William S. “Sandy” White has expanded the foundation’s professional staff and implemented new processes and procedures designed to streamline invention disclosure and technology transfer. The ultimate goal is to expedite translation of promising discoveries made by UAB scientists from the laboratory to the marketplace, improving the health and lives of the public.

The UAB Health System (UABHS) has instituted an organizational strategy to address fundamental goals that permeate the enterprise’s operations. These include development and refinement of a care delivery model, providing quality care efficiently, analysis and improvement of the supply chain process, and exploration and refinement of medical record documentation and coding practices. The organizational strategy is focused on 29 strategic initiatives linked to viability within the major domains of supplies, labor, and volume.

Each initiative has an identified sponsor who leads a cross-functional team and ensures all aspects of the project are documented in E4IS, the Web-based application endorsed by UABHS for documentation, tracking, and reporting.

Project teams meet regularly to evaluate effectiveness, eliminate barriers to progress, and devise action plans to sustain successes. Project sponsors communicate results of the team’s efforts each week to the UABHS Executive Steering Team, which oversees direction of the initiatives and ensures alignment with core organizational goals.

The strategic initiatives approach perpetuates the momentum toward understanding, communicating, and meeting the entire organization’s primary needs. By capitalizing on organizational synergies identified within and among the initiatives, UABHS can maximize operational efficiencies and streamline shared processes. Each initiative is essential to the attainment of the Health System’s mission and ongoing commitment to enhance the quality of care provided at UAB.

The Research Foundation’s rapid expansion is an integral part of a coordinated effort by university administration to assure UAB is positioned to meet its objective of ranking among the top 10 institutions in National Institutes of Health research funding. White says, “That commitment to growth played a
key role in my decision to join UAB, as did the university’s internationally recognized quality of research.

“Now that essential new staff and procedures are in place, I’m starting to focus on establishing a more comprehensive dialogue with faculty, informing them of the foundation’s expanded resources so they can play a more active role in the technology-transfer process,” he says. “This office has a number of functions; some are visible, but much of our work takes place behind the scenes. Each grant that comes to UAB has intellectual property rights and ‘technology-transfer’ wrapped around it, and where required, we are directly involved in assisting faculty with the often complex processes. If faculty need to transfer critical research material from one institution to another, we are part of the team assuring this is legally managed.”

TAPPING POTENTIAL

White points to biotechnology as a field with dramatic growth potential. “The science of biotechnology is only about 20 years old, and I think the next 10 years will bring an explosion of technologies that have emerged from 2 decades of accumulating knowledge. UAB is a biotechnology powerhouse with world-class research under way in a multitude of areas, including, but certainly not limited to, basic molecular biology, immunology, and oncology. Biomedical engineering is another UAB area of research holding much future promise.”

Since its inception in 1986, the UAB Research Foundation has generated $21 million in revenue for the university, returning more than $16 million to inventors and academic departments. The foundation has produced 33 start-up companies based on UAB technologies, completed 300 option and licensing agreements, and negotiated $19.5 million in research agreements.

“From a revenue generation standpoint, which provides direct economic benefits to the university and the entire region, fiscal year 2005 is already guaranteed to be far one of the best in UAB’s history,” White says. “I’m excited that we have already been able to close multiple million-dollar deals since I joined the organization. This has only been possible with support from the faculty and other elements of university administration, including the UAB legal department.”

Dr. Leona Fitzmaurice

UAB Research Foundation’s current professional staff includes Director of Technology Transfer Leona Fitzmaurice, PhD, who has more than 10 years of direct major university technology-transfer experience, Senior Licensing Associate Alane Barnes, JD, Licensing Associates Emily Duff and George Megaw, PhD, and Program Manager Debbie Bidanset, PhD.

“Breakthroughs in medicine and biotechnology represent years and sometimes decades of research,” White says. “By licensing that technology, the Research Foundation interfaces with industry to facilitate translation of the world-class work done at UAB into products that improve health care and create revenue and jobs that flow back to the university, helping continue the process of scientific discovery and medical advancement.”

For more information, contact White at 934-9911.

AΩA Elects Members

Senior medical student and Alpha Omega Alpha (AΩA) President James Stephen Spann announces the election of new members to Alabama’s Alpha Chapter of AΩA.

AΩA OFFICERS

President James Stephen Spann, Class of 2005
Vice President Micah Todd Monaghan, Class of 2005
Vice President Jennifer Chiachen Hsia, Class of 2005

CLASS OF 2005
Matthew Brian Albright
William Sama Fonbah
Amy Susan Hajari
Nady Hamid
Jennifer April Hanan
Brad Settle Huber
Alexandra Elizabeth Leigh
Joe Spencer Liles
Billy Wayne McGough
Annal Dhananjayan Meleth
Kimberly Ann Parkerson
Kinnari Baldev Patel
Christy Friday Pearce
Sally Cathleen Rohrer
Jennifer Michelle Scalici
Jane Ogden Schell
Audry Louise Slane
Nicholas James Smith
William Stephen Stigler
Erica Lynn Thomas
Lindsey Carroll Tilt
Katherine Mason Trucks
Duane Robert Wesemann
Luisa Ann Wetta

