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Anthrax terrorism precautions at work

The IUPUI and Medical Center campus and the Clarian Health System are engaged in precautionary measures should the threat of anthrax terrorism reach the IUPUI/Methodist campuses. Following is a compilation of information for faculty, staff and students.

Forum for Mail Handling Safety Tips

The distribution of office mail used to be a mundane function, but in light of the recent anthrax threats, the handling of mail has taken on a whole new meaning.

To assist campus personnel with safety issues pertaining to the anthrax threat and other threats associated with mail delivery, the IUPUI Police Department will host a forum at 1 p.m., Tuesday, Oct. 23, in the Lilly Auditorium at University Library.

How mail is processed at IUPUI, how it should be handled within departments and what qualifies as suspicious mail are topics to be discussed.

The forum, co-sponsored by Human Resources Administration, Environmental Health and Safety and Publishing, Document and Distribution Services, may be of interest to employees who handle or sort mail as part of their job responsibilities, managers and department heads.

If you are unable to attend the forum and want additional information, contact Capt. Bob True or Sgt. Jerry Baker, IUPUI Police Department, 274-2058.

Who You Should Call

Capt. True said any IUPUI staffer who discovers suspicious mail or a suspicious substance in the workplace should contact the campus police at 274-7911. Employees in Riley, Methodist or IU hospitals should contact Clarian Security at 929-8000. Employees at the Roudebush VA Medical Center should contact its security office at 554-0000, ext. 2050. Wishard personnel should call the security office at 630-7071.

What Constitutes 'Suspicious'

A mail parcel may be considered suspicious if:

- It is addressed to someone no longer with your organization or is otherwise outdated.
- Has no return address, or has one that can't be verified as legitimate.
- Is of unusual weight, given its size, or is lopsided or oddly shaped and/or feels of a powdery or foreign substance.
- Is marked with restrictive endorsements, such as "personal" or "confidential."
- Has protruding wires, strange odors or stains.
- Shows a city or state in the postmark that doesn't match the return address.
- Has an address that is hand written or poorly typed including misspelling of common words.
- Contains excessive postage.

Suspicious packages should not be handled, shaken or emptied. They should be placed in a plastic bag or some other type of container to prevent leakage. If you cannot place it in a container, then cover it with anything available, such as clothing, paper, trash can, etc. Do not handle the suspicious item any more and do not let anyone else handle it. Notify your supervisor and the appropriate security agency (IUPUI police, Wishard, Clarian or Roudebush security office).

Clear the immediate area and close the doors. Anyone who handled the mail parcel should wash his or her hands immediately with soap and water. Provide a list to security officers of all individuals who have touched the letter, envelope or parcel.

Questions about these safety precautions may be addressed to the appropriate security office, John Mulvey, IUPUI director of public safety, 274-4860, or Rich Strong, director of environmental health and safety, 274-1388. Questions pertaining to mail distribution may be

addressed to James Dalton, director of publishing and distribution, 274-5484.

Mail Bomb Threats

The United States Postal Services has a document with useful information on detecting and dealing with the threat of a mail bomb.

That information can be access at

<http://new.usps.com/cpim/ftp/notices/not71.pdf>. You must have Adobe Reader capabilities on your computer to access this file.

Web Links To Anthrax Information

Additional information on anthrax can be found at this link, provided by the Clarian Health Medical Library,

<http://chomc.clarian.com/library/AnthraxLinks.asp>

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AMA, CDC anthrax information to be rebroadcast Monday

"Anthrax: What Every Clinician Should Know" will be rebroadcast at 4 p.m., Monday, Oct. 22, in Myers Auditorium, Wishard Memorial Hospital. Video recordings for medical professionals of the national conference on anthrax are at the Ruth Lilly and the Clarian Medical libraries.

The program was broadcast live Oct. 18 and is being rebroadcast because of the short notice given to physicians and the amount of interest expressed. The broadcast discusses clinical guidelines and procedures for the early recognition, diagnosis, treatment and reporting

of anthrax exposure. A panel of experts from the CDC provide an overview of clinical, laboratory and public health preparedness for potential *Bacillus anthracis* incidence.

