Broad building honored for environmental design

The Eli and Edythe Broad Center for Regenerative Medicine and Stem Cell Research at USC received high honors from R&D Magazine as the publication announced its 2011 “Laboratory of the Year” winners. Featuring architecture and interior design by ZGF Architects LLP of Los Angeles, the building is one of only four labs to be recognized by R&D this year.

Representatives of the winning facilities and design teams were officially recognized at R&D Magazine's Laboratory Design Conference held in Universal Orlando, Florida, on April 12. The Broad building is the first building on the Health Sciences Campus to receive a silver Leadership in Energy and Environmental Design (LEED) designation based on its unique, eco-friendly features. The building allows ventilation in the cavity, reducing heat gain in warmer temperatures and creating an insulating barrier when it is cool. The building’s façade features ultra-clear glass and black granite. The building also utilizes an innovative chilled beam HVAC system, which uses water instead of air to cool the space, reducing energy consumption by more than 30 percent and improving the air quality and occupant comfort within laboratory and office areas.

During the October 2010 dedication ceremony, USC President C. L. Max Nikias acknowledged the beauty of five-story building, but said the most important stories will be the ones that play out in the form of lives transformed through new treatments, discoveries and innovations. “This new center carries out our promise to society,” Nikias said. “In the future, historians will search for the turning point in the age of medicine and biology, and when they do, they will look to this place.”

—USC President C. L. Max Nikias

American Pharmacists Assn. showers School of Pharmacy with top awards

By Kukla Vera

For the USC School of Pharmacy, a March visit to the rainy city of Seattle was anything but wet and dreary. The school came home with top awards from the American Pharmacists Association (APhA) Annual Meeting and Exposition, held March 25-28. Associate professor Jeffrey Goad received the Distinguished Achievement Award in Clinical/Pharmacotherapeutic Practice, given by the APhA to recognize an individual who has made a significant contribution to the provision of pharmaceutical care within clinical or pharmacotherapeutic practice. According to the APhA, Goad was selected in recognition of his significant contributions to the advancement of clinical services in the community pharmacy setting, including the promotion of community pharmacy residency training and the role of the pharmacist in travel medicine and immunizations.

At the School of Pharmacy, Goad serves as the director of Student Outreach for Community Health. He has also established and currently runs the USC International Travel Clinic, which provides complete, expert pre-travel advice, including immunizations and a customized overall travel plan. During the APhA meeting, Goad presented a four-hour travel medicine course and an immunization update. He also participated in a community pharmacy residency expert panel. Goad is currently a national faculty trainer for the American Pharmacists Association Pharmacy Based Immunization Training Program, and has been a long-time advocate for the ability of pharmacists to immunize in the community pharmacy setting.

Two USC student projects won the top national awards in their categories. Operation Diabetes, led by Christopher Munoz and Hovik Mekhjian, was recognized for the interdisciplinary approach they took in their efforts to screen patients for diabetes and, when appropriate, refer them for additional care. Further noted was the group’s multi-language capability, providing forms and translators appropriate to the community being screened, resulting in more effective communication. The group also reached across the globe in a diabetes project aimed at people in India. Operation Immunization, under the leadership of Amy Lee and Joanna Lee, also brought home the gold for USC. This project recognizes student efforts that promote, educate and administer immunizations. Further, the group works to introduce the public to the role of the pharmacist in providing immunizations.

USC also won the Region 8 Award for Project Heart, headed by Anna Deng, who is also the USC chapter president.

Project Transformation

Building the Future of Our Academic Medical Center

INSIDE: Project Transformation special section

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Show Baby Spirit

USC Football Head Coach Lane Kiffin (above, foreground) and his players visited USC Spirit of Troy Band and USC Song Girls on April 20 as part of a campus-wide pep rally that included visits to USC hospitals. The program included performances from the USC Spirit of Troy Band and the USC Song Girls, with tight end Randall Teller autographing a helmet for USC University Hospital senior telecommunications engineer Freddie Ruiz.

