

Rockefeller University Hospital's "pride of place"

by Physician-in-Chief BARRY COLLER, M.D.

The last year was marked by a number of activities that enhanced clinical investigation at The Rockefeller University Hospital. We've started this newsletter to bring all Rockefeller University Hospital faculty and staff up-to-date on the progress we have made, as well as our plans for the future. I know that we all take pride in the glorious history of the hospital, and in the exciting pioneering studies that are being conducted here.

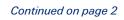
As the reports in this newsletter demonstrate, our current aim is to build new infrastructure supports to facilitate future investigations. The additions to our staff of Dr. Rhonda Kost, Clinical Research Officer, Ms. Leann Zaar, Research Implementation and Monitoring Specialist, and Dr. Barbara O'Sullivan, Hospitalist, have greatly strengthened our ability to help investigators achieve their goals. I encourage everyone to take an active role in helping us strengthen the hospital further by providing both constructive criticism of existing programs and creative suggestions for new initiatives.

Rockefeller University Hospital Committee

The Rockefeller University Hospital Committee – a Committee of the Board of Trustees of The Rockefeller University – is the governing body of the hospital. The Committee is chaired by Dr. David Nathan, one of the nation's most distinguished physician-scientists, who previously served as President of the Dana-Farber Cancer Institute in Boston. The other distinguished members of the Committee are Ms. Judith Berkowitz, Dr. Joseph Goldstein, Mrs. Nancy Kissinger, Dr. Evelyn Lipper, Dr. Richard Rockefeller, and Dr. Reed Tuckson. We are indeed fortunate to have their expertise and active involvement in our planning.

The Clinical Scholars Program

The Clinical Scholars Program continues to thrive as a premier educational experience for young physician-scientists. Last year I initiated a broad curriculum in patient-oriented and translational research, which is taught as a weekly interactive tutorial in which individual Scholars lead the discussions. Topics are selected, in part, from the National Institutes of Health curriculum, using the book *Principles and Practice in Clinical Research* (edited by John Gallin). This initiative comple-





BARRY COLLER

The Rockefeller University Hospital Receives Outstanding JCAHO Review

by Vice President for Medical Affairs EMIL GOTSCHLICH, M.D.



Point Commission on Accreditation of Healthcare Organizations (JCAHO). This is a national organization that most hospitals in the United States engage to oversee their operations and to grant accreditation. In fact, JCAHO accreditation is a requirement for funding of the General Clinical Research Center by the National Institutes of Health. We're delighted to report that The Rockefeller University Hospital received an outstanding review by the JCAHO this fall.

The expectations of the JCAHO for the structures and functions of a hospital are spelled out in some 500 standards. They seek an organization that continually monitors itself, attempts to predict where errors may occur, and has clear methodology and strategic plans to improve performance in all spheres of hospital operation. This commitment to quality assessment and performance improvement should be visible at all levels of the organization, including the Hospital Committee of the Board of Trustees. The JCAHO ensures that the hospital operates in a building that meets a large number of standards for fire safety, infection control, and other safety codes.

The JCAHO recognizes that in many healthcare organizations, the priorities and goals of the Medical Staff and of the Hospital Administration often diverge. They therefore require that the Medical Staff be independently organized, that it have its own bylaws and officers, and that it maintains direct access to the Hospital Committee of the Board of Trustees. They also devote great attention to the completeness of the credentialing process and files of all members of the Medical

Continued on page 3

Table of CONTENTS

- 3 Clinical Research
 Office Aids
 Investigators
- 3 Patient Transfer Agreement
- 4 Nurses Continue Skill Development
- New Medical Staff Officers
- 6 GCRC Report
- 7 Outpatient Facility
 Nearly Complete
- 8 Good News



EMIL GOTSCHLICH

PHYSICIAN-IN-CHIEF'S REPORT continued from page 1

ments the Scholars' comprehensive patient-oriented and translational research experiences in individual laboratories, as well as their active participation in weekly meetings with speakers delivering the Seminars in Clinical Research.

