

DEAN'S CORNER E-NEWSLETTER

Texas College of Osteopathic Medicine

November 17, 2006

The Texas College of Osteopathic Medicine/University of North Texas Health Science Center was proud to have been the medical partner for the 2006 Dallas/Ft. Worth Breast Cancer 3-Day benefiting the Susan G. Komen Foundation and the National Philanthropic Trust.

Our physicians, nurses and staff cared for the thousands of walkers along the 60-mile route and in the overnight "base camp."

Sue Wagner, project manager of the National Philanthropic Trust, said the importance of the medical team at the Dallas/Ft. Worth Breast Cancer 3-Day is invaluable to the safety of the walkers.

"The health and welfare of every person involved in the Breast Cancer 3-Day is of the utmost concern," she said. "The medical team of doctors, nurses and other health care staff administer services to hundreds of walkers during an event weekend, addressing concerns ranging from blisters to dehydration. The medical team also plays an important role in reminding walkers to rest, hydrate, eat and cool off - all key factors in providing walkers a safe and rewarding experience."

The following UNTHSC personnel participated in the event: Robert Adams, DO, Sam Buchanan, DO, Roberto Cardarelli, DO, MPH, Ruthie Dyer, PA-C, Lynda Fenn, LVN, Laurie Hill, MHS, PA-C, Lynn Holmes, Melva Jones, LVN, Jan Jowitt, RN, Christine Kalish, MBA, Erika Lebaron, RN, Janice Misner, LVN, Scott Ransom, DO, MBA, MPH, Jane Rogers, Brent Sanderlin, DO, Damon Schranz, DO, Judy Steudeman, RN, Jean Tips.

I visited the camp site and was proud of the care our medical team was providing to the participants of the 3-Day event. The medical school will provide medical services again next year for this important event.

Please supply any pertinent information to my office (deantcom@hsc.unt.edu) by the third Thursday of the month, for inclusion in this monthly Newsletter.

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Student Affairs:

Thomas Moorman, Ed.D.

Associate Vice President for Student Affairs

DO Dash

The annual DO Dash took place on Saturday, October 28. The run began with a welcome from Dr. Marc Hahn, Dean of the Texas College of Osteopathic Medicine. Jeremy Warner finished at the 17 minute mark to take first place for the men. Lauren Gray was the first female to cross the finish line at the 19:34 mark.

This years run had over 300 people pre-registered. It is one of the few timed road races that permits runners/walkers to bring their dogs. More than a half dozen dogs completed the whole course. Additionally, many of the runners/walkers were under 14 years old. It was a great event for the entire family.

The run was followed by a fall carnival and health fair. Prizes were awarded for the best jack-o-lanterns. There were many games and activities for kids of all ages.

Congratulations to the DO Class of 2009 and especially those involved with the planning committee for a wonderfully successful event.

TCOM Parents' Association

New this semester to the UNTHSC campus is the TCOM Parents' Association.

The mission of the organization is to:

- Enhance communication between parents and families and TCOM
- Enrich the DO/PA school experience for both parents and families and their students
- Involve parents and families in campus and regional activities to promote TCOM

- Provide financial support

The Association is for parent(s) and family members of current TCOM students. All parent(s) who contribute at least \$30 a year will be eligible for membership. Membership privileges include a subscription to the quarterly electronic newsletter (PULSE), as well as links to other campus publications such as the Campus Connection, the Dean's Corner Newsletter; and The Leadership Link. Additional information concerning campus events, lectures, and activities calendars will also be made available.

Please contact the Office of Student Development if you have any questions (817) 735-5006.

Clinical Affairs/Faculty Practice:

Robert Adams, D.O.

Senior Associate Dean for Clinical Affairs/Chief Medical Officer

With the first quarter of Fiscal Year 2007 almost gone, we need to assess the status of several initiatives that are intended to lead our clinical practice toward its vision of being the preeminent multi-specialty medical group in Tarrant County and the healthcare partner of choice. These initiatives along with others will improve the way we provide service, the way we do business, and our visibility in the community. It's critical that we're all aware of our direction and the recognition that each of us play an important part in our teams success.

