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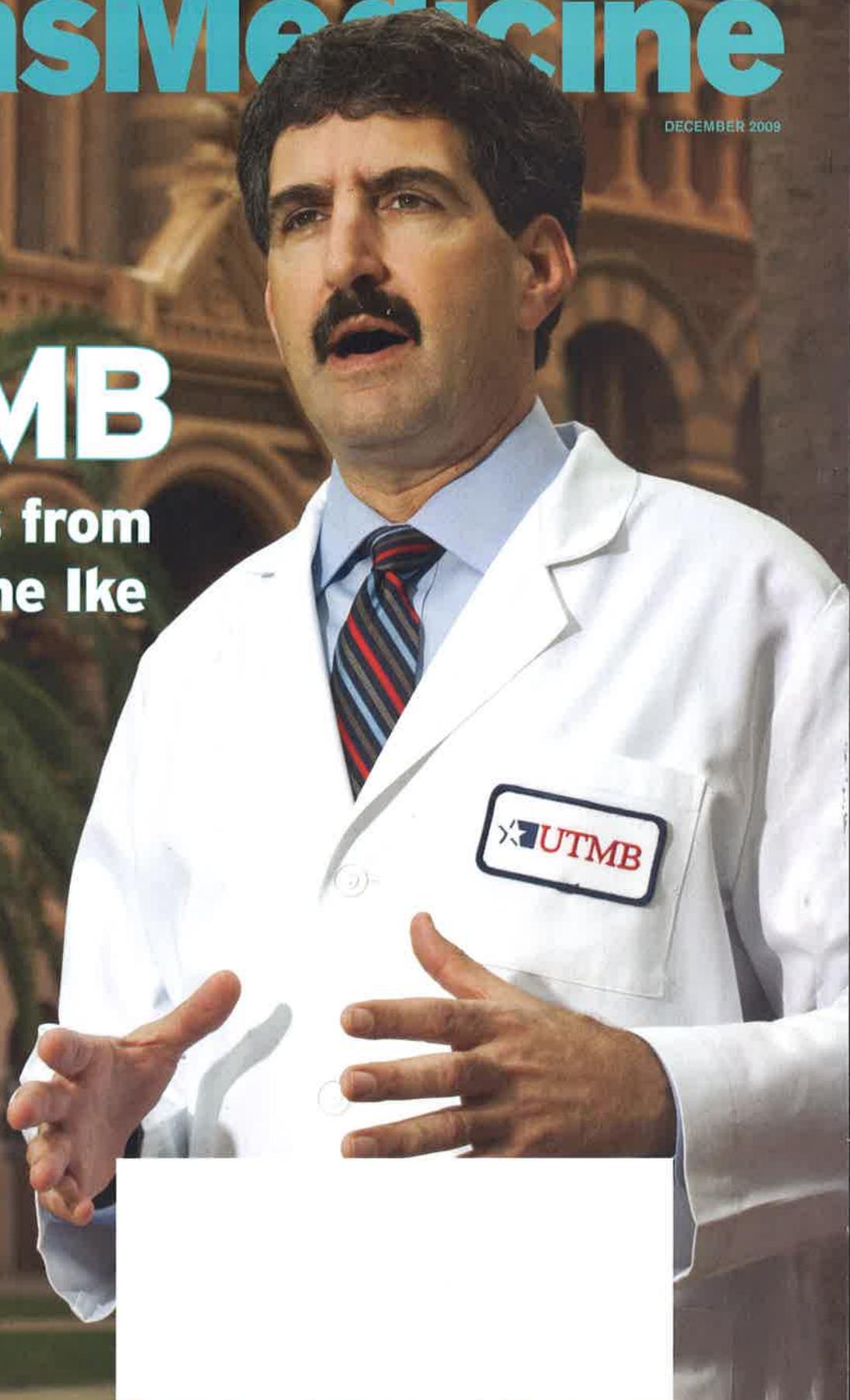
TexasMedicine

TEXAS MEDICAL ASSOCIATION

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UTMB

**recovers from
Hurricane Ike**



"I think what struck me the most is our students, how resilient they are. And also how supportive of their school they are. They were chomping at the bit to get back to the island to help, whether it was cleaning out houses or seeing patients in a clinic."

things you've got to have for those beds that we had pre-Ike."

Dr. Richardson also says the uncertainty over UTMB's future 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 considerably 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 Galveston, 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.

RETURNING TO NORMALCY

That uncertainty, however, passed when lawmakers reaffirmed their support for keeping UTMB in Galveston by passing 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 approved 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 construction management contracts for much of the repair and mitigation 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 harm's way.

Ike'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're already seeing that," said Dr. Richardson. "Rather than having 90 percent of our clinical activity on the 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 campus. 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 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 faculty] view this as an opportunity to change styles of practice," he said. "There is a real, real major movement on patient services, improving the way we treat the patient and delivering patient-centered care."

