

# USC University Hospital welcomes four new clinics

**'This has been a top priority and is part of a strategic effort to better coordinate care for our patients.'**

**—Mitch Creem, chief executive officer of USC University Hospital and USC Norris Cancer Hospital**

**By Tania Chatila**

USC University Hospital has acquired licensing for four new hospital-based clinics, successfully achieving a months-long goal aimed at enhancing patient care and streamlining the clinical experience for patients, staff and physicians.

General Surgery, Cardiovascular Thoracic Institute (CVTI) Surgery, CVTI Diagnostics and the Department of Medicine officially transitioned from physician offices to hospital-based outpatient services on Jan. 5, following a rigorous survey by the California Department of Public Health. The transition means these

programs will now be operated by the hospital from their current homes on the Health Sciences Campus.

"We're very happy to welcome these clinics into the hospitals family," said Mitch Creem, chief executive officer of USC University Hospital and USC Norris Cancer Hospital. "This has been a top priority and is part of a strategic effort to better coordinate care for our patients, whether they're being seen in their doctor's office, undergoing an outpatient procedure or being admitted to one of our hospitals. This transition will mean more efficiency and a more streamlined experience for everyone."

The process to license the clinics began more than nine months ago and included some capital improvements, the development of an integrated registration and scheduling system between the hospitals and The Doctors of USC, and enhancements to business operations, such as financial tracking.

All of the improvements will lead to "better access to records, an easier process for ordering tests, centralized appointment scheduling and a shared electronic health record," said Minor Anderson, chief executive officer of The Doctors of USC.

Additionally, the transition meant welcoming more than

115 clinic staff members to the hospital's employee family, said Annette Sy, associate administrator of ambulatory care. Sy led the multidisciplinary team of physicians, hospital leaders and clinic staff who worked together to make the transitions possible.

She added that plans are already under way to bring aboard other clinical services as well, such as radiation oncology and gynecology.

"Our ultimate goal is to provide the same standard of care and exceptional service at all of the ambulatory practices sites throughout the USC academic medical center," Sy said.



Ziva Santop/Steve Cohn Photography

**NOTED HEALTH CARE REFORMER MICHAEL DUKAKIS DISCUSSES CURRENT STATE OF HEALTH CARE REFORM**—Former Massachusetts Governor and one-time presidential candidate Michael Dukakis visits Keck School of Medicine Professor Michael Cousineau's Health Policy class to share his thoughts on the health care reform debate, the repeal effort and what recent developments could mean for the future of the health care profession. Above, at a reception at Keck School Dean Carmen A. Puliafito's home, Dukakis spoke to a gathering of public health and medical students about his own struggle to enact health care reform, noting that he was very impressed with the students' questions and understanding of the issues.

## School of Pharmacy prepares new bilingual health education videos

**By Gabrielle Olya**

With a successful series of health literacy fotonovelas behind him, USC School of Pharmacy assistant professor Mel Baron is expanding his outreach efforts to the video/DVD format.

UniHealth Foundation has awarded a \$600,000, three-year grant to fund a 10-segment series designed to educate patients and their families about the kidney transplant process.

UniHealth made the award to the National Institute of Transplantation (NIT), which in turn partnered with the USC School of Pharmacy and the Institute of Health Promotion and Disease Prevention Research at the Keck School of Medicine of USC on the project.

"Since 2001, UniHealth Foundation has supported NIT's efforts to increase public awareness about the risk factors and treatment options for end-stage renal disease," said Mary Odell, president of UniHealth. "We believe this innovative partnership with the USC School of Pharmacy for the fotonovela project will result in a new and exciting resource for conveying health care information to very sick patients in a user-friendly format."

The series will be produced in Spanish and

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# USC researchers elucidate signaling mechanism for detecting and fighting viruses

Researchers at the Keck School of Medicine have discovered the mechanism by which the body turns off the production of interferon I, a protein that enables cells to communicate about detecting and fighting viruses.

The findings, which appeared in the journal *Molecular Cell* on Feb. 4, could eventually lead to treatments for life-threatening infections and better understanding of autoimmune diseases.

