Gover things you've got to have UTMB students alike.

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Dr. Raimer said there are other changes taking place as

well, and he sees it as an opportunity to improve.

"Change can be good, and I think many (of the facul-
ty view this as an opportunity to change styles of prac-
tice," he said. "There is a real, real major movement on patient serv-
ices, improving the way we treat the patient and delivering

patient-centered care.

"There certainly has been a lot of change to the campus it-
self," he continued, "and the way we put it back together to

improve service to patients, whether it's scheduling in the

c outpatient area or day surgery or just the services within the

hospital itself.

In the end, Dr. Raimer says he has been impressed with

the "resilience" of the students and the employees of UTMB.

"This would be a great environment for whining because

you still look around town and there are dead trees and this

isn't working or that isn't working," he said. "But I don't bear

a lot of whining.

"I think what struck me the most is our students, how re-
silient they are," he added. "And also how supportive of their

space they were. They were chomping at the bit to get back

to the island to help, whether it was cleaning out houses or see-
ing patients in a clinic."

Dr. Lieberman says despite the disruption, all UTMB

four-year students graduated on time and scored high on

their board and clinical skills exams. "While their education

and their lives were disrupted, their education stayed on

track and the academic achievements have not suffered as a

result," he said.

And, Dr. Richardson praised the faculty and staff who

have devoted many hours to putting UTMB back together

while dealing with their own personal losses.

"It was inspiring to me," she said. "There were people

coming to work every day doing everything they could to get

UTMB back up and open, and I knew full well that they had

lost everything. Their houses were demolished; they'd lost all

their clothing, everything. And yet they came to work

every day.

"It's been a tough go, but this is a tough bunch down here.

They do best when things are at their worst and they cer-

tainly have come through."

RETURNING TO NORMALCY
That uncertainty, however, passed when lawmakers reaf-
firmed their support for keeping UTMB in Galveston by pass-
ing a $300 million supplemental appropriations bill to pay

for repair of campus facilities. That money, along with funds

from an insurance policy, philanthropic donations, and

matching dollars from the Federal Emergency Management

Agency, will finance the $667 million building project ap-

proved by the Board of Regents, Dr. Raimer says.

While it remains a long journey, UTMB officials say things

are settling back into place. They planned to issue construc-
tion management contracts for much of the repair and miti-
gation work before the end of the year, and Dr. Raimer says

they have some "impressive plans" for restructuring John

Sealy Hospital, as well as addressing learning spaces across

campus.

It is likely that most first-floor space throughout the

campus will be converted to conference room or classroom space

that does not require expensive equipment that would be in

harms way.

lie's long-term impact on UTMB is still unknown, but

some faculty members say there already are obvious signs of

change. For one, UTMB likely will not be quite the tight-knit

environment where most faculty, staff, and students worked

and learned on the main campus.

"We've already seeing that," said Dr. Richardson. "Rather

than having 90 percent of our clinical activity on the main

campus, we're going to be seeing a significant proportion of our

clinical activity going out of Galveston and onto the mainland.

That makes it a little different. It changes the feel of the cam-

pus. For the most part, we were all here together. Now we're

going to be like most academic health science centers in that

we're going to be spread out to other geographic areas."

Dr. Raimer says things you've got to have for those beds that we had pre-like.

Dr. Richardson also says the uncertainty over UTMB's fu-
ture on Galveston Island also took a toll on faculty, staff, and

students alike.

There was some suggestion in legislative circles that

UTMB might be moved elsewhere. That was met with a con-
siderable negative reaction on campus, she says.

"I'm getting sentimental, but it's hard to think that there

would not be a University of Texas Medical Branch in Galve-
ston, particularly when we've got the wherewithal to build it

such that we shouldn't sustain the kind of damage that we

sustained this go-round," Dr. Richardson said.
Among items exhibited are:

- An interactive kiosk with links to televised tobacco advertisements;
- Cartoons by Pulitzer Prize-winning artists;
- Tobacco advertisements targeting young adults and children;
- Newspapers from 1964 with the surgeon general's declaration that smoking is linked to cancer;
- Free sample cigarette packs for airline passengers; and
- Anti-smoking posters.

The History of Medicine Gallery is open Monday through Friday from 8:15 am to 6:30 pm. For more information or to schedule a group tour, call Betsy Tyson, TMA Knowledge Center special collections coordinator, at (800) 550-1300, ext. 1552, or (512) 370-1552.

Critics said "Joe Camel" enticed children and young adults to smoke.

Celebrity endorsements by movie stars and athletes were a staple of tobacco advertising.
Smoke & Mirrors

Ads like this one helped spread the antismoking message.

24% policyholder dividend
1% rate reduction
Effective January 2010

The Governing Board of Texas Medical Liability Trust has approved a 24% policyholder dividend for renewing TMLT policyholders and a 1% rate reduction for TMLT policyholders effective January 1, 2010. It is not too late to become eligible for this 2010 policyholder dividend. Become a TMLT policyholder by December 31, 2009, and you will be able to participate in the savings when you renew in 2010.

This is the fifth time TMLT has declared a policyholder dividend. The 24% dividend will amount to approximately $36 million in 2010 premium savings for TMLT insured physicians. This is the seventh consecutive rate reduction since the passage of House Bill 4 by the Texas legislature and Governor Rick Perry in 2003.

According to Dave W. Kittrell, MD, Governing Board Chairman of TMLT, once these rate cuts and dividends are implemented in 2010, TMLT insured physicians will have saved approximately $519.6 million since the passage of medical liability reform.

Just think of what you could do with the money you will save!

The premium dollars I save with my dividend can help me pay for ...

For more information or to apply, contact TMLT at 800-580-8658 or email sales@tmit.org.

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