PHOTOS/SARA REEVE
Foundation funding is key to Elder Abuse Forensic Center

By Pauline Vu
It’s a scenario that’s more common than it should be: an older adult, often suffering from some sort of dementia, is taken advantage of by someone who’s supposed to help them. In one case reviewed by the Los Angeles County Elder Abuse Forensic Center, an elderly, non-ambulatory man married his caregiver, who then depleted his bank account. She bought an SUV for herself and a “brother” who was suspected of being her husband.
The center, which is housed at LAC-USC Medical Center, employed medical and neuropsychological experts to evaluate the victim and found he lacked the capacity to make decisions, including financial ones. Their testimony helped the District Attorney’s office prosecute the suspect, who was found guilty of theft of an elder adult by a caretaker and sentenced to five years in state prison.
“We see the full gamut of abuse, from financial abuse to physical abuse, neglect, sexual abuse and psychological abuse, and we also see self-neglect cases,” said Diana Homeier, the center’s director and an associate professor of internal and family medicine at the Keck School of Medicine.
The center will be able to continue its work thanks to a $350,000 grant from the Archstone Foundation and a $400,000 grant from the UnIHealth Foundation, received in January. These two foundations also provided the initial funding that helped establish the center in 2006.
Both foundations have been amazing in thinking about this population that doesn’t get a lot of attention and this issue that doesn’t get a lot of funding,” Homeier said.
When it opened in 2006, the Los Angeles County Elder Abuse Forensic Center was just the second such program in the country.
It is now the country’s largest program to investigate cases of potential elder abuse. Representatives from other states and countries come to see the L.A. center in action as they set up their own programs.
As of the end of 2010, the center had reviewed 591 cases of elder and dependent adult abuse, provided 110 medical and 129 neuropsychological evaluations and obtained $3 million in conservatorships. Its findings have led to 53 prosecutions of elder abuse.
Its effectiveness stems from the multidisciplinary team of experts it brings together weekly. The team’s members include a neuropsychologist and geriatrician, representatives from the District Attorney and City Attorney’s offices; the L.A. Sheriff’s Department and L.A. Police Department; Adult Protective Services; the Department of Mental Health; and more.
California also has elder abuse forensic centers in Orange County, San Diego and San Francisco—the most of any state. About $200,000 of the Archstone award will go to Kathleen Wilber, the Mary Pickford Professor of Gerontology at the Davis School of Gerontology on the University Park Campus, who has been evaluating the L.A. program since its inception. With the new grant she will compare practices at California’s four centers, all of which receive Archstone funding.
Wilber will also compare the number of successful prosecutions and protective interventions, such as conservatorships, between cases referred to the forensic center and similar cases that have not been heard at the center.
“The question is … what kind of value does this resource add to the protective services system?” Wilber said. “We think there are additional outcomes that could result from this unique model, because for many of the most complex cases, it takes a team of experts to address the problem.”
If the evaluation proves the forensic centers are effective, the L.A. program can apply for funding from new avenues, such as the federal government or groups that support crime victims, Homeier said.

International Assn. for Dental Research awards key honor to USC scientist

By Beth Dunham
The International Association for Dental Research (IADR) recently honored Yang Chai as the recipient of the 2011 Distinguished Scientist Award for Craniofacial Biology Research. Chai, associate dean of research and director of the Center for Craniofacial Biology at the Ostrow School of Dentistry of USC, accepted the award on March 16 at the IADR’s 2011 General Session and Exhibition in San Diego.
He is widely recognized throughout the dental and craniofacial research community for his investigations of the molecular and cellular mechanisms of craniofacial development, including oral and facial birth defects such as cleft palate.
“He’s a great feeling to have your work recognized by your peers as having made a significant impact on the field,” he said.
Chai credited many of his scientific achievements to the supportive research and mentorship environment at the Ostrow School of Dentistry and throughout USC.
Arihsh sadan, dean of the Ostrow School of Dentistry, praised Chai as one of the School’s strongest scientific leaders and research role models.
“He is not just a great scientist,” Sadan said. “His leadership and his mentoring of both faculty and student researchers have helped the Ostrow School of Dentistry maintain our role as a dental and craniofacial research powerhouse.”
Unique process spurs transformation to academic medical center

By Tania Chatila

The first time Raul Torres walked into Project Transformation, he couldn’t help but notice all the “officers” in the room.