1. Komen 3 Day Walk - The UNTHSC and specifically the Clinical Practice was the Medical Partner for this event in late October. Dr. Brent Sanderlin served as Co-Medical Director and Judy Studeman, RN, served as Medical Team Captain. We received significant community visibility from our participation in this important event. A special thank you for all who participated in this event. We will be the medical partner again next year during the last weekend of October 2007, and hope to see even greater participation. Anyone who has interest in hearing more about this year's event or how they can participate next year should contact either Dr. Sanderlin or Ms. Studeman.

2. We are continuing to stress the importance of excellent customer service. A practice wide initiative is underway and will continue for several months. Watch for opportunities to participate in training opportunities and other activities that will be announced. The theme of this year's service campaign is Cruise to QCARE. We hope you'll share your ideas with our QCARE team of how we can do what we do better. Everyone in the clinical practice has the opportunity to earn points recognizing accomplishments related to improving service during these activities. By year end, the points earned will make a few of the top point earners eligible for special prizes in celebration of our accomplishments. For more information, contact Candy Clifton by email.

3. The initial training for our Electronic Health Record has begun. This technology will offer so many advantages over our current medical record system that care can't help but be improved and many of our care activities made easier. It's expected that there will be a learning curve to

gain all of the efficiencies, but the leap forward we'll realize in our medical record will be worth the effort. Watch for an announcement telling when you can experience a demo of this product first hand. If you're interested to learn more about what's going on with this initiative, contact Jane Rogers by email.

4. MGMA50 is a new initiative dealing with productivity in our clinics. The Medical Group Management Association publishes information on multiple practice indicators yearly. We will begin distributing a report to each provider in November that will compare individual wRVU production to the MGMA 50th percentile adjusted for percent time devoted to clinical practice. Our vision is to be the preeminent multi-specialty medical practice in Tarrant County. To accomplish this we need to move closer to meeting the standards associated with the best practices. At a minimum, every provider should be able to perform at the 50th percentile. Best practice would be closer to the 70th percentile. While some of our providers exceed the 75th percentile, we still have a large number who perform well below the 50th percentile. Our goal this year is for everybody to perform at the 50th percentile, as a minimum.

5. Our telephone system providing access to our clinics needs several improvements. A plan is currently being developed to change the way we handle incoming calls to better serve our customers. Expect to see changes during the month of January 2007. One of the important aspects of this initiative is the establishment of a central number that anyone can use when trying to access our clinics. The number, (817) 735-DOCS, will become the number published in all of our marketing efforts. This initiative will make some significant changes to how we do business, but the outcome will be a much better system to meet the needs of those we serve.

These 5 initiatives represent the kinds of changes needed to achieve our vision. Your input or participation is welcome and critical to achieving success.

Educational Programs:

Don Peska, D.O.

Associate Dean for Educational Programs

Recruitment season is well underway for the 2007-2008 internship class. This year, university sponsored programs will be offering over sixty PGY1 positions in sixteen programs at six different training sites. In the past just over half of our graduates have stayed in Texas and over sixty-five percent have entered primary care programs. This year we are hoping for even higher numbers as the Texas OPTI office is completing new program applications for UTMB-Galveston, Driscoll Children's Hospital in Corpus Christi and Methodist San Jacinto Hospital in Baytown. Our goal is to give every TCOM graduate the opportunity of completing postdoctoral training in the State of Texas. In so doing, we can continue the growth of osteopathic medical practice in the state.

Our Careers in Medicine program is up and running. This program helps students sort out their practice choices by encouraging self-assessment and offering counseling beginning in their second year at TCOM. They are provided with a variety of online resources to steer their development as well as personal advising from our faculty. Michael Budd and Eryn Loney are

the principal leaders of the program with valuable support provided by Rynn Sloan in the Office of Student Affairs. Our advisors are senior faculty members who will be providing both group and individual advising to the students to bring them through the program. We will provide updates in the next newsletter.