Kyung-Soo Inn, a Keck School postdoctoral fellow in

microbiology and molecular immunology, was the primary researcher for the study, which was directed by Jae Jung, Fletcher Jones Professor and Chair of the Department of Molecular Microbiology and Immunology. Other contributors include Michaela Gack, a faculty member of Harvard Medical School, and researchers led by Professor Kazuhiro Iwai of Osaka University in Japan. Study findings built upon an earlier investigation of interferon activation conducted by Gack, a former

Ph.D. student in Jung's lab.

Inn explained that when the immune system detects a viral infection, an anti-viral signaling mechanism is activated: retinoic acid inducible gene I (RIG-I) detects the virus signature and turns on intracellular communication to produce interferon; interferon then tells uninfected neighboring cells that there is an infection nearby, prompting them to produce hundreds of antiviral genes to combat it.

In her earlier study (*Nature*, 2007), Gack found that tripar-

tite motif-containing protein 25 (TRIM25) acts as a turn-on switch in the anti-viral process by triggering the addition of ubiquitin, a small regulatory protein found in all tissues, to RIG-I.

"I thought there also ought to be a negative regulator to remove ubiquitin from the RIG-I, and deactivate the virus sensor so that it can't turn on interferon, simply a 'what goes up must come down' in innate immune activation," Inn said. "Interferon needs to be turned off quickly because

high levels of it can induce autoimmune disease and cell death."

The study by Inn and his collaborators discovered that linear ubiquitin assembly complex (LUBAC), a grouping of proteins, can inhibit the addition of ubiquitin to RIG-I and thereby stop the release of interferon. "We found that TRIM25 and LUBAC counteract each other to maintain a balanced level of interferon signaling," he said.

Inn noted that interferon

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# Pharmacy students’ project helps spread clinical skills abroad

‘We want to empower people to get the help they need and empower pharmacy students to provide the type of hands-on clinical practice they are equipped to do.’

—USC School of Pharmacy student Hovik Mekhjian

**By Gabrielle Olya**  
Hovik Mekhjian and Parth Parikh, USC students in the doctor of pharmacy program, have begun an outreach project that educates pharmacy students in India about clinical aspects of the profession, a facet not currently emphasized in that country’s programs.

“India has the fastest-growing diabetic population in the world, and pharmacy students can play an integral part in dealing with the current health care gaps stemming from this epidemic,” Mekhjian said.

In many countries, pharmacists are not used to their full professional capabilities, and the USC School of Pharmacy is extending its knowledge abroad to improve upon the integration of the pharmacist as part of the health care team.

With these goals in mind, Mekhjian and Parikh are bringing this initiative to India.

“I chose India as the project site because I was very familiar with the locations and language, and I had a lot of connections that would help us successfully execute this project,” Parikh explained. “Secondly, I have been studying about diabetes in countries like India, the United States and China. I knew the U.S. was doing a lot of projects through pharmacists and other health care providers to tackle this disease, while India wasn’t doing what the U.S. has been doing, even though diabetes is also a very large problem in India.”

With the help and support of colleagues, Mekhjian and Parikh founded Project India, which recently completed its pilot phase. Part one of the project included two training sessions in which 52 students from four schools of pharmacy in India were trained to screen

patients and counsel them about diabetes. The sessions took place in late December at the Nirma University Institute of Pharmacy and the L.M. College of Pharmacy, both located in Gujarat, India.

“Parth and Hovik have begun significant and outstanding work in collaboration with student pharmacists in India, along with the support of multiple stakeholders, to enhance clinical pharmacy education and practice and, more importantly, to improve the lives of people in India,” said Michael Wincor, associate dean of globalization at the USC School of Pharmacy. “This project exemplifies a major component of our global initiatives here at the school.”

The students also organized seven health fairs where more than 1,000 participants were screened, with nearly 7 percent being referred to local physicians for follow-up care. At these health fairs, students who participated in the training sessions were given the opportunity to utilize their newly acquired skills in both screening and educating the community.

