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spring 2008

Ready for Anything

Whether manmade or natural, UAMS has a plan for whatever emergency may strike.

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- Going High Tech
- Simulated training gives students an educational advantage.
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- Renewed Hope Nationally recognized author turns to UAMS for cancer care.
- At the Forefront Arkansas Center for Health Improvement celebrates its 10th anniversary.

On the cover: Ron Crane is emergency preparedness manager at UAMS.

Cover photo by Michael Pirnique.

HOUSE-CALL

spring 2008

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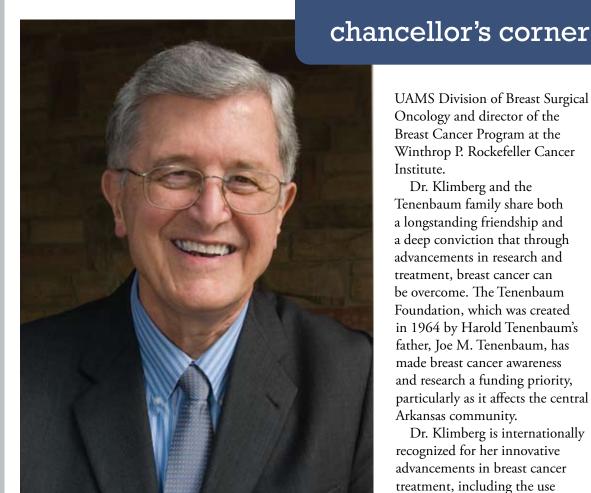
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A Gift to Research

In the true spirit of philanthropy and compassion, Little Rock's Tenenbaum family has established a legacy honoring two exceptional women, the late Muriel Balsam Kohn and UAMS' Dr. Suzanne Klimberg.

Just as many families have been touched by breast cancer, so has the Tenenbaum family. Muriel Balsam Kohn, mother of Judy Tenenbaum, fought a courageous battle against the disease prior to her death in 1993. While we remember her dedication to family and her spirit of volunteerism, the Tenenbaum family has chosen to honor her memory in a unique and lasting way through the establishment of the Muriel Balsam Kohn Chair in Breast Surgical

This chair, which is the first endowed chair in the UAMS Department of Surgery, will provide funds in perpetuity for the work of breast cancer researchers at UAMS. The inaugural recipient is Dr. Klimberg, chief of the UAMS Division of Breast Surgical Oncology and director of the Breast Cancer Program at the Winthrop P. Rockefeller Cancer Institute.

Dr. Klimberg and the Tenenbaum family share both a longstanding friendship and a deep conviction that through advancements in research and treatment, breast cancer can be overcome. The Tenenbaum Foundation, which was created in 1964 by Harold Tenenbaum's father, Joe M. Tenenbaum, has made breast cancer awareness and research a funding priority, particularly as it affects the central Arkansas community.

Dr. Klimberg is internationally recognized for her innovative advancements in breast cancer treatment, including the use of radio frequency ablation to reduce or eliminate the need for follow-up surgery, reduce recurrence of breast cancer at the original site, and even

reduce the need for radiation treatment.

Her research also includes the development of the Axillary Reverse Mapping procedure, a technique that Dr. Klimberg created that allows the surgeon to identify during surgery the way fluid drains through the lymph node system in the arm to prevent the arm swelling known as lymphedema.

Through the Tenenbaum family's foresight, the research initiatives of Dr. Klimberg and others like her will continue to impact women not only in Arkansas but throughout the world. We sincerely thank Judy Tenenbaum, Harold Tenenbaum and their family for making this possible with their gracious and lasting gift.

I. Dodd Wilson, M.D.

Chancellor, University of Arkansas for Medical Sciences

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"We meet monthly and work very closely to make sure that our priorities, needs and wants are in sync," Crane said. This means developing plans for any number of emergencies that could occur in central Arkansas, from weather-related incidents to chemical spills to electrical failures. Plans are deliberately written without a lot of detail, because each emergency and each response are different, Crane said.

In the event of a major emergency, UAMS would play a significant role, said Dr. Aubrey Hough, chairman of the UAMS Emergency Preparedness Committee. "UAMS would assume a major role in patient care, not because of our size, but because of the more than 1,500 physicians working for us," Hough said. "We're a cohesive group of health care providers and meet all the national standards for training, drills, organization, security, supplies and communication."

A Unique Niche

Crane also is in charge of UAMS' decontamination team, which is equipped to handle chemical, biological and radiological contamination events. Drills with the U.S. Army, the Federal Emergency Management Administration and the Arkansas

Department of Emergency Management help responders prepare for potential large-scale emergencies, such as a radiation or chemical incident at the Arkansas Nuclear One power plant in Russellville or at the U.S. Army's Pine Bluff Arsenal.

"UAMS has a unique niche for decontamination, as only one of two hospitals in the state that supports Nuclear One, should an incident there ever occur," Crane said. The other supporting hospital is St. Mary's Regional Medical Center in Russellville.

However, Crane is quick to note that the likelihood of a nuclear or chemical incident at either Nuclear One or the arsenal is very low. "The chance of an event happening at either of those locations is so slim," he said. "It doesn't keep me up at night."

Much higher on the list of potential incidents in the state are events that many Arkansans have already experienced: tornados, floods and ice storms. Should a large-scale emergency take place, a campus notification system alerts key personnel via cell phone, office phone, pager and e-mail. "The campus notification system is rapid and immediate. It keeps calling until staff members respond that they have received the message," Crane said.

The key item to remember, Crane said, is that UAMS is all-hazards capable. "Whether it's natural or manmade, we can handle it. We're looking toward it, and we're prepared for it."

