Reinvention Emerges as Good Fit for NIH
By Rich McManus

(During the summer, the NIH Record will publish a series of stories on the subject of reinvention, a topic that can be more dizzying than Twister and harder to pin down than sumo champion Prince Akebono. This is the first article in the series.)

When Vice President Al Gore took charge of the National Performance Review and designated some federal agencies “reinvention laboratories,” he should have known that NIH would welcome the idea. Foisting the lab metaphor on the workforce here was only too agreeable, given our love of hypothesis, theory and contention, and our equal passion to behold new ideas like the blender beholds an unmixed Margarita—do we stir, puree or liquefy?

“It’s a natural fit,” commented NIH director Dr. Harold Varmus. “I’m delighted that it’s being pursued with such enthusiasm and imagination. This is an experiment that’s turning out well not just for employees here, but also for science—we’re getting resources faster to those who know best what to do with them.”

In the course of interviewing more than a dozen authorities on reinventing government (dubbed REGO), now almost 3 years old at NIH, the Record has found pockets of indifference to what some view as a passing political fad, but the overwhelming sense is that, as Geoffrey Grant, an extramural policy honcho here since 1986, said, “all the stars are in alignment—from Gore to [HHS Secretary Donna] Shalala to Dr. Varmus and Dr. Baldwin. That alignment of support and common vision for this positive change is unprecedented in my experience. I have never seen that kind of consistency in the past.”

What they all agree on is that NIH needs to decide how to be more efficient (that is, with fewer staff and smaller budgets) at accomplishing its mission of improving health. While all of NIH is technically under the reinvention microscope, the extramural side

'Salvation or Damnation?'

STEP Seminar Speakers Examine Ethics of Genetic Studies
By Charlotte Armstrong

The title of a recent 2-day NIH seminar—“Salvation or Damnation: A Debate on Genethics”—bespeaks the emotionally freighted language used to discuss the implications of genetics for society. Like other scientific revolutions, genetics is shaking the world beyond science; but, as the seminar brought home, genetics is raising uniquely personal questions about autonomy, human values, and family and societal relationships and obligations.

For clinical medicine and research these issues pose thorny practical difficulties. Speakers at the seminar, a module in the STEP program (Staff Training in Extramural Programs), laid out a spectrum of dilemmas, from the narrowly personal—how does a person at risk for a genetic disease make the decision to be tested?—to broader public health issues—what genetic diseases should all newborns be screened for? Figuring large in all the discussion was NCHGR’s program on the ethical, legal, and social implications (ELSI) of human genome research, which has been written much of the research on these issues cited during the seminar.

This STEP module, organized by a subcommittee chaired by Diane Bronzert in NCI’s Division of Cancer Treatment, Diagnosis and Centers, was one of four offered this year to provide continuing education for the NIH extramural community.

Dr. Eric Juengst, associate professor of biomedical ethics at Case Western Reserve University in Cleveland and the first head of ELSI, opened the program with a picture of how genetics and the uses to which it has been put have shaped, and been shaped by, each era’s social attitudes. The fear of eugenics—once advocated as a means of improving the population, even in this country—haunts today’s genetic policymaking. By World War II, said Juengst, 60,000 people in the United States had been sterilized under laws authorizing the procedure for the “genetically degenerate.” Such laws were promulgated by public health groups as a well-meaning measure in the same vein as vaccination and improved sewerage. Out of this experience emerged today’s prevailing concern with autonomy in medical and reproductive decisionmaking and alertness to the possibilities for discrimination against individuals and groups that genetic testing could inadvertently foster.

Defining these issues and how the scientific and medical community and society can best address them is the task of the ELSI program. Elizabeth Thomson, acting chief of NCHGR’s ELSI branch, described how this pro-
GENETICS EXPLORED AT 2-DAY STEP SEMINAR
(Continued from Page 1)
gram, established as a 3-5 percent set­aside at the outset of the Human Geo­nome Project, has served as a model for other such programs both in the U.S. and internationally. The ELSI program has four areas of focus: issues surround­ing genetic research, clinical integration of new genetic technologies, privacy and fairness in use and interpretation of genetic information, and public and professional education. To date ELSI has supported some 114 research projects, including a group of studies designed to examine the impact of genetic testing and counseling for cystic fibrosis (CF) and cancer risks. The ELSI program has also sponsored the policy­shaping work of various task forces and meetings, result­ing in the publication of policy recommend­ations regarding informed consent for genetic research using stored tissue samples and the human genetics chapter in the 1993 Office for Protection from Research Risks guidebook for the institutional review boards that have to approve all research protocols involving human subjects.

Evolving technical capabilities and the ethical dilemmas they give rise to aren’t making ELSI’s work any easier. NCI/NCHGR scientist Dr. Jeffery Struwing described the limitations of testing for the two breast cancer susceptibility genes, BRCA1 and 2. The large number of different mutations, the lack of knowl­edge of the genes’ functions, the uncertain­ty about their prognostic meaning, and the inadequacy of preventive treatments, all muddy assessments of the usefulness of this testing for medical management of breast cancer, according to Struwing.

Indeed, many ethical dilemmas, said speaker Dr. Neil Holtzman, professor of pediatrics at Johns Hopkins School of Medicine, arise from our current ability to identify the gene but not treat the disease; others, from problems inherent in the tests themselves. Genetic hetero­genity with BRCA and CF—almost 1,000 mutations have been identified in the CF gene—ensures some number of false negative results. In the case of BRCA, a woman may have the gene but never develop the disease, a false positive if the goal is predicting breast cancer. Furthermore, there is now no regulatory assurance that either commercial or academic laboratories that do these tests meet rigid standards of quality control, or that physicians and others offering the tests have adequate knowledge to counsel recipients of the information. Commer­cial interest in the tests is high, but Holtzman and others have found that consumers’ interest in genetic testing drops when they learn of the limitations to the information they would get. Holtzman chairs a task force on genetic testing (under the auspices of the NIH-Department of Energy working group on ELSI) that has drafted a set of interim principles in three areas: scientific validation, laboratory quality, and education, counseling, and delivery of results. The principles have been distributed for comment and are available at http://infonet.welch.jhu.edu/ policy/genetics/ on the World Wide Web. The task force is also discussing how to ensure that these principles are put into practice.

Despite the limitations of testing, the information it produces carries risks that go beyond that of more traditional diagnostic information. Several speakers addressed the risks or “toxicities” of genetic information. Karen Rothenberg, director, Law and Health Care Program at the University of Maryland School of Law, who was on leave during 1995-96 as special assistant to the director of NIH’s Office of Research on Women’s Health, discussed the risk that someone identified as carrying a disease gene could be denied health coverage, or charged a prohibitive amount for it. A number of states, she said, have enacted or are considering provisions against insurers requesting a genetic test or its results, or deciding coverage or its cost based on a genetic test. Such laws, however, only offer limited protection for two main reasons: first, they usually only cover the policies of the paper and HHS. This can amount to employment discrimina­tion as well, because an employer may view a person with a positive test for a disease gene as potentially costly to insure. Some bills in Congress that address health coverage incorporate language on genetic information. There is in addition, says Rothenberg, a patchwork of state statutes—but no broad solutions—regarding rights to privacy and confidentiality of such personal information.

The Americans with Disabilities Act (ADA), according to Equal Employment Opportunity Commission attorney Andrew Imparato, is a partial remedy to gene­based discrimination. In the EEOC language that guides enforcement of the act, the definition of disability includes the perception of disability by others, on the grounds that others’ percep­tions (and misperceptions) of disability can be as disabling—can limit someone’s ability to carry out a major life activity such as working or caring for oneself—as mental or physical impairment. This definition makes it possible to include someone who carries a disease gene but is not ill. However, while forbidding discrimination in benefits such as health coverage, the ADA only covers the employed.

Genetic testing also poses extraordinary difficulties with regard to informed consent and the process of decision­making. Attorney Patricia Barr, a member of the task force on genetic testing, outlined the principles of informed consent: respect for persons, including their autonomy and protection of personal information.

Genetics is shaking the world beyond science; but, as the seminar brought home, genetics is raising uniquely personal questions about autonomy, human values, and family and soci­etal relationships and obligations.

The Record

NIH Record Office
Bldg. 31, Rm. 2B03
Phone 6-2125
Fax 2-1485

Editor
Richard McManus
rm26q@nih.gov

Assistant Editor
Carla Garnerr
cg96@nih.gov

Published biweekly at Bethesda, Md., by the
Editorial Operations Branch, Division of
Public Information, for the
information of employees of
the National Institutes of
Health, Department of
Health and Human
Services. The content is
reprintable without
permission. Pictures may
be available on request.

The NIH Record reserves the right to make
corrections, changes, or deletions in submitted
copy in conformity with the policies of the paper
and NIH.