“Because India has a fee-per-service health care model, people don’t often get regular checkups and screenings unless they are feeling sick,” Mekhjian said. “We want to empower people to get the help they need and empower

pharmacy students to provide the hands-on clinical practice they are equipped to do.”

The project also included an appreciation dinner at a local restaurant, where participating Indian pharmacy students were awarded certificates for their involvement and dedication to increasing clinical pharmacy practice throughout the country.

“The response was positive from both the pharmacy students and the individuals who were screened,” Mekhjian said. “We want to encourage students to be more involved in their community and to change the views of the people of India about the types of services their pharmacists can provide.”

“This project was an effort to fill the medical gap by utilizing the already available resources—the pharmacist in India,” Parikh said.

The project was co-sponsored by the International Pharmaceutical Students’ Federation, Global Health at USC, Project KADAM, the State Health Department of Gujarat, Ganpat University S.K. Patel College of Pharmaceutical Education and Research, Nirma University Institute of Pharmacy, L.M. College of Pharmacy, Anand College of Pharmacy, the Indian Pharmaceutical Association Student Forum in India and the Indian Pharmacist Association of California.

## Keck School researcher Zea Borok receives prestigious MERIT award

**By Katie Neith**  
In recognition of her outstanding work toward understanding mechanisms of lung injury and repair, Zea Borok, professor of medicine and biochemistry and molecular biology at the Keck School of Medicine, has received a MERIT Award from the National Heart, Lung and Blood Institute (NHLBI), part of the National Institutes of Health (NIH).

The overall objective of the NHLBI Method to Extend Research In Time (MERIT) Award program is to provide productive investigators with a history of exceptional talent, imagination and a record of preeminent scientific achievements the opportunity to continue making fundamental contributions of lasting scientific value.

Borok, who is also chief of the division of pulmonary and critical care medicine at the Keck School, has been studying transcriptional mechanisms that regulate differentiation of lung alveolar epithelial cells in the context

of lung injury and repair at USC since 1990.

According to the award letter from the NHLBI, Borok was selected to receive funding for her “consistent outstanding contributions to biomedical science and to our Institute.”

Edward Crandall, chair of the Department of Medicine at the Keck School, said, “Borok is a highly qualified physician-scientist and exceptional faculty member who is highly deserving of this special recognition.”

The MERIT Award provides long-term, stable support to investigators whose research competence and productivity are likely to continue in the future. It is intended to foster their continued creativity and lessen the administrative burdens associated with the preparation and submission of research grant applications.

“I am very thrilled and flattered to receive this prestigious award, which will give me more stable funding and freedom to pursue my studies,” said Borok.



Ryan Ball

Keck School of Medicine Dean Carmen A. Puliafito mingles with medical students on Feb. 7 as part of the Baccalaureate/M.D. spring semester social.

Puliafito and Henri Ford, vice dean for medical education, used the occasion to deliver words of encouragement to students about the academic year ahead.

The event, which featured food, refreshments and music by a string quartet, was hosted by the Keck School and the Office of Pre-Health Advising.

The Weekly

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**Associate Senior Vice President, Health Sciences Public Relations and Marketing:** Jane Brust

**Executive Director of Communications:** Ina Fried

**Assistant Director of Publications:** Sara Reeve

**Editor:** Jon Nalick

**Contributors:** Ryan Ball, Eva Blaauw, Tania Chatila, Carol Matthieu, Katie Neith, Gabrielle Olya, Leslie Ridgeway and Imelda Valenzuela

**Senior Vice President, University Relations:** Martha Harris



Phone: 323-442-2830 Fax: 323-442-2832  
E-mail: hscwkl@usc.edu Web: theweekly.usc.edu RSS: http://www.usc.edu/hscw

# USC study suggests high-spending hospitals may save more lives

**By Suzanne Wu**  
Studies have shown that regions spending more on medical care, such as Miami, do not have better health outcomes than regions that spend relatively less, such as Minneapolis.

However, less is known about how medical spending affects health at certain critical times, such as in the immediate period after a patient is admitted to the hospital with a life-threatening condition.

