A SAFER TOMORROW

SHRP Responds to the Threat of Terrorism
For the past three years, our nation has focused intensely on the threat of terrorism. After the anthrax scares in Washington, D.C., and New York, that focus expanded to include bioterrorism. Threats like these, along with the ongoing challenges presented by natural and man-made disasters, have forced us to look more closely at our ability and preparedness to respond to large-scale emergency situations.

Health professionals educated at SHRP are critical to determining how our state and our nation will respond to emergencies. Physician assistants, respiratory therapists, medical technologists, and radiographic technologists, among others, all play important roles in the first-line medical and diagnostic activities related to emergency response. Health administrators and those who manage health information must be prepared to deal with large-scale emergencies and the consequences of bioterrorism. Furthermore, those in health informatics must look at how we can better coordinate our communication in these crisis situations.

As you will see in the issue of Spectrum, the School of Health Related Professions is actively working to better prepare our students for these challenges, regardless of discipline. We are also engaged in research to determine how to better coordinate emergency response activities. Yet we are still challenged by the fact that even though SHRP enrollment is at an all-time high, the nation as a whole is still not producing the number of practitioners necessary to staff our hospitals and other health-care settings.

As we have mentioned before, the school is actively involved in promoting legislation to expand the allied-health workforce. The Allied Health Reinvestment Act (HR 215) will provide funds to allow UAB and other universities and community colleges to recruit more students, expand programs, develop innovative educational delivery systems, and provide scholarship support for students entering our disciplines.

To this end, Alabama’s congressional delegation has been extremely supportive of our efforts. Representatives Spencer Bachus, Artur Davis, Jo Bonner, and Robert “Bud” Cramer have all signed on as co-sponsors of this bipartisan bill. If you get the opportunity please thank them for their support of this initiative.

We are also partnering with key community college allies to encourage Representatives Robert Aderholt, Terry Everett, and Mike Rogers to also join in co-sponsoring this legislation. I would encourage those of you in these districts to let your representatives know your thoughts related to this legislation supporting health-professions education.

I hope you enjoy all of the articles and items in this issue of Spectrum. If we can provide you with any further information, please let us know.
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In Brief
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Alumni in Action
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Latest Developments
Alumni news, development, and class notes
UAB professor Norman W. Weissman, Ph.D., has been named to the L.R. Jordan Endowed Chair in Health Services Administration. Weissman is a professor in SHRP's HSA department as well as the School of Medicine, and is the co-director of the Center for Outcomes and Effectiveness Research and Education (COERE) and the Deep South Center on Effectiveness at the Birmingham VA Medical Center. “It’s a great honor to be named to an endowed chair at UAB,” Weissman says. “And it’s especially rewarding for that chair to be endowed by a group of people who wanted to honor someone who has truly made a huge contribution to the field. Rush Jordan worked in the department when I first came here, and he was very supportive of what I was trying to do.”

Weissman joined the UAB faculty in 1995, and now holds appointments as senior scientist at the Lister Hill Center for Health Policy, the Center for Research and Education on Therapeutics, the Center for Emergency Care and Disaster Preparedness, and the Minority Health and Research Center, among many others. One of his major goals, Weissman says, will be keeping UAB, and the Department of Health Services Administration specifically, highly ranked in terms of academics and research. “The HSA department was already highly ranked before I got here, and I’d like to help keep it there or move it up even further, because it’s really deserving,” he says. “We have a great dean and department chair; we have a very strong department academically and research-wise. Scholarships and service and research are the keys to a strong department, and we have a faculty that has done all of that exceptionally well.”

Weissman also says he looks forward to continuing to explore the interdisciplinary partnerships that have made UAB such a strong, unified institution. That cooperation, he says, has paid particular dividends for his work in outcomes research at the COERE. “What I love about UAB is the ability to work with other people in other fields and other disciplines. It’s wonderful the way people here are able to cross disciplinary lines. That helps create the success we’ve enjoyed,” he says, “and SHRP is right in the middle.”

NUCLEAR MEDICINE FACULTY CONTINUE EDUCATIONAL OUTREACH EFFORTS

W ith terrorism and weapons of mass destruction demanding more and more attention from workers in the health-care field (see cover story, page 6), the issue of radiation safety has taken on even greater prominence for nuclear medicine technologists. Last summer, faculty members from SHRP’s Department of Diagnostic and Therapeutic Sciences wrote and produced three video clips that will be used in UAB’s radiation-safety course.

Michael Thompson, NMT, and Norman Bolus, NMT, from the Nuclear Medicine Technology Program collaborated with George Fritsma, M.S., MT, of the Department of Clinical Laboratory Sciences and Jay Yip, information technologist for diagnostic and therapeutic sciences, to produce the three segments. They deal with proper receipt of radioactive packages, the penetrating ability of various types of radiation, and proper decontamination techniques. The videos will pay dividends beyond the classroom, as the radiation-safety course is a requirement of the university’s radioactive materials license.