The Scholars also participate in one course on the ethical principles of investigation, given by a triinstitutional consortium, and another in experimental design and biostatistical principles, taught by Dr. Knut Wittkowski. They also have discussion groups that are stimulated by group attendance at cultural events in New York which relate to clinical investigation.

We have been very fortunate to recruit outstanding new Scholars this past year, and I hope that you will join me in welcoming them at our holiday party on December 19. A complete list of Clinical Scholars and their laboratories appears below.

Clinical Scholar	Topic of Research	Laboratory Head/Mentor
Gavin Bart	Drug addiction	Mary Jeanne Kreek
Kavita Dhodapkar	Brain tumors in children	Ralph Steinman
Athanasios Dousmanis	Neurologic syndromes in	Robert Darnell
	cancer patients	
Christine Hogan	Treatment of HIV	David Ho/Martin Markowitz
Edmund Lee	Novel treatments of psoriasis	James Krueger
Shao-lee Lin	Immune function in	Ralph Steinman/John Hardin
	autoimmune disease	
Michelle Lowes	Dendritic cell therapy of	Robert Darnell/Nina Bhardwaj
	melanoma	
Keren Osman	Multiple myeloma	Madhav Dhodapkar
Ephraim Sehayek	Cholesterol metabolism	Jan Breslow
Jacqueline Stevens	Sickle cell disease	Barry Coller
Sandhya Vasan	HIV vaccine development	David Ho/Martin Markowitz
Sagit Zolotov	Leptin therapy in obesity	Jeffrey Friedman

Information Technology (IT) Strategic Plan

The administrative leadership of the hospital has been meeting each week for several months to develop an Information Technology Strategic Plan for the hospital.Mr. Jerry Latter, the University's Chief Information Officer, has also attended these meetings, providing both extraordinary expertise and advice regarding the integration of hospital and University IT programs. With this plan, we aim to:

- use information technology to reduce the risk of medical error to the absolute lowest level achievable
- facilitate protocol development and submission to the IRB and GCRC Advisory Committee (GAC)
- provide online information and links to important regulations for investigators developing protocols
- provide opportunities for protocol data management and monitoring for those who desire such support
- provide data warehouses with advanced statistical and presentation capabilities to interested investigators.

The first step in the process has been the evaluation of software to support protocol development and IRB/GAC submission.Dr. Rhonda Kost is leading this project, and we have successfully garnered a \$150,000 grant from the NIH to support this effort.

RxArt

The Rockefeller University Hospital has developed a partnership with a new nonprofit organization dedicated to placing original works of art in hospitals and other healthcare facilities. Ms. Diane Brown, the founder of RxArt, chose The Rockefeller University Hospital as its first site. The artwork on display was selected by both RxArt and Rockefeller University Hospital staff to insure that the works were appropriate for a hospital setting. The project was the subject of a very positive *New York Times* article last May, and both patients and staff have noted how the artwork brightens the atmosphere of the hospital.

Newsletter and Other Communication

We are eager to insure that hospital faculty and staff have the information they need to participate actively in making The Rockefeller University Hospital the best place possible to perform clinical investigation. This newsletter is one mechanism to achieve that goal. If you would like to submit an article or story idea for a future issue of the newsletter, please let me know.

We are also revamping our Web site to make it more attractive to our faculty and staff, potential research volunteers, faculty and staff recruits, and potential trainees. One item under discussion is a listing of all active protocols by title and Principal Investigator, informing everyone of the research being conducted. If you have other ideas for Web site content, please contact me.

RxArt founder and curator Diane Brown (center) helped install Michele Oka Doner's *Spiral* (1990) in the hospital's main lobby. RxArt, a program created to aid and accelerate the healing process by placing contemporary art in hospitals, made its debut at The Rockefeller University Hospital in March.