The Record is recyclable as office white paper.
for those with diminished autonomy; beneficence, focusing on the concern that research protocols involving humans ask questions of merit and that potential benefit be weighed against risk; and justice, involving an assessment of who stands to benefit from the research and who bears the burden of risk from the information gained. Barr feels that “genetics is different,” involving unique risks, including the possibility that other people will have obtained information about you—that you may not be aware of—from your blood or tissue. With its impact on employment and insurance, genetic testing can stigmatize communities—an example being sickle cell disease in African Americans—as well as individuals. Within a family, the results from testing one individual who wants the information may have inescapable impact on other family members who don’t want to know, for example, the identical twin of someone who tests positive for Huntington’s disease, or the at-risk parent of a child whose positive test would also diagnose that parent. Commercial interests and pressures from the public and media, Barr said, create problems by encouraging use of the tests before they have been validated.

Barr emphasized that informed consent is a process, not a document—in particular, not a liability document. Barbara Biesecker, codirector of NCHGR’s intramural genetic counseling program, gave a personal context to that statement with examples from her experience. She emphasized that genetic counseling is far more counseling than education. How this powerful information is conveyed is critical. To respect autonomy, counseling must, Biesecker says, be nondirective, a very difficult task. The needs of the clients are paramount, illustrated by her description of the difficulty of conveying complex genetic information in any meaningful way to parents who have learned recently that their child is going to die.

In counseling individuals at risk for genetic illnesses, health professionals must be sensitive to the possible unintended value judgments they may convey through loaded language. Dr. Alice Wexler, a research scholar at the Center for Study of Women, University of California, Los Angeles, cited examples from the press that portrayed the wish to be tested for Huntington’s disease (HD) as “a quest for knowledge” or “the desire to know,” while describing the choice not to test pejoratively as “the wish not to know” or even “a preference for ignorance.” Yet, as she and other speakers made clear, the benefits of knowing one’s genetic status for fatal, untreatable diseases such as Huntington’s are unclear. While touted as helping a person “plan for the future,” studies show that testing positive for the HD gene may make planning more difficult.

For most traits, says Juengst, genetic information is more like a weather map than a crystal ball. We are only just learning about all the variables that contribute to the sum of an organism’s physical and behavioral traits. In the case of the BRCA genes, carrying out genetic tests in a research setting is an approach advocated by professional groups as a way to ensure informed consent, close monitoring and quality control of genetic counseling services, DNA testing by accredited labs, privacy safeguards, and the assembly of family and medical history data that will provide a better understanding of the relationships between genes and disease and how best to convey that information to affected persons.

Understanding will not eliminate the responsibility to make ethical choices, however. Abbey Meyers, president of the National Organization for Rare Disorders, and a member of NIH’s recombinant DNA advisory committee, fears that unregulated genetic technology could be used for “genetic enhancement”—the selection of traits like stature or thick hair—rather than amelioration of disease and that profit, not science, will drive genetic research.

In a phrase NCHGR’s Thomson attributes to director Francis Collins, if we don’t do ELSI right, no one will thank us for doing the Human Genome Project. ☐

Dr. Kenner Rice, chief of NIDDK’s Laboratory of Medicinal Chemistry, will receive the American Chemical Society’s 1996 Division of Medicinal Chemistry Award on June 20. He was chosen from a field of outstanding candidates for his many contributions to the fields of organic and medicinal chemistry. His accomplishments include the design and development of the NIH Opiate Total Synthesis, currently the only practical procedure for production by chemical synthesis of all medical narcotics and narcotic antagonists now derived from opium. Given every 2 years, the $3,000 ACS award is a premier honor in the field of medicinal chemistry. Rice will be presented with the award at the 25th National Medicinal Chemistry meeting at the University of Michigan.

Dr. Michael E. Rogers has been named director of the Division of Pharmacology, Physiology, and Biological Chemistry (PPBC) of NIGMS, a position he has held on an acting basis since 1993. He formerly served PPBC, one of the five NIGMS divisions, as deputy director and as a program director. He will be responsible for the planning, organization, and administration of a large national program of grant and fellowship awards in the pharmacological, physiological, biochemical, and chemical sciences. He will also serve as an advisor and liaison to the scientific community, individual scientists, and other government and private organizations.

Healthy Smokers Needed

NIAAA is seeking healthy smokers to participate in various research studies. Each participant must be at least 18 years old. For more information, call Dr. John Umhau, 6-7515. ☐
of the agency, which consumes almost 80 percent of the budget, is the “wet” lab that Gore (for which REGO is a fortunate anagram) formally dubbed a “reinvention laboratory.”

“We’re in it much more enthusiastically than simply doing Gore’s bidding,” confided Grant, who gave an overview of the hothouse that reinvention has become within extramural NIH.

The story begins with anxiety. “What’s going to happen to my job?” many wondered, according to Grant, who is acting director of the Office of Policy for Extramural Research Administration in the Office of Extramural Research. “That was followed by a period of resistance to the idea, which developed into a sense of real optimism. Here was the first opportunity for people to make some necessary improvements in their work.”

Involving many staff from various extramural positions, NIH adopted such metaphors as “pick the low-hanging fruit,” in choosing the first reinvention targets. Another appropriate image was “Save the Trees,” which is shorthand for cutting down on truly stunning quantities of paperwork.

The low-hanging fruit initially numbered three: peer review, application process and post-award administration, said Grant.

Typical of how reinvention was to proceed was streamlined review, dubbed “triage.” In light of the fact that NIH funds about 25 percent of the 30,000 grant applications it receives yearly, it didn’t make sense to devote equal time to all—some clearly are noncompetitive.

“Rather than focus equal attention on all applications, we decided to concentrate on the top 50 percent,” said Grant. “The bottom half don’t need to be addressed as closely” during peer review meetings—3-day marathons conducted several times yearly during which reviewers debate the merits of grant applications. “That’s exactly how you

maximize your human resources. Everybody still gets a critique, and NIH gains in three ways: expedited feedback to applicants, expedited summary of reviews to NIH staff, and abbreviated time spent by reviewers at study section meetings.”

Triage also saves a full day of expenses, per diems, and room rentals for some study sections, said Grant, “and has produced tangible savings as a result.”

Four committees oversee REGO at NIH, and Grant cochairs the parent committee—the extramural reinvention committee—with Dr. Wendy Baldwin, NIH deputy director for extramural research. The subordinate committees include ERA (electronic research administration, which applies information technology to NIH’s business), program management and project monitoring, and improving peer review.

“These all address different segments and chronology of the process,” said Grant. “They stimulate the initiatives, then the implementation.”

How do grantee institutions view NIH’s internal throes? “My university contacts see us making positive changes with their interests in mind,” said Grant. “But they are concerned that we not offload what had been a federal burden to grantees in some cases. These things are moving in both directions, but the long-range direction is simplifying and reducing the burden for everybody.”

At meetings of the professional societies of research administrators, the buzz is generally good about what’s going on at NIH, Grant noted.

NIH is becoming more mindful of the demands it makes on grantseekers, he explained. “It takes months for grantees to prepare applications—that’s time taken away from research. Then, if there’s a resubmission, that consumes more time,” Grant enumerated. “We have to be sensitive to this. We ask many of the same people to be reviewers, too. And since reviews are taking longer, we’re ‘robbing’ research twice. Then

when you factor in various compliance requirements—governing human subjects, animal welfare, and conflict of interest—the enterprise is getting larger and larger. This is the third ‘robbery’—as applicants, reviewers, then administrators—that’s distracting to research. We need to streamline the time investigators spend in those additional responsibilities so they can spend more time on their research. Our motto is ‘Streamline the administrative burden, while enhancing stewardship of public funds.’”

In other words, not all those 30,000 applications need the same level of professional judgment and scrutiny; much of it is routine and can be handled that way. “We need to concentrate on the problems and exceptions that really require oversight,” Grant declared. He uses the analogy of credit card fraud detection—where companies noticing sudden and unusual activity on an account in a market not frequented by the cardholder can notify the owner of possible misuse. “We think we can identify characteristics [of the special cases] so that the routine stuff gets a little less scrutiny and reporting and brings everyone’s attention to bear on the exceptions.”

The size of the award is a critical factor: a $100,000 grant is modest, requiring relatively little shepherding. But other factors come into play. Grant asks, “Is it very basic research or is it clinically oriented, where the patient risks are high? Is the grant request coming from an established institution or an entrepreneurial organization? We can streamline the daylights out of some of this stuff.”

On the high-dollar, high-risk portion of NIH’s research portfolio, “we stay more closely engaged,” Grant assured.

With some of the low-hanging fruit firmly in hand, NIH “is now tackling more difficult targets, and looking at longer-term improvements,” said Grant. The agency recently went through a “benchmarking” exercise with 14 other roughly similar—in terms of business process—organizations including banks, insurance companies, Britain’s Medical Research Council, and other grantmaking bodies. An examination of grant-determining processes revealed that NIH is virtually alone in entertaining revised applications; fully one-third of all grant submissions to NIH are revisions.