When hospitalized for a major acute medical condition—including heart attack, stroke and pneumonia—patients were less likely to die in high-spending hospitals, according to a new study appearing in the Feb. 1 issue of the *Annals of Internal Medicine*.

The findings inform the ongoing discussion on how to curb health care spending.

“Our findings suggest that while regions spending more on health care generally produce no better care, specific types of medical spending, such as acute-care hospital spending, may save lives,”

said John Romley, an author of the study and an economist with the Schaeffer Center for Health Policy and Economics at USC, which is supported by the USC School of Policy, Planning, and Development and the USC School of Pharmacy.

Romley, Dana Goldman of the Schaeffer Center and Anupam Jena of Massachusetts General Hospital and Harvard Medical School looked at discharge records for more than 2.5 million patients admitted to 208 California hospitals from 1999 to 2008 with one of six major medical conditions: heart attack, congestive heart failure, acute stroke, gastrointestinal hemorrhage, hip fracture or pneumonia.

The researchers found that as hospital spending went up, the risk of dying in the hospital from the condition that caused hospitalization went down.

For example, from 2004 to 2008, patients admitted for heart attack to the top-spending hospitals were 19 percent less likely to die than patients admitted to the lowest-

spending hospitals. From 1999 to 2003, patients admitted for heart attack were 9 percent less likely to die at the highest-spending hospitals than at the lowest-spending hospitals.

“Adjusted inpatient mortality was negatively associated with hospital spending for all six diagnoses, meaning those admitted to hospitals that spent the most were less likely to die in the hospital than were patients admitted to hospitals that spent the least,” said Goldman, holder of the Norman Topping Chair in Medicine and Public Policy at USC and director of the Schaeffer Center.

In their analysis, the researchers accounted for patients who have additional life-threatening conditions, such as AIDS or cancer. They adjusted for hospital, regional and socio-demographic differences that might correspond to variations in health, such as median household income in patients’ neighborhoods.

The researchers estimated the number of lives that might have been saved if all patients

in the sample were admitted to the highest-spending hospitals rather than to the lowest-spending hospitals, including 5,198 lives from heart attack, 11,089 lives from pneumonia and 7,467 lives from stroke.

In 2004 to 2008, the period for which the researchers had disease-specific cost data, the highest-cost hospitals spent three to five times more than the lowest-cost hospitals. For example, the highest-spending hospitals (top one-fifth) spent an average of \$21,072 on each patient who had suffered a heart attack, compared to an average of \$5,168 by the lowest-spending hospitals (lowest one-fifth).