Academic Affairs:

Bruce Dubin, D.O., J.D.

*Associate Dean for Academic Affairs
Medical Education*

Initiative to Transform Medical Education

I had the pleasure to attend an invitation only AMA conference on the national "Initiative to Transform Medical Education." This AMA initiative has the aim to promote excellence in patient care by recommending reforms in the medical education and training systems across the continuum from pre-medical preparation and medical school admission through continuing professional development. I must tell you that I left this meeting with a great sense of pride and enthusiasm for what we have accomplished here at UNTHSC-TCOM.

Clearly, TCOM is on the leading edge of many of these transformational ideas in education. From our novel "applications based" curricular designs to our 4 year inclusion of humanism and ethics throughout our undergraduate curriculum, TCOM is a leader. I don't know how many of the faculty are aware of the wonderful job Roy Martin and our Ethics facilitators do. Roy, and his associated faculty have accomplished a curriculum design that provides a wonderful basis for much needed study in ethics and humanism among future physicians. At the AMA meeting, I had a short opportunity to mention some of the wonderful work that were doing in ethics, and I believe it had a terrific impact on some of the other schools. Congratulations to Roy and all of you in this process.

It exciting to see that all we do here at TCOM is "top notch".

Clinical Research:

Peggy Smith-Barbaro, PhD

Director Division of Health Related Programs

We have had great news on the research front this academic year. Dr. Kendi Pim was awarded an AOA grant, "Osteopathic Manipulative Medicine in Pregnancy: Physiologic and Clinical Effects." In addition, Dr. Pim received a K-23 Mentored Patient-Oriented Research Career Development Award from the NIH/NCCAM. Dr. Lisa Hodge is principal investigator on an AOA grant "Lymphatic Pump Manipulation: Effects on Lower Respiratory Tract Infection and Immunity." Dr. Scott Stoll received a grant from Samueli Institute entitled, "Manual/Manipulative Therapy for Back Pain in Active Duty Military Personnel". A CDC

continuing award was made to Dr. Stephen Weis in Internal Medicine to examine, “Factors Associated with Acceptance of Adherence to and Toxicity from Treatment for Latent Tuberculosis Infection.” Please join me in extending congratulations to all these principal investigators in their continued research successes.

Students continue to play a vital role in research at TCOM. The TCOM student research club kicked off its lunchtime seminar series with a lecture from Richard Easom Ph.D. Associate Professor Department of Molecular Biology and Immunology. In November Meharvan Singh, Ph.D. Associate Professor of Pharmacology and Neuroscience presented a cutting edge lecture on the clinical relevance of progestins and their influences on brain function. The next speaker will be Dr. Orr on December 7th at noon followed by Dr. Scott Ransom, UNTHSC President, who will be lecturing early in the new year. Dr. Ransom will be speaking about research opportunities for TCOM students. Details will follow. All are invited.

"Research is to see what everybody else has seen, and to think what nobody else has thought." - Albert Szent-Gyorgyi

Admissions:

Russell Gamber, D.O., MPH

Assistant Dean of TCOM Admissions & Outreach

Update on PA and Medical School Applications

The number of PA program applications this year, 239 at present, is almost double the number of applications (128) received last year at this time. TCOM has received 1240 applications from the Texas Medical and Dental Schools Application Service (TMDSAS) as of 9/13/2006, compared to 1263 at the same time last year and 904 in 2004. Although the number of applications this year is slightly lower than at a comparable time in 2005, TMDSAS started sending applications a week later this year than in years past, accounting for the small difference noted. We expect the total number of applications to exceed 2000 this year, compared to 1886 last year.