The program was sponsored by the American Medical Association, Centers for Disease Control and Prevention, American Hospital Association and the Public Health Training Network.

Three faculty members join IU Center for Bioethics

Three members of the IUPUI academic community have been appointed core faculty of the Indiana University Center for Bioethics.

The center was established in July 2001 with the mandate to conduct research, engage in education and provide a full range of services to the university and public communities in Indiana. Eric Meslin, PhD, is director of the center and also is assistant dean for bioethics and professor of medicine at the Indiana University School of Medicine.

Joining Dr. Meslin at the IU Center for Bioethics:

Kimberly Quaid, PhD, associate professor of clinical medical and molecular genetics and of psychiatry at IUSM, is the director of school's Predictive Testing Program and also is on the clinical staff of the Indiana Alzheimer Disease Center.

After earning her doctorate in psychology at The Johns Hopkins University, she went on to become the coordinator of genetic predictive testing of Huntington disease at Johns Hopkins School of Medicine, one of the first of its kind in the nation. Dr. Quaid chairs the IUPUI Committee on Ethics and Research, is an active member of the Indiana Genetics Advisory Group and is co-chair of the Ethical, Legal and

Policy Issues subcommittee of the advisory group.

David Orentlicher, MD, JD, Samuel R. Rosen Professor at the IU School of Law-Indianapolis, has practiced both medicine and law. He also is an adjunct associate professor at IUSM and a member of the American Law Institute.

Before coming to the IU School of Law in 1995, Dr. Orentlicher served as director of the Division of Medical Ethics at the American Medical Association and held various appointments at the University of Chicago Law School and Northwestern University Medical School. He is a founding board member of the American Association of Bioethics.

William Schneider, PhD, is professor of history and associate dean in the IUPUI School of Liberal Arts. He directs that school's Medical Humanities program and holds an adjunct appointment with IUSM. He's past president of the IUPUI Faculty Council and co-president of the IU Faculty Council

Dr. Schneider has written two books and many articles on the history of science in medicine, including a book on the history of eugenics in France. His most recent research work centered on the discovery of human blood groups and their use as the first genetic markers.

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A Moment for Patient Safety And Quality Health Care

Patients expect and trust their physicians to provide the highest quality of care, and it is a responsibility of medical school faculty, staff and students to discuss and promote the importance of quality care. Physicians seek the most efficacious way to attain positive clinical outcomes-the greatest benefit with the fewest downside risks. As

academics, we search for information about ways to do this based on solid data.

To those ends, upcoming issues of *SCOPE* will feature, in highly abbreviated fashion, a number of patient safety practices whose significance has been thoroughly documented. Pertinent studies will be cited for your reference.

The Agency for Healthcare Research and Quality (AHRQ), formerly the Agency for Health Care Policy and Research, has sponsored and reported on many of the studies through its Evidence-Based Practice Centers, which systematically review relevant scientific literature and conduct additional analyses when needed.

I encourage you to take note of this continuing topic in upcoming issues of *SCOPE*.

Herbert E. Cushing, MD

Dr. Cushing is associate professor of medicine, associate dean of student affairs, and medical director, IUMG-SC. He is a member of the Division of Infectious Diseases, IU Department of Medicine.

Use of Prophylaxis Diminishes Post-Operative Venous Thromboembolism

Of 79 patient safety practices reviewed for potential impact based on prevalence, severity, current utilization of the practice, strength of evidence supporting the practice, and on costs of, and logistical and policy-related barriers to, implementation, 11 practices have been identified by the University of California at San Francisco-Stanford University Evidence-Based Practice Center as "clear opportunities for

safety improvement."

The first of the 11 is appropriate use of prophylaxis to prevent deep venous thromboembolism (DVT) in patients at risk. Without prophylaxis, deep vein thrombosis, typically of the lower extremities, occurs after approximately 20 percent of major surgical procedures; pulmonary embolism (PE) occurs after 1 percent to 2 percent. The numbers rise to over 50 percent for DVT and 30 percent for PE after major orthopedic surgeries.

