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Charles Clark to lead CME

Charles Clark, MD, has been named associate dean for Continuing Medical Education. The appointment will be effective July 1.

Dr. Clark will retain his current appointments as professor of medicine and of pharmacology and toxicology, and adjunct professor of public health. Dr. Clark joined the IUSM faculty in 1969.

He possesses extraordinary administrative and organizational skills as evidenced by his leadership in establishing the Diabetes Research and Training Center. Due in large part to his efforts, IU has become a

leading institution in diabetes research and care, said Stephen Leapman, MD, executive associate dean for educational affairs.

Dr. Clark also has served as co-director of the Regenstrief Institute and as associate chief of staff for research and development at the Richard L. Roudebush VA Medical Center.

In his new role of associate dean for CME, Dr. Clark will provide continuing medical education to the physicians of the state of Indiana and beyond through innovative programming and distributed educational technology. The CME office will continue its national prominence achieved through the efforts of Steven Jay, MD, and Beverly Hill, EdD.

The Continuing Medical Education office will be relocating to new office suites at 714 N. Senate within the next month.

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A Moment for Patient Safety and Quality Health Care

Sixth in a series

By Herbert E. Cushing, M.D.

Studies Demonstrate Value of Anticoagulation Management Strategies

Anticoagulants, such as heparin and warfarin, generally are included among the classes of medications that pose serious risks to patient safety. In patients with cardiac disease and those who are at risk for thromboembolism, rapid achievement of therapeutic effect can reduce the risk; however, a sub-therapeutic dose leaves the risk of further clot formation; a supra-therapeutic dose can result in bleeding complications. The potential for drug and dietary interactions

contributes to the complexity of proper dosing.

One large inpatient study cites anticoagulants in 4 percent of the preventable adverse drug effects and 10 percent of the potential Anticoagulation Management Strategies reviewed. Another study revealed the risk of bleeding, whether minor, major, or fatal, was twice as great for patients during heparin therapy as for those without such therapy and five times as great for those undergoing warfarin therapy, resulting, at best, in increased length of stay and cost of care.

One well-studied strategy for reducing risk includes the use of heparin dosing protocols (nomograms), often weight-based, which define a standard initial bolus and infusion rate and orders for adjusting subsequent doses in response to the first partial thromboplastin time. Studies showed a significant improvement in the time required to achieve a therapeutic PTT and/or an increase in the proportion of patients in the therapeutic range. None showed increased bleeding; four of the six showed an increase in the proportion of patients with PTT's higher than the target range.

A second strategy is the use of pharmacist-run inpatient and outpatient anticoagulation services. Sufficient evidence is available to identify significant reduction of ADE's in the inpatient setting when such services are used. Fewer studies of the outpatient setting are available, but, of those, all but one demonstrated improvement.

Patient self-management is the third strategy. Although it is little-used in this country because many payers, including Medicare, do not pay for the home testing supplies, studies show that compliant and motivated patients using a home finger-stick technique and adjusting dosage using a nomogram were successful in maintaining the target range of anticoagulation, with greater satisfaction and less anxiety than patients whose treatment was managed in other ways.

For the full report, see www.ahrq.gov/clinic/ptsafety/chap9.htm.

This is the ninth of eleven practices identified by the Agency for Healthcare Research and Quality's Evidence-Based Practice Centers as "clear opportunities for safety improvement." Through a critical study of recent literature and sponsorship of clinical trials, these practices were found to have the greatest positive impact on patient outcomes, with the least downside risk, including cost, of the 79 practices studied.

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Wishard Parking Garage policy changes

Effective Sunday, June 23, the Wishard Parking Garage will no longer be available for discounted "overflow" employee parking.

Physicians who currently are using the Wishard Parking Garage should contact the Parking Office at 630-7671 to make arrangements for parking in the Physician's Surface Lot. All other employees will be required to park at Bush Stadium and will be shuttled to and from the Wishard campus when the West and Overflow Lots are full.

Should any employees choose to park in the Wishard Parking Garage after June 23, they will be required to pay the posted parking rates at the time of service.

The change is being implement to accommodate visitors and outpatients who have difficulty finding parking space when coming to Wishard. The issue was brought to the attention of the Parking Office, in part, by physicians voicing concern over the problem.

If you have any questions, please contact the Parking Office at 630-7671.

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Deadline approaching for program registration

The first class for the Biotechnology Certificate Training Program will begin their studies in August. The deadline for registering for the program is **Sunday, June 30**.

The IU Biotechnology Training Program is part of the IU-based Indiana Genomics Initiative (INGEN), a landmark endeavor made possible with a \$105 million grant from the Lilly Endowment. IU School of Medicine's nationally recognized research faculty will serve as course instructors.

Students in the program will have access to the most modern INGEN and School of Medicine core research facilities for cellular imaging, DNA sequencing, proteomics, gene expression, flow cytometry and bioinformatics. Already, a new teaching laboratory is under construction for the Indianapolis-based program at the INGEN Biotechnology Research and Training Center.

For additional information or a curriculum outline, see www.medicine.iu.edu/~gradschl/biotechTraining/index.html, or contact Judy White, PhD, laboratory director of the Biotechnology Research Training Program, Department of Biochemistry and Molecular Biology, 4053 Medical Sciences, 635 Barnhill Dr., Indianapolis, IN 46202-5122; call (317) 274-7151; or e-mail the program at biotech@iupui.edu.

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Planning publicity for journal articles

The IUSM Office of Public and Media Relations would like to know about faculty journal articles prior to their publication. This allows the staff to develop news coverage for papers that may be of interest to the media and their audiences. We routinely work with journals and are entirely aware of policies regarding embargo dates and other specifics related to public dissemination of the information.

Please contact Mary Hardin at mhardin@iupui.edu or Joe Stuteville at jstutevi@iupui.edu, or call 274-7722.

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Scientific Calendar online

A comprehensive listing on IUSM seminars, lectures and Grand Rounds can be accessed at 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 included.

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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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