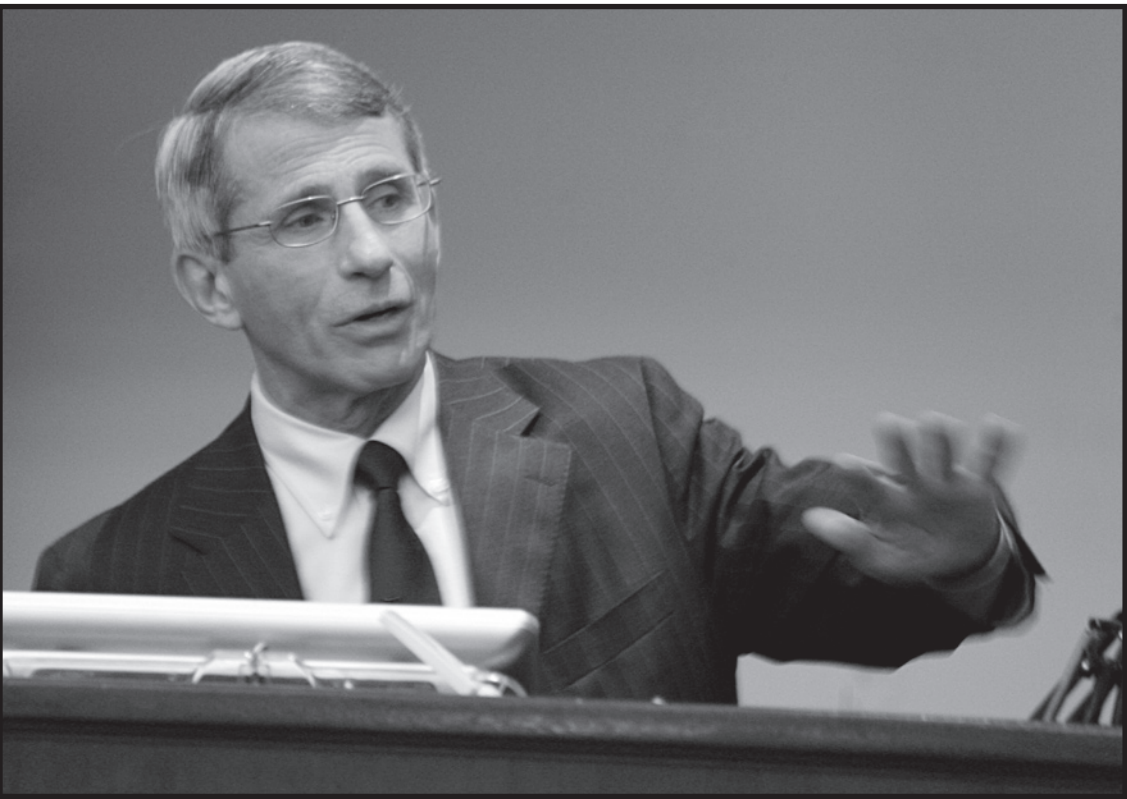
Variations in hospital spending may be incurred by time spent in the intensive care unit, use of specialists, diagnostic tests and imaging, and medical procedures, including mechanical ventilation and dialysis.

“While our analysis demonstrates that intensive spending by hospitals is associated with lower mortality, it does not identify the specific costly interventions that high-spending hospitals undertake to achieve this mortality benefit,” Romley said. “Important questions about the efficacy and value of hospital care on post-discharge mortality remain to be answered.”

The research was funded by the National Institute on Aging (partly through the Roybal Center for Health Policy Simulation at USC), as well as the Bing Center for Health Economics at RAND Corp.

‘Those admitted to hospitals that spent the most were less likely to die in the hospital than were patients admitted to hospitals that spent the least.’

—Dana Goldman, holder of the Norman Topping Chair in Medicine and Public Policy at USC



**30 YEARS OF HIV/AIDS RESEARCH**—Anthony S. Fauci, director of the National Institute of Allergy and Infectious Diseases (NIAID) at the NIH, presented to a standing room only crowd in the Mayer Auditorium as part of the Dean’s Translational Medicine Seminar Series on Jan. 28. Since his appointment as NIAID director in 1984, Fauci has overseen an extensive research portfolio devoted to preventing, diagnosing and treating infectious and immune-mediated diseases. He is also chief of the NIAID Laboratory of Immunoregulation, where he has made numerous important discoveries related to HIV and AIDS and is one of the most-cited scientists in the field. The archived webcast of his presentation, “30 Years of HIV/AIDS Research: A Personal Journey,” is available at: <http://keckmedia.usc.edu/mediasite/Catalog/catalogs/fauci.aspx>.

## SIGNALING: Study sheds light on immunity

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is usually turned on within several hours of cells being infected by a virus, and stays on for about 12 hours before declining.

“If we can interfere with the action of LUBAC, we can induce higher, more prolonged interferon production, which could help if there is a life-threatening infection, even though there may be some side effects from the

interferon,” he said. “Another possibility is that in some autoimmune diseases, where there are higher levels of interferon than normal, we can check whether those patients have a problem with their LUBAC.”

Inn is also among those who are examining the signaling mechanisms of viruses, seeking to understand how they work and can be stopped.