JCAHO REVIEW continued from page 1

Staff, including Nurse Practitioners. All other employees of the hospital – including nurses, nurses' aides, bionutritionists, electricians, plumbers, custodians, and administrative staff – must also keep files documenting that their performance has been evaluated on a yearly basis and that they have maintained the skills to perform their particular job descriptions.

The JCAHO also examines in detail all aspects of inpatient and outpatient care. This scrutiny also extends to pharmacy operations, patient rights, IRB operations, patient and family education, all aspects of record-keeping, and provisions for follow-up care, when needed.

Like any accrediting entity, the JCAHO operates by the maxim, "If it's not documented, it hasn't been done." Assembling the documents that describe all aspects of hospital procedures, minutes, and bylaws is a major job that was coordinated by Ms. Cynthia Seidman, the Director of Regulatory Affairs. All of the administrative staff of the hospital also contributed to this effort. In addition, we are deeply grateful for tremendous assistance from the Office of the General Counsel, Laboratory Safety, Plant Operations, and Construction and Planning.

It is important to emphasize that the preparation for this site visit was done over a period of months in a very deliberate manner. We viewed it as an opportunity to review our operations and procedures in-depth, in order to bring them up-to-date and change them whenever we could identify better ways of performing needed functions. The goal was to provide an optimal environment for the study of patients and normal volunteers that minimizes the risk-to-benefit ratio.

After such careful preparation, we hosted a two-day visit by Dr. Thomas Lavell, the JCAHO surveyor, on October 29 and 30. We received one Type I recommendation, which will require a minor change in language in the Medical Staff bylaws. There were a few supplemental recommendations which require no formal action on our part. These dealt with one unlocked drawer of the crash cart, minor cleanliness issues on two laboratory floors of the hospital, and boxes stored within less than 18 inches of a sprinkler head on a laboratory floor.

The results of the JCAHO review are outstanding, and very gratifying for all of the people – both in the hospital and in University – who contributed so much to this effort.





Clinical Research Office Provides Valuable Assistance to Investigators

by RHONDA G. KOST, M.D., Clinical Research Officer LEANN ZAAR, R.N., Clinical Research Implementation Specialist and Monitor

he role of the Clinical Research Office is to provide a core facility of resources and services to investigators involved in human research, and to the subjects populating their studies. The Clinical Research Office must consider the needs of research subjects, especially subject safety, subject rights, and a valid informed consent process. It must also meet the needs of investigators, providing education in Good Clinical Practice and protection of human subjects, guidance on ethical issues, assistance in navigating regulatory mazes, and enhancement of the infrastructure that supports rigorous, ethical, scientifically valid investigation in the current climate of regulation.

The Clinical Research Office is proud of its accomplishments in the past year:

1) Data and Safety Monitoring Plans (DSMPs) in protocols:

We provide one-on-one instruction to investigators and Scholars in DSMP design, Web page resources, consulting, and ongoing support to investigators in revisions of their plans and protocol processes. All protocols reviewed by the IRB currently have Data and Safety Monitoring Plans.

2) Protocols on the Web:

IRB-approved protocols and informed consent forms are now posted electronically by the IRB office to a password-protected Hospital Protocols Administration Web site. Protocols are accessible to inpatient nurses, investigators and others indicated by the Principal Investigator. The Web site allows viewing or printing of an up-to-date protocol or informed consent form from any computer with access to the University intranet. One can even download a file and e-mail the stamped IRB-approved form to a prospective participant. If your protocols are not already posted on the Web site, call Dale Miller at x8411 for more information.

3) Responses to BRANY audits:

We have helped investigators develop action plans in response to the findings of external voluntary protocol-conduct audits by the Biomedical Research Alliance of New York (BRANY). Identification of common problem areas resulted in the creation of Enrollment Notes and Delegation of Authority Forms, as well as consultations on workflow and other resources for investigators.

4) Hospital Online Adverse Event (AE) Reporting system revised:

Multiple revisions have been completed to make this system more user-friendly and useful to nurses, oversight staff, and to investigators who rely on it for tracking AEs.