“Chief executive officer, chief nursing officer, chief financial officer—I found myself looking around thinking, I never thought I would ever be in,” Torres said. Now, four months later this USC University Hospital surgical technician is leaving his footprint in what will be a new future for the USC medical center. “This process showed me I have a voice.”

Torres is one in a rapidly growing group of people who have participated in Project Transformation, an ambitious effort to create a new strategic vision for the clinical enterprise. The USC hospitals launched the large-scale initiative in December, and it will eventually enlist the help of more than 700 employees and medical staff to create this new future.

The goal of Project Transformation is to develop the plans necessary to transform the culture of the clinical enterprise from that of a for-profit community hospital to that of an academic medical center for USC. “Project Transformation is a process for planning our future,” said hospitals CEO Mitch Creem.

“Our ultimate goal is to be known as a truly outstanding academic medical center—one of the very best in this country,” he added. “In order to get there, we need a plan.

Project Transformation will create the pathway needed to identify and implement that plan.”

The overall project encompasses three main elements:

• development of a new culture and mindset among all physicians and staff that emphasizes ownership, excellence, courage, financial responsibility and accountability;

• the adoption of this new mindset and culture at all levels of the organization;

• and alignment on a set of critical initiatives, which each have specific outcomes, milestones and implementation metrics.

Thus far, more than 200 doctors, nurses, administrators and other hospitals staff, like Torres, have participated in the Project Transformation program. These early-adopters have helped to create a common vision for the organization, one that continues to be vetted and shared as more and more people enroll in the process.

Over the course of the year, each and every member of the organization will be touched by this common vision.

“It’s a very fulfilling and satisfying experience,” said Torres. “The process was very challenging at first to understand, but by the time the first few days had passed, all the pieces came together.”

THE LANGUAGE OF TRANSFORMATION

“They talk about a new language and yes, you come out understanding terms differently,” said Philip Lamb, chair of the Department of Anesthesiology. “Project Transformation becomes a Rosetta Stone to translate and understand the interpersonal communication that will drive us to institutional change.”

For those who have been through the 3.5-day Project Transformation program, key words and phrases have been significant in helping to guide the learning process. It’s referred to as the language of transformation—a specific set of terms to help people better communicate with and understand others.

“The one everyone seems to remember is racket, and the idea of dropping one’s racket,” said Lamb. “A racket is merely a scam, a defensive mode of behavior that keeps us from interacting with our colleagues in a realistic way.”

What is ‘Project Transformation’? Answers to frequently asked questions

What is Project Transformation?

Project Transformation is a large-scale initiative to create a new strategic vision and strategic plan for USC University Hospital, USC Norris Cancer Hospital and the clinical enterprise. This initiative includes a 3.5-day course to teach employees and medical staff how to better communicate and collaborate with one another.

Why is it called ‘Project Transformation’?

This initiative is about transforming our clinical enterprise from a for-profit hospital to the USC medical center—unifying the enterprise and bringing together all partners in USC’s pursuit of excellence in health care.

Who is involved in Project Transformation?

So far, more than 200 people have participated in the 3.5-day Project Transformation course, including doctors, nurses, administrators, hospitals staff, researchers and even consultants working within the clinical enterprise.

Eventually, more than 700 people from the Health Sciences Campus will participate. But even those who don’t attend the course may participate in this important initiative to shape the future of USC’s medical center and implement our strategic plan.

I keep hearing people talk about a ‘declaration.’ What is that?

An important part of the Project Transformation process is making declarations, written statements that describe who people or groups want to be professionally, personally or both.

Staff of the USC medical center went through a similar process on behalf of the entire organization, committing to the medical center becoming “a trusted leader in quality health care that is personalized, compassionate and innovative.”

To read the full declaration, see page H4.

Why is Project Transformation so important?

Those involved in USC’s medical center should see themselves in the future of our organization. That means being actively involved in our collaborative process to design our new future. By participating in this cultural transformation, they will play an important role in the success of USC’s medical center.

How can I attend Project Transformation?