"There certainly has been a lot of change to the campus itself," he continued, "and the way we put it back together to improve service to patients, whether it's scheduling in the 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 hear a lot of whining."

"I think what struck me the most is our students, how resilient they are," he added. "And also how supportive of their school they were. They were chomping at the bit to get back to the island to help, whether it was cleaning out houses or seeing patients in a clinic."

Dr. Lieberman says despite the disruption, all UTMB fourth-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 certainly have come through." ★

Ken Ortolon is senior editor of *Texas Medicine*. You can reach him by telephone at (800) 880-1300, ext. 1392, or (512) 370-1392; by fax at (512) 370-1629; or by e-mail at ken.ortolon@texmed.org.



Smoke & Mirrors

A history of tobacco advertising

A compilation of powerful and chilling images and artifacts reflecting more than a century of tobacco ads, promotion, and news coverage is on display in the History of Medicine Gallery on the first floor of the Texas Medical Association building in Austin. >

PHOTOS BY DENNIS FAGAN

Smoke & Mirrors



Airlines used to allow smoking on board and even handed out samples.

Among items exhibited are:

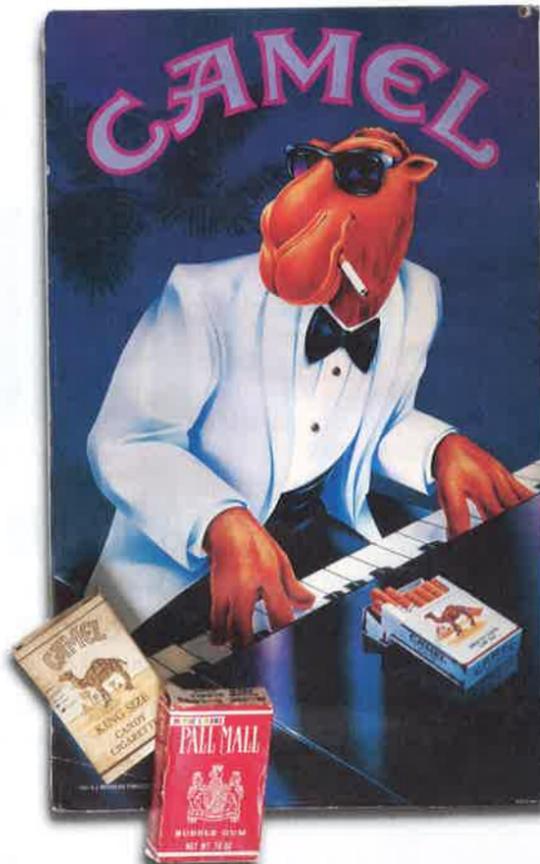
- An interactive kiosk with links to televised tobacco advertisements;
- Cartoons by Pulitzer Prize-winning artists;
- Tobacco advertisements targeting young adults and children;
- Newspapers from 1964 with the surgeon general's declaration that smoking is linked to cancer;
- Free sample cigarette packs for airline passengers; and
- Antismoking 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) 880-1300, ext. 1552, or (512) 370-1552.



Cigarette ads often appeared in medical journals.



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

How MILD can a Cigarette be?
MAKE THE 30-DAY CAMEL MILDNESS TEST—SEE WHY...
MORE PEOPLE SMOKE CAMELS than any other cigarette!

MAN'S IDEA OF A MOVIE HERO
 And the women agree! 6 foot 4 inches, John Wayne has smashed his way to fame in dozens of knock-down-and-drag-out—hard-riding... glorious motion pictures!

"The roles I play in movies are far from easy on my voice—I can't risk throat irritation. So I smoke Camels—they're mild"

John Wayne
 POPULAR, HANDSOME HOLLYWOOD STAR

"I've been around movie sets long enough to know how important cigarette mildness is to an actor. So when it came to deciding what cigarette was just right for my throat—I was very particular. I made a *sensible* test—my own 30-Day Camel Mildness Test!
 "I gave Camels a real tryout for 30 days. The most pleasure I ever had from smoking. My own 'T-Zone' told me just how mild and good tasting a cigarette can be! I found out for myself why *more people smoke Camels than any other cigarette!*"

Make your own 30-Day Camel MILDNESS Test in your "T-Zone"
 (T for Throat, T for Taste)

Not one single case of throat irritation due to smoking CAMELS!
 Yes, these were the findings of noted throat specialists after a total of 2,470 weekly examinations of the throats of hundreds of men and women who smoked Camels—and only Camels—for 30 consecutive days.

R. J. Reynolds Tobacco Company, Winston-Salem, N. C.

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

Smoke & Mirrors



 AMERICAN
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SOCIETY

FOR MORE INFORMATION CALL THE AMERICAN CANCER SOCIETY TOLL FREE: 1-800-ACS-2345

Ads like this one helped spread the antismoking message.