What Are the Odds?

Every two years, the UAMS Emergency Preparedness Committee updates the campus' Hazards and Vulnerability Analysis, ranking incidents based on the likelihood of them occurring in central Arkansas, the impact they would have on campus operations, and the potential for loss of life or property.

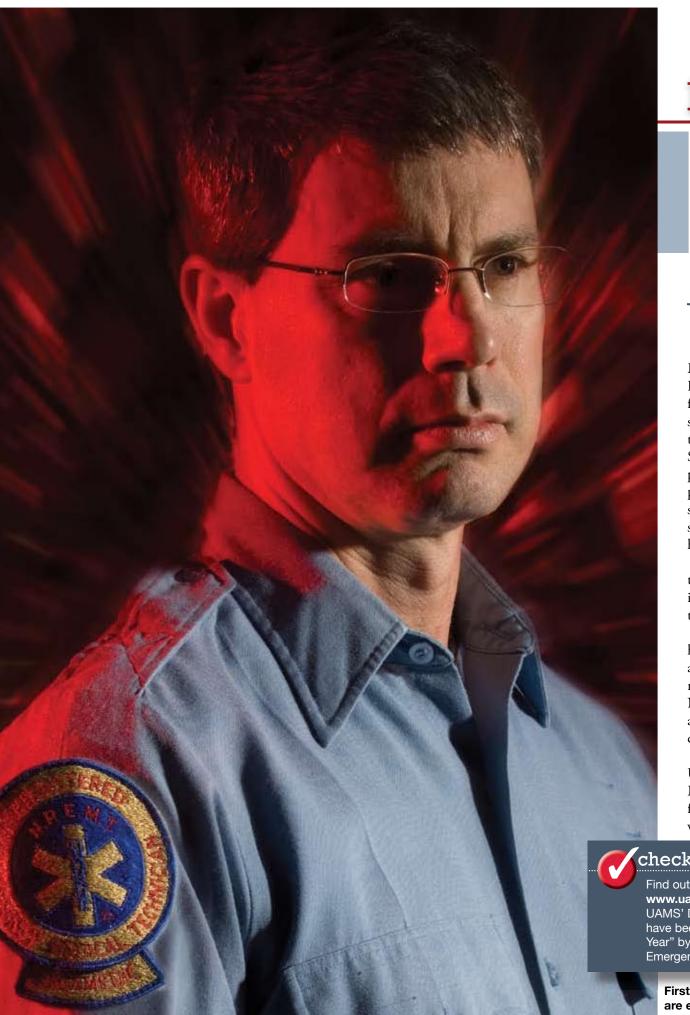
"We are in a much better position to handle emergencies now than 10 years ago, and we still have more to learn," said Dr. Aubrey Hough, committee chairman.

According to the 2007 analysis, the five incidents with the **GREATEST LIKELIHOOD** of occurring are:

- 1. Tornado
- Electrical failure
- 3. Mass casualty incident
- 4. Ice/snow storm
- 5. Information systems failure

The five incidents with the **LEAST LIKELIHOOD** of occurring are:

- 1. Bomb threat
- 2. VIP situation involving a visiting dignitary
- 3. Civil disturbance
- Hostage situation
- 5. Natural gas failure



hen a deadly tornado ripped through central Arkansas in March 1997, Dennis Mitchell and Danny Bercher were among the first responders heading to the scene. Mitchell, an instructor in the UAMS Emergency Medical Sciences program, followed his predetermined disaster response plan and went to the ambulance service in Benton, where he was sent to a mobile home park that had been destroyed.

His assignment was part of the triage section, deciding care for the injured before they were taken to the hospital.

"We were very busy for several hours," Mitchell said. "It was a surreal scene where there are no street lights, no house lights. Nothing but rain and flashlights and people shouting in the distance."

Bercher, chairman of the UAMS Department of Emergency Medical Sciences, was returning from a meeting in Russellville when the storm hit. Reporting

check it out

Find out more at www.uams.edu/chrp/ems. UAMS' Dennis Mitchell and Tim Rinehart have been named "Instructors of the Year" by the National Association of Emergency Medical Technicians.

First responders such as Danny Bercher are essential in an emergency situation.

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to the headquarters of the Metropolitan Emergency Medical Services (MEMS), he assisted with search and rescue operations.

The day ended with 15 tornados and 25 deaths across Arkansas. It also made evident the fact that an organized response to emergencies is vital to the health and safety of Arkansans.

Be Prepared

Each member of a rescue team must understand his or her role within what is referred to as the incident command system, Mitchell said.

Some first responders are assigned to triage — or prioritizing the severity of the injuries — while others handle patient care. Some are responsible for transporting patients away from the scene, and others get supplies to the paramedics and emergency medical technicians (EMTs).

Everyone should know his or her responsibilities ahead of time so the operation runs quickly and smoothly.

"If the responders all just run to the scene it could be chaos, potentially causing more harm than good," Mitchell said.

Paramedics and EMTs are among the allied health professionals, who together with doctors, nurses and pharmacists, make up the modern-day health care team. Many of those allied professionals, such as nuclear medicine technologists and respiratory therapists, have specialized skills making them vital in the event of an emergency.

In an accident at the Arkansas Nuclear One power plant in Russellville, a nuclear medicine technologist could help detect areas or persons exposed to radioactivity and the level of that exposure.

"The nuclear medicine technologist knows how to isolate the radiation area and assist in cleaning up the area safely and without spreading the radioactive contamination further," said Arthur Maune, an instructor in the UAMS Division of Nuclear Medicine Imaging Sciences.

Containment skills learned by nuclear medicine technologists are essentially the same for a small spill or large-scale event, he said. Technologists learn the safety techniques to deal with accidents that could happen in the lab and must be prepared for any type of event.