Update on Medical School Interviews

This year TCOM interviews were initiated during the last week in July, one week earlier than in past years. The total number of applicants interviewed at the present time is 265, compared to 192 on the same date in 2005. It is especially important this year to complete as many interviews as possible by November 1 in order to prepare for the “early match” period beginning in mid-November. Whereas in past years there has been one “Match Day” (always February 1st), this year there will be both an “early match” period starting on November 15th, and a second match on February 15th. During the early match period Texas resident applicants can receive offers of acceptance from one or multiple Texas medical schools. Applicants holding multiple acceptances on December 31st must choose the school they wish to attend and decline other TMDSAS offers by January 15th. The 61 JAMP (Joint Admissions Medical Program) students

who have met all programmatic requirements will interview at all eight Texas medical schools and will receive their Match results this year on December 15.

Dr. Russell Gamber, Joel Daboub, and the entire TCOM Admissions staff wish to thank the department chairs, faculty interviewers, and departmental interview coordinators for their key roles in facilitating the interview process. At this point, we have completed nearly half of the 600 interviews we plan to schedule this year. We realize that our job would be impossible without the continued cooperation of each interviewing department.

Fall Recruiting Efforts

Last month TCOM Admissions staff members represented the institution at graduate and professional fairs at Texas Women's University, the University of Texas at El Paso, New Mexico State University, Texas A&M University, Our Lady of the Lake University, the University of Texas at San Antonio, the University of Texas at Austin, the University of Texas at Tyler, Texas Christian University, Prairie View A&M University, the University of Texas at Dallas, Texas A&M University-Kingsville, Texas A&M-Corpus Christi, the University of Texas at Brownsville, Texas Tech University, the University of Texas-Pan American, and other selected universities. In addition, Admissions staff members attended two national meetings for minorities interested in careers in the sciences: SACNAS (Society for Advancement of Chicanos and Native Americans in Science), and ABRCMS (Annual Biomedical Research Conference for Minority Students). These events provide the occasion for TCOM admissions staff members to meet with interested premedical and pre-PA students to discuss opportunities for professional education available on our campus.

PA Studies:

Hank Lemke, P.A.-C

Vice Chair for PA Studies

October 2-6 was National PA Week

October 2nd - October 6th was National PA Week. October 6th commemorates the 39th anniversary of the first PA graduates in the U.S. TCOM graduated its first PA students on September 21, 1999 and today we have over 135 PA alumni.

Accreditation Announcement

Next year the PA program is looking at re-accreditation for the third time since the program opened in 1997. On April 26-27, 2007 the Accreditation Review Commission for PA Education (ARC-PA) will send an on-site review team to review the PA program. Major areas examined will include Program Administration (resources and fair practices); Curriculum (content and delivery); Evaluation (continuous improvement efforts); Students (support, etc.) and Educational Equivalency (off-campus activities). Physician Assistant Studies currently has 90 students

enrolled in the 34-month curriculum. First-time pass rate performance on the PA National Certifying Exam has averaged over 93% since it began graduating student in 1999.

PA Applicant Information Sessions

An information session for new applicants to the PA program is scheduled on the UNTHSC campus Saturday, November 18th from 10:00 a.m. - 12:30 p.m. in Luibel Hall. To get more information about the session, call (817) 735-2204 or visit the web-page announcement at <http://www.hsc.unt.edu/education/pasp/infosession.cfm>

Science and Health News:

The Christian Science Monitor Online

Posted October 10, 2006 - <http://www.csmonitor.com/2006/1010/p25s01-usmb.html>

Dr. Mark McClellan

By David Cook

Dr. Mark McClellan, who will step down Saturday as administrator of the Centers for Medicare and Medicaid Services, met with reporters at a Monitor-sponsored breakfast on Friday.

As head of an organization that dispenses some \$610 billion in healthcare payments, Dr. McClellan's vision and management savvy have gotten positive reviews from such dissimilar editorial pages as The New York Times and The Wall Street Journal.