Information technology (IT) is also a focus of REGO, and can be applied most efficiently post-award, said Grant.
"Three-quarters to 80 percent of our grant money is tied up with post-award management," he said. IT includes use of the Internet and the World Wide Web, EDI (electronic data interchange) and email for transferring information. The term ERA (electronic research administration) has been coined to describe a reinvented way of doing business electronically. Grant emphasizes that it isn’t so much the means (trading paper for electrons) that have been transformed, but the ideas as well. "We don’t want to just get more efficient at doing the same old business," he explained.

For example, NIH participated for 18 months with all federal research agencies on creation of a common research application; we need to present a common face to our customers." EDI emerged as a universal standard for use by any federal agency, mirroring similar technology that banking and industry use for tracking invoices, purchase orders, payments, etc. It also includes a database of public information enabling investigators to monitor the status of their application, or find out who is on a particular review group.

NIH will be relying much more heavily on ERA to substitute for the reams of paper exchanged between NIH and potential grantees on matters as simple as confirming receipt of application to other ongoing notifications. The typical competing grant application is some 40-50 pages long, said Grant, and is copied 30-50 times by NIH to pass out to reviewers and administrators. "That’s an enormous distribution of material, so ERA is going to save a lot of trees," he observed.

Any time NIH can save one sheet of paper off of an application, it “saves” 1.2 million sheets of paper that NIH would have to copy, mail, file, store, and, for the most part, recycle, he said.

Two REGO projects—called SNAP and JIT—demonstrate amply the benefits of new thinking and technology. SNAP stands for “streamlined noncompeting award process.” Given that the average length of award for a competitive grant is 4 years, NIH needs a way to monitor progress for that period to confirm that all is proceeding as planned. SNAP will take place in an electronic space or “commons” that enables the investigator and the institution to access a grant record in a database.

"It’s not our corporate database, because that’s secure," Grant cautions, "but a virtual workspace for us and them. The institution can provide updated information" as the grant term matures. "It’s very user friendly," said Grant, adding that the quality of information on the database is controlled, and that its flow is governed by a series of "traffic lights." Green signals mean everything is ready and can be submitted, yellow means it’s not complete, and red means they haven’t started.

"We have about $3.5 billion of our portfolio in the pool that’s getting the SNAP treatment," reported Grant. "As it becomes successful there, we’ll implement it on more complex grants."

SNAP’s benefit to investigators is that they can update their abstracts and progress reports easily. This is publicly available information, so investigators can check out what colleagues are doing in a given field. Grant says the openness “will facilitate research, not just its administration. This kind of information didn’t used to be available annually for all grants.”

Side benefits to SNAP include, for NIH, ease of tracking compliance with such requirements as proper care/use of animals, recruitment of women and minorities to trials, and other relevant information. "We really get a lot of mileage out of it," said Grant. "That’s the terrific thing about it."

SNAP’s sister acronym JIT stands for "just in time," a method of requesting information only when you need it. Instead of requiring all 30,000 applications to include information that only a fraction will actually need, JIT reduces the burden.

Using JIT, NIH "gets a higher quality of information [in support of a grant application] in a more timely way, and reduces the burden for three-quarters of applicants who will never have to provide it," Grant said. "It’s implemented now for FIRST awards, career awards and RFA applications. This is a fairly noncontroversial subset of applications for getting started in phase I. Phase II will look at other modest investigator-initiated projects where this would be appropriate."

Grant sees a "real cultural change" in the way staff at NIH use information to make grant decisions, and ardently supports any improvement in the way public funds are spent.

"There’s a lot of exciting and very important stuff going on," he says. "A lot of the public’s money is at stake (his office estimates an average taxpayer share of $110 yearly for NIH), so we’re trying to improve that investment as much as we can. There are many dedicated staff involved in all of these efforts and they have dedicated time in the laboratory enthusiastically to reinvent an even better NIH.”

Dr. Peter H. Bennett, chief of NIDDK’s Phoenix Epidemiology and Clinical Research Branch, received the American Diabetes Association’s (ADA) Banting Award on June 9 for his career contributions to the understanding of diabetes prevention and treatment. For more than 30 years, Bennett and his colleagues have conducted the most extensive epidemiologic and clinical research ever done to understand noninsulin-dependent diabetes mellitus (NIDDM). The $2,000 Banting award is the highest bestowed by ADA to honor individuals with distinguished careers in the field. It was presented at the Moscone Convention Center in San Francisco, where Bennett gave the 1996 Banting Lecture, "NIDDM: From Epidemiology to Genetics."
Varmus Presents 1996 NIH Honor Awards

NIH director Dr. Harold Varmus will preside at the annual NIH Honor Awards Ceremony, to be held on Friday, June 21 at 1:30 p.m., in the Natcher Bldg. auditorium. The following awards will be made:

The NIH Director’s Award recognizes superior performance or special efforts significantly beyond the regular duty requirements, and directly related to fulfilling the agency’s mission.

**Clinical Center**

Jean M. Harris
Nurse Specialist (Quality Assurance)
Nursing Department
“For your exceptional initiative and leadership, with impact on quality management in coordinating accreditation review in the Clinical Center and the workforce diversity program.”

CC Medical Records Department Group
Jennifer Bayless, Deputy Director
Kimberly J. Jarema, Medical Record Administration Specialist
Jon W. McKeefy, Computer Specialist
Karen K. Phillips, Medical Record Administration Specialist
“For your outstanding administrative support in the development and expansion of intramural research protocol data management services.”

**Division of Research Grants**

**DRG Group Award**
Dr. Calbert A. Laing, Health Scientist Administrator
Dr. Ramesh K. Nayak, Health Scientist Administrator
Lucy Rowser, Lead Grants Technical Assistant
Karen Oden, Grants Technical Assistant
Dr. Raymond E. Bahor, Associate Chief for Referral and Review Branch
Melinda Altman, Grants Technical Assistant
Muriel M. Wade, Grants Technical Assistant
Linda L. Thee, Lead Grants Technical Assistant
“For their resourcefulness and devoted leadership to the ‘Bridge to the Future’ program and their contributions to the development of young minority scientists.”

**DRG Group Award**
Ellen J. Ring, Chief, Networking and Telecommunications Section
Diane D. Christensen, Committee Management Assistant
NaDeL Griffith, Administrative Officer
Fred Wong, Financial Management Officer
Dr. Suzanne Fisher, Health Scientist Administrator
Dr. Elliot Postow, Chief, Technology and Applied Sciences Review Section
Marilyn J. Cuzzolina, Administrative Officer
Matthew S. Burr, Writer-Editor
“For outstanding and resourceful team performance in providing leadership and management of the planning, design and implementation process of the DRG relocation.”

**National Cancer Institute**

**National Cancer Institute**

Dr. Jeffrey S. Abrams, Jr.
Medical Officer, Division of Cancer Treatment, Diagnosis and Centers
“For your leadership in developing and implementing NCI’s clinical announcement regarding the optimal length of adjuvant treatment of early stage breast cancer patients with tamoxifen.”

Richard N. Bamford
Biologist, Division of Clinical Sciences
“In recognition of your codiscovery of cytokine IL-15/IL-7, the definition of its cell surface receptor and demonstration of the role of translation in its expression.”

Mary C. Cushing
Budget Officer, Office of the Director
“In recognition of your dedicated, resourceful leadership in the financial management of the National Cancer Institute.”

Dr. Melinda G. Hollingshead
Veterinary Medical Officer, Division of Cancer Treatment, Diagnosis and Centers
“For the development and implementation of novel in vivo models to advance the cause of new drug development for cancer and AIDS.”

Dr. Dan L. Longo
Associate Director, Division of Cancer Treatment
“In recognition of innovative leadership, resourcefulness and creativity in merging basic and clinical research in the Biological Response Modifiers Program, Division of Cancer Treatment, NCI.”

Dr. Alan Rabson
Deputy Director
“In recognition of his dedication and vision for the pursuit of science which makes NIH a special biomedical research institution.”

Lawrence J. Ray
Deputy Associate Director, Office of Intramural Management
“In recognition of exceptional leadership in coordinating administrative operations necessary to accomplish NCI’s reorganization.”

Dr. Elaine Ron
Epidemiologist, Division of Cancer Epidemiology and Genetics
“For developing a program of international studies that has advanced our knowledge of radiation risks and thyroid cancer.”

Marianne Wagner
Chief, Human Resource Management and Consulting Branch
“In recognition of superb leadership in NCI human resources management activities and initiatives.”

Dr. Shelia Hoar Zahm
Epidemiologist, Division of Cancer Epidemiology and Genetics
“In recognition of your creativity and leadership in developing an innovative program of cancer research on migrant and seasonal farm workers.”