Thompson has amassed considerable experience in multimedia production, having developed a CD-ROM about radiation physics and protection that has been purchased by schools around the country and as far away as South Korea; proceeds support the activities of the NMT Program and its students.
SHRP's health-administration programs have already garnered high national rankings in numerous surveys; now the programs' alumni are getting high rankings themselves. Two SHRP alumnae were named to Birmingham Business Journal's September 2004 "Top Birmingham Businesswomen" list, while a third was named one of the "100 Most Powerful People in Health Care" by Modern Healthcare magazine.

Neeysa D. Biddle, one of BBJ's top businesswomen, earned both her undergraduate degree and master of science in health administration from SHRP and was promoted to chief operating officer of Brookwood Medical Center in April 2003. She has had a long and productive career in health-care management, the last eight of which have been spent at Brookwood; she was the vice president of operations there before being promoted to the COO post formerly held by Gary L. Gause, who was promoted to chief executive officer.

The other SHRP alumna to make the BBJ list is Lori Ewoldson, who joined Children's Health System in 1987 as physician relations manager and now holds the title of vice president of strategic business development.

Ewoldson earned her bachelor's degree in marketing and statistics from UAB in 1983 and added a master's in health administration from SHRP in 1990; her present duties include directing physician relations, public relations, internal and external communications, and marketing for Children's Health System. She is also a diplomate in the American College of Healthcare Executives and has served as president of the organization’s local affiliate, the Birmingham Regional Health Executive Forum.

Meanwhile, down in Pensacola, Florida, another SHRP graduate, Al Stubblefield, was named to Modern Healthcare magazine's list of the "100 Most Powerful People in Health Care". Stubblefield has been with Baptist Health Care Corporation in Pensacola since 1985 and has served as the company's president and CEO for the last six years. The Modern Healthcare recognition is just the latest in a long line of public accolades for Stubblefield and his organization: For three years in a row, Baptist has been named one of Fortune magazine’s 100 Best Places to Work in America, and Training magazine not only named Baptist to its Top 100 list in 2003 and 2004 in recognition of the company’s dedication to workforce development, but also named Stubblefield one of the “11 CEOs That Get It” for similar reasons.

A fellow of the American College of Healthcare Executives, Stubblefield recently published a book, The Baptist Health Care Journey to Excellence: Creating a Culture that WOWs!, about his experiences as Baptist’s chief operating officer. During his tenure as COO, Stbblefield developed and set out a common vision that significantly altered the company’s corporate culture in an effort to adapt to a changing (and increasingly competitive) health-care industry; the company’s continued growth and consistent accolades are thanks in part to his work. The book is available through the Baptist Health Care Leadership Institute [http://www.baptistleadershipinstitute.com/].
At a high-security office complex outside Washington, D.C., dozens of people from the fields of law enforcement, health, pharmaceuticals, and government spend two intense days at their computer screens and telephones. They’re fighting a simulated outbreak of a pneumonic plague caused by the bacterium Yersinia pestis that’s been released simultaneously by bioterrorists in two major cities—an eerily realistic test of America’s disaster preparedness.
Dealing with life-or-death situations has always been all in a day’s work for health-care professionals. But the recent emergence of the threat of terrorism has raised the stakes—and the responsibilities—exponentially, and the School of Health Related Professions has responded with new initiatives that range from an enhanced curriculum to communications research to an informational Web site for diagnosticians in the field.

“Many of the individuals that we educate within this school would find themselves key players in a response to any type of terrorist incident,” says Dean Harold Jones, Ph.D. “For example, clinical lab scientists would be very involved in trying to determine what type of biological agents were used and the levels of exposure that individuals have suffered. Many of the possible agents create difficulty with breathing, which involves respiratory therapists. Physician assistants and others in emergency-room settings would likely be the first to see a wave of symptoms.

“And people in health information management, who deal largely with data, would have to manage significant flows of information in a brief period of time to allow clinicians to make the right kinds of decisions. So there are many, many connections.”

SHRP’s course offerings continue to reflect that new playing field, says Patsy Greenup, Ph.D., associate professor of clinical laboratory sciences: “Since 2002 we’ve offered a course in biological and chemical weapons that’s open to all students across campus, and we’ve attracted even more students from outside SHRP than from inside. We’ve also offered a course in emerging and re-emerging infectious diseases. Another course that’s been submitted for approval is Bio-Crimes and Microbial Forensics. We taught an undergraduate Honors Program version in the recent term, and fall is our target date for the first graduate-level course.