5) Education:

In collaboration with Mount Sinai Medical Center and Camille Silvetti, Director of Nursing, we've sent two to three nurses or coordinators each month to an all-day training workshop in Good Clinical Practice. We plan to institute our own workshops for coordinators, nurses, and investigators in 2003.

Leann Zaar, R.N., Clinical Research Implementation Specialist and Monitor, joined us three months ago. Her primary role is to facilitate the protocol conduct phase by providing suggestions and tools (such as revised protocol pathways, screening logs, AE logs, and means to design data worksheets) and helping to design work practices that enhance data integrity, adherence to protocol, adequate documentation, and patient safety. She has been instrumental in the latest revisions of the AE reporting system, and in providing in-service training to nurses to use the system better. She attends weekly rounds of several lab groups, listening and providing insight and advice as requested. She has provided not-for-cause audits of several investigators' protocols, at their request, and can provide a workbook of tools to assist in data collection and organization of record-keeping.

Rhonda G. Kost, M.D., the Clinical Research Officer, oversees the Clinical Research Office. Her goals include further expanding the "menu" of resources at the Clinical Research Office so it can be a "one-stop-shopping" core facility for investigators preparing and conducting protocols. This office can help with design; data collection and work process design; continuing education in human subjects protection and Good Clinical Practice; assistance with plans for executing data and safety monitoring activities such as AE reporting; internal and external monitoring of protocol conduct; and tools and templates to assist in those tasks. The staff also works on enhancement of the IRB Web page and provision of templates to investigators, strategic planning of information technology for the hospital and Rockefeller University clinical research community (starting with an online system for protocol submission, review, and approval by the IRB), and much more.

RHONDA G. KOST, M.D., (left) and LEANN ZAAR, R.N. lead the Clinical Research Office, which helps meet the needs of research subjects and clinical investigators.





BARBARA O'SULLIVAN

Acutely Ill Patient Transfer Agreement with New York Presbyterian Hospital

by BARBARA O'SULLIVAN M.D., M.P.H., Hospitalist

hen a research participant becomes acutely ill, the Rockefeller University Hospital physician on-call is available to respond to and manage these medical problems 24 hours a day, 7 days a week. There may be situations, however, that are best managed in an acute-care hospital facility. To accomplish that, we've established a transfer agreement with New York Presbyterian Hospital (NYPH).

This agreement enhances the continuity of care for our volunteers, while furnishing the best medical care available. The agreement includes rapid transport of the patient to NYPH using the NYPH ambulance service. This service, which is part of the City of New York's 9-1-1 system, is contacted directly by the clinical staff on the hospital floor and is available immediately.

The proximity of NYPH to The Rockefeller University enables the Principal Investigator to visit the patient if he or she is admitted to the NYPH inpatient unit. This proximity enhances continuity and facilitates communication among clinicians at both institutions. Another important element of the agreement involves patient discharge: when patients leave NYPH, they are discharged to The Rockefeller University Hospital, rather than to their homes. In this way, the loop is closed and our research volunteers are not lost to follow up.

Periodic drills test this important transfer arrangement. During these drills, Rockefeller University Hospital clinical staff members actually contact the NYPH ambulance service and also speak with NYPH emergency room staff. These drills reinforce the process for staff at both institutions, and remind the NYPH of our mission.

The transfer agreement with NYPH is one of the features put in place by the leadership of The Rockefeller University Hospital to serve our research community. We are interested in feedback about this policy from clinical investigators, and we welcome suggestions about other aspects of clinical care that would enhance the research and patient care environment at the hospital.



Continual New Skill Development Central to Nursing and Patient Care Services

by CAMILLE SILVETTI, R.N., Director of Nursing and Patient Care Services

The Department of Nursing and Patient Care Services provides "best practice" for research participants enrolled in the multiple clinical research studies under way at The Rockefeller University Hospital. The care of patients in the inpatient and outpatient units is served by the rich diversity of clinical skills and support services of nurses, pharmacists, social workers, and arts and recreation staff. Together these staff members foster an environment of community for patients while ensuring their adherence to the protocol.