The questioning began with the financial challenges an aging population poses for the healthcare system in general, and Medicare in particular.

McClellan said, "I want to distinguish steps to make our healthcare system work better at the lowest possible cost for aging Americans, and steps to make ... our Medicare and Medicaid sustainable. The aging of the baby boom is putting big pressure on both."

Turning first to the healthcare system as a whole, McClellan said, "the best thing that we can do is to take further steps to improve the efficiency in the way that it works, of getting more for the dollars that we spend. Steps like paying more for value, shifting benefits so that they are up to date and stay up to date, getting patients more involved because care is increasingly about prevention ... all of those steps can help us get the overall cost of care down...."

There is substantial waste in the healthcare system that can be eliminated, McClellan said. "Because of medical errors, misuse of treatments, overuse and underuse, by many estimates up to 30 percent or more of our healthcare spending is going for the wrong thing. We need to be making much more progress on getting that right."

McClellan, the older brother of former White House press secretary Scott McClellan, then turned to steps that could put the Medicare program on a sounder footing for the future. "Anything we

do to avoid unnecessary spending, to get overall costs down, is going to help with sustainability," he said.

But McClellan said he favored "reduced subsidy levels" from Medicare "for wealthier Americans."

"I do think we need to continue to take a close look at what Medicare can support for the long term. In 2007 we are implementing an income-related premium in Medicare. What that means is that the wealthiest beneficiaries will still get a significant subsidy for their Medicare benefits. The overall Medicare subsidy next year is going to be worth more than \$7,000 a person, and even the wealthiest beneficiaries will continue to get most of that subsidy. But steps toward having people with the most means use their own savings and their own resources to pay for part of their care, while keeping the whole Medicare program up to date, making sure it is available and providing effective coverage for everyone, can be a very important step toward making the program sustainable," he said.

The challenge of making Medicare sustainable was a key part of a speech last week by Federal Reserve Board Chairman Ben S. Bernanke. The Fed chairman stressed the country's need to boost saving to pay for the effects of an aging population. He noted that Medicare's cost is projected to rise from 3 percent of gross domestic product (GDP) today to 9 percent in 2050. That is more than the country now spends on both Social Security and Medicare.

Bernanke said the choices for dealing with the financial costs of an aging population are higher taxes, less non-entitlement spending, a reduction in outlays for government programs, a sharply higher budget deficit, or some mix of all these.

McClellan cited the recently enacted Medicare prescription drug benefit as an example of the gains that can come from competition and from consumers making frugal choices.

"The average costs that the [providers] say they need for 2007, or their bids for providing the drug coverage, turned out to be about 10 percent lower on average than had been the case for 2006. So drug costs to taxpayers will be on average about 10 percent lower in 2007 than in 2006," McClellan said.

"Another way to look at it is that the bids the plans made for 2007 are about one third lower than had been predicted a little bit over a year ago in the middle of 2005 because of ... very strong and aggressive competition and people choosing low-cost plans," McClellan said. He noted that, "something like 75 percent plus of our beneficiaries chose plans which cost less than the average."

McClellan brings a strong academic background to his work. He earned his bachelor's degree from the University of Texas, his master's degree from Harvard University, his medical degree from Harvard-MIT Division of Health Sciences and Technology, and his PhD from Massachusetts Institute of Technology.

Not surprisingly, McClellan is optimistic about the role medicine will play in the country's future. "If you look ahead in the 21st century, this really should be what many experts have called and the economists have called the biomedical century. Healthcare and biotechnology and innovation in medicine are areas where the United States can lead the way for the world in innovation, can lead the way for the world in helping people live much longer and much better lives," he said.

Health Policy News:

AAMC Comments on NIH Proposed Genome Policy

The AAMC Oct. 19 sent a letter commenting on the NIH Genome Wide Association Studies proposed data sharing policy. The letter expressed strong support for the overall goal of advancing science for the benefit of the public through the creation of a centralized data repository, but noted a few concerns, such as the risk of genetic discrimination for insurance, education or employment purposes.