Respiratory therapists, with their focus on breathing and the lungs, could be called into action in almost any emergency situation. From a large fire where many suffer from smoke inhalation to airborne diseases such as the flu or chemical agents spread through the air, these allied health care professionals' expertise could be critical.

"Local hospitals or hazardous materials teams may include a respiratory therapist because of their skills," said Heather Neal-Rice, respiratory care instructor. Following Hurricane Katrina, Neal-Rice was called to assist with evacuees suffering from chronic lung disease or asthma.

On the Front Lines

When most think of emergency responders, it is the EMTs and paramedics that spring to mind.

The paramedic is the highest level emergency medical professional in the pre-hospital setting. The paramedic must be able to work independently and as a team leader helping people in stressful conditions.

"It's the kind of job one needs to be mentally prepared to do," said Bercher. "You may see things you can't imagine."

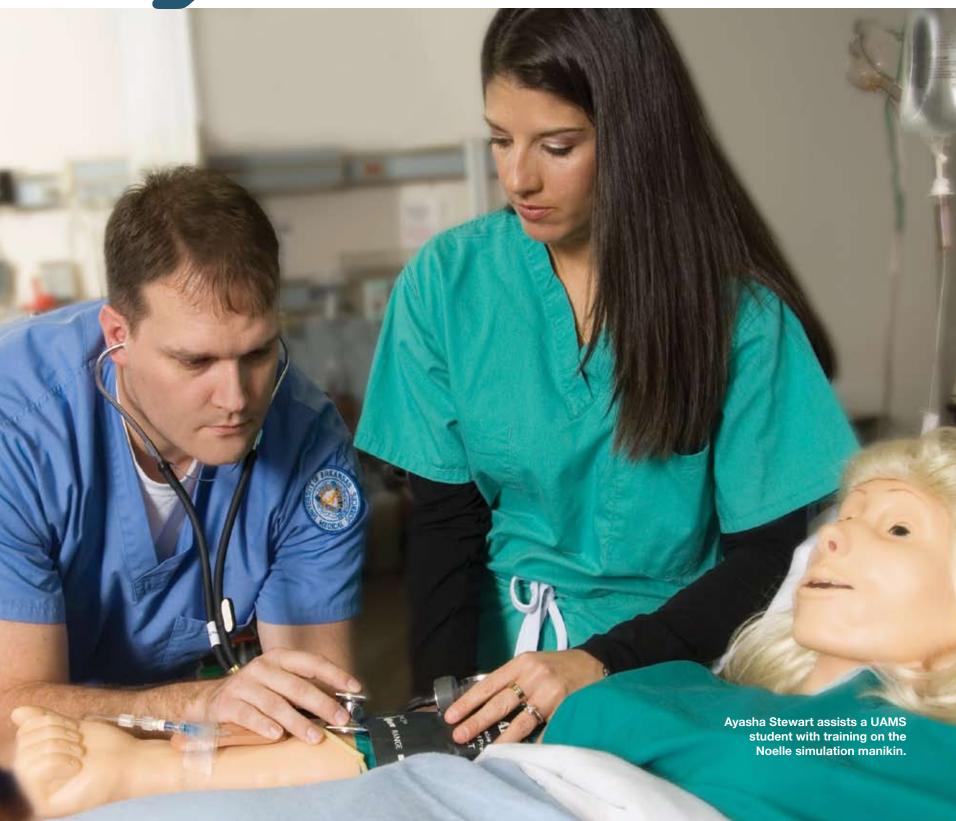
The ability to be flexible and think quickly is important for an emergency medical responder, Bercher said. Paramedic students learn how to respond to largescale incidents. Many students also participate — often as simulated casualties — in the large-scale emergency drills conducted annually by the Little Rock National Airport, he said.

Mitchell loves his work as a responder, despite the danger or tragedy he may face.

"It's a situation where you know people need help and you have a plan and the skills to help them," he said. •



Going Simulated Training with Manikins Advances Medical Education High Tech



irplane pilots have used it for years. So has the space program. Now simulation is making its way into educating tomorrow's nurses, physicians and other health care professionals — including those studying at UAMS.

In a 5,000-square-foot area on the fifth floor of the Education II building, 15 manikins in hospital beds are lined up side by side. While nursing students have named them after celebrities, such as Denzel Washington, George Clooney and Cameron Diaz, each manikin represents something more serious — a health professional's attempt to get a procedure right before practicing on a live patient.

In the last few years, this type of training has been taken to a new level at UAMS with the introduction of computerized Sim Man, Sim Baby and Noelle, a high-tech childbirth simulation manikin that can simulate scenarios from high-risk complications to normal birth.

"Simulation allows students to practice and make mistakes in a safe environment," said Patricia Dufrene, a registered nurse and director of the Nursing Learning Resource Center simulation lab.

Nursing students use the full-body manikins to practice sterile dressing change, insertion of catheters and tubes and other procedures.

With Sim Man and Sim Baby, nursing students practice critical thinking and problem solving in scenarios programmed so that the manikins produce certain symptoms.

And while practice attempts to make perfect, "case analysis is a key factor," said Dufrene, who also has a Master's of Science in Nursing. "It's a place to critically analyze mistakes and plan corrective action."

Working Together

This is especially true with Noelle. She could be called one of UAMS' best kept secrets — one that Dr. Samantha McKelvey, assistant program director in the UAMS Department of Obstetrics and Gynecology, discovered while talking to Sarah Rhoads, clinical assistant professor in the College of Nursing.