If you are interested in enrolling in the 3.5-day course, please contact Traci Perry via e-mail at Traci.Perry@med.usc.edu.
TRANFORMATION: Project aims to bolster interpersonal ties

Continued from page H1.

"Rackets," "break-throughs," "commitments," "getting complete"—these are just some of the words and phrases that Project Transformation participants emerge with after completing the course. Employees agree the shared language is important in not only making the entire process successful, but also in keeping it alive outside of the course.

"For me, it was about being aware of how I am listening and relating to my colleagues at work," said Chris Corwin, a business and network development consultant working with the USC hospitals. "I clearly see the difference when I 'get my opinions out of the way', and I am 'present' to what someone is saying versus listening to them through my filters. This takes the conversation to a new level."

The language isn't all about improving communication though. Participants say it's also about learning how the power of words can create new possibilities for the future. During sessions, participants write declarations for what they want to be professionally, personally or both. Then they read those declarations aloud, committing to them publicly.

Early enrollees went through a similar process collectively on behalf of the entire organization. Together, they committed the USC medical center to becoming a "trusted leader in quality health care that is personalized, compassionate and innovative."

CHANGE YOURSELF, CHANGE THE WORLD

At its core, the Project Transformation process is about relationships—changing behaviors for the better so that people can foster genuinely positive relationships with others. "But before we can change the world, we need to change ourselves," said Creem. "We need to look inside of ourselves."

Self-reflection is an important piece of the Project Transformation process. Participants learn to identify the different things that keep them from creating open and honest relationships with others. By identifying that baggage, they learn how to let it go and break down the barriers they may have with people in their lives.

"I used to be so much about myself and my relationships with other people, both personally and professionally," said Osula Aragon, a nurse at USC University Hospital. "This program really allowed me to stop holding on to the past. We often spend too much time complaining, worrying and getting frustrated. Instead, that time and energy can be spent on creative problem-solving to make the best of the situations we deal with every day." It is these open and honest relationships that will eventually transform the USC medical center into a more cohesive unit, said Chief Human Resources Officer Matt McElrath.

"Over the last year or so we've talked a lot about our differences," he said. "There are Tenet people, USC people, Norris people. In reality, we are all in this together. What Project Transformation is doing is reuniting us as one single team." Keeping it alive

It was a whole different ball game when Joint Commission surveyors showed up unexpectedly at USC University Hospital earlier this month. The last time they had been here was 2008. But this time around, surveyors told administrators something was different at the hospital. That something was Project Transformation.

"In an initial briefing with our key physicians, administrators, directors and staff, they told us, 'Whatever you're doing with this cultural transformation, it seems to be working.' Everyone is talking about the hospital's transformation and how evident it is," said Chief Operating Officer Scott Evans.

"They felt the buzz and they noticed how it was impacting what we do here in a positive way. We have to keep up that momentum."

Participants of Project Transformation say they're betting on the program's staying power, which is why they're committed to ensuring the process doesn't lose steam. One way they're doing this is by encouraging others to join. Since December, about 215 people have attended the course, and that number is growing as more and more staff enroll in upcoming sessions.

The buzz of Project Transformation is even spreading beyond the hospitals, with interest from USC researchers and other Health Sciences Campus staff. By the year's end, Creem hopes to have put at least 700 people through the program, and that number could grow if additional sessions are offered next year.

"I think people just have to do it," Lumb said. "You have to take a leap of faith. It's not going to work if you go one day and decide you don't like it. It's a commitment. You need to let down your defenses, get down off your high horse and leave your professional title behind. I'm betting anyone who actually goes through the full course is not going to say, 'this is a waste of time.'"

Another key way participants are keeping the initiative alive is through the formation of individual project teams. These teams are tasked with designing and implementing strategic organizational improvements over the next three years in six different categories: quality health care, patient experience, employees, education, research and electronic health network.

Keeping in mind the organization's overall goal of being the trusted leader in health care, each of these teams has come up with specific goals and outcomes for each category. Some of those goals include creation of an inventory of simulated education programs, implementation of a comprehensive and integrated medical call center and solidifying USC's medical center as one of the best places to work in the country.