NIH Requests Roadmap Input

The NIH Oct. 20 issued a request for information soliciting input from the scientific community, health professionals, patient advocates, and the general public on innovative and cross-cutting initiatives to improve and accelerate biomedical research. The request is an initial step in the process of identifying new "Roadmap" trans-NIH strategic initiatives for FY 2008. The deadline for responses is Nov. 17.

Niederhuber to Head NCI

John E. Niederhuber, M.D., Oct. 18 was officially sworn in as the Director of the National Institutes of Health National Cancer Institute (NCI). Dr. Niederhuber is the 13th Director of the NCI in its nearly 70 year history. Prior to his current appointment, Dr. Niederhuber was NCI's Chief Operating Officer and Deputy Director for Translational and Clinical Sciences. Before joining the Institute in a full-time capacity, Dr. Niederhuber was a Professor of Surgery and Oncology at the University of Wisconsin School of Medicine.

VA Committee Examines Genomic Medicine

The Department of Veterans Affairs (VA) Genomic Medicine Program Advisory Committee (GMPAC) Oct. 16 held their first meeting in Washington DC. The committee, established March 22, is charged with examining the scientific and ethical issues related to the establishment, development, and operation of a genomic medicine program. Specifically the committee will address the potential impact of a VA genomic medicine program on existing VA patient care services; policies and procedures for tissue collection, storage and analysis; the

development of a research agenda; and approaches by which research results can be incorporated into routine medical care.

MedPAC Continues Discussions on IME and DSH Adjustments; Physician Payments

At its Oct. 5-6 meeting, MedPAC continued the discussion that it began at the September meeting on the purpose of indirect medical education (IME) and disproportionate share (DSH) payments within the Medicare program. Commission staff provided information showing that the “empirically justified” IME adjustment based on 2004 hospital data and Medicare policies was 2.1 percent, which is significantly less than the 5.35 percent adjustment that is currently paid to teaching hospitals. The discussion on the DSH adjustment continued to focus on the need to obtain reliable uncompensated care data from hospitals so that DSH payments could be better targeted to those hospitals that provided higher levels of uncompensated care.

Research and Funding Opportunities:

Change in Annual Receipt Dates for Noncompeting Progress Reports for Ruth L. Kirschstein National Research Service Award Institutional Research Training Grants (T32) Supported by NIAAA.

(NOT-AA-07-001)

National Institute on Alcohol Abuse and Alcoholism

<http://grants.nih.gov/grants/guide/notice-files/NOT-AA-07-001.html>

Request for Proposals RFP-NIH-NICHD-DESPR-07-01: Enhancing Carbohydrate Quality in Diabetes Management and Prevention

(NOT-HD-07-001)

National Institute of Child Health and Human Development

<http://grants.nih.gov/grants/guide/notice-files/NOT-HD-07-001.html>

Pre-application Workshop for Potential Applicants to RFA-HD-06-017: Cooperative Reproductive Science Research Centers at Minority Institutions

(NOT-HD-07-002)

National Institute of Child Health and Human Development

<http://grants.nih.gov/grants/guide/notice-files/NOT-HD-07-002.html>

Genome-wide Association Studies in the Genes and Environment Initiative – Availability of Additional Information

(NOT-HG-07-001)

National Institutes of Health

<http://grants.nih.gov/grants/guide/notice-files/NOT-HG-07-001.html>

Amendment to RFA-HL-07-004, Career Development Program in the Genetics and Genomics of Lung Diseases (K12)

(NOT-HL-07-001)

National Heart, Lung, and Blood Institute
<http://grants.nih.gov/grants/guide/notice-files/NOT-HL-07-001.html>

Technical Assistance Conference Call for Centers for Education in Research and Therapeutics (CERTs) and CERTs Coordinating Center (NOT-HS-07-025)
Agency for Healthcare Research and Quality
<http://grants.nih.gov/grants/guide/notice-files/NOT-HS-07-025.html>