**NCI Group Award**

Tara L. Gilliam, Employee Relations Specialist
Stephen M. Hazen, Chief, Extramural Financial Data Branch
Kay C. Johnson, Equal Opportunity Specialist (NIDCD)
Joan I. Metcalfe, Grants Management Specialist
Alan R. Peigh, Purchasing Agent
Pamela C. Robbins, Lead Purchasing Agent
Debra Stevenson, Public Health Advisor
Nancy Munro, Information Assistant
Corinne Vanchieri, Public Affairs Specialist
Mary Anne Bright, Technical Publications Writer
Catherine Muha, Public Health Advisor
Katja Laepke, Technology Transfer Fellow
Linda Sloan, Technical Writer Editor
Carrie Sullivan, Graduate Intern
“Your exceptional leadership in meeting extraordinary and unprecedented challenges involved in setting up procedures for the Intramural Program of the NCHGR.”

**National Center for Human Genome Research**

Deborah Fountain-Delore
Personnel Management Specialist
“In recognition of your diligence and perseverance in meeting extraordinary and unprecedented challenges involved in setting up procedures for the Intramural Program of the NCHGR.”
Kimberly A. Gayton
Biological Science Technician, Laboratory of Cancer Genetics
"In recognition of your unfailing perseverance, resourcefulness and diligence in meeting the challenges of managing the logistics of the Laboratory of Cancer Genetics, NCHGR."

Dr. Ron G. King
Chief, Office of Technology Transfer
"In recognition of your creativity and leadership in establishing the Office of Technology Transfer at the National Center for Human Genome Research."

Dr. Robert L. Nussbaum
Chief, Laboratory of Genetic Disease Research
"In recognition of your creative leadership within the Division of Intramural Research and in development of the Center for Inherited Disease Research at the NIH."

NCHGR Group Award
Dr. Carol A. Dahl, Health Scientist Administrator, Sequencing Technology Branch
Dr. Robert L. Strausberg, Chief, Sequencing Technology Branch
"In recognition of outstanding achievement in fostering and promoting the DNA sequencing technology development and technology transfer programs at the NCHGR."

National Center for Research Resources
Dr. Bela J. Gulyas
Deputy Director, Office of Review
"In recognition of your leadership, determination, and resourcefulness in the review of applications and management of the Office of Review, NCRR."

Barbara N. Perrone
Deputy Director, Office of Science Policy
"In recognition of your superb performance, resourcefulness, and competence in the management of the Office of Science Policy, NCRR."

Anne E. Summers
Budget Officer
"In recognition of your high level of competence and resourcefulness in developing and tracking all aspects of NCRR's complex budget."

Elijah C. Walker
Director, Scientific Equipment Services Branch, Biomedical Engineering and Instrumentation Program
"In recognition of dedicated, imaginative and effective leadership leading to significantly improved instrumentation services in support of the NIH Intramural Research Program."

Brenda H. Watts
Senior Administrative Officer, Veterinary Resources Program
"For exemplary leadership of administrative services in the Veterinary Resources Program."

National Heart, Lung, and Blood Institute
Robinson Fulwood
Senior Manager for Public Health Program Development
"In recognition of innovative strategies for the translation and dissemination of research advances to improve the health of minority populations."

Barbara Liu
Director, Scientific and Legislation Program
"In recognition of exceptional initiative, creativity, and sustained superior performance and leadership in implementing major activities for NHLBI and NIH interactions with the scientific community."

Dr. Teri A. Manolio
Medical Officer (Research)
"For creative approaches to enhancing the scientific productivity of population-based research and innovations in epidemiologic studies of cardiovascular disease."

Dr. George J. Nemo
Leader, Transfusion Medicine Scientific Research Group
"In recognition of extraordinary foresight and leadership of research programs to ensure the safety of the nation's blood supply."

Dr. Hannah H. Peavy
Medical Officer (Research)
"In recognition of outstanding management of NHLBI basic and clinical pulmonary research programs in AIDS and tuberculosis."

Barry Rubinstein
Personnel Officer
"In recognition of superior leadership and performance in directing the human resource management program of the National Heart, Lung, and Blood Institute."

Dr. George Sopko
Interventional Cardiology Scientific Research Group Leader
"In recognition of exceptional leadership in developing and managing the National Heart, Lung, and Blood Institute's BARI Trial."

LaVerne Stringfield
Supervisory Management Analyst
"In recognition of exemplary leadership in improving and streamlining administrative processes of the National Heart, Lung, and Blood Institute."

Thom C. Turley
Chief, Grants Operations Branch
"For outstanding efforts in development of automated grants management systems promoting overall efficiency of grants management at NIH and for participation in NIH reinvention activities."

Dr. John T. Watson
Bioengineering Scientific Research Group Leader
"In recognition of exceptional leadership in developing and managing the National Heart, Lung, and Blood Institute's extramural bioengineering research programs."

NHLBI Group Award
Dr. Carol H. Letendre, Deputy Director, Division of Blood Diseases and Resources
Rosalin M. Clipper, Equal Employment Specialist
Dr. Richard A. Bjorklund, Program Analyst
Dr. Sonia I. Skarlatos, Health Scientist Administrator
Dr. Sydney C. Selden, Health Scientist Administrator
Doris East, Grants Technical Assistant
"In recognition of your superb leadership and resourcefulness in chairing the National Heart, Lung, and Blood Institute's Human Resource Management Framework Working Group."

National Institute on Aging
Shirley P. Bagley
Assistant Director for Special Programs, Office of the Director
"In recognition of her outstanding contribution to the National Institute on Aging for her research on aging in special populations."

Dr. Miriam F. Kelty
Associate Director, Office of Extramural Affairs
"In recognition of her outstanding leadership role in management of the extramural research program of the National Institute on Aging."

Dr. Edward Lakatta
Chief, Laboratory of Cardiovascular Science Intramural Research Program
"In recognition of his outstanding contribution to the scientific quality and intellectual environment of the intramural research program of the National Institute on Aging."

National Institute on Alcohol Abuse and Alcoholism
Longina Akhtar
Chemist, Laboratory of Neurogenetics Division of Intramural Clinical and Biological Research
"For outstanding contributions to genetic family and population studies on alcoholism, and the collection, banking, and organization of cell lines and DNAs for linkage studies."

Dr. Gayle M. Boyd
Program Director for Research on Youth and the Elderly, Prevention Research Branch, Division of Clinical and Prevention Research
"In recognition of your exemplary leadership and dedication in initiating, expanding, stimulating, and synthesizing NIAAA's prevention research program concerning youth, elderly, family, and rural studies."

Dr. Theodore R. Colburn
Deputy Scientific Director, Division of Intramural Clinical and Biological Research
"In recognition of outstanding service to the National Institutes of Health and to the National Institute on Alcohol Abuse and Alcoholism Intramural Research Program."

(Continued on Page 8)
(Continued from Page 7)

Dr. Joanne B. Fertig
Project Officer, Treatment Research Branch
Division of Clinical and Prevention Research
"In recognition of your competence, initiative and creativity in expanding and enriching the scope of scientific research of effectiveness of treatment for alcoholism."

Cheryl L. Jones
Psychology Technician, Cognitive Neuroscience Section
Laboratory of Clinical Studies
Division of Intramural Clinical and Biological Research
"In recognition of your outstanding effectiveness, creativity, and dedicated support of the Intramural Research Program of the National Institute on Alcohol Abuse and Alcoholism."

Mary A. Foulkes
Supervisory Mathematical Statistician
Biostatistics Research Branch, Division of Acquired Immunodeficiency Syndrome
"In recognition of your outstanding commitment and dedication, and for significant contributions to the field of HIV/AIDS pathogenesis and drug discovery."

Dr. Dennis M. Dixon
Chief, Bacteriology and Mycology Branch
Division of Microbiology and Infectious Diseases
"In recognition of your skillful review of scientific priority and management of monitoring processes in complex clinical trials of therapy for systemic mycotic infections."

Dr. Michael Gottlieb
Microbiologist
Parasitology and International Programs Branch
Division of Microbiology and Infectious Diseases
"In recognition of your exceptional initiative and superb leadership in establishment of the International Centers for Tropical Disease Research Program of the NICHD."

Dr. Kyung J. Kwon-Chung
Head, Molecular Microbiology Section
Laboratory of Clinical Investigation
Division of Intramural Research
"In recognition of achievement in defining molecular and genetic factors responsible for the virulence of fungi that cause serious human diseases."

Dr. Pamela M. McInnes
Neonatal Pathogens and Maternal Immunization Program Officer
Respiratory Diseases Branch
Division of Microbiology and Infectious Diseases
"In recognition of your exceptional leadership in advancing the development and safe implementation of Haemophilus influenzae vaccines."

Dr. Philip M. Murphy
Medical Officer, Laboratory of Host Defenses
Division of Intramural Research
"In recognition of pioneering studies leading to the discovery and cloning of immune system chemokine receptors for MIP-1α, RANTES, and eotaxin."