Members of the nursing staff,in collaboration with the investigators, re-format the protocol design in the unique form of a pathway. The pathway map identifies the nurses' roles in each admission day or outpatient visit. The nurses' roles are diverse, and include educating patients about study requirements and adherence, identifying health patterns, and teaching patients how to maintain a healthy lifestyle.

The areas of support and infrastructure that were established during the last two years to move toward a culture of partnership and to meet the commitment to service and learning include measures to meet environmental requirements, as well as educational sessions to instruct and prepare the Nursing and Patient Care Service for clinical studies. Educational programs include research training and clinical review. All professional staff are certified in Advance Cardiac Life Support, while Nursing Assistants are Heart Saver certified.

The collaborative interaction between investigators and members of the Nursing and Patient Care Service is one of the great strengths of The Rockefeller University Hospital, and we look forward to developing ever more creative ways to enhance our scientific and medical missions.







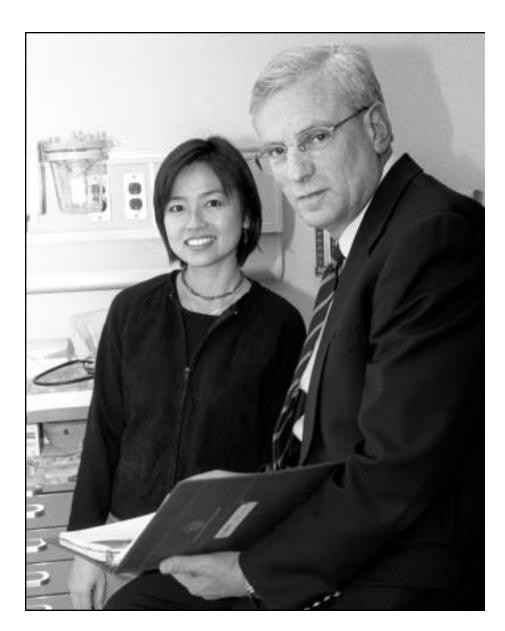
The collaboration between clinical investigators and members of the Nursing and Patient Care Service is a great strength of The Rockefeller University Hospital. Shown here: LYN GOLDSMITH (left) and BARBARA TIDDENS.

Jan Breslow and Mayu Frank Elected Medical Staff Officers

t the Medical Staff meeting on September 26, Dr. Jan Breslow was elected President of the Medical Staff, and Mayu Frank, N.P., was elected Vice President, both for a one-year term. This is the first time that Rockefeller University Hospital Medical Staff has elected officers, reflecting a new change in the Medical Staff bylaws.

The purpose of electing officers and holding Medical Staff meetings is for self-governance. The new officers hope that these meetings will provide a valuable mechanism for Medical Staff members to raise issues or convey their thoughts for discussion. They hope that this will lead to more Medical Staff input and better communication with the hospital.

The officers look forward to working with the Medical Staff and Administration in the upcoming year.



JAN BRESLOW, M.D. (right), was elected President of the Medical Staff, and MAYU FRANK, N.P., was elected Vice President.



JAMES KRUEGER



The Recreation Therapy Room of the hospital, coordinated by Karen A. Zaremba-Soto, provides a creative outlet for hospital inpatients as well as a stunning view of the East River.

Report of the General Clinical Research Center (GCRC)

Program Director and Medical Director

by JAMES KRUEGER, M.D., PH.D.

GCRC News

We welcome Dr. Marcus Stoffel as Chair of the GCRC Advisory Committee.