CLASS OF 2006
Brent Joseph Archer
William Joseph Jenkins
Lyndon Byong-Keun Lee
Jeremy J. Murdock
Cynthia Ann Munch
Rebecca A. Manning
William Sama Fonbah
Benjamin David Powell
Matthew Brian Albright

FACULTY
Nancy Dunlap, MD, PhD

HOUSE STAFF
Jason Hefner, MD
Five 2005 Diethelm Scholars Selected

INVESTING IN FUTURE SURGEONS

UAB’s Arnold G. Diethelm Student Scholar in Surgical Sciences program offers medical students insight into a surgeon’s daily life. “Students often receive little exposure to surgery in their first years of medical school,” Director of Undergraduate Surgical Education Paul Gardner, MD, says. “The program is designed so students spend about 2 weeks in diverse areas: anatomy, surgery, and surgical pathology. They can follow the comprehensive flow of surgical work, from seeing patients in clinic to observing in the operating room to pathological assessment and postoperative management.”

This year, 27 applicants applied for five positions. Scholars were selected by evaluation and scoring of student abstracts by a panel of three judges. The program begins June 20 and runs through July 29.

The five 2005 Diethelm scholars are Sarah Fulghum, Christopher Dywayne Key, Jinnie Kim, James Timothy O’Neil, and Jessica Zarzour.

In 2003, Department of Surgery Chair Kirby I. Bland, MD, initiated the program in conjunction with UAB’s Department of Pathology. It was named in honor of Dr. Kirby’s predecessor, Arnold G. Diethelm, MD, who was recruited to UAB in 1967 by John W. Kirklin, MD, to develop the organ transplantation program. Dr. Diethelm, who trained a generation of UAB surgeons during 35 years of service and built the nation’s largest renal transplant service, succeeded Dr. Kirklin as Department of Surgery chair in 1982, heading the department for 18 years. He continued his work in the Division of Transplantation until he became professor emeritus in 2002.

By 2020, the United States will need at least 50% more surgeons, the Annals of Surgery reported in 2003.

Health System Strategic Initiatives continued from page 1

SELECTED INITIATIVES

LABOR
Care Delivery Model (sponsors, Cynthia Barginere & Marilyn Henry)
Compensation and Benefits (Reba Belcher)
Workforce Development and Satisfaction (Hans Donkersloot)
Nursing Productivity (Cynthia Barginere)

SUPPLIES
Supply Chain (Robert Cofield)
Surgery Cost Opportunities
Pharmacy Cost Opportunities (Mark Todd, PharmD)

DIAGNOSTIC AND INVASIVE CARDIOLOGY

Cost Opportunities (Marilyn Henry)

VOLUME

Ambulatory Visit Management (Reid Jones, Mary Beth Briscoe, Nancy Dunlap, MD, PhD)
Bed Planning (Arpan Limdi)
Coding and Documentation (Joan Hicks)
Revenue Cycle/Patient Progression (Robert Cofield)

DOM CHAIR CANDIDATE PRESENTATIONS

The UAB community is invited to attend an upcoming presentation from a candidate for the Department of Medicine chair. Robert Kimberly, MD, who is director of the Division of Clinical Immunology and Rheumatology and director of the Arthritis Center, will make a presentation on Tuesday, May 24, at noon in Spain Auditorium.

NIH CLINICAL CENTER

Visit the National Institutes of Health (NIH) Clinical Center to search for information about clinical research studies and other items of interest. Conferences, meetings, and special programs also are listed.

www.cc.nih.gov

To access a Synopsis article from the last 2 years, visit our Web site at www.health.uab.edu/synopsis. You can search by date or subject in the left sidebar.
Communication Crucial For Informed Consent

Obtaining informed consent requires clear physician-patient communication, says Linda Mittleman with UAB’s Office of Risk Management and Insurance. “By taking time to obtain informed consent in the proper manner, the physician has a final opportunity to be sure the patient fully understands the procedure to be performed and its associated risks,” she explains.

“In addition, the physician must explain alternative procedures and the risks involved, as well as the consequences of doing nothing. Therefore, only the physician should obtain consent — not a nurse, clerk, or any other staff member,” Mittleman adds.

A consent form with a patient’s signature is helpful in protecting the physician in an informed consent lawsuit. “The testimony of the patient that the signature on the form is his or hers is powerful evidence that the conversation between patient and physician occurred,” she says.

“In addition, actual documentation of the conversation with the patient in the medical record, including the concerns and questions asked by the patient, can be critical to the physician’s defense.”

Mittleman offers physicians additional suggestions:

◆ Have a family member or close friend of the patient present during informed consent, if at all possible, to hear the facts and ask appropriate questions on the patient’s behalf.

◆ Obtain informed consent as far ahead of a scheduled procedure as possible.

◆ Avoid medical and technical jargon

“UAB risk managers are available to speak to Health System physicians concerning any legalities pertaining to the delivery of health care,” she says.

For further information, contact Risk Management at 934-5382 or visit the SPP Web Site at https://scr.hs.uab.edu.