“The big project we’ve been working on is writing the proposal for a certificate program in Homeland Defense and Security,” she continues. “We’re identifying courses that already exist on campus, and working with faculty in Public Health and in Social and Behavioral Sciences to include their classes in the program, as well as developing new courses that would be added.”

To say that the program is still evolving would be an understatement, according to Greenup: “When we started working on this a year and a half ago there were no certificate or degree programs in the U.S., but now they’re blossoming. I saw an article recently with the headline ‘Homeland Security 101 is Hot Topic.’”

Primary and emergency-care providers have a new resource in the Web site [www.bioterrorism.uab.edu], which offers online quizzes, a quick-reference database on diagnosing threats that range from anthrax and botulinum to West Nile virus, and links to continuing medical education.

“While it’s important to recognize any act of bioterror as soon as possible,” says one of the site’s creators, health-administration professor Norman W. Weissman, Ph.D., professor and L.R. Jordan Chair in Health Services Administration, “that’s made more difficult because the symptoms frequently mimic far more common conditions. Our bodies can only show symptoms in so many ways—fever or headaches, for example—so it’s important to help sensitize physicians to making judgments that distinguish an ordinary case of the flu from, say, avian influenza or bioterrorism.

“If the nation were on high alert, health-care providers would potentially be more suspicious of those kinds of events—otherwise, diagnosis is done on the basis of probability, of what it’s most likely for a certain patient to have. And our site is a reminder of possibilities that we should have in the back of our mind in order to recognize possible terrorism as early as possible, whether it’s by a specific blood test or by ordering an X-ray earlier to diagnose anthrax.”

A special “hot topics” section on the site’s home page carries timely updates on illnesses that are not yet high-profile, such as tularemia, which takes the forms of typhoid, pneumonia, or meningitis, and whose bacteria generally occur among animals in nature but could theoretically be grown in a laboratory and spread in aerosol form by a bioterrorist. The site’s popularity keeps growing; it’s already registered millions of hits from users around the world.

Health-care administrators, though they don’t directly see patients, nonetheless would play a crucial role in any response to an act of terrorism, says Howard W. Houser, Ph.D., professor of health services administration:

“These days our focus is a lot broader, including disease threats that are man-made as well as those that come from nature,” says Houser. “The context is that health administrators are generally educated for ‘normal’ operations—routine
day-to-day events—and for what we might call, for lack of a better term, ‘routine disasters’ such as a plane crash, a train wreck, or a tornado. In those cases, the response is intense and instantaneous for the duration of a single incident. Every hospital is required to have a disaster plan and to practice it regularly.

“A bioterrorism threat of anthrax or smallpox, by contrast, has the potential to spread and can totally disrupt normal operations. For example, it raises the crucial issue of staffing. In the case of an infectious disease, what about staff members who either become victims themselves or fail to show up for work because they fear spreading the disease to their children or other family members? Is it possible to have plans for secondary staffing in place?

“Most people today under the age of 30, for instance, have no smallpox immunity at all. And in situations such as the recent SARS outbreak in China, we saw that anywhere from one-fourth to one-third of victims were the health-care workers themselves. That vulnerability raises many questions, and one of our major jobs is to prepare students in administration for anticipating these types of management problems in a crisis.”

During the 2001 terrorist attacks in New York City, emergency workers learned the hard way that their old communication systems were woefully inadequate for such large-scale disasters. Helmuth Orthner, Ph.D., program director and professor of health informatics, is part of a team that’s finding ways not just to update old systems but to create a new generation of emergency medical services that capitalizes on such breakthroughs as satellite communication, wireless Internet, and high-definition video.

With the help of a prestigious three-year grant from the National Library of Medicine, a branch of the National Institutes of Health, the group is testing such concepts as uploading patient data from a moving ambulance to a trauma center, to help the emergency room staff prepare their treatment plan. “There are many practical issues involved,” says Orthner, “not just how much data can be uploaded and sent, but how the information can best be identified and secured so that it meets standards of the Health Insurance Portability and Accountability Act.”

Other research is exploring the possibility of piggybacking emergency communications on existing systems such as “wi-fi,” or wireless local computer networks, and the OnStar emergency notifier that’s built into many new automobiles.

“Manufacturers of wi-fi systems provide filters to prevent unauthorized use,” Orthner explains, “but we believe it’s possible for a user who’s not ‘authenticated,’ such as an EMT team, to go straight to certain sites without compromising that bandwidth’s privacy, in the same way that payphones can dial 911 without requiring coins. We think the public

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- Helmuth Orthner
might support the use of their secure sites, if they’re assured it’s only going for emergency support.”

Likewise, Orthner sees the increasing availability of high-definition television cameras and monitors, along with rapidly increasing bandwidth of a new generation of cellular phones, converging to allow emergency workers to transmit high-resolution video of ill or injured patients, in real time, from remote sites or ambulances to a central trauma facility. “With high-definition camcorders coming onto the market for $4,000 to $5,000, compared to the previous prices of more than $100,000 for professional models, the possibility of transmitting on-site pictures becomes a very interesting proposition,” Orthner says.