As the plans continue to develop they will be shared with the organization. Employees will also have the chance to participate in the different teams, giving them the opportunity to leave their footprints in the future of the hospitals and clinical enterprise.

"We could spend $2 million on a strategic plan—come up with five great goals to accomplish and never get there because we haven't learned how to work together," Creem said. "We haven't learned how to let go of the things that are holding us back; how to create open and honest relationships. That is why this process is so powerful. It's giving us the tools we need to create and honor commitments—to ourselves, our colleagues, our patients and this organization."

Above, USC University Hospital nurse Phuong Tran writes down key words and phrases to be used in a declaration for her nursing group at Project Transformation. Left, USC hospital's administrative assistant Lindielle Morrison brainstorming during a group exercise as Human Resources nurse recruiter Bryan Hickey looks on.
How has Project Transformation affected the way you view and perform your job?

**Bobby Bowman**  
Supervisor, Accounts Payable  
USC University Hospital

It’s very informative. It teaches you to look within yourself and evaluate your values. It allows you to take a look at your inner emotions. It also teaches you about how to deal with unfinished issues we may have with our co-workers, our bosses or even in our personal lives.

This helps you find ways to deal with those issues so we can all come together and work together more efficiently. What’s nice is meeting with other employees and hearing about what they’re going through. It makes us more aware of one another and allows us to really step into someone else’s shoes.

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**Leslie Ung**  
Nurse, USC University Hospital

I found Project Transformation to be very inspirational and motivating. It’s provided me with excellent tools to help USC University Hospital become a renowned leader in healthcare.

It was very exhilarating to have been a part of this revolution. I left feeling invigorated and eager to pass on what I’ve learned to our operating room team.

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**Daniel Oakes**  
Associate Professor of Clinical Medicine, Keck School of Medicine

This took a very large leap of faith on [USC hospitals CEO Mitch Ceem’s] part. It’s very impressive that the leader of our hospitals is willing to level the playing field and allow a lot of different voices to participate in these discussions about our future.

There are problems in every workplace, but we have the opportunity to be part of the solution. We all are empowered with the ability to contribute, to change how we do things to make them better. That’s the power of Project Transformation and that’s why it’s important to talk to others about what we’re doing, why it’s positive and why people should give up their time and get involved.

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**George Round**  
Senior Business Analyst, USC Health Sciences Information Technology

I came here thinking this was about transforming the organization. I’m now realizing that we need to transform ourselves and our way of thinking to be able to affect organizational change.

It’s been a journey. It seemed unclear where we were going at first, but it all came together at the end.

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**Stacy Gaudynski**  
Nurse, USC University Hospital

I’ve learned that it’s just not me. It’s not about just the nurses or me. Everyone is involved in changing the attitude of our organization. This is bringing people together to work collaboratively. It’s starting conversations.

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**John Odom**  
Human Resources Recruitment Manager, USC hospitals

Project Transformation helped me understand who I am in my personal life as well as my professional life. Because of this extraordinary program, I now view my entire life differently and more positively, and I would definitely recommend it to everyone who can attend.

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**Joanne Weigh**  
Nurse Manager, USC University Hospital

Project Transformation has given me the tools to confront and change things that have been holding me back from being the compassionate and inspirational leader I strive to be.

It is exciting to have the opportunity to be part of transforming the culture at USC and take us to the next level. It’s like a rebirth for the hospital.

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**Carmen A. Pullafito**  
Dean, Keck School of Medicine

Everyone who has gone through Project Transformation has been touched by this process. Aspirational goals have been set. This kind of collaboration is going to help us move forward in providing the best possible care for our patients.

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**James Ayers**  
Respiratory Therapist, USC University Hospital

I really believe that Project Transformation can give us the tools needed to affect change and the opportunity for all of us to begin at the same point.

This program has the possibility to impact everyone both professionally and personally. It doesn’t matter if you’re a doctor or you work in the respiratory department. Improving patient outcomes is where these tools really can affect how our patients see us at the hospitals. It all begins with you. Everyone should attend.