Evidence for the effectiveness of mechanical and pharmacologic DVT prophylaxis for patients undergoing general and orthopedic surgery and neurosurgery, as well as those being treated for trauma, can be found at <http://ahrq.gov/clinic/ptsafety/chap31a.htm>.

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Reminder: Beering Lecture is 8:30 a.m. Wednesday, Oct. 24

The 2001 Steven C. Beering Award for Outstanding Achievement in Biomedical Science will be presented to Bernard C. Rossier, MD, professor of pharmacology and toxicology of the Institut de Pharmacologie et de Toxicologie at the Université de Lausanne, Switzerland.

Dr. Rossier's lecture, entitled "Salt-Sensitive Hypertension: From Monogenic to Polygenic Disease," will be 8:30 a.m., Wednesday, Oct. 24, at the University Place Conference Center auditorium.

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Clinical faculty titles changed to reflect employment status

The IUSM Faculty Steering Committee, along with Dean D. Craig Brater, MD, IUPUI Dean of the Faculties Bill Plater, and IUPUI Chancellor Gerald Bepko, recently approved a title change for full-time and part-time clinical rank faculty in the School of Medicine.

Clinical rank faculty members previously designated as clinical associate professor of medicine now carry the title of associate professor of clinical medicine.

The change was instituted in hopes the revised titles will help differentiate full-time and part-time clinical rank faculty from the volunteer clinical faculty.

Questions regarding the new titles should be addressed to the respective department administrator or to Lynn Wakefield, IUSM Academic Administration, at 274-7215.

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TAT protein use guidelines

The IUPUI Institutional Biosafety Committee has issued the following minimum guidelines for the use of TAT protein.

The IBC has become aware of investigators either wanting to initiate or purchase Trans-Activating Transduction (TAT) proteins or other tags which promote protein entry into cells. Many investigators initially view TAT fusion protein expression vectors, as just one of the many plasmids, which they may use in their laboratory and as such, submission to the IBC may be an unexpected requirement. They may also view use of TAT fusion proteins outside the purview of the IBC. Expression of a

TAT- fusion protein, even in bacteria, is considered rDNA work and falls under the auspice of the IBC particularly since the TAT protein has potentially distinctive and unknown infectious qualities. As such, the use of the TAT protein is categorized as biosafety level 2 (BSL2).

TAT protein use may be pursued at IUPUI if the guidelines listed below are followed:

A. Laboratory Containment, Practice, and Technique for TAT (or similar) protein studies (BL2):

1. TAT Protein must be handled as a potentially hazardous material.
2. Some proteins are more toxic and/or immunogenic and should be identified.
3. Plastic backed absorbent lab paper should be used on all laboratory bench surfaces to absorb spills and splashes. All things that come in contact with TAT proteins should be regarded as contaminated.
4. Biological safety cabinet (preferred) or designated space is recommended.
5. Avoid aerosol-generating activities or use appropriate safety equipment such as biological safety cabinets and sealed centrifuge tubes

B. Personal Protection required:

Mouth pipetting is NOT allowed.

Lab coats must be worn.

Disposable latex, nitrile, or equivalent gloves must be used.

Safety goggles must be worn.

Avoid direct contact with the skin, cuts, mucous membranes.

Wash well after working with TAT material.

C. Decontamination Procedures:

In the event of a spill, while wearing gloves, lab coat, and safety glasses:

Decontaminate work surfaces using a detergent with a protease enzyme (like Terg-A-Zyme) for 10-20 minutes.

Wash with water and then wipe with a 70% ethyl alcohol solution.

D. Disposal procedures:

1. Deactivate and dispose of TAT solutions and cultures using standard autoclave procedures.

2. Dilute solutions can be deactivated using a 1:10 dilution of bleach (sodium hypochlorite solution) in a 1:1 mixture with the TAT solution, let sit for five to ten minutes. Dispose by sewer drain with copious amounts of water.

E. TAT protein research approval:

TAT Protein research must be approved by the IBC **prior** to its initiation. When any revision to an approved protocol is desired, an amendment must be filled with the IBC. The IBC reserves the right to approve exceptions to the above guidelines on a case-by-case basis. A protocol or an amendment to an existing protocol must be submitted to purchase, synthesize or express TAT proteins.