McKelvey immediately saw Noelle's potential in childbirth training for resident physicians. Such simulated training for medical doctors is becoming increasingly popular across the country. Some obstetric emergencies occur

so infrequently that it may take years for young physicians to develop the experience to build their skills and feel confident in leading the team.

Simulated childbirth training, in which the obstetricians, nurses and even pediatricians work together, allows each health care professional to practice split-second decisions that could mean life or death, McKelvey said.

With Dufrene's help and College of Nursing Dean Claudia Barone's support, McKelvey and Rhoads last year held a collaborative training session dealing with shoulder dystocia, a lifethreatening condition that occurs when the baby's shoulder is caught under the mother's pubic bone. To safely release the shoulder, a series of maneuvers is required that involves the cooperation of the doctor, nurse and mother. They also drew on the expertise of Ayasha Stewart, College of Nursing clinical instructor and advance practice nurse, who facilitated the project by programming Noelle's software, running the scenario and providing nursing

The effects of such training are "immeasurable," Dufrene said. "It was such a valuable experience to see them working together. Research has shown that a relaxed non-threatening learning environment produces better results."

students.

"Absolutely," McKelvey said. "It lets you practice releasing a shoulder in less time, which can save a baby's life."

She said that in one study where shoulder dystocia training began in 2000, there's been a four-fold reduction in neonatal injuries with this type birth.



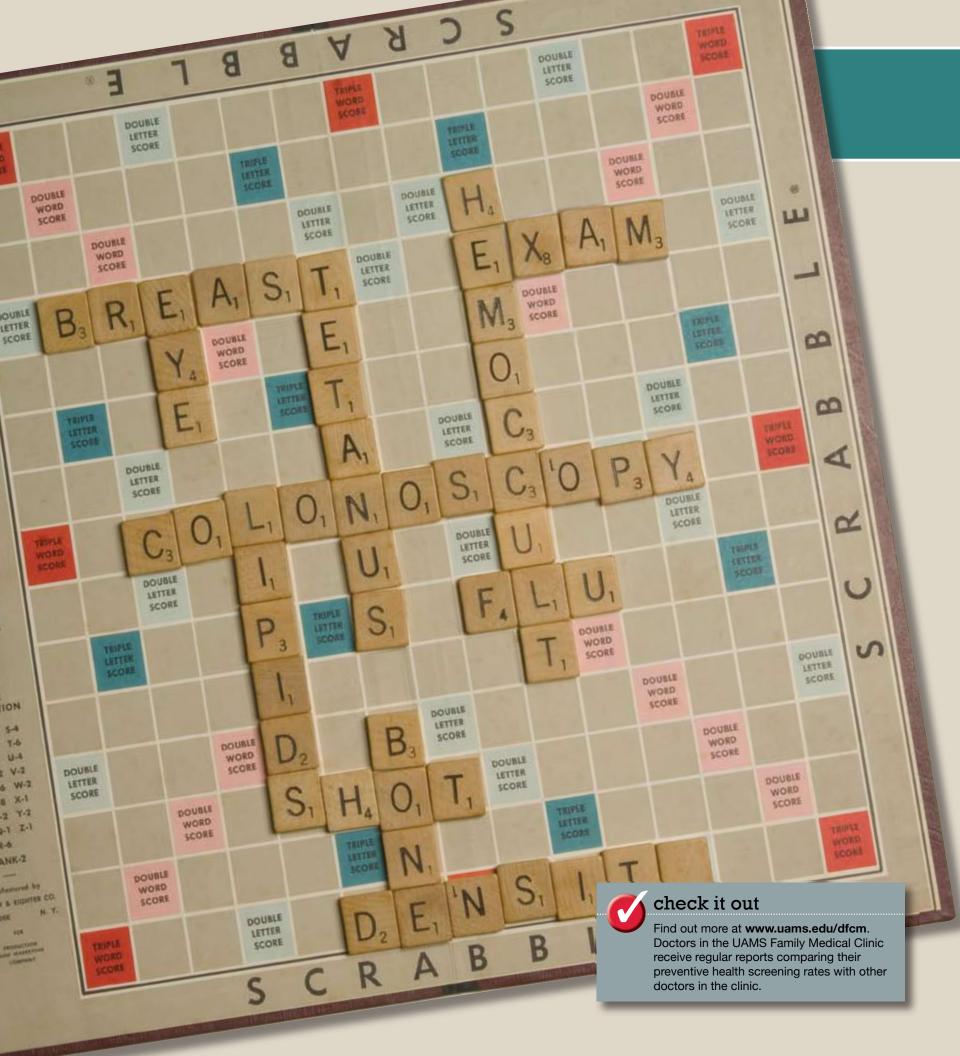
More than 150 nursing students use the simulation education lab each year.

three computerized simulation manikins in use at UAMS. Valuable Tools Medical residents in UAMS' Department of Obstetrics and Gynecology also use sophisticated surgical simulation programs. "You can tie tubes, remove an ectopic pregnancy, or perform a hysteroscopy to look at the lining of the uterus," McKelvey said. "It simulates the resistance an instrument encounters when inserted so you can judge the right amount of pressure to use. It gives feedback on the amount of time a procedure takes and whether you use an instrument efficiently. And it notifies you if you have excessive blood loss or tissue damage." Dufrene and McKelvey are quick to say

Sim Baby is one of

that simulation cannot replace experience with human patients. And the simulation manikins aren't cheap. Noelle costs about \$30,000.

But when time is critical and results of errors can be devastating, having practiced a procedure is essential, McKelvey said. The simulation models "let you practice in real time — when a complication happens fast and a response is needed now. Just like in a fire drill." •



ON THE LOOKOUT

Electronic Records Keep Preventive Medicine in the Forefront

veryone is different. While one person's family history may put him or her at a higher risk for developing a certain medical condition, another person's habits — such as smoking — may raise his or her risk factors for another condition.