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**Lisa Dexter**  
Supervisor, Accounts Payable  
USC University Hospital

This project has changed both my personal and professional life. I have become a better listener and thus a better communicator. I am still in the examination process—identifying some of my underlying issues that may be preventing my collaborations within the organization.

But every day when I come to work, I feel like I’m working toward something, and that I’m not on that path alone. I have identified how my common complaints (rackets) actually formalize my reactions and I address those now so that I can have more positive outcomes. I have moments of regression, but I keep getting back on task.
Our Declaration

We are the University of Southern California Medical Center.

We declare the possibility of being the trusted leader in quality health care that is personalized, compassionate and innovative.

• We stand for empowerment, integrity, respect, collegiality and vitality.

• We commit to authenticity.

• We commit to excellence in clinical care, teaching and research.

You can count on us to be fully present in the delivery of uncompromising health care.

FIGHT ON!

Project teams target key areas for improvements

Since the launch of Project Transformation, project teams have formed to design and implement improvements in six categories relating the success of USC’s medical center.

“If we achieve these outcomes, we will achieve who we want to be in our declaration.”
—Mitch Creem, CEO, USC hospitals

Following are some of the key commitments proposed by the project teams.

ELECTRONIC HEALTH NETWORK
By July 2014, we have a system that effectively communicates usable and complete health information anywhere, anytime.

Outcomes include:
• A robust technical infrastructure including network, server and desktop support
• A single Electronic Medical Record for the Health Sciences Campus
• Interactive access portals for patients and physicians
• Portable wireless data access/entry devices

QUALITY HEALTH CARE
By July 2014, together we all are now an innovative compassionate team working collaboratively in an exceptional model of clinical care.

Outcomes include:
• A “USC Way” model of care that includes a multi-disciplinary team approach to inpatient care
• Coordination of multiple outpatient visits/services and/or hospital admissions for patients with one phone call

PATIENT EXPERIENCE
By July 2014, we are a medical center where our patients have the experience of being known.

Outcomes include:
• A comprehensive and integrated medical call center
• Websites for the two hospitals and The Doctors of USC integrated into one patient-focused site with enhanced content and functionality

• An innovative USC health network of hospitals, community physicians and payors

OUR PEOPLE
By July 2014, our people (employees and medical staff) are known, empowered and dedicated. We are one of the “Best Places to Work” in the United States.

Outcomes include:
• Increased physician and employee satisfaction
• An employee/medical staff survey engagement plan to increase participation in satisfaction surveys
• A “Just Culture” program to create a culture of trust and empowerment in the workplace
• We are one of the best places to work in the United States

RESEARCH
By July 2014, we are an international mode for discovery that transforms patient care.

Outcomes include:
• Structures and processes to engage patients and their families in health and discovery
• A culture of research and discovery embraced across the medical center
• Our patients choose USC because of its leadership in research

EDUCATION
By July 2014, we are an innovative learning environment for health.

Outcomes include:
• Multidisciplinary learning programs with accredited continuing education
• A destination learning center that provides nationally recognized public and patient education
• Technologically sophisticated learning programs including simulation labs, e-learning
• A community education program funded by the Good Neighbors Campaign

For more information about the groups or if you would like to join a group, please e-mail Karen Ribback at karen.ribback@health.usc.edu.
Fundraising walk to fight women’s cancers to be held Mother’s Day weekend

By Tania Chatilla
Facility, staff, students, residents and friends are invited to celebrate Mother’s Day weekend with Team USC Norris at the 18th Annual Entertainment Industry Foundation Revlon Run/Walk For Women on May 7, to help fight women’s cancers. The walk attracts tens of thousands of participants to the Los Angeles Coliseum at Exposition Park each year, all committed to raising money for cancer research. The USC Norris Comprehensive Cancer Center has been selected as one of this year’s beneficiaries.

“We all know that women’s cancers are still far too common. We’re losing too many mothers, daughters, sisters and friends,” said Team USC Norris Captain Tonya Strom. “But the more we know about these diseases, the better equipped we are to fight them — and eventually, to eradicate them. Let’s join together to support this important cause.”