## The Weekly NEWSMAKERS

A Feb. 6 *Los Angeles Times* story quoted **Jaimie Davis**, assistant professor of preventive medicine, about major cereal makers offering cereal with less sugar in it.  
Children with healthy appetites can still get more than the recommended daily amount of sugar with the lower-sugar versions.  
“Most children don’t have a single serving — they fill up the whole bowl,” she said. Davis suggested that

parents cut back on sugar in their children’s cereal by mixing the kids’ sugary favorites with low or no-sugar cereals to start, and transitioning to other less-sweet options.  
A Feb. 6 *Bangor Daily News* story featured a study led by **Robert Kloner**, professor of medicine, showing that fans of losing Super Bowl teams have a higher risk of death from cardiac causes than fans

of winning teams.  
“Fans develop an emotional connection to their team ... and when their team loses, that’s an emotional stress,” Kloner said. “There’s a brain-heart connection, and it is important for people to be aware of that.”  
A Feb. 7 Reuters UK story quoted **Thomas Mack**, professor of preventive medicine and pathology, about

a study indicating that people who have spent more time in the sun and who have high levels of vitamin D are less likely to develop multiple sclerosis. “We’ve known for decades that the farther away from the equator you live and grew up, the higher the risk of MS,” he said. “The question is, what is it that’s responsible for that increase? Sunlight is a good bet, and of course vitamin D is a function of sunlight exposure.”



# Calendar of Events

This Calendar of events is also online at [www.usc.edu/hscalendar](http://www.usc.edu/hscalendar) for the Health Sciences Campus community

## Tuesday, Feb. 15

**10:30 a.m.** USC Hospital Guild Women’s Health Focus. “How to Look as Young as You Feel,” Regina Baker and Kristy Morrell, USC. Wilshire Country Club, Los Angeles. \$65. Info: (323) 254-0600

## Wednesday, Feb. 16

**Noon.** ZNI Seminar. “Maternal Immune System and Its Role in Autism,” Judy Van de Water, UC Davis. ZNI 112. Info: (323) 442-2144

**Noon.** Childhood Obesity Research Center Seminar. “Use of Stable Isotope Tracers for Metabolic Research in Humans,” Luc Tappy, University of Lausanne, Switzerland. CSC 250. Info: (323) 442-2637

**Noon.** Center for Excellence in Teaching. “Writing Learning Objectives,” Win May, USC. KAM B21/23. Info: (213) 740-3959

**4 p.m.** Center for Excellence in Research. “New Congress, New Challenges: Assessing Your Federal Research Opportunities,” Jennifer Grodsky and Jean Brodeur, USC. UPC: CUB 329. Info: (213) 740-6709

## Thursday, Feb. 17

**Noon.** Dean’s Translational Medicine Seminar. “Diet, Obesity and Liver Fat: Why are Some Macronutrients Worse Than Others,” Luc Tappy, University of Lausanne, Switzerland. MCH 149. Info: (323) 442-1146

**Noon.** Center for Excellence in Research. “The Image of the Journalist in Popular Culture: Researching an Innovative Field of Scholarship,” Joseph Saltzman, USC. UPC: CUB 329. Info: (213) 740-6709

**4 p.m.** Center for Excellence in Research. “New Congress, New Challenges: Assessing Your Federal Research Opportunities,” Jennifer Grodsky and Jean Brodeur, USC. NML East Conference Room. Info: (213) 740-6709

**Noon.** Cellular Homeostasis Lecture Series. “The Functional Relevance of Stem Cells in Pancreatic Adenocarcinoma,” Zeshaan Rasheed, Johns Hopkins. MCH 156. Info: (323) 442-3121

## Friday, Feb. 18

**8:30 a.m.** Surgery Grand Rounds. “Innovation and Perseverance in Burn Reconstruction,” Michael Neumeister, Southern Illinois School of Medicine. DOH 100. Info: (323) 442-2506

**11:30 a.m.** Physical Sciences in Oncology Center Seminar. “Reducing Time-To-Action in Clinical Genomics Studies by Using an Integrated Strategy of Epigenetics, Transcriptomics and Computational Biology,” Simon Lin, Northwestern University. CSC 240. Info: (323) 442-2596

**Noon.** Pharmacology and Pharmaceutical Sciences Seminar. “Peptide and Non-Peptide Interactions at the Human 5HT1a Receptor,” Keith Parker, University of Montana. PSC 104. Info: (323) 442-1362