The UAMS Department of Family and Preventive Medicine has developed a computerized checklist of health screenings, which they recommend to all patients at the UAMS Family Medical Center. While some patients should receive screenings earlier or more frequently based on their individual condition, the checklist provides a foundation to ensure that all patients are offered basic health screenings based on their age and gender.

"Studies have shown that unless a family practice physician has an active plan to track preventive health services, they often don't get accomplished with the frequency that they should," said Dr. David Nelsen, associate professor in the UAMS Department of Family and Preventive Medicine. To address this issue, the department has made preventive medicine a priority through the use of an electronic medical record system designed to track each individual patient's preventive health needs, including screening tests, immunizations and counseling.

"If a patient is due for a preventive health service, the doctor sees that information on the computer and can address it with the patient," Nelsen said. If the patient has already received a recommended screening, the doctor can view the date it was completed. The system also tracks specific medical services for patients living with conditions such as diabetes.

"We've taken the burden off both the patient and the doctor to determine which preventive services they need and when they need them," Nelsen said.

The Who, What and When of Preventive Health Care

Physicians in the UAMS Department of Family and Preventive Medicine see hundreds of patients from across central Arkansas for their health care needs. To ensure their patients receive preventive services in a timely fashion, the department uses a computerized system to alert its doctors of recommended screenings, immunizations and counseling for individual patients based on their age and other medical conditions.

Below are the preventive services recommended to patients at the UAMS Family Medical Clinic who are at average risk for someone their age and gender. Additional screening, immunizations and counseling may be needed for people with certain risks based on their personal or family history. People with questions about appropriate health screenings or their personal medical risk factors should consult with their physician.

WOMEN	AGES 40-49	AGES 50-64	AGES 65 +
Breast exam by doctor: every 12 months		•	•
Pap smear: yearly until three normal, then every 3 years; after age 65 only if previously abnormal	•	•	•
Mammogram: every 12 months	•	•	•
Lipids — cholesterol, HDL ("good" cholesterol) and LDL ("bad" cholesterol): every five years	•	•	•
Colonoscopy: every five to 10 years		•	•
Hemoccult (hidden blood in stool): yearly if no colonoscopy		•	•
Flu vaccine: every 12 months	•	•	•
Pneumonia vaccine: once after age 65			•
Eye exam and hearing test: every 12 months			•
Shingles vaccine: once after age 60			•
Bone density: once after age 60			•
Tetanus, diphtheria booster: every 10 years	•	•	•

MEN	AGES 40-49	AGES 50-64	AGES 65 +
Lipids — cholesterol, HDL ("good" cholesterol) and LDL ("bad" cholesterol): every five years		•	•
Colonoscopy: every five years if no hemoccult (blood in stool) performed in the last 12 months		•	•
Flu vaccine: every 12 months		•	•
Pneumonia vaccine: once after age 65			•
Eye exam and hearing test: every 12 months			•
Shingles vaccine: once after age 60			•
Tetanus, diphtheria booster: every 10 years	•	•	•



ementia's symptoms may sometimes be innocuous, but they're always scary and too often insidious - like mistaking a car's gas pedal for the brake.

Confusing the gas and brake, getting lost in a familiar area or forgetting recent events are just some of the life-threatening and life-altering symptoms of a cognitive disorder or dementia, said Dr. Shelia Cassidy, a neuropsychologist for the Memory Loss Team at the UAMS Donald W. Reynolds Institute on Aging.

Cassidy and Dr. Garrett Andrews, also a neuropsychologist, along with other specialists on the Memory Loss Team treat dementia in its 40-plus varieties. Alzheimer's disease is the most common, followed by vascular dementia, which is caused by blockages in the brain's blood supply.

Most people probably think of memory loss when they hear dementia, but oftentimes it first affects parts of the brain that cause changes in personality.

The new Cognitive Disorder Clinic at the Institute on Aging evaluates individuals for dementia, mild cognitive impairment, mood disorders that can affect thinking, and age-related cognitive decline.

"Problems develop not only with memory but in areas like language, visual-spatial abilities and hand-motor skills," Cassidy said.

With vascular dementia, patients often experience diminished "executive function," which is the ability to quickly process information and to reason in familiar and unfamiliar situations.

Jina "Bitsy" Lewallen, a Memory Loss Team member who provides counseling to caregivers, recalled a couple from Sheridan who were driving home from Little Rock and wound up in Texas.

"That's an executive function impairment," Lewallen said. "They can drive, but they get lost."

Comprehensive Treatment

The Memory Loss Team is using the latest treatments to slow the progression of dementias and cognitive disorders and to help patients, their families and caregivers cope with the many dementia-related issues. The team also is involved in exciting new research that may one day help reverse symptoms of dementia, Cassidy said.

New patients are evaluated by a team that includes a geriatrician, a neuropsychologist, and a social worker. Patients also may be seen by a neurologist, a psychiatrist, a dietitian or a pharmacist, depending on their needs. After diagnosing the type and severity of the patient's condition, the patient and family members are given the findings and recommendations for treatment. Social workers also are part of the team providing psychosocial assessments, case management and psychotherapy. A psychiatrist is available to help manage medications and assist families with challenging behavioral issues.

"We help family members with depression and transitional grief counseling, because they

are losing a spouse or a parent a little at a time," Lewallen said. "We also offer support for patients experiencing depression and guilt, which comes with the realization that a loved one will have to care for them."

Lewallen is the social worker specialist who helps with neglect and abuse cases. More than 75 percent of the elderly are abused or neglected by family members who care for them, she said.