The day will begin with a celebrity opening ceremony at 9 a.m. followed by the start of the 5K at 8:45 a.m. The course takes participants through the streets surrounding the USC University Park campus and finishes inside the Coliseum. Additionally, the USC Norris Comprehensive Cancer Center and Hospital will host a booth at the event’s Health Expo to promote USC’s extensive cancer services. The booth is organized by the USC Health Sciences Public Relations and Marketing Department.

Registration to run or walk is $35 through May 6, but $40 on the day of the event. All registered team members will receive a Team USC Norris T-shirt and an EIF Revlon Run/Walk For Women goodie bag. To make a donation or join the USC team, visit http://tinyurl.com/teemef.

This year the Revlon Run/Walk in Your Dreams gives supporters an opportunity to join the team without participating in the walk.

The cost is $42 and registrants will still receive the Team USC Norris T-shirt. Click on the “Run/Walk in Your Dreams” option on the registration page.

For more information about the team or the event, contact Strom at (323) 865-0688 or email her at tstrom@usc.edu.

AWARD: Broad building recognized for innovative designs, materials, construction

Continued from page 1

HONORS: School of Pharmacy lauded for public service video

Continued from page 1

The Eli and Edythe Broad building recognized for innovative designs, materials, construction

The Weekly NEWSMAKERS

In a HealthDay News story on Apr. 8, Bloomberg Businessweek quoted Peter Singer, professor of bioethics at the University of Oxford, about treatments used for curing diseases of the thyroid gland. An Apr. 10 Los Angeles Times article highlighted a study by Nurses Sanossian, professor of neurology at the Keck School of Medicine, and a UCLA colleague that found that drinking coffee might reduce the risk of stroke.

On Apr. 11 U.S. News & World Report cited a study by Lon Schneider, a professor of psychiatry, neurology and gerontology at the Keck School of Medicine, that concluded the drug commonly prescribed for Alzheimer’s Disease, memantine, appears to be ineffective in treating the mild stage of the disease. “In view of the small effects seen in patients with moderate disease, questions remain about this drug’s use in these patients,” Schneider said. The Boston Globe, Los Angeles Times, Reuters, CNN, WebMD, MSNBC, MSNBC Health & Fitness, MyHealth, HealthDay, Internal Medicine News Daily Digital Network and Health Canal also reported on the study’s findings.

An Apr. 15 Ventura County Star story reported that Anne Peters, professor at the Keck School of Medicine and director of the USC Clinical Diabetes Program, created a groundbreaking protocol that enables diabetic IndyCar driver Charlie Kimball to monitor and regulate his blood sugar levels during races. The Orange County Register also ran a story.

On Apr. 21 The New York Times quoted Scott Fruin, assistant research professor of environmental health at the Keck School of Medicine, about diesel emissions, stating that there are suspicions that “diesel is a lot more toxic than other types of particulate matter because of the things it’s enriched with.”

We all know that women’s cancers are still far too common. We’re losing too many mothers, daughters, sisters and friends.

—Team USC Norris Captain Tonya Strom
Calendar of Events
This Calendar of events is also online at www.usc.edu/hscalendar for the Health Sciences Campus community

Monday, May 2
Noon – 2 p.m. and 4 p.m. – 7 p.m. USC Plastic Surgeons: A Day of Beauty. Participants will enjoy free evaluations with USC plastic surgeons and discounted prices on Botox and Juvederm. Free consultation for any other type of cosmetic procedure with the purchase of Botox or Juvederm. HCT 1009A. Info: (323) 442-2920

Tuesday, May 3
8 a.m. Annual USC Norris Cancer Center Poster Session. NRT LG 503/504. A light lunch will be served. For abstract submission and instructions, please visit http://uscnorris.com/poster. Info: (323) 865-0901

Friday, May 6
11 a.m. Biochemistry and Molecular Biology Special Seminar. “From Epigenetic Profiling to Understanding Transcriptional Regulatory Mechanisms.” Shirley Liu, Harvard. NRT Artery Aud. Refreshments will be served. Info: (323) 865-3852