Dr. Giuseppe Pantaleo
Visiting Scientist, Immunopathogenesis Section, Laboratory of Immunoregulation, Division of Intramural Research
"In recognition of your exceptional research effort to advance our understanding of human immunodeficiency virus pathogenesis."

National Institute of Allergy and Infectious Diseases

Dr. Carl W. Dieffenbach
Associate Director, Basic Sciences Program
Division of Acquired Immunodeficiency Syndrome
"In recognition of your excellence and dedication, and for significant scientific contributions to the field of HIV/AIDS pathogenesis and drug discovery."

Dr. Judith A. Cooper
Chief, Scientific Review Section
Division of Extramural Research
Program Operations Branch
"For exceptional leadership in developing a consensus development conference on the use of antenatal steroids, disseminating the recommendations and assessing their impact on obstetrical practice."

Dr. H. George Hausch
Chief, Scientific Review Section
Program Operations Branch
Division of Extramural Research
"For organizational improvement and efficiency utilizing an extraordinarily high degree of originality, initiative and creativity in proactively leading and building the NIDR Scientific Review Section."

The Record
The Record

June 18, 1996

Jayne P.E. Lura-Brown
Program Assistant, Disease Prevention and Health Promotion Branch, Division of Epidemiology and Oral Disease Prevention Program

"In recognition of creative and energetic planning, executing, evaluating and completing graphic and tabular materials for key scientific and policy presentations and reports."

National Institute of Diabetes and Digestive and Kidney Diseases

Dr. David G. Badman
Hematology Program Director

"In recognition of your resourcefulness in applying electronic technology to extramural programs management, and your leadership in distributing program information via the World Wide Web."

Shirley A. Shores
Chief, Research and Development Contracts Section

"In recognition of your superb leadership and significant contributions to the National Institute of Diabetes and Digestive and Kidney Diseases' contracts program."

Ellen C. Vaughn
Administrative Officer

"For sustained and excellent performance while providing exemplary administrative guidance to the intramural laboratories of the National Institute of Diabetes and Digestive and Kidney Diseases."

National Institute on Drug Abuse

Dr. Khursheed Asghar
Chief, Basic Sciences Review Branch, Office of Extramural Program Review

"In recognition of leadership, dedication, and outstanding effort in managing the review of multiple, high priority new initiatives and a record-breaking number of grant applications."

Helen K. Cesarri
Public Health Advisor, Community Research Branch, Division of Epidemiology and Prevention Research

"In recognition of outstanding leadership, resourcefulness and extraordinary contribution to the development of NIDA's extramural HIV prevention research program."

Suzanne M. Cole
Chief, Management Analysis and Services Branch, Office of Planning and Resource Management

"In recognition of substantial contributions in improving and enhancing the administrative processes for the National Institute on Drug Abuse."

Dr. Timothy P. Condon
Acting Deputy Director, Office of Science Policy and Communications

"In recognition of outstanding leadership in expanding the infrastructure for drug abuse research training and in establishing new relationships between NIDA and the scientific community at-large."

Jurij Mojsiak
Pharmacologist, Clinical Trials Branch, Medications Development Division

"For exceptionally thorough solicitation, review, and implementation of NIDA-funded Medications Research Units at VA Medical Centers on the development of pharmacologic treatments for cocaine dependence."

Chanvadey Nhim
Administrative Technician, Management Analysis and Services Branch, Office of Planning and Resource Management

"In recognition of exemplary performance and many contributions in support of the administrative activities of the National Institute on Drug Abuse."

National Institute of Environmental Health Sciences

Dr. Raymond W. Tennant
Chief, Laboratory of Environmental Carcinogenesis and Mutagenesis

"For pioneering the use of transgenic mouse models in the identification of environmental carcinogens and defining mechanisms of cancer induction."

NIEHS Group Award
Susan P. Johnson, Administrative Technician
Marcia M. Soward, Management Systems and Policies Coordinator
Charles E. Leasure, Jr., Associate Director for Management
Brenda L. Deck, Secretary
Nancy E. Stark, Management Analyst
Donna L. Ratcliff, Secretary

"For initiating, implementing, and providing leadership in activities contributing to well-being of NIEHS employees, and to an environment conducive to the highest achievements in science."

NIEHS Group Award
Patricia W. Lamb, Biologist
Dr. J. Carl Barrett, Chief, Laboratory of Molecular Carcinogenesis, Scientific Director
Dr. Alicia E. White, IRITA Fellow
Dr. Jin-Tang Dong, Visiting Fellow

"For isolating the prostate cancer metastasis suppressor gene, KAI1, which may be the foundation for new approaches in diagnosis, treatment, and prevention of such cancers."

National Institute of General Medical Sciences

Dr. Warren C. Jones
Chief, Biochemistry and Biorelated Chemistry Branch, Division of Pharmacology, Physiology, and Biological Chemistry, Office of the Director

"In recognition of exemplary initiative and resourcefulness displayed while developing proposals aimed at enhancing the National Institute of General Medical Sciences' scientific program operations."

Dr. James B. Onken
Chief, Office of Program Analysis and Evaluation
Office of the Director

"In recognition of your dedication, statistical expertise, and ingenuity displayed while coordinating program analysis and evaluation activities for the National Institute of General Medical Sciences."

Yvonne G. Williams
Secretary (Office Automation)
Grants Administration Branch
Division of Extramural Activities
Office of the Director

"In recognition of exceptional resourcefulness, creativity, and leadership skills demonstrated in the administrative management of the National Institute of General Medical Sciences."

National Institute of Mental Health

Dr. L. Eugene Arnold
Special Expert, Child and Adolescent Disorders Research Branch
Division of Clinical and Treatment Research

"In recognition of organization, facilitation, and coordination of the Multimodal Treatment Study of Children with ADHD, which will inform clinical practice for years to come."

Dr. Mary C. Blehar
Chief, Mood, Anxiety and Personality Disorders Research Branch
Division of Clinical and Treatment Research

"In recognition of advancing the understanding of mood, anxiety and personality disorders through research and program development."

Olga Boikes
Senior Advisor to the Executive Officer, Office of Resource Management

"For her many outstanding contributions to assuring the quality and effectiveness of NIMH program activities, while reducing government costs."

(Continued on Page 10)
NIMH Development of Committee Financial Management System
Division of Extramural Activities
Jacqueline E. Sanders, Chief, Information Management and Analysis Branch
Office of Resource Management
Dr. Alfred Bruner, Chief, Neuroscience Review Branch
Bronwyn O. Dwyer, Administrative Technician
Joanna L. Kiefle, Committee Management Officer
In recognition of outstanding initiative, creativity, and sustained contributions toward the development and implementation of an automated consultant reimbursement and reporting system.

Homepage Development Group
Office of Scientific Information
Information Resources and Inquiries Branch
Louise C. Marshall, Technical Information Specialist
Anthony N. Strong, Computer Assistant
Joan G. Abell, Chief, Information Resources and Inquiries Branch
For exemplary leadership in electronic dissemination of information on mental health research programs.

Peptide-T Clinical Trials, Office on AIDS
Olga Boikess, Senior Advisor to the Executive Officer, Office of Resource Management
Dr. Ellen Stover, Director, Office on AIDS
Dr. Benedetto Vitiello, Medical Officer, Office on AIDS
Dr. Walter Goldschmidt, Microbiologist, Office on AIDS
David J. Eskenazi, Chief, Contracts Management Branch, Office of Resource Management
In recognition of outstanding dedication and work in ensuring the safe and thorough evaluation of an experimental AIDS therapeutic agent.

National Institute of Neurological Disorders and Stroke
Byron Mason
Administrative Officer, Basic Neurosciences Program, Division of Intramural Research
For consistently using standards of excellence in the administration of the Intramural Research Program, National Institute of Neurological Disorders and Stroke.

Dr. Ronald D. McKay
Visiting Scientist and Acting Chief, Laboratory of Molecular Biology
Basic Neurosciences Program
Division of Intramural Research
For major contributions to our understanding of multipotent stem cells in the adult and embryonic nervous system and the signals that regulate their fates.

Ruth R. O’Reilly
Secretary, Clinical Neuroscience Program Division of Intramural Research
For sustained, exemplary performance in administrative management of the Office of the Clinical Director and 11 other branches of the Clinical Neuroscience Program, NINDS.

James A. Stoneman
Administrative Officer
Division of Extramural Activities
For recognition of his sustained superior performance in the administrative and financial services provided to the extramural divisions of NINDS.

National Library of Medicine
Dr. Michael Ackerman
Assistant Director for High Performance Computing and Communications, Lister Hill National Center for Biomedical Communications
For leadership of the Virtual Human project, culminating in the release to the scientific community of two immense datasets representing a 3-dimensional male and female.