"The abuse and neglect isn't necessarily a result of deliberate cruelty, but rather from frustration and not knowing how to cope," Cassidy said.

Abuse can occur in the reverse, as well, with dementia causing some patients to become more easily agitated and even violent toward their caregivers.

"We watch for those situations and try to identify the stressors for the caregiver so that we can offer support through therapy or respite care or whatever is the best fit for them," Lewallen said. •

WARNING SIGNS

The risk of dementia increases significantly for people in their 70s and 80s. While being forgetful is normal, it's important to recognize the warning signs of dementia, which are often subtle and can begin in a person's 50s.

Signs include:

- Memory loss that affects job skills, beyond forgetting a coworker's name or phone number
- Difficulty performing familiar tasks. It's normal to forget to serve a side dish, but a person with dementia may forget that they've cooked a meal.
- Problems with abstract thinking, such as not recognizing numbers in a checkbook
- Changes in personality, such as becoming suspicious or fearful or more outgoing than before
- Forgetting simple words or substituting inappropriate words
- Becoming lost in areas that should be familiar
- Poor judgment, such as when driving
- Repeatedly misplacing things
- Radical mood swings



did you



Vaccine Potential

Researchers at UAMS have for the first time transferred an immune response in a healthy individual to a patient with multiple myeloma, a cancer of the bone marrow, showing promise for cancer vaccination.

In the study conducted at the **UAMS** Myeloma Institute for Research and **Therapy** in the Winthrop P. Rockefeller Cancer Institute, a healthy person was immunized with a cancer protein that can kick-start the body's immune system to kill cancer cells. The cancer-killing antibodies produced by the healthy patient's immune system were then transferred via stem cell transplant to her twin sister, who had been diagnosed with multiple myeloma, in conjunction with chemotherapy.

Dr. Frits van Rhee, director of clinical research in the Myeloma Institute, led the research team.

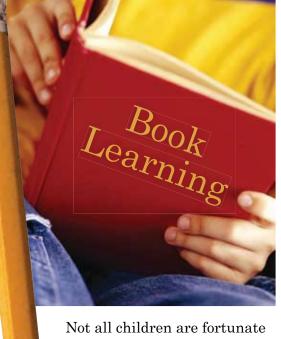
Public Health Grants

The UAMS Fay W. Boozman College of Public Health recently secured grants totaling more than \$20 million.

The funding includes a five-year, \$6.6 million grant from the National Center for Minority Health Disparities, a program of the National Institutes of Health, and a \$4 million five-year extension of a Robert Wood Johnson Foundation grant to evaluate the implementation of Arkansas Act 1220 of 2003, which established a statewide school-based intervention addressing childhood obesity.

Additional grants include funds to conduct a national study of public health systems, an obesity study focusing on older adults and a study examining ways to reduce health risk behaviors among rural African-American drug users.

Dr. Jim Raczynski is dean of the college.



enough to have a bookcase filled with their favorite books, but a group of community leaders is working to change that.

Founded by nationally syndicated columnist Jim Davidson of Conway, the Bookcase Project is a literacy advocacy program whose goal is to provide a personalized oak bookcase and set of children's books for 4- and 5-year-olds enrolled in the Head Start program.

> Head Start and Early Head Start centers in Pulaski County are operated by UAMS. Ninety percent of the families with children enrolled in Head Start are at or below the 100 percent poverty level.



Great Place to Work

Fortune magazine has ranked UAMS' teaching affiliate Arkansas Children's Hospital as 76th on its 11th annual "100 Best Companies to Work For" list. Physicians who are employed by the UAMS Department of Pediatrics practice at Arkansas Children's Hospital.

The hospital also was recognized under the category "Unusual Perks" for its pre-kindergarten fitness program and was ranked No. 1 in the "Onsite Child Care" category.

The list is developed by the Great Place to Work Institute and *Fortune* through an extensive employee survey of corporate America and on the company's responses to the institute's Culture Audit, which includes detailed questions about pay and benefit programs, hiring practices, internal communications, diversity and more.

Building Healthy Minds

A recent day-long conference co-sponsored by the UAMS Psychiatric Research Institute addressed how faith leaders and mental health professionals can learn from and collaborate with one another to reduce mental illness and related stigma.

The second annual "Bridging Faithful Spirits and Healthy Minds" conference included presentations by national and local experts on topics such as the needs of veterans and their families, faithbased approaches to mental health, and language barriers related to faith and mental health disparities.

Additional conference sponsors included the Veteran's Administration South Central Mental Illness Research Education and Clinical Center and the Central Arkansas Coalition for Faithful Spirits and Healthy Minds.

Dr. Teresa L. Kramer, associate professor in the UAMS Department of Psychiatry, was conference facilitator.



An open house was held in January to celebrate the new annex to the UAMS Winthrop P. Rockefeller Cancer Institute, touting its energy efficiency and "green" elements.

The two-story annex houses the Office of Grants and Scientific Publications, the UAMS Cancer Control Outreach Program and a new loading dock.

The annex features several environmentally conscious and energy efficient

elements, including:

- Recycled materials used in the carpeting and furnishings
- Cabinets made from corn husks, not wood
- Decreased overhead lighting and the use of skylights
- Recycled aluminum on the exterior
- Glazing on the exterior windows that makes them more energy efficient
- Recycled steel produced in Arkansas that includes steel from old buildings and cars

The annex was designed by Crowell Architects & Engineers Inc. CDI Contractors, Inc.

healers

oy Banks had her sights set on a career in health care.
"I always knew I was a nurturer," said Banks, who works as an ophthalmic medical technologist in the UAMS Harvey and Bernice Jones Eye Institute.