Noon Pharmacology and Pharmaceutical Sciences Seminar. “In-cell SNR Spectroscopy to Study Protein Interactions.” Alexander Shuldtman, State Univ. of New York at Albany. PSC 104. Info: (323) 442-1417

Tuesday, May 10
10:30 a.m. USC Hospital Guild Speaker Series. “Autisms: Challenges and Research Advances.” Pat Larvic, USC Valley Hunt Club, Pasadena. $45 per person. RSVP to (626) 440-0679


Wednesday, May 11

Friday, May 20
8 a.m. Pathology and Laboratory Medicine Grand Rounds. “Medico-Legal Death Investigation in LA County – Unusual Case Scenarios.” Lakshmanan Sathyavagiswaran, USC & UCLA. NOIR 7409. Info: (323) 442-1186

11:45 a.m. USC PRSC Seminar. “Histone Variants, Nucleosome Dynamics, and Epigenetics.” Steven Hemminki, Fred Hutchinson Cancer Research Center. USC 250. Info: (323) 442-9849

Tuesday, May 24

Notice: Deadline for calendar submission is 4 p.m. Monday to be considered for that week’s issue—although three weeks’ advance notice of events is recommended. Please note that timely submission does not guarantee an item will be printed. Send calendar items to The Weekly, KAM 400 or fax to (323) 442-2832, or e-mail to eblaauw@usc.edu. Entries must include day, date, time, title of talk, first and last name of speaker, affiliation of speaker, location, and a phone number for information.

HONORING “THE FATHER OF EMERGENCY MEDICINE”—The LAC+USC Medical Center formally renamed its emergency room the “Gail-Anderson, M.D. Department of Emergency Medicine” in honor of Gail Anderson St. Anderson served the Keck School of Medicine for more than 30 years including stints as chair of the Department of Obstetrics and Gynecology and also as chair of the Department of Emergency Medicine—the first such department anywhere. More than 200 people attended the ceremony on April 21 at the LAC+USC Replacement Facility, paying their respects to Anderson, who is widely known as “The Father of Emergency Medicine.” Above, Anderson (left) thanks the crowd for the honor as longtime friend Phil Manning looks on.

Oral surgery journal honors School of Dentistry researchers

By Beth Dunham
Two articles published by Herman Ostrow School of Dentistry investigators in the journal Oral Surgery, Oral Medicine, Oral Pathology, Oral Radiology and Endodontontology have won awards for the journal’s best articles of 2010.

The first article, “Comparison of cone-beam CT parameters and sleep questionnaires in sleep apnea patients and control subjects,” won the American Academy of Oral and Maxillofacial Radiology’s Arthur Wiedemann Prize for best oral radiology article. Lead author Reyes Enciso, assistant professor of clinical dentistry, said the study illustrated the correlative power of three-dimensional cone-beam CT scans in patients with possible obstructive sleep apnea, which is characterized by pauses in breathing during sleep due to the airway collapsing or soft tissues such as the tongue or palate blocking the airway.

The patients eventually diagnosed with the condition shared similar airway characteristics as discovered by the cone-beam CT scan, including smaller lateral airway widths and smaller cross-sectional area measurements of the airway. However, airway collapsibility seemed to be a bigger factor for apnea diagnosis than airway dimensions alone. Enciso said.

The second article, “Treatment outcomes of mandibular advancement devices in positional and non-positional obstructive sleep apnea patients,” won the H. Dean Millard best paper award from the American Academy of Oral Medicine.

Principal investigator Glenn Clark, director of the Ostrow School’s oral medicine residency program, said the study examined the helpfulness of mandibular advancement devices in sleep apnea patients. The devices, used during sleep, pull the lower jaw forward, reducing the likelihood of soft oral tissues blocking the airway.

The results suggested that the devices helped patients who had positional sleep apnea—those whose apnea was worst when sleeping in a certain position, usually on their backs. However, the devices did not seem to help as much in patients whose apnea was non-positional or those whose apnea did not depend on the position in which they slept.

“One of the important findings of the paper that we published is that when your snoring or apnea is no longer helped by turning on your side, this is a serious sign of progression of the disease,” Clark said. “We feel that paying attention to whether a patient is a positional or non-positional apnea patient is very important.”