Office of Research Services
ORS Group Award
Occupational Safety and Health Branch
Division of Safety
Rosamond A. Rutledge-Burns, Supervisory Safety and Occupational Health Manager
Lisa J. Flynn, Safety and Occupational Health Specialist
Ronald Trower, Safety and Occupational Health Manager
Polly J. McCarty, Safety and Occupational Health Specialist
Cassie K. Yang, Safety and Occupational Health Specialist
Cdr. Deborah E. Wilson, Safety and Occupational Health Manager
John L. Barnhart, Safety and Occupational Health Specialist
Edward F. Sorenson, III, Safety and Occupational Health Specialist
Suzanne E. Hughes, Safety and Occupational Health Specialist
Gail L. Katz, Safety and Occupational Health Specialist
Kathy K. Lock, Safety and Occupational Health Specialist
For demonstrating exceptional initiative and leadership throughout an investigation of a potential biologic hazard.
Arturo Giron
Assistant Director, Office of Quality Development

"In recognition of superb leadership and resourcefulness in supporting the associate director for research services in the Office of Research Services' extensive streamlining initiatives."

Paul R. Horton
Director, Division of Space and Facility Management

"For exemplary leadership and innovative management of the Division of Space and Facility Management, Office of Research Services at the National Institutes of Health."

Stella Serras-Fiotes
Master Planner, Facilities Planning and Programming Branch, Division of Engineering Services

"In recognition of outstanding leadership and resourcefulness in planning and programming the Master Plan for the Bethesda campus of the National Institutes of Health."

ORS Group Award, Combined Radiation Safety and Occupational Safety and Health Branches, Division of Safety

Rosamond A. Rutledge-Burns, Supervisory Safety and Occupational Health Manager

"For distinguished, successful leadership as acting director, NIMH, during an extended period, with budgetary constraints and unprecedented attacks on NIMH's scientific programs."

F. William Dommel, Jr.
Senior Policy Advisor, Office for Protection from Research Risks, Office of Extramural Research

"For leadership as chairman, Public Health Service Human Subject Regulation Drafting Committee, in protecting research involving pregnant women, fetuses, and human ova fertilized in vitro."

John E. Green, Jr.
Warehouse Worker Foreman, Office of Logistics Management

"In recognition of dedication, expertise and follow-up on the site selection and relocation to the Gaithersburg Distribution Center."

Marvene S. Horwitz
Assistant Director, Office of Human Resource Management

"For outstanding contributions to the development and realization of a visionary program of human resource management for the National Institutes of Health."

Clarence W. Jackson, Jr.
Supervisory Procurement Analyst, Office of Procurement Management

"In recognition of outstanding contributions to the Clinical Center's small purchasing operations."

Donald L. Kemp
Procurement Analyst, Office of Procurement Management

"For superior foresight, initiative and leadership in the development of the purchase card program at NIH, which has resulted in cost savings and improved responsiveness."

Montrue E. Nelson
Personnel Assistant, Division of Senior Systems, Office of Human Resource Management

"For your contributions in providing exceptional service to the National Institutes of Health community."

Gloria H. Richmond
Patent Advisor, Office of Technology Transfer

"In recognition of a career of sustained excellent performance and dedication to the formulation and improvement of the National Institutes of Health patent operations."

Theodore J. Roumel
Assistant Director, Office of Technology Transfer

"In recognition of your outstanding contribution to the NIH by developing points for consideration for NIH grantees and contractors entering into sponsored program agreements."

Dr. Belinda Seto
Senior Advisor to the Deputy Director for Extramural Research Office of Extramural Research

"For outstanding coordination of the Office of Extramural Research comprehensive review of the management of Phase II Clinical Trials supported by the NIH."

Martina A. Vogel
Program Analyst, Office of Disease Prevention

"In recognition of outstanding contributions to further disease prevention research and the relevant sciences of epidemiology and biometry."

Dr. Paul T. Wingfield
Chief, Protein Expression Laboratory, Office of Intramural Research

"In recognition of valuable scientific contributions to the NIH intramural community through the establishment and successful leadership of the Protein Expression Laboratory."

Leo F. Wright
Motor Vehicle Operator, Office of Logistics Management

"For your work in simplifying and streamlining processes and procedures related to the Senior Executive Service at the National Institutes of Health."

Office of Human Resource Management Group

Frederick C. Walker, Director, Division of Senior Systems

Mary W. Blitz, Personnel Management Specialist, Division of Senior Systems

Carmen Garcia, Personnel Management Specialist, Division of Senior Systems

Richard Drury, Director, Division of Human Resource Systems

"For exceptional foresight and initiative in advancing efforts to enhance the National Institutes of Health's ability to measure and communicate the benefits of biomedical research."

Office of Science Policy Group

James Schuttinga, Economist, Division of Science Policy Analysis

Dr. Suzanne Medgyesi-Mitschang, Division Director, Division of Science Policy Analysis and Development

Margaret Schnoor, Program Analyst, Division of Science Policy Analysis

Sarah Carr, Program Analyst, Division of Science Policy Analysis and Development

Dr. Mary E. Groesch, Health Science Policy Analyst, Division of Science Policy Analysis and Development

Elyssa Tran, Health Science Policy Analyst, Division of Science Policy Analysis

"For exceptional foresight and initiative in advancing efforts to enhance the National Institutes of Health's ability to measure and communicate the benefits of biomedical research."

(Continued on Page 12)
OD Group Award
Edward M. Donohue, Deputy Director, Extramural Program, NINDS
Dr. Miriam C. Kelty, Associate Director, Office of Extramural Affairs, NIA
Dr. Michael Fordis, Medical Officer, OD
Dr. Anne Sassaman, Director, Division of Extramural Research and Training, NIEHS
Dr. Walter T. Schaffer, Director, Research Training and Special Program Office, Office of Extramural Research, OD
Dr. Donna J. Dean, Supervisory Health Scientist Administrator, DRG
Dr. Julia B. Freeman, Health Scientist Administrator, NIAMS
Dr. Judith E. Fradkin, Branch Chief, Office of Research on Women’s Health, OD

For exceptional leadership in the innovative design and successful implementation of the Reentry Scientists Program.

Office of Extramural Research Group
Barbara A. Nolte, Program Analyst
Dr. Louis R. Sibal, Health Scientist Administrator
Nancy P. Avis, Secretary (Office Automation)

For sustained and exceptional performance in developing and implementing improvements in the coordination of NIH-wide extramural program activities.

Office of Research on Minority Health Group
Dr. Lorrita P. Watson, Minority Programs Coordinator
Dr. David A. Wolff, Minority Health Policy Analyst

In recognition of an outstanding contribution to the Office of Research on Minority Health in the area of policy development for research on minority health training programs.

OD Group Award
Dr. Donna J. Dean, Supervisory Health Scientist Administrator, DRG
Dr. Richard L. Mowery, Supervisory Health Scientist Administrator, NCI

For exceptional service and creative leadership as cochair of the Research Subcommittee of the Coordinating Committee on Research on Women's Health.

Office of Technology Transfer Group
Susan A. Rucker, Patent Advisor
Dr. Jack Spiegel, Director, Division of Technology Development and Transfer

In recognition of outstanding performance, under tight time constraints, to analyze and preserve DHHS intellectual property rights under the new General Agreement on Tariffs and Trade.

OD Group Award
Sue S. Ohata, Special Assistant to the Associate Director for Extramural Affairs, Office of Extramural Research, OD
Dr. Harold T. Saiferstein, Technology Development Coordinator, Office of Administrative Management, NHLBI
Dr. George C. Stone, Health Scientist Administrator, Office of Policy on Extramural Research Administration, Office of Extramural Research, OD

For developing a highly innovative invention reporting system that makes use of the latest technology and facilitates grantee compliance with the Bayh-Dole Act.

PHS Commissioned Corps Awards
The Distinguished Service Medal is the highest award given to a PHS Commissioned Officer. It is presented to an officer who has exhibited an exceedingly high level of achievement and a genuine sense of public service through outstanding contributions to the PHS mission.

National Cancer Institute
Capt. Mitchell H. Gail
Chief, Biostatistics Branch

For sustained research excellence in medical statistics, and for leadership in a program of epidemiology and statistical methodology.

The Meritorious Service Medal is the second highest Commissioned Corps honor award granted to an officer. It recognizes a single, particularly important achievement; a career notable for accomplishments in technical or professional fields; or unusually high quality and initiative in leadership.

Clinical Center
Cdr. Carol A. Romano
Director, Clinical Systems and Research Support

For contributions to the PHS toward improving the quality and efficiency of management and delivery of health care services through creative use of information technology.

National Cancer Institute
Capt. Leslie G. Ford
Chief, Community Oncology and Rehabilitation Branch

For directing and defending the Breast Cancer Prevention Trial with exemplary responsiveness and resourcefulness during multiple crises and ensuring the scientific integrity of the study.

Capt. Jerry M. Rice
Associate Director for Frederick Cancer Research Facility and Acting Director, Division of Cancer Etiology

For outstanding contributions to the field of cancer etiology and prevention in both laboratory research and science administration.