She found her calling while checking out the UAMS ophthalmic medical technology program. Both her grandparents have glaucoma — an eye disease that can lead to vision loss or even blindness — so the ability to help patients with eye care appealed to her.

"Through my grandparents, I learned about glaucoma and helped them better understand their condition over the years. I also stressed the importance of taking their medications," Banks said.

Ophthalmic medical technologists (OMT) are allied health professionals who improve patient care by assisting the patient and physician. Technologists take patient histories, conduct various vision tests and assist in ophthalmic surgery.

"OMTs like Joy play an important role in patient care," said Dr. Inci Dersu, a glaucoma specialist. "Their work gives the physician more time to explain a diagnosis and discuss treatment with the patient."

The job requires technical knowledge as well as the ability to work with patients to get the information a physician needs. The Joint Commission on Allied Health Personnel in Ophthalmology, which

oversees the profession, offers skill tests to certify technologists. The highest certification level is the certified ophthalmic medical technologist (COMT).

In 2007, Banks passed the COMT practical exam and entered an elite group, as only about 5 percent of the nation's certified ophthalmic medical personnel have passed the COMT exam, a combination of written and skills assessment. About 685 of the 15,859 certified personnel are COMTs.

"Passing the exam demonstrates the high level of care she can provide," said Suzanne Hansen, interim chairman of the UAMS OMT program.

As for her job, Banks said she enjoys meeting and visiting with patients.

"Even though we only work on the eyes, every day is different since different patients have different problems," Banks said. "I enjoy figuring out which tests will give the doctor the best information."

Echoing the experience with her grandparents, Banks' life came full circle as she works as the lead technologist for Dersu. "Joy is very thorough and organized, and patients like her," Dersu said.

Banks also is a clinical coordinator and lecturer for the UAMS ophthalmic medical technology students and is working toward a master's degree in adult education. "She's a great role model for students," Hansen said. •



partners

Deroy Day Volunteer Heads Up Fundraiser for Neonatal Intensive Care

our decades before he was a volunteer fundraiser for UAMS, Matt De Luca was a boy who enjoyed visiting his father's research lab on campus.

"My true connection to UAMS is through my father," De Luca said of Dr. Donald De Luca, now an emeritus faculty member after serving full time from 1966-2006.

"Growing up, I got to spend a handful of Saturdays at the lab. His work there and conversation around the dinner table gave me a close-up view of the campus' growth through the years."

Five years ago, De Luca, senior vice president and city executive for U.S. Trust, Bank of America Private Wealth Management, became involved with the UAMS Consortium, a group of young professionals and business executives who support UAMS with fundraising activities.

De Luca is in his second year of a two-year stint as Consortium chairman, which makes him chairman of the group's primary fundraiser: the upcoming Julep Cup Jaunt, a Kentucky Derby watch party that raises money to support the Neonatal Intensive Care Unit (NICU).

De Luca is no stranger to the NICU. His wife, Sandra, was closely monitored during her high-risk pregnancy by Dr. Paul Wendel, a maternal-fetal medicine specialist at UAMS who oversaw the delivery of their second healthy daughter three years ago. The De Lucas also have a 5-year-old daughter. Many Consortium members are parents of young children, or are just starting families, so the NICU is good fit for a fundraiser, he added.

"There's quite a bit of emphasis on other areas at UAMS, but the NICU may be overlooked a little bit," De Luca said. "That's an area where we believe we can have a big impact."

The Julep Cup Jaunt, which includes a silent auction, has grown steadily, with 2007 considered one of the most exciting watch parties yet. Local media celebrity Craig O'Neill entertained guests as the master of ceremonies, and his knowledge of the Derby and obvious passion for horse racing was a treat, De Luca said.

O'Neill, sports director at KTHV Channel 11 in Little Rock, has agreed to be master of ceremonies again this year.

"We're looking at other ways to add to the excitement and hoping for another successful event," De Luca added. •

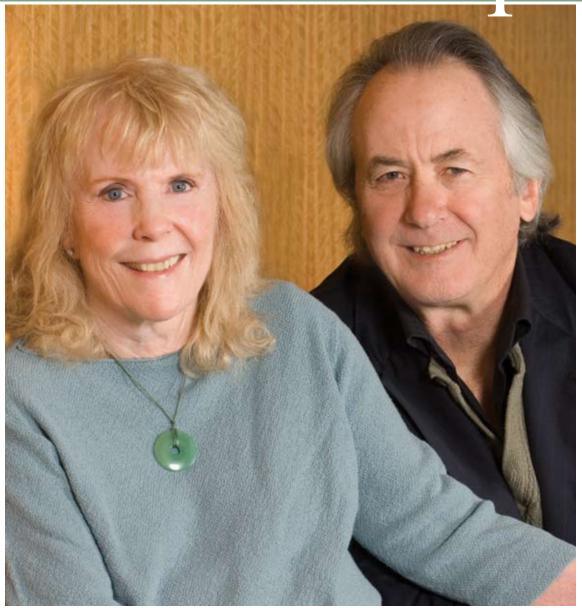


12th floor auditorium

Tickets: \$25

Contact: Dana Hof, (501) 686-8099

Renewed Hope Author's Battle with Myeloma Brings Her to UAMS



Claudia Jessup and her husband, Jonathan Richards, traveled from New Mexico to Little Rock for her treatment.

ooking at Claudia Jessup, it's hard to believe that just three years ago she fought the battle of her life against a rare form of cancer. Now in remission, the author of 11 books said she owes her life to UAMS and its Myeloma Institute for Research and Therapy.

Jessup's experience with cancer began in December 2004. While lifting a holiday package, she felt a "pop" in her back. At first, she dismissed it as a minor injury. When the pain persisted and worsened, she went to the doctor.

"I was told that I had a compression fracture in my spine and was put on bed rest," said Jessup, who lives in Santa Fe, N.M., with her husband, writer and political cartoonist Jonathan Richards. Jessup is the author of "The Woman's Guide to Starting

a Business," written under her name, and "Bare Essence," for which she uses the pseudonym Meredith Rich. "Bare Essence" was adapted into a television mini-series and a prime-time weekly series.

Jessup's pain became excruciating, and an MRI revealed not one but several fractured vertebrae. On March 2, 2005, Jessup entered a Santa Fe hospital where she was diagnosed with multiple myeloma, a rare cancer that affects the plasma cells.

"My doctor knew that Santa Fe didn't have a facility equipped to treat me," she said. "The day I was diagnosed, my doctor e-mailed Dr. Barlogie in Little Rock. I was told that he could accept me the following day." Dr. Bart Barlogie is director of the Myeloma Institute, which treats more myeloma patients than any other facility in the country and is part of the Winthrop P. Rockefeller Cancer Institute.

Jessup and Richards arrived by air ambulance at UAMS, where she began undergoing tests, and with the help of their daughters, India and Alex, the couple set up a life in Little Rock based around Jessup's treatment schedule.

"I knew I was in good hands. Everyone here is extraordinary, from the doctors and nurses to the patient care techs and secretaries," she said.

Jessup underwent chemotherapy and two stem cell transplants, after which she was in complete remission. Although they still return to UAMS for regular checkups, Jessup and Richards are back to their normal lives in New Mexico, where she is toying with the idea of writing a book about her experience.

"I found that I was willing to accept whatever life threw at me," she said. "I'm so glad that I put myself in the hands of the experts at UAMS." •



check it out

Claudia Jessup has written articles for magazines including *Vogue, Harper's Bazaar* and *Glamour*.

At the Forefront

Health Reforms Get Push From Independent Group



Dr. Joe Thompson is director of the Arkansas Center for Health Improvement.

n observing its 10th anniversary this year, the Arkansas Center for Health Improvement (ACHI) is celebrating several landmark health reforms.

ACHI has been the catalyst for such reforms as Arkansas' indoor smoking ban, its childhood obesity law and its dedication of tobacco settlement money to health care, said Dr. Joe Thompson, ACHI director and associate professor in the UAMS College of Medicine and Fay W. Boozman College of Public Health.

"These achievements wouldn't have happened without major contributors like the UAMS Department of Pediatrics, the College of Public Health, and the state Department of Education and Department of Health,"

said Thompson, who also is Arkansas' surgeon general. "I think ACHI has helped to spark those efforts into a major inferno."

ACHI, the nonpartisan, independent organization, has provided the evidence-based research and other expertise policymakers and political leaders have needed to develop, adopt and carry out the initiatives.

The College of Public Health, the Biosciences Institute, Arkansas' seven Regional Centers on Aging and the new Delta Area Health Education Center, all of which fall under the UAMS umbrella, owe their existence to the tobacco settlement money.

ACHI, then led by UAMS' Dr. Rick Smith, now director of the Psychiatric Research Institute, was instrumental in the \$50 million annual spending plan adopted by voters in 2000.

ACHI is sponsored by UAMS, the Arkansas Department of Human Services, and Arkansas Blue Cross and Blue Shield. Thompson, who has directed ACHI since 2003, said securing the tobacco money entirely for health programs was ACHI's biggest achievement in its first five years. The strategy has brought the state extra Medicaid dollars as well as positive national recognition.

> "We've halted the progression of the childhood obesity epidemic."

"In the last five years, Arkansas has banned smoking in workplaces and public buildings and our statewide childhood obesity initiative has shown that we've halted the progression of the childhood obesity epidemic," Thompson said.

ACHI was instrumental in establishing a program that helps small businesses provide health benefits to low-income workers by taking the lead in a federally funded initiative.

Today, ACHI continues its work to improve Arkansans' access to health care through the Governor's Roundtable on Health Care.

ACHI also is working with the public school and state employees' health insurance plans to modify their benefit structures so that the plans promote health improvement among employees. The state is providing financial incentives to employees who don't use tobacco, are physically active, work toward a healthy body weight and wear their seatbelt. •



check it out

Find out more at www.achi.net. ACHI was created in 1998 after UAMS' Dr. Kate Stewart alerted state officials to a major grant opportunity from the Robert Wood Johnson Foundation.

doll

231 Participants in the **UAMS** Program for Weight Loss and Metabolic Control who lost between 50 and 100 pounds in 2007



38,867

Hours given by UAMS Medical Center volunteers in 2007



Year a football team from the University of Arkansas Medical Department, the forerunner of UAMS, won a state championship

\$285 million

Amount received by UAMS in the last three years by patients from outside Arkansas

Cost per night to stay in the UAMS Family Home, which provides housing for cancer patients and parents of premature infants cared for at UAMS

Exam rooms in the Jackson T. Stephens Spine & Neurosciences Institute

seconds

Estimated time it would take to fill a home swimming pool with the water circulated by the new UAMS West Central Energy Plant

Arkansas' ranking in the nation for the number of colorectal cancer cases reported each year

Students in the **UAMS** sonography program at locations in Little Rock, Fayetteville, Pine Bluff and Texarkana



Time that the first baby born in Pulaski County in 2008 arrived at UAMS Medical Center

Myeloma survivors from 23 states who attended a first-ever gathering of 10-year-plus survivors hosted by the UAMS Myeloma Institute for Research and Therapy

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