Other initiatives involve the use of GPS (Geo-Positioning System) technologies to automatically feed location information of ambulances to the Geographic Information Systems (GIS) in the disaster coordinating center. The GIS displays the location of all ambulances on street maps, allowing quicker and more accurate assessment of the geographic distribution of ambulances and their deployment.

The 20th-century breakthrough of nuclear medicine, now used routinely in hospitals and physicians’ offices, creates another set of concerns when radioactive material might be stolen by terrorists intent on making a “dirty bomb” that uses an explosion to scatter deadly chemicals or disease viruses. Fortunately, says Michael Thompson, NMT, professor of medical physics, almost all of the radioactive materials used by nuclear medicine have very short half-lives, which means that their radioactivity decays in a very short period of time, typically within a few hours.

“For the departments that do keep other radioactive substances on hand,” Thompson says, “we’ve worked closely with the university’s Radiation Safety office to ensure effective safeguards to keep the material out of sight and under lock and key. Most of those materials are behind at least three different sets of locks, with effective procedures in place to prevent any misuse.”

“Terrorism is a subject that cuts across a tremendous number of areas in health education,” says Dean Jones, “and that makes it important for us to coordinate our efforts educationally—especially in a curriculum that’s already extremely compacted to begin with—so that we prepare individuals for whatever role they might play in crises of the future.”

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- Pat Greenup
here’s more to redoing a Web site than meets the eye. SHRP has learned that lesson over the past year, as it has sought to prepare a new site that more accurately reflects the excellence for which the school is known.

“The Web is a critical tool for marketing to all of our different constituencies, and it’s a useful internal tool for communication and resources for current faculty and staff,” says Cathleen Erwin, SHRP development director and chair of the committee overseeing the redesign.

Unfortunately, the two goals sometimes conflict on the current site, making it hard for prospects to find the information they need.

“The current site is rather like a bulletin board,” says Erwin. “People have been sticking things up, but nobody is checking it and removing things that are out of date. We want a new look.”

The new site will have dual functions, each serving its own audience.

“The external site will focus on prospective students, alumni, and individuals from other institutions who want to learn about the school,” explains Dean Harold Jones, Ph.D.

“So we will design the front page to address what those individuals will look for. On the other hand, we have a need for Web-based resources for people to get information on coursework and schedules.”

The site is scheduled to go live this spring, following months of extensive research. “We’ve done focus groups with current students, prospective students, current faculty and staff, and alumni: How do people navigate our site? What information are they looking for? How can we minimize the number of pages they have to look through?” says Erwin.

“Most people don’t realize that when you are developing a Web site, the most important thing initially is doing market research to determine what people are looking for,” Jones says. “From that, you build your architecture. The look is important; it’s the window we’re looking through in order to see the information. But that’s the easy part of Web design . . . putting a pretty frame around the picture. You really put that frame on last.

“It can be very frustrating for those who are looking for the final product,” admits Jones. “It doesn’t move quite as quickly as they’d like, but if we want the site to be effective and easy to use, you have to go through the step-by-step process.”

The new Web site will have improved functionality for all users. “A Web site, from a marketing standpoint, is dynamic. It’s more than a print piece,” says Erwin. “It’s immediately responsive. We hope people will ask for feedback . . . they’ll want more information mailed to them, they’ll want to set up appointments, they’ll want to come visit the school. We can change it on a minute-by-minute basis.”

Despite the ongoing content changes however, there will be one constant on the new Web site: It will convey the quality of SHRP. “It is our stated vision to be the recognized national leader in health-care education and research,” says Jones. “All of the communications that come from our school need to do a good job of promoting the excellence and quality of our programs and to really showcase the fact that we are one of the best, if not the best, school of our type in the country. We’re trying to lead with our communications as well as leading with teaching and service.”
The School of Health Related Professions has added a new program, the Doctor of Science in Physical Therapy. Practicing physical therapists with master's degrees can advance to this higher level, which includes a research component.

“Physical therapy is moving towards direct access or autonomous practice,” explains program director Cecilia Graham, P.T., Ph.D. “We need for clinicians to be practicing at a high level, teach in the clinical courses while also doing research,” says Graham. “Right now there are people out in the clinics who have the data and the patients, and there are people in academics who have the knowledge of how to do research, but there’s kind of a gap between those two. The DScPT students are really good candidates to bridge that gap. They can, as they say, keep one foot in the clinic and also be involved in academics.”

The first student began in the summer of 2003, and Graham came on board a few months later. As a physical therapist with a Ph.D. in adult education, she was uniquely qualified to oversee this new program, which now has six students.