Medical Staff News

New Bylaws

Organizations (JCAHO) relate to credentialing, structure, and governance of the Medical Staff. Since the rules are constantly evolving, we found that our previous set of bylaws needed extensive revision to meet the current spirit of the JCAHO standards. Accordingly, our bylaws were completely rewritten earlier this year, with tremendous help from our legal counselors Harriett Rabb and Deborah Yeoh. With adoption of the new bylaws by the Medical Staff and after approval by the Hospital Committee, our overall Medical Staff structure has been significantly changed in the following ways:

- 1) The Medical Staff is now officially a self-organized and self-governing body. With the new bylaws, the Medical Staff now has an elected President (Dr. Jan Breslow) and a Vice President (Mayu Frank, N.P.). (See the related story on page 5.) Issues of concern to the Medical Staff, particularly potential conflicts with the Administration, should be directed to these individuals.
- **2)** Between annual Medical Staff meetings, the Medical Staff Executive Committee and its appointed subcommittees manage issues for the Medical Staff. Over the next several months, this committee and its subcommittees are being re-organized according to the new bylaws. If any members would like to serve on particular committees, please let us know.
- **3)** Each laboratory group conducting research in the hospital will now have a Clinical Director who is responsible for overall patient care and for recommending staff appointments or reappointments for that service.
- **4)** The Medical Staff Executive Committee adopted a policy that each independent practitioner should have a minimum of 25 hours of CME activity per year for re-appointment. The CME should be related to the area of practice in the hospital, but Category I is not required. Our Wednesday Seminar Series in Clinical Research will count as CME, and sign-in is encouraged. A form to help guide CME credits will so on be distributed to Medical Staff members.
- **5)** To help organize increasingly more complex credentialing, we welcome Goldie Steele as our new Medical Staff Coordinator. She has tremendous knowledge and experience in this area, and she will help all of us keep all our files up-to-date and in order.

Meet Our Hospitalist

e welcome Dr. Barbara O'Sullivan as the new Hospitalist for The Rockefeller University Hospital. She trained in Philadelphia and completed a fellowship at Memorial Sloan-Kettering Cancer Center. She is board-certified in Internal Medicine and Critical Care.

Dr. O'Sullivan works under my supervision as Medical Director to assure the provision of high-quality medical care at the hospital. She works closely with the nursing staff with regard to quality improvement activities aimed at error reduction, Good Clinical Practice, and emergency preparedness. She is also responsible for ensuring coverage of the hospital by on-call physicians (see below)

Dr. O'Sullivan is interested in working with clinical investigators and would like to discuss her potential role in upcoming investigations. She encourages investigators to contact her about new protocols.

Hospital on-call coverage will be enhanced by the presence of a physician on-call in the hospital every night as of January 1,2003. The presence of a physician on the hospital floor is an obvious advantage in the case of a medical emergency. We welcome feedback about the evolving role of the physician on-call in the care of research participants.

The Medical Staff Rules and Regulations were revised this year, and the new version was approved at the last Medical Staff meeting. The Rules and Regulations are intended to guide Medical Staff members in their patient-related work in the hospital. They were written with the most current regulatory, clinical, and organizational guidelines in mind.

The new rules and regulations contain several items we'd like to bring to your attention:

- **1)** New guidelines describe the level of supervision for trainees participating in clinical research at The Rockefeller University Hospital (see Article XV).
- **2)** Standard admission testing for the hospital has been revised and remains consistent with standard practice and regulatory requirements (see Article I).
- **3)** The time frame for signature of verbal orders has been extended to 72 hours; most importantly, however, we are developing a new process for online orders. Please contact Alex Peshansky at x8062 for details. Also be sure to review the e-mail Alex recently sent to all Medical Staff members regarding this issue.



New Ambulatory Care Facility Nears Completion

by KELLY McCLARY, Assistant Director of Nursing and Patient Care Services

onstruction of the A-level outpatient unit at The Rockefeller University Hospital is nearly complete, and we anticipate relocating our ambulatory services there in January or February 2003. The facility, which will be named for Robert and Harriet Heilbrunn in recognition of their generous support of the hospital's clinical research programs, was designed to accommodate a variety of studies, diverse patient and volunteer populations, and staff needs.