## Wednesday, Feb. 23

**Noon.** ZNI Seminar. “The Complexity of Synaptic Signaling Networks: Insights into the Molecular Mechanisms Altered in Psychiatric Disorders,” Marcelo Coba, Wellcome Trust Sanger Institute. ZNI 112. Info: (323) 442-2144

## Thursday, Feb. 24

**Noon.** Cellular Homeostasis Lecture Series. “Translating Basic Studies of Embryonic Development into Generating Pancreatic and Intestinal Tissue from Stem Cells,” James Wells, University of Cincinnati. MCH 156. Info: (323) 442-3121

## Friday, Feb. 25

**8 a.m.** Pathology and Laboratory Medicine Grand Rounds. “Diagnostic Problems in Hemophilia and Von Willebrand Disease,” Carol Kasper, USC. NOR 7409. Info: (323) 442-1180

**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](mailto: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.



“Visiting... With Huell Howser” television journalist Huell Howser interviews epilepsy patient Nathan Jones as Christy Heck (center right) and 16-year-old epilepsy patient Emily Evans (center) and her mother Kristin (in red), look on.

## Huell Howser makes ‘amazing’ visit to USC Epilepsy Center

The USC Comprehensive Epilepsy Center hosted a Feb. 3 visit by KCET’s “Visiting... With Huell Howser” host Huell Howser, who interviewed physician Christi Heck, and a patient and her mother for an upcoming segment on epilepsy.

The visit was sparked by a short film titled “A Seizure by Nathan Jones,” which tells the story of an epilepsy patient from the patient’s point of view. Jones, whose film is to be shown during the segment, was also interviewed during the visit, discussing what it feels like to have epilepsy.

Heck, associate professor of neurology, gave Howser a primer on epilepsy, calling it a “brain

storm” that can have a major impact on patients’ lives, and noted that the disease is misunderstood by most people. Sixteen-year-old patient Emily Evans and her mother Kristin underscored how the disease affects those who have it.

Howser also interviewed Susan Pietsch Escueta, executive director of the Epilepsy Foundation of Greater Los Angeles, about the work the foundation does to educate the public about epilepsy.

The episode will air on March 3 and March 18 at 7:30 p.m. on KCET.

For information, visit the foundation’s web site at [www.epilepsyfoundationgla.org](http://www.epilepsyfoundationgla.org).

## PHARMACY: Bilingual DVD series offers dialysis education in fun format

Continued from page 1  
English and distributed through various venues, in addition to being available on monitors in dialysis clinics frequented by targeted patients and families. The grant also provides for an evaluation of the series in affecting patient and family behaviors.

“This grant is a committed collaboration,” said Nicole Pinkerton, director of development and education at the National Institute of Transplantation. “The series will augment our current comprehensive educational program that provides dialysis patients with personalized one-on-one education and support from trained kidney transplant recipients. Based on our experience, we have identified several challenges that are common with dialysis patients in accessing transplantation, which will be addressed in the video.”

Baron was a natural fit for the project, given the successful series of fotonovelas that he and colleague Greg Molina have produced targeting the Latino community.

The fotonovela format, in both English and Spanish, is

culturally sensitive and deals with myths and misconceptions that often prevent individuals from seeking care and from following therapeutic regimens to reach care goals. Diabetes, medication compliance and dementia are some of the topics on which Baron has produced fotonovelas.

“We will produce a DVD

series that makes the information understandable for those who might not get it from traditional health education materials,” Baron said. “Our approach is engaging and entertaining, but it also gets across the important points that will help these individuals optimize their health outcomes.”

USC Health Sciences  
Public Relations and Marketing  
1975 Zonal Ave. KAM 400  
Los Angeles, CA 90033

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## In case of an emergency...

**Call the Emergency Information Phone: 213-740-9233** The emergency telephone system can handle 1,400 simultaneous calls. It also has a backup system on the East Coast.

**Visit the USC Web: <http://emergency.usc.edu>** This page will be activated in case of an emergency. Backup Web servers on the East Coast will function if the USC servers are incapacitated.