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because there’s a lot more responsibility if someone comes to us without a physician referral.

“The program blends clinical and research skills, and graduates will have the credentials to pursue faculty positions in physical therapy. These people could join a faculty and also be involved in academics.”

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The drug therapies now prolonging survival for patients with HIV/AIDS only work if people know they have the disease in the first place. One SHRP professor is enlisting physician assistants to aid those identification efforts and, in the process, stop the disease’s deadly spread.

Patricia Jennings, M.H.S., PA-C, first began her push to improve identification and prevention efforts while working at the University of Kentucky in 1996. Jennings says she saw numerous patients presenting in the later stages of AIDS because they’d neither been educated about their potential risk factors before contracting the disease nor properly diagnosed afterward. In some cases, the patients’ physicians had inadvertently discouraged them from giving detailed sexual histories.

“When we asked them if anyone had given them any preventative messages, they said no, that their practitioners said, ‘You’re not having sex, are you?’” Jennings recalls, adding that homosexual patients found themselves even further stigmatized. “That began a push to get my physician-assistant students to take better sexual histories.”

That year, Jennings submitted a grant to study how PAs elicited sexual histories from their patients and train them to take better ones. In just four years, students from all over the country were asking to join her training program—when a second grant enabled her to accept 10 additional students, she received more than 50 applications.

When Jennings came to UAB in 2003, she brought that training program with her, and continued to expand and refine it. PA students now take a pre-test before the program begins that gauges their knowledge of STDs as well as their comfort level in eliciting sexual histories. Even these students, she says, may carry very basic misconceptions about HIV/AIDS and how the diseases are transmitted. From there, the students are educated on everything from pathophysiology and risk assessments to cultural, gender, and age differences that can affect the diagnostic process. But their education isn’t limited to the classroom—each student spends an afternoon at the 1917 Clinic with Jeff Hill, D.M.D., learning about the oral manifestations of HIV/AIDS and how to administer oral exams.

At the end of the program’s first year, students take a post-test, and based on the results of that test, 10 are selected for a clinical rotation that includes the 1917 Clinic and the Veterans Administration hospital. They also give safe-sex lectures to participants in area substance-abuse programs and volunteer with outreach efforts for people with AIDS.

The program isn’t an easy one. The sheer emotional intensity of dealing with AIDS patients can be a challenge, Jennings confirms; increasing the students’ comfort level in terms of medical information and sexual histories, too, has been challenging in a region where conservative attitudes toward sex have built walls of social unacceptability around certain topics.

For the good of the public’s health, though, it has to be done, “and it has to be done non-judgmentally,” Jennings says. “We’re all God’s children, and we all need to be treated with respect—therefore, when you’re asked those questions, in order for you to answer honestly you have to have a feeling that your provider is going to be comfortable with your answer. . . . An open dialogue, good listening skills—that’s what we are hoping for.”

So far, they appear to be having some success. “Due to the emphasis she placed on obtaining accurate patient histories—including, most importantly, sexual histories—I have incorporated questions about sensitive subjects into my discussions with patients and have often learned important information regarding their treatment and care that would not have been offered had I not asked,” says Amy Mercantini Klingler, PA-C, who first met Jennings at Kentucky in 2001 and now serves on the Idaho Care and Prevention Council for HIV/STDs. “She taught me to be comfortable obtaining sexual histories, which in turn allows patients to be comfortable with me.” Not only that, but “working with a variety of agencies allowed me to see the full impact of the disease on the complete person and their loved ones,” she says, “and made me appreciate the work that we do.”

Jennings says that kind of experience is the program’s ultimate goal. “We’re hoping that after each educational intervention—whether it’s with a standardized patient, an observational role in the clinic, or a hands-on role—that the students will be more and more comfortable,” she says, “so that when they graduate, they can go out and make a difference.”

SHRP professor Patricia Jennings, center, coaches students Amelie McKneely (left) and Traci Benefield on examining patients at the 1917 Clinic, where even routine check-ups can play a vital role in diagnosing AIDS.

NEW TROOPS IN A LONG BATTLE:
Enlisting Physician Assistants in the Fight Against AIDS

By Doug Gillett
The UAB National Alumni Society has achieved dramatic success in supporting the university's academic mission, but it has also succeeded in calling attention to the many diverse areas of study and service. Perhaps nowhere is that more true than at the School of Health Related Professions, where a number of alumni chapters have popped up to reflect the wide range of disciplines in which the school is teaching and training tomorrow’s health-care leaders.

SHRP’s Alumni Association of the Graduate Programs in Health Administration grew out of an informal meeting in a booth at the Black Hawk Restaurant in Chicago in 1970, recalls professor Bob Hernandez, Ph.D. “A group of us were attending the American College of Healthcare Hospital Administrators annual meeting,” he says. “Many alumni groups host receptions at the meeting, and we decided to form a group to promote UAB and help us network.”

Over the past 35 years the alumni association has grown from the five or so original members to more than 150, and they have supported the graduate programs at UAB by establishing scholarships, presenting awards, and providing other financial assistance. “The annual education seminar held in Sandestin is another project the association has sponsored,” adds current president Larry Throneberry. “It has become a major event that has grown in attendance and stature.”

Sherrie Van Pelt helped start SHRP’s Occupational Therapy alumni chapter when she was president of the UAB National Alumni Society (NAS) in 2001. Yvonne McAnnally, the chapter’s current president, reports that the group is interested in raising funds for worthy causes as well as raising awareness of UAB’s programs in occupational therapy. One of the events in the planning stages is a “fun run” to benefit the Center for Aging.

The Physical Therapy alumni chapter, which was started in 2002 and accepted into the NAS in 2003, currently has about 30 members. “The chapter’s local executive committee meets about four times a year, and the alumni get together at national professional meetings,” reports associate professor Cara Adams, M.S., who serves as the group’s faculty liaison. “We are interested in supporting UAB programs, especially our clinical instructors, and getting networking going. We want to know what our alumni are doing so we can brag on them, and we also want to keep them informed about new programs.”

The Surgical Physician Assistant alumni chapter applied for a charter in the NAS last June and was approved in July. “We are still in the organizing phase but hope to be up and going full force soon,” says Wendy Cornelius, PA-C, who is serving as the chapter’s first president. “The group was established because several of my classmates and those in surrounding classes were interested in starting an alumni society so we could keep up with each other, network, and keep close ties with the UAB program and faculty. We especially want to help ensure that the program keeps its surgical emphasis and help those interested in serving as clinical preceptors. The alumni would also like to help SHRP establish a distance-learning program at the master’s level.

“We want to know what our alumni are doing so we can brag on them, and we also want to keep them informed about new programs.”

- Cara Adams, M.S.

“We hope to have an annual alumni reunion, maybe in conjunction with new student orientation, graduation, or another UAB function. We also hope to eventually establish a scholarship for physician assistant students,” she says.

“The UAB Alumni Affairs office has implemented a Chapter Development plan that focuses on strengthening relationships with the schools,” notes Becky Watson, assistant vice president for alumni affairs and annual giving. The thought behind school chapters is simple—helping schools reengage alumni in a way that is meaningful to both the program and the alumni.

“We were very pleased that the School of Health Related Professions added the new Surgical Physician Assistant chapter last year,” Becky emphasizes.
Looking SHaRP

Daniel Behan, Noah Coleman, Donna Conn, Duriel Garner, and Lisa Roncadori, all students in the B.S. in Health Information Management Program, had featured articles published in the January/February 2005 issue of the American Health Information Management Student Connection, the e-newsletter of the American Health Information Management Association. UAB was also highlighted in the issue.

Pamela Cartright, M.A.Ed., RT, an instructor in the Radiation Therapy Program, has had a busy year, juggling a new position—interim program director of the Radiation Therapy Program—with a very busy travel schedule. She spoke at the American Society of Radiologic Technologists’ national semiannual meeting in Denver, Colorado, and was sent to the ASRT’s Leadership Academy on Governance held at the organization’s headquarters in Albuquerque, New Mexico. Closer to home, she also spoke at the annual meeting of the Alabama Society of Radiologic Technologists in Prattville last spring.

Joan Hicks, M.S., has been named the interim chief information officer for UAB Health System. (Read more about Joan on page 16.)

Midge Ray, R.N., M.S.N., associate professor in the B.S. in Health Information Management Program, has been appointed trustee at large and director of the board of trustees at St. Martin’s in the Pines, an assisted-living facility in Birmingham.

Ann Steves, NMT, associate professor of medical imaging technology, received the 2004 Outstanding Allied Health Educator Award from the American Society for the Allied Health Professions (ASAHP). The award recognizes excellence in didactic and clinical instruction. Steves, who was nominated for the award by fellow SHRP faculty member Donna Slovensky, Ph.D., submitted an essay describing her teaching philosophy and an example of her most innovative teaching technique.

Mary Warren, OT, assistant professor of occupational therapy, was awarded the Elsie Holmes McKibbin Lectureship last September. The lectureship is the highest award from the Alabama Occupational Therapy Association, and includes agency sponsorship to assist in the research expenses of the recipient.

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<tr>
<th>SHRP Students and Faculty Receive Alpha Eta Nominations</th>
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<td>A lengthy list of students and faculty at SHRP have received nominations into the UAB chapter of the Alpha Eta Honor Society, a group promoting scholarship and service in the allied health professions. The society was chartered in 1975 and now has chapters at dozens of colleges and universities all over the country. Student inductees are selected by professors who are Alpha Eta members themselves, while faculty inductees are chosen by their colleagues. All are nominated on the basis of their scholarship, leadership, achievement, and service in the health professions.</td>
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<td>Bethany Killen</td>
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<td>Marquita Doss</td>
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<th>HEALTH INFORMATION MANAGEMENT</th>
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<tr>
<td>Judy Brown</td>
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<td>Melissa M. Keen</td>
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<th>HEALTH SCIENCES</th>
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<tr>
<td>Anit Makhiija</td>
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<th>NUCLEAR MEDICINE TECHNOLOGY</th>
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<td>Kirwan B. Price</td>
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<td>PHYSICAL THERAPY</td>
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<td>Lara Bowen</td>
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<td>Sarah Bagley</td>
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<th>FACULTY NOMINEES</th>
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<td>Audrey Harris, Department of Diagnostic and Therapeutic Sciences</td>
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<td>David M. Morris, Department of Physical Therapy</td>
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<td>Mary Warren, Department of Occupational Therapy</td>
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<td>Jonathan B. Waugh, Department of Critical Care</td>
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Low Vision Rehab Certificate Program Graduates First Students

SHRP’s December commencement featured a notable first: Nineteen students became the first class to receive UAB’s Graduate Certificate in Low Vision Rehabilitation. Many of them have already found full-time clinical jobs providing low-vision rehab services.

The program marked another first in January, when its first completely online class began its curriculum. The class’s 16 members represent 15 states, including California, South Dakota, and Alaska; development of the online curriculum was supported by a grant from the EyeSight Foundation of Alabama.

The EyeSight Foundation also provided a grant for the UAB Center for Low Vision Rehabilitation to hold a national symposium for low-vision health-care professionals called “Addressing Low Vision Rehabilitation Through the Healthcare System: Current Challenges and Future Trends.” The symposium was held April 2-3 at the Callahan Eye Foundation Hospital and offered health-care workers from all over the country a forum through which to meet and share information on their programs and new advances in the field.

Saucy, Spicy—and Good For You

The Division of Clinical Nutrition and Dietetics has found a creative way to raise money—by selling a collection of spice rubs for meat, seafood, poultry, vegetables, and other foods. “Blaze’s Blends” went on sale in January to raise funds for student scholarships and dietetic internship stipends; the spice blends were developed by the AC Legg Corporation. The four varieties are Barbecue, Cajun, Gourmet Steak, and Hickory; each 8-ounce bottle costs $7. Order forms are available at the Department of Nutrition Sciences Web site [www.uab.edu/nutrition]; select Academic Programs and the link for Blaze’s Blends is on the right. Phone orders can be placed at (205) 934-3223.

ALUMNI NEWS

Denise Ketcham (Watts) Driscoll (M.S. clinical laboratory sciences ’92) was recently promoted to director of laboratory accreditation programs for the College of American Pathologists (CAP). The CAP Laboratory Accreditation Program accredits more than 6,400 labs worldwide. Driscoll currently resides in Burlington, Wisconsin.
ALUMNI IN ACTION

LARRY HORNSBY, B.S.N., CRNA
By Tara Hulen

At various points in his life, Larry Hornsby was urged to become a lawyer and tempted to become a professional bass fisherman. But he’s stayed dedicated to nurse anesthesia ever since first becoming attracted to the field back in 10th grade.

“I didn’t hear anything but good things about it,” Hornsby says of his early conversations with two CRNAs in his hometown of Tallassee. “They had both been CRNAs for a long time, and they both told me—individually of each other—that if they had to go back and do it all over again, they’d still be nurse anesthetists. That’s a pretty strong recommendation.”

After getting his nursing degree from UAB in 1981, Hornsby graduated from what was then the School of Anesthesia for Nurses at SHRP in 1985. Not long after that, he decided it was time to go into business—and he’s now one of the owners of VitalMed, a comprehensive management firm that provides everything from hospital-management services to medical billing services. “I am also a partner in other entities that manage and employ anesthesia personnel at individual locations such as St. Vincent’s Hospital here in Birmingham,” he says.

Hornsby’s advancement was not limited to the business world, however. He served separate stints as president of the state nurse anesthetists’ association in 1991 and 1993, and became president of the American Association of Nurse Anesthetists in 2001—the only Alabamian ever to do so. His experience with the AANA has aided him in his work as a member of SHRP’s Advisory Board, which guides the school in adapting its mission and curriculum to meet future needs.

“Think having gained an understanding about how nurse anesthesia works in all 50 states brings something to the table. . . . You always worry, ‘Are we falling behind in a certain area because they’re doing it a different way in California or New York?’” he explains. “So it’s been nice to have that background with AANA—I can speak to those issues.”