National Heart, Lung, and Blood Institute
Capt. Robert J. Garrison
Leader, Field Studies and Biometry Scientific Research Group

For a distinguished career in initiating and directing long-term epidemiologic studies of cardiovascular disease including the decade-long Framingham and Honolulu Heart studies.

Capt. Michael J. Horan
Director, Division of Heart and Vascular Diseases

For sustained exceptional leadership in the management of a national program in cardiovascular research, including significant advances in human genetics research.

National Institute of Allergy and Infectious Diseases
Capt. Thomas C. Quinn
Chief, AIDS International Section

For distinguished leadership of the International HIV/AIDS Program of the NIAID and for innovative research in the field of AIDS.

National Institute of Dental Research
Capt. Lynn J. Brown
Director, Epidemiology and Oral Disease Prevention Program

For sustained excellence in dental research and outstanding leadership of the NIDR's research program in orofacial epidemiology.

Capt. Dushanka V. Kleinman
Deputy Director, NIDR

For exemplary accomplishments and leadership in advancing the mission of the National Institute of Dental Research, while serving as acting director during 1994 and 1995.

National Institute of Diabetes and Digestive and Kidney Diseases
Capt. Griffin P. Rodgers
Chief, Molecular Hematology Section

For outstanding contributions to elucidating the pathophysiology of sickle cell disease and developing new therapies for this and other genetic hematological diseases.

National Institute of Neurological Disorders and Stroke
Capt. Norman W. Barton
Chief, Clinical Investigations and Therapeutics Section

For internationally recognized contributions and leadership in the development of therapeutic approaches to hereditary lipid storage disorders and the methodology necessary to assess treatment responses.

Capt. Thomas N. Chase
Chief, Experimental Therapeutics Branch

For sustained contributions to the development of improved pharmacotherapies for Parkinson's disease.
The Outstanding Service Medal is presented to commissioned officers who have demonstrated outstanding continuous leadership in carrying out the PHS mission; performed a single accomplishment that has had a major effect on the health of the nation; or performed a heroic act resulting in the preservation of health or property.

National Cancer Institute
Capt. Charles H. Evans, Jr.
Chief, Tumor Biology Section
"For continuous outstanding leadership in the development of fundamental and translational biomedical laboratory research into understanding the ability of the immune system to inhibit the development of cancer."

Capt. Thomas J. Walsh
Lead Clinical Investigator
"For sustained and outstanding advances in the treatment, prevention, and diagnosis of invasive fungal infections in children with cancer and HIV infection."

National Heart, Lung, and Blood Institute
Cdr. Helena O. Mishoe
Health Scientist Administrator
"For sustained outstanding leadership in the development of innovative programs to advance research in cellular hematol ogy and unrelenting efforts to promote excellence in PHS Minority Programs."

National Institute on Aging
Capt. Stanley L. Slater
Deputy Associate Director, Geriatrics Program
"For exemplary performance in the development and management of clinical aging research programs."

National Institute on Alcohol Abuse and Alcoholism
Cdr. David Goldman
Chief, Laboratory of Neurogenetics
"For outstanding scientific leadership in genetic studies on alcoholism and identification of nonconservative amino acid substitutions in candidate genes for alcoholism."

National Institute of Allergy and Infectious Diseases
Capt. Thomas B. Nutman
Senior Investigator, Laboratory of Parasitic Diseases
"For major accomplishments in identifying the mechanisms underlying protective immunity to filarial infections and for insights into the allergic diseases."

Cdr. Sharilyn K. Stanley
Senior Clinical Investigator
"For outstanding contributions in the study of the immunopathogenesis of human immunodeficiency virus (HIV)."

National Institute of Dental Research
Capt. Tullio F. Albertini
Special Assistant for Program Management
"For exceptional leadership and commitment to the science management of NIDR’s Epidemiology and Oral Disease Prevention Program and to the dental and health programs of PHS."

National Institute on Drug Abuse
Capt. Rebecca S. Ashery
Senior Social Work Specialty Consultant
"For exceptional contributions to the field of drug abuse in the areas of community and prevention research, AIDS education, technology transfer and women’s issues."

Capt. Chung-Yui B. Tai
Chief, Regulatory Affairs Branch
"For outstanding continuous leadership in the establishment of a Clinical Cocaine Treatment Program."

National Institute of Mental Health
Capt. Barry J. Richmond
Research Medical Officer
"For pioneering work in developing the field of computational neuroscience."

Office of Research Services
Capt. Terry L. Christensen
Senior Civil/Environmental Engineer
"For outstanding career contributions in environmental safety while serving with the National Institutes of Health and the Indian Health Service."

Office of the Director
Cdr. Joyanne P. Murphy
Senior Program Management Officer
"For exceptional service to the NIH and the Commissioned Corps in her role as Chief, COS, System and Actions Branch, Division of Personnel Management, NIH."

The PHS Outstanding Unit Citation is presented to officers who exhibit superior service toward achieving the goals and objectives of the Public Health Service. This award requires the performance of exceptional service of national or international significance.

National Institute of Mental Health
NIMH Research Workshop on Insurance Coverage for the Severely Ill Division of Epidemiology and Services Research
Capt. Darrel A. Regier
Cdr. William E. Narrow
"For outstanding scientific analysis supporting the development and implementation of the National Advisory Mental Health Council Report on Severe Mental Illnesses to the Senate Appropriations Committee."

Equal Opportunity Awards
The Harvey J. Bullock, Jr. Award for Equal Opportunity Achievement honors an individual who has demonstrated outstanding efforts and achievements in furthering equal opportunity at NIH.

George Martin
Senior Building Engineer
Division of Engineering Services
Office of Research Services
"For dedication and commitment to the spirit of equality through selfless giving and by assisting those in need in the workplace and community."

The NIH Equal Employment Opportunity Award of the Year recognizes an individual who has clearly excelled in actively and effectively furthering equal employment opportunity.

Dr. John L. Fakunding
Health Scientist Administrator
Division of Heart and Vascular Diseases
National Heart, Lung, and Blood Institute
"For outstanding innovation and achievement in promoting diversity among extramural researchers supported by the National Heart, Lung, and Blood Institute."

PHS COMMISSIONED CORPS

Commendation Medal and Unit Commendation
The following NIH Commissioned Corps officers were approved by the director, NIH, to receive the PHS Commendation Medal and the PHS Unit Commendation. These awards are presented at the ICD level.

PHS Commendation Medal

Clinical Center
Cdr. Mary Andrich
Cdr. Jennifer Bayless
Lcdr. Maureen Farley
Lcdr. Maureen Gormley
Cdr. McDonald Horne
Cdr. Katherine Matrakas
Lt. Karen Vorsteg
Division of Computer Research and Technology
Capt. Robert Klein

National Cancer Institute
Cdr. Patricia Brown
Lcdr. Neil Caporaso
Cdr. Edward Chu
Capt. Sylvan Green
Cdr. Glenn Hegamyer
Lcdr. Peter Ho
Cdr. Carl Huntley
Cdr. Steven Mark
Lcdr. Michael Montello
Cdr. Nathaniel Rothman
Cdr. Malcolm Smith
Capt. Harvey Stein
Cdr. Barton Weick
Capt. John Weinstein

National Center for Research Resources
Cdr. Axel Wolff

National Heart, Lung, and Blood Institute
Cdr. Rekha Garg

National Institute on Alcohol Abuse and Alcoholism
Cdr. Lura Abbott

(Continued on Page 14)
Native American Students Visit NIEHS

NIEHS recently expanded the scope of its educational outreach, opening its doors to a group of Native American students from all over central North Carolina. The visit was arranged by the Equal Employment Office and the North Carolina Indian Affairs Commission.

The students were shown various career options in science and particularly environmental science. In the introductory session, Dr. Jerry Yakel told the group about his own Native American background and his research involving neurons in the brain. Dr. Carl Barrett, scientific director, talked about what an exciting time this is in the sciences.

Visits to a number of laboratories gave the students insight into how the scientists became interested in careers in science and the challenges they face in reaching their personal and professional goals. The scientists involved—Dr. Cynthia Afshari, Dr. John Roberts, Pat Murray, Astrid Haugen-Strano and Pat Stockton—explained the research conducted in each laboratory and many provided hands-on experience with a piece of equipment or a technique.

BRCA2 Mutations Tied to Few Sporadic Breast Cancers

Mutations of the breast cancer gene BRCA2, like those of the first-identified BRCAl, seldom appear to be involved in sporadic, noninherited breast cancer and ovarian cancer—the 95 percent that does not run in families.

The results were reported in the June issue of *Nature Genetics* by British physician Johnathan Lancaster, a research fellow at NIEHS, and Dr. Andrew Futreal of Duke Comprehensive Cancer Center, as well as the Institute of Cancer Research in Surrey, UK. In their study of 70 sporadic breast cancers and 55 ovarian cancers, the scientists found alterations of the gene in only two of the breast cancers and none of the ovarian cancers.

Some of the same Duke and NIEHS researchers reported recently that BRCA2 was linked to fewer inherited breast cancers than had been predicted before the gene was isolated. This additional finding that its mutations are seldom found in sporadic breast cancer might be seen as reducing the importance of BRCA2, but Lancaster said that finding few mutations does not necessarily mean that BRCA2 has no role in sporadic breast cancers, but that something other than classic mutations of this gene may be responsible.
**OHRM Training Tips**

OHRM’s Division of Workforce Development offers the following courses:

<table>
<thead>
<tr>
<th>Courses and Programs</th>
<th>Starting Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management and Supervisory</td>
<td></td>
</tr>
<tr>
<td>The Winning Leader</td>
<td>6/19-21</td>
</tr>
<tr>
<td>Working with Personal Differences for Technical Staff</td>
<td>6/20-21</td>
</tr>
<tr>
<td>Effective Supervision: A New Role Perspective</td>
<td>6/25-28</td>
</tr>
<tr>
<td>Interacting with Difficult Employees</td>
<td>6/27</td>
</tr>
<tr>
<td>Assertive Leadership</td>
<td>7/16-17</td>
</tr>
<tr>
<td>Managing and Valuing Diversity: Working with Personal Differences</td>
<td>7/18-19</td>
</tr>
<tr>
<td>Budget Execution</td>
<td>7/29</td>
</tr>
<tr>
<td>Effective Executive Speaking</td>
<td>8/6</td>
</tr>
<tr>
<td>Budget Formulation</td>
<td>8/7</td>
</tr>
<tr>
<td>Coaching Skills for the 21st Century</td>
<td>8/13</td>
</tr>
<tr>
<td>Administrative Skills Development</td>
<td></td>
</tr>
<tr>
<td>Leadership and Management Skills</td>
<td>6/24-25</td>
</tr>
<tr>
<td>Creating and Maintaining Filing Systems</td>
<td>6/27</td>
</tr>
<tr>
<td>Motivating Yourself for Peak Performance</td>
<td>7/18</td>
</tr>
<tr>
<td>NIH Correspondence: Letter and Memo Preparation</td>
<td>7/19</td>
</tr>
<tr>
<td>Administrative Systems</td>
<td></td>
</tr>
<tr>
<td>Foreign Travel</td>
<td>6/20-21</td>
</tr>
<tr>
<td>Basic Time and Attendance Using TAIMS</td>
<td>6/24-26</td>
</tr>
<tr>
<td>Delegated Acquisition Training Program</td>
<td>7/8-12</td>
</tr>
<tr>
<td>Domestic Travel</td>
<td>7/15-17</td>
</tr>
<tr>
<td>Human Resource Management</td>
<td></td>
</tr>
<tr>
<td>KSA Methodology</td>
<td>6/24</td>
</tr>
<tr>
<td>Intro to Position Classification</td>
<td>8/5</td>
</tr>
<tr>
<td>Communication Skills</td>
<td></td>
</tr>
<tr>
<td>Communication Strategies for Leaders</td>
<td>7/9</td>
</tr>
<tr>
<td>Effective Listening &amp; Memory Development</td>
<td>8/8</td>
</tr>
<tr>
<td>Writing in E-Mail Environment</td>
<td>7/17</td>
</tr>
<tr>
<td>Writing for Results</td>
<td>7/25</td>
</tr>
<tr>
<td>Presentation Skills with PowerPoint 4.0</td>
<td>7/6</td>
</tr>
<tr>
<td>Special Courses</td>
<td></td>
</tr>
<tr>
<td>NIH Retirement Seminar</td>
<td>8/12</td>
</tr>
</tbody>
</table>

**The NIH Life Sciences Education Connection**

The 1996 NIH Mini-Med School’s recently concluded 9-week program didn’t succumb in silence. On June 13, following the lecture by NCHGR director Dr. Francis Collins, a graduation ceremony—complete with “pomp and circumstance,” speeches, and even a play about genetics—turned lawyers, homemakers, retirees, and truck drivers into official Mini-Med School graduates. The third annual Mini-Med School welcomed 12 NIH biomedical researchers and institute directors to inform (and even entertain) the 225-member audience—many of whom had waited 2 years for an opening in the class. The 2-hour lectures were held on Thursday evenings at the Clinical Center.

Mirroring the courses typical of a med student’s first 2 years, the program—directed by Dr. Bruce Fuchs and coordi-

nated by Ellen Orjala of the Office of Science Education—kicked off with anatomy, biochemistry, microbiology, and immunology, and a discussion of AIDS. Subsequent lectures involved the brain, heart, genetics, and health policy.

As in previous years, this season’s faculty boasted some of the most accomplished people at NIH. In addition to Collins, it included institute directors Dr. Alan Leshner of NIDA, and Dr. Enoch Gordis of NIAAA. Dr. David Pickar, who oversees research into new psychiatric drugs at NIMH, and Dr. Paula Gregory, chief of NCHGR’s Genetics Education Office, are three-time speakers.

May 23 at NIH and will tour area schools next fall.

NIH’s Mini-Med School is modeled after a similar program Fuchs developed at the Medical College of Virginia in Richmond in 1992. As a result of the overwhelming success of these programs, he has consulted on the initial development of several new Mini-Med Schools, including one at the University of Illinois School of Medicine at Peoria and another at the University of North Carolina at Chapel Hill.

Plans for fall and spring Mini-Med Schools are under way. For details about locations and subject matter, call Ellen Orjala, 2-2469.—Michele R. Bupp

---

**Le Club Français**

Si vous parlez bien français venez pour une soirée de conversation, dégustation et ambiance française 1er & 3ème mercredi, de 20h à 22h, NIH’s Federal Bldg., 7550 Wisconsin Ave., Bethesda. Pour renseignements téléphonez à Le Club Français à 438-8625.

---

**Kaiser Permanente Health Plan Day, June 27**

Kaiser Permanente Health Plan will be on the NIH campus Thursday, June 27 to assist enrollees who have claims or enrollment problems or questions. A Kaiser representative will be available from 10 a.m. to noon in Bldg. 31C, Conf. Rm. 7 and from 1 to 3 p.m. in Bldg. 38, Conf. Rm. B. No appointment is necessary. Assistance will be provided on a first-come, first-served basis. It is anticipated that Kaiser will be at NIH the fourth Thursday of each month.
Conference on Microbial Ecology, July 10-12

Common principles governing how microorganisms interact with their external environment is the topic of an upcoming conference on "Microbial Ecology and Infectious Disease," cosponsored by NIDR, NIAID, and CBER/FDA. It will take place July 10-12 at the Pooks Hill Marriott grand ballroom.

Among the topics to be addressed are interactions between adhesins and receptors, avoidance of host defense mechanisms, signaling within large populations of bacteria, and bacterial growth in complex environments. Speakers include Drs. Joshua Lederberg and Elaine Tuomanen, Rockefeller University; John Collier and John Mekalanos, Harvard Medical School; Julian Davies, University of British Columbia; Ananda Chakrabarty, University of Illinois at Chicago Medical Center; Barbara Iglewski, Rochester University; and Jorge Galan, State University of New York at Stony Brook.

Registration forms are available in Bldg. 16 (Stone House), Rm. 202A. For more information call Dr. Jack Schmidt, 6-4161; email: schmidtj@box-s.nih.gov.

New, Used Medical Equipment Needed

The Washington Area Wheelchair Society is having a summer drive for new and used medical equipment. The society is a volunteer-based, nonprofit organization dedicated to providing durable medical equipment for the needy throughout the entire metropolitan area. All sorts of equipment are needed—everything from wheelchairs and walkers to canes and crutches—even such basic items as orthopedic cushions, bed rails, transfer boards and office supplies are sought. Equipment does not need to be in perfect shape, and equipment parts can be useful; the society repairs, refurbishes and, if necessary, stores equipment prior to distributing it to those in need.

The society is also seeking volunteers for many different activities; drivers with vans are especially sought. Funding and equipment come from individuals, groups and corporations. All contributions are welcome and donations are tax-deductible. The office is located at 912 Thayer Ave., #108, Silver Spring, MD 20910-4570. For more information, call (301) 495-0277.

Dr. Philip C. Fox was recently named NIDR clinical director. He joined NIDR in 1976 as a clinical associate and for the past 7 years has served as chief of the institute’s clinical investigations section. He is board-certified in oral medicine. One of his first priorities is to expand the NIDR Oral Medicine Training Program to enhance research opportunities available to participating fellows. He will also encourage basic scientists at NIDR to move research findings into the clinical arena more rapidly.

Wednesday Afternoon Series Semester Ends

The final Wednesday Afternoon Lecture of the season takes place on June 26 at 3 p.m. in Masur Auditorium, Bldg. 10, when Dr. Jurg P. Rosenbusch visits to discuss “Molecular Pathology of Channel-Forming Transmembrane Proteins at Atomic Resolution.” He is professor of biