swallow castor beans have a very low mortality rate (about 10 percent) because they do not get much of the poison in their system. Use of the toxin in terrorism is different because people would be exposed to a more concentrated product.

### *Q: How attractive is this toxin to terrorists?*

A: This agent is not well suited for mass exposure. It is not likely to be used as a weapon of mass destruction. On the other hand, it is well suited to assaults on individuals and was actually used in 1978 in a successful assassination.

## Stem Cells—Medicine's Silver Bullet?

Navigate the political and medical waters in the Winter issue of *GW Medicine and Health Magazine* available February 21, 2003. Also includes coverage of Colonials Weekend, White Coat and Convocation Ceremonies and more.

For more information, contact GWUMC Communications and Marketing, Suite 313, Ross Hall, 202-994-8069.

## Staff Development Opportunities

A leading academic health center in the metropolitan area and the world, GWUMC also affords staff development opportunities to hone, broaden or improve skills. Following is a listing of some of the current university training classes. Classes are held at the Marvin Center. For information, visit [www.gwu.edu/~etd](http://www.gwu.edu/~etd).

### February

- Office Skills (nonexempt office employees in salary grades 5-12), Feb. 21, 9-4:30, Room 307.
- Time Management for Managers: Setting the Right Pace (exempt managers and supervisors), Feb. 28, 9-12:30, Room 404.

### March

- Compensation and Salary Administration (managers and supervisors), March 18, 9-12, Room 404.
- Financial Overview (managers and supervisors), March 11, 9-12, Room 403.
- Managing a Culturally Diverse Workforce (managers and supervisors), March 28, 9-12:30, Room 405.
- Sexual Harassment: Myths and Facts (nonexempt employees), March 20, 9-12, Rooms 413-414.
- Skills for Employees in Lead Positions (nonexempt employees), March 25-26, 9-4:30, Rooms 413-414.
- Staff Recruitment and Employment Interviewing (managers and supervisors), March 6, 9-12:30, Room 402.
- Time Management (nonexempt employees), March 14, 9-12:30, Room 403.

### April

- Basic Benefits (managers and supervisors), April 22, 9-11, Room 405.
  - Communicating in Difficult Situations (any employee), April 24, 9-12:30, Room 405.
  - Customer Service: Techniques and Practices (any employee), April 23, 9-12:30, Room 403.
  - Equal Employment Opportunity/Affirmative Action (managers and supervisors), April 10, 9-12:30, Room 404.
  - Management Skills and Practices (managers and supervisors), April 8 and 9, 9-4:30, Room 405.
  - Payroll Processes and Procedures (managers and supervisors), April 17, 9-11, Room 402.
  - Telephone Techniques (any employee with telephone answering responsibilities) April 15, 9-12:30, Room 404.
  - Working with International Students, April 29, 9-12:30, Room 403.
- Classes offered through GWUMC Himmelfarb Library.*

### February

- Medline (OVID), Feb. 19, 3-4 p.m.
- Searching PubMed, Feb. 26, 3-4 p.m.
- Access Level I, Feb. 27, 10-noon, free for GWUMC staff; \$100 for MFA and hospital staff
- SPSS, Feb. 27, 3-4 p.m., free for GWUMC staff; \$50 for MFA and hospital staff

### March

- Introduction to PowerPoint/Effective Presentation, March 4, 2-4 p.m., free for GWUMC staff; \$100 for MFA and hospital staff
- Patient Education Resources on the Web, March 12, 12-1 p.m.
- Access Level II, March 26, 10-noon, free for GWUMC staff; \$100 for MFA and hospital staff
- GroupWise E-mail, March 26, 12-1 p.m., free for GWUMC staff; \$50 for MFA and hospital staff

## A LOOK AT AGING

### Center Launches New Initiative

The Center on Aging, Health and Humanities, part of GW Medical Center's Institute for Health Policy Outcomes and Human Values, has launched a major new initiative to reinforce positive images of aging in society. Center Director Dr. Gene Cohen says one of the first projects for the new SEA Change (Societal Education about Aging for Change) initiative will be to develop a reading list which libraries can use to portray aging in a positive light.

"We're at a turning point in modern gerontology, the first since the 1970s," said Dr. Cohen, who was the first to serve as head of the Center on Aging at the National Institute of Mental Health in the 1970s. "We've known for decades about the problems associated with aging. But the focus is turning now to potentials."