Hornsby has reaped the benefits of a field that has experienced major growth in recent years. VitalMed now has locations all over the Southeast, and he’s had to travel between them so often that he became a pilot and bought a Diamond Star DA40 airplane last year.

Though the plane’s primary use may be work-related, Hornsby’s family—wife Carol, daughter Laura, and son Drew, who’s in flight training now and will get his pilot’s license on his 17th birthday—has taken full advantage of it, too. “They basically spend their time trying to decide where we can go next in the plane,” he says with a laugh.

The plane will also probably be called into service for a fishing trip before too long—Hornsby fished the competitive bass tournament circuit for 15 years and says it’s still his most beloved hobby. “I haven’t used the plane for that yet—but only because I haven’t had it long enough,” he says.

JOAN HICKS
By Doug Gillett

In 1975, Joan Hicks was a member of the first class of SHRP’s Medical Records Technology Program. In 1986, she graduated from SHRP’s first non-traditional Registered Health Information Administrator (RHIA) Program. Eight years later, she graduated from SHRP’s graduate health informatics program—also the school’s first.

“I begged them not to start a Ph.D. program,” she says with a laugh. “I definitely would be tempted, but I just can’t do it now.”

Hicks is indeed busy these days, now that her pioneering spirit in the health-informatics field has led her to the position of interim chief information officer for the UAB Health System. She’s responsible for a bewildering array of information—paper and electronic records for The Kirklin Clinic, UAB Hospital, and Callahan Eye Foundation Hospital; UAB Hospital’s registration and billing system; four separate clinical systems—pretty much anything that deals with patient information and the systems that provide it.

In the more than 30 years since she began her training in the field, Hicks has seen dramatic changes in both the technology surrounding medical records and the government regulations that dictate how they can be used. Those advances are coming to a crossroads as HIPAA rules begin mandating a complete shift to computer-based record-keeping. The conversion will be an especially huge task for a system the size of UAB—“I just hope I see it before I retire,” she says—but she praises the wisdom and forward thinking that the system’s administra-
Jim Shmerling may no longer be at UAB, but he knows firsthand the excitement of opening a new hospital. As the CEO of Vanderbilt Children’s Hospital in Nashville, Shmerling got to oversee the hospital’s move from its old location—two floors of the main university hospital—to a brand-new, state-of-the-art, eight-story building in February 2004.

“If you can envision Children’s Hospital of Alabama being inside two floors of UAB, that’s where we were for 30 years,” Shmerling says. But the new hospital, with 40 percent more patient capacity than the old facility, has enough space to give each patient a private room with many new amenities for them and their families. “We also now have dedicated and separated ancillary services for pediatrics,” he says. “Before, we shared radiology departments and other ancillary services; now we’re all freestanding at Children’s Hospital, geared totally toward care for children.

“That makes a tremendous difference in the kind of care we can provide,” he continues. “Children are not small adults—in addition to whatever illness they may be experiencing, they’re still growing. The equipment, facilities, and staff who care for those children have to be specifically geared toward children.”

Managing those child-specific needs is something Shmerling knew he wanted to do virtually from the get-go—“At the age of 20 I knew exactly what my career path would be,” he says. Shmerling chose UAB’s health-administration program specifically because Children’s Hospital was so close by, and his residency at Children’s was the start of nine years spent at the hospital.

Shmerling attended UAB from 1978 to 1980, during a period that would prove to herald critical changes for health administrators and the field as a whole—particularly in terms of information technology. “When I was doing my residency, one of my tasks was doing a capital budget, and Jim Dearth, who’s now the CEO, had the only microcomputer in the hospital at the time,” he remembers. “It was on the sink in his lab. I remember sitting at the sink on a bench and inputting all the spreadsheets from the hospital’s budgets. Once I thought I’d lost the whole spreadsheet, and he helped me retrieve it.”

Shmerling recalls Howard Houser and Tee Hiett as two SHRP faculty members who were particularly helpful in guiding their health-administration students through this transition. In his estimation, the school is still doing a top-notch job of molding tomorrow’s health-care leaders. "Once in a while we’ll ‘test the waters’ [with new residents], and the UAB students coming into residencies are by far the best trained,” he says. “It’s just a magnificent program.

“I probably got in by the skin of my teeth,” he adds with a laugh, “but I’m grateful that they saw potential in me.”
The School of Health Related Professions is grateful for the support provided by alumni and friends during the past year. Private support has a tremendous impact on the school and its programs, enabling us to provide scholarship support to attract and retain talented students, purchase new technology for the classroom, enhance research capabilities, and provide programs for both student and faculty development, among other important needs.

We would like to publicly recognize and thank the following individuals, corporations, and foundations for their gracious financial support during calendar year 2004. For information on how to contribute, please contact Cathleen Erwin, SHRP development director, at (205) 934-4159 or by e-mail at cerwin@uab.edu.

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