The new unit includes nine examination rooms (including two infusion/procedure rooms) and two consultation rooms. Other features include a large reception area and waiting room with plenty of comfortable lounge chairs and couches; an Admitting Office behind the reception area; a Nurses' Station and workroom; and a multipurpose Patient Education/Conference Room. There will be plenty of computers and printers, as well as space to dictate, read charts, and write. A large space has been dedicated to the collection, processing, and temporary storage of specimens.

Patient accessibility to the facility and inpatient unit will be greatly improved. Patients will be directed to take the marble pathway to the A-level entrance of the hospital building, and then take the nearest pathway on their left toward the East River to the main entrance of the facility. This pathway and entrance are handicapped accessible. Since Admitting will be located in the facility, all inpatients and outpatients will be asked to use the A-level entrance instead of the hospital building main entrance during normal business hours. Please inform your patients to stop at the Security Booth so the security guards can give them directions to the new location.

The first few months in the new outpatient unit will be a time of transition, and we welcome your comments and suggestions. We will make every attempt to accommodate you. Thank you in advance for your cooperation and support.



The new A-level outpatient unit, scheduled to open in early 2003, will meet the diverse needs of research subjects and staff.

Solarium Provides Respite for Patients, Staff

Susan G. Richer (left), Hospital Administrative Director, and Janet Maturi, M.S., R.D., Director of Bionutrition, meet in the hospital's newly renovated solarium. Located on the second floor of The Rockefeller University Hospital, the solarium is a peaceful haven for inpatients as well as staff.







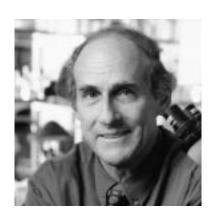
Auerbach honored for Fanconi anemia research

Associate Professor Arleen Auerbach received the Lifetime Achievement Award from the Fanconi Anemia Research Fund earlier this month. The award "acknowledges the exceptional contribution [Auerbach] has made to the field of Fanconi anemia (FA) research by establishing and maintaining the International Fanconi Anemia Registry and the premier FA diagnostic center in the world." The fund also noted the high value it places on Auerbach's work with FA patients in helping them determine their particular complementation group and/or mutation.



Kreek receives NIDA grant

The National Institute on Drug Abuse (NIDA) of the National Institutes of Health (NIH) has awarded a five-year grant worth \$14.4 million to the NIDA-NIH Research Center, directed by Professor Mary Jeanne Kreek, head of the Laboratory on the Biology of Addictive Diseases and senior physician. Established in 1987, the Center unites bench science with clinical studies in the pursuit of the molecular and neurobiological causes of addictive diseases, including heroin addiction, cocaine dependency and alcoholism. Its ultimate mission is to translate this knowledge into new treat-



Steinman elected to IOM

The Institute of Medicine (IOM) of the National Academies elected Ralph Steinman a member of the Institute during its annual meeting Oct. 14 and Oct. 15. Steinman, Henry G. Kunkel Professor, head of the Laboratory of Cellular Physiology and Immunology and senior physician, joins 13 other Rockefeller scientists who are IOM members. The institute elected 65 scientists this year, including Rockefeller alumnus Bertil Hille (class of 1967). Steinman also is a member of the National Academy of Sciences.



Mother's Voices, a not-for-profit organization that mobilizes parents and educators as advocates for HIV prevention, honored MARTY MARKOWITZ, M.D., Clinical Director at the Aaron Diamond AIDS Research Center, with an award. The organization commended Markowitz's devotion to patients with HIV and AIDS, both at The Rockefeller University Hospital and in sub-Saharan Africa. Spokesperson and supermodel Iman presented Markowitz with the award at a Mother's Voices breakfast ceremony in March.

The Rockefeller **University Hospital**

The Rockefeller University Hospital Update was produced by the Office of Communications and

Public Affairs and the Media Resource Center.

Barry Coller, M.D.

Meredith Gatschet,

Media Resource Center **Contributing Editor:**

Rosie Foster

John Sholtis, Lubosh Stepanek, Media Resource Center

Cathy Yarbrough

Lynn Love Pam Burns