SEA Change will focus particularly on how young people view aging. The Center is already collaborating with the American Library Association to develop a reading list for children. Dr. Cohen says too many children's stories portray old people as villains. "Think of Cinderella's stepmother, or the evil queen in Snow White and you know what I'm talking about," he said. Subsequent SEA Change projects will introduce a range of novel approaches for better educating the young about aging.

## Proteomics Core Facility Opens

The GW Proteomics Core Facility officially opened its doors for business Jan. 6. Located in Ross Hall, Room 631, the mass spectrometry section of the facility includes a new MALDI-TOF mass

spectrometer (Kratos-Axima Plus) that primarily will be used for protein identification. Use of the instrument is contingent upon attending a training session that includes some hands-on experience. Due to limitations in space, training sessions are limited to a maximum of five people per session. Weekly sessions will be scheduled on a regular basis every Monday afternoon to ensure that everyone receives proper training. Participation is on a first-come first-served basis. Those interested may sign up for training by e-mailing [phmpxl@gwumc.edu](mailto:phmpxl@gwumc.edu).

Questions should be directed to Paolo Lecchi, PhD, associate research professor. Further details about available services and fees will be posted in the GW Proteomics Core Facility web page that is currently under construction.



Don't miss the GWUMC annual *thank you* to employees—Hospital, MFA, SMHS and SPHS—for a great year. Enjoy plenty of food, fun, music and door prizes.

## GWUMC Unveils New Mission

*Continued from page 1*

aways at community events. Explaining the change in the wording and design, John F. Williams, MD, EdD, provost and vice president for Health Affairs said, "It was time to unveil a new vision and mission. This clearly reflects the fact that we have just completed a successful restructuring to divest our clinical enterprises and focus on our core missions of education and research. In light of the changes, I asked for input on how to reword our future goals."

Dr. Williams said the vision and mission statements have now been refined to explain

the clinical divestment and to emphasize education and research as the Medical Center's core functions while improving the connection between the Medical Center's

mission and the missions of the School of Medicine and Health Sciences, the School of Public Health and Health Services and the main University.

"We had a lot of feedback in this project," continued Dr. Williams. "In my mind, that is a clear reflection of everyone's commitment and support of this organization and its future. The new document is something that will be integral to all of our communications, strategic planning and community outreach."

For Mardi Gras party goers, there will be a special mission bookmark distributed at the GW Medical Center Appreciation Event. You could say this party favor will "mark" the beginning of a new and exciting direction for our academic health center.

### GW Tapped to Lead First Responder Training Effort; Create READI Center

*Continued from page 1*

Dr. Williams stressed that collaboration with regional partners is the key to making this a successful venture. "We cannot do this alone. This is clearly a great opportunity for us to showcase the academic expertise that has put us at the forefront of emergency preparedness training and to work with our Virginia partners in creating the new READI center."

## Faculty Appointments—January 2003

*~Full-time Faculty~*

### Emergency Medicine

**Gary Lamont Little, MD**, instructor

**Bruno Petinaux, MD**, instructor

### Prevention and Community Health

**Mark Cameron Edberg, PhD, MA**, assistant research professor

**Moirra Gutman Killoran, PhD, MA**, assistant research professor

*~Part-time Faculty~*

### Anatomy and Cell Biology

**Stephen B. Williams**, adjunct instructor

### Biochemistry and Molecular Biology

**Gideon Marius Clore, MBBS, PhD**, adjunct professor

### Emergency Medicine

**Irfana Ali, MD**, assistant clinical professor

### Global Health

**LTC Jose A. Betancourt, MS**, adjunct assistant professor

**John E. Borrazzo, MS, PhD**, adjunct assistant professor

**Rathavuth Hong, DrPH, MPH, MD**, adjunct assistant professor

**Kenneth Paul Moritsugu, MD, MPH**, adjunct professor

**Jose Romero Teruel, MD**, adjunct assistant professor

**Edwina Yen, MPH, MD**, adjunct assistant professor

**Michael E. Zeilinger, MPH, DPM**, adjunct assistant professor

### Health Care Sciences

**Sarah Catherine Anderson, MS**, assistant clinical professor

**Erwin A. Bondareff, MD**, assistant clinical professor

**Catherine A. Chapman, MSN, RN**, assistant clinical professor

**Yung Jin Cho**, assistant clinical professor

**Carroll David Christiansen, MD**, assistant clinical professor

**Michael Clyde Doll, EdD**, assistant clinical professor

**Mark Edward Franke, PA-C, MD**, assistant clinical professor

**Ronald E. Greger, MD, MGA**, assistant clinical professor

**William A. Hazel, MD**, assistant clinical professor

**Nathan F. Januz, MHS, MPH**, assistant clinical professor

**Vanessa Yoder Jewell**, assistant clinical professor

**Joseph L. Kaplowe, PA-C, MHSA**, assistant clinical professor

**Andrea J. Sloan, JD**, adjunct assistant professor

**Kirsten Thomsen, PA**, adjunct assistant professor

### Health Policy

**Tanya Ehrmann, MPH**, adjunct professor

### Health Services Management and Leadership

**Daniel Ronald Hawkins**, adjunct assistant professor

**Luc Reginald Pelletier, MSN**, adjunct assistant professor

### Medicine

**Neal D. Barnard, MD**, adjunct associate professor

**Robert A. Gallino, MD**, assistant clinical professor

**Ann Marie Gordon, MS, MD, PhD**, assistant clinical professor

**Harvey I. Katzen, MD**, associate clinical professor

**Raymond W. Turner, MD, MPH**, assistant clinical professor

### Ophthalmology

**James K. Luu, MD**, assistant clinical professor

### Prevention and Community Health

**Vivian Pereyra, MD, MPH**, adjunct assistant professor

### Psychiatry and Behavioral Sciences

**Antoine George Hani, MD**, clinical professor

**Carol Cole Kleinman, JD, MD**, assistant clinical professor

## Avon Gives Award for GW MFA Breast Care, Mammography Program

The Avon Foundation Breast Care Fund has awarded a \$100,000 one-year grant to The George Washington University Medical Faculty Associates (GW MFA) Mobile Mammography Program. It is the fourth year that the program has received Avon Foundation funding to support its work on this important health issue.

The grant is part of Avon's mission to increase cancer awareness and provide financial support to programs that deliver breast cancer screening services to the underserved community. This grant will fund two critical positions in the Mobile Mammography Program, the Bi-Lingual Health Educator and the Social Worker/Patient Navigator. Both of these positions ensure that any woman who is screened on the GW

Mammovan has access to bilingual services and, if a diagnosis of cancer is established, the patient navigator ensures that the woman receives appropriate care and follow-up.

The GW MFA Mobile Mammography Program provides screening mammograms to women in the corporate and underserved community six days a week. The GW Mammovan was initially funded from a generous grant from the Cancer Research and Prevention Foundation in 1996. Since that time, the Mobile Mammography Program, the only one of its kind in this area, has reached more than 15,000 women with screening mammograms and information about the importance of early detection of breast cancer.

Every woman is at risk for breast cancer. It is the most common form of cancer in women in the U.S., and the

leading single cause of death overall in women between the ages of 40 and 55. In 2003, it is estimated that there will be 213,000 new cases of invasive breast cancer, and approximately 60,000 cases of pre-invasive breast cancer diagnosed in the United States. Although the mortality rates have continued to decrease, Washington, DC, has the highest breast cancer mortality rate in the country.

Nearly 30 to 40 percent of breast cancer deaths could be prevented if all women practiced the three early detection steps. The American Cancer Society (ACS) recommends annual mammograms beginning at age 40; annual clinical breast exams beginning at age 20; and monthly breast self-examinations beginning at age 20. According to the ACS, the majority of women who don't comply with these

guidelines are poor and underserved women.

"Many factors, ranging from fear to lack of a doctor's recommendation, keep women from practicing good breast health," says Jean Lynn, program director, GW MFA Breast Care Center and Mobile Mammography Program. "There is a tremendous need to reach women with information and resources," adds Lynn. "We are grateful that Avon shares this mission, and has chosen to support our program."

GW's Mobile Mammography Program was one of 135 grant recipients selected from all entries received nationwide in the 2003 cycle of Avon Foundation Breast Care Fund grants. These organizations were chosen based on their ability to reach women effectively, particularly minority, low-income and older women, who are often medically underserved.

### GWUMC Mission

As a leader in education and research, The George Washington University Medical Center strives to set standards of excellence by:

- Valuing a diverse and dynamic community that encourages life-long learning
- Striving for, refining and defining quality in all endeavors
- Providing exemplary and innovative teaching programs that produce astute, highly competent, and compassionate health professionals and scientists trained and prepared for the future
- Generating and expanding health knowledge through superior research programs
- Enhancing the delivery of compassionate and high quality health care through our education and research activities
- Improving the health and well-being of our local, national and international communities

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