Standing Receipt Dates for AHRQ Small Conference Grant (R13) Applications (NOT-HS-07-026)
Agency for Healthcare Research and Quality
<http://grants.nih.gov/grants/guide/notice-files/NOT-HS-07-026.html>
Requests for Applications

Resource Centers and Coordinating Center for Minority Aging Research (RCMAR) (RFA-AG-07-005)
National Institute on Aging
Application Receipt Date(s): January 08, 2007
<http://grants.nih.gov/grants/guide/rfa-files/RFA-AG-07-005.html>

Building the Tooth: Bridging Biology and Material Sciences. (Limited Competition)[U54] (RFA-DE-07-009)
National Institute of Dental and Craniofacial Research
Application Receipt Date(s): January 29, 2007
<http://grants.nih.gov/grants/guide/rfa-files/RFA-DE-07-009.html>

Environmental Health Sciences Core Center Grants (P30) (RFA-ES-06-010)
National Institute of Environmental Health Sciences
Application Receipt Date(s): February 21, 2007
<http://grants.nih.gov/grants/guide/rfa-files/RFA-ES-06-010.html>

Facilitating Interdisciplinary Research via Methodological and Technological Innovation in the Behavioral and Social Sciences (R21) (RFA-RM-07-004)
NIH Roadmap Initiatives
Application Receipt Date(s): February 23, 2007
<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-07-004.html>
Program Announcements

Research Demonstration and Dissemination Grants (R18) (PA-07-017)
National Heart, Lung, and Blood Institute
Application Receipt/Submission Date(s): Multiple dates, see announcement.
<http://grants.nih.gov/grants/guide/pa-files/PA-07-017.html>

International Research Scientist Development Award (IRSDA) [K01]
(PAR-07-014)

John E. Fogarty International Center
John E. Fogarty International Center
Office of Dietary Supplements

Application Receipt/Submission Date(s): January 16, 2007; January 16, 2008; January 16, 2009
<http://grants.nih.gov/grants/guide/pa-files/PAR-07-014.html>

Understanding and Promoting Health Literacy(R21)
(PAR-07-018)

National Cancer Institute
National Heart, Lung, and Blood Institute
National Institute of Biomedical Imaging and Engineering
National Institute of Dental and Craniofacial Research
National Institute of Environmental Health Sciences
National Institute of Mental Health
National Institute of Nursing Research
Office of Behavioral and Social Science Research

Application Receipt/Submission Date(s): May 24, 2007; January 24, 2008; September 24, 2008;
May 25, 2009; January 25, 2010
<http://grants.nih.gov/grants/guide/pa-files/PAR-07-018.html>

Understanding and Promoting Health Literacy (R03)
(PAR-07-019)

National Cancer Institute
National Center for Health Marketing
National Institute on Aging
National Institute of Biomedical Imaging and Engineering
National Institute of Child Health and Human Development
National Institute of Dental and Craniofacial Research
National Institute of Environmental Health Sciences
National Institute of Mental Health
National Institute for Occupational Safety and Health
National Library of Medicine
Office of Behavioral and Social Science Research
Office of Disease Prevention

Application Receipt/Submission Date(s): May 24, 2007; January 24, 2008; September 24, 2008;
May 25, 2009; January 25, 2010
<http://grants.nih.gov/grants/guide/pa-files/PAR-07-019.html>

Quotes:

You couldn't get hold of the things you'd done and turn them right again. Such a power might be given to the gods, but it was not given to women and men, and that was probably a good thing. Had it been otherwise, people would probably die of old age still trying to rewrite their teens.

Stephen King

Experience keeps a dear school, but fools will learn in no other.

Benjamin Franklin

A man who carries a cat by the tail learns something he can learn in no other way.

Mark Twain

Marc

Marc B. Hahn, DO

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