The protocol or amendment must indicate:

1. What peptide you are linking on to
2. What you are using as target cells
3. What are the harmful consequences, if any, when expressed?

References:

Becker-Hapak M, McAllister SS, Dowdy SF. TAT-mediated protein transduction into mammalian cells.

Methods. 2001 Jul;24(3):247-56. Review.

Schwarze SR, Hruska KA, Dowdy SF. Protein transduction: unrestricted delivery into all cells?

Trends Cell Biol. 2000 Jul;10(7):290-5. Review.

Backus, B.D., Dowdy, S.F., Boschert, K.R., and Richards, T.L, Becker-Hapak, M. (2000). Safety Guidance for Laboratory Personnel Working with Trans-Activating Transduction (TAT) Protein Transduction Domains. American Chemical Society Journal of Chemical Health and Safety (submitted).

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Paid Family Leave Policy Changes

Changes in the partially paid family leave policy have been adopted by the Trustees of Indiana University.

Under the revised policy, faculty members on a partially paid family leave will be paid two-thirds of their salary instead of the 50 percent previously paid under the original policy. Changes also allow full-time faculty member to apply for a partially paid family leave after only one year of service, rather than the three years allowed in the original policy.

The policy and an application form can be found at

<http://www.jaguars.iupui.edu/frames/home/partialpaidfamilyleave.html>.

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Faculty invited to meet potential students

Admissions Ambassadors are inviting IUSM faculty to stop by the

Ambassadors' hospitality room on medical school interview days to give prospective students the opportunity to meet and casually talk with some of the faculty. Current medical students will also be there.

The south end of the Van Nuys Medical Science atrium will serve as the hospitality room from 8:30 a.m. until noon and again from 2 p.m. to 4 p.m. on the following interview days:

Nov. 14

Nov. 21

Jan. 2

Jan. 16

Feb. 13

Feb. 27

Snacks and beverages will be available.

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Honors

Marilyn Bull, MD, the Morris Green Professor of Pediatrics and director of Developmental Pediatrics, received the Section on Injury and Poison Prevention 2001 Fellow Achievement Award at the annual American Academy of Pediatrics Meeting. Dr. Bull has served as chair of the AAP Section on Injury and Poison Prevention, is chair of the AAP Committee on Injury and Poison Prevention and is vice president of the AAP Indiana chapter.

Rose Fife, MD, associate dean for research, has been appointed as associate editor of the Journal of Laboratory and Clinical Medicine. She previously served on the publication's editorial advisory board. In her new role, she will be involved in the peer review process of assessing

articles for publication in the monthly journal published by the Central Society for Clinical Research.

Thomas Kling, MD, professor of orthopaedics, received the American Academy of Pediatrics Section on Orthopaedics Distinguished Service Award at the 2001 annual meeting. The award recognizes an individual in the field of pediatric orthopaedics who has contributed to the academy's mission of excellence in patient care, research and teaching. He currently is a member of the AAP section and has served as its chair.

Scientific Calendar online

A comprehensive listing on IUSM seminars, lectures and Grand Rounds can be accessed at <http://www.medlib.iupui.edu/calendar/>. To place items on the Scientific Calendar, please forward them to Iona Sewell at imsewell@iupui.edu.

To keep the electronic version of Scope as streamlined as possible, only seminars and lectures of general or multi-disciplinary interest will be printed.

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Submissions to Scope

Scope wants your news items.

The deadline for submission is 8:30 a.m. on Fridays. *Scope* is published electronically and sent to faculty, staff, students, and residents.

There are four easy ways to submit story ideas or information to *Scope*:

- fax the information to 278-3502
- e-mail the information to mhardin@iupui.edu
- mail the information to Mary Hardin, LO 401, IUPUI
- paste your plain text message into Scope Web form on the IUSM faculty & staff page: <http://medicine.iu.edu/faculty/index.html>

Contributions submitted by e-mail should be forwarded in 12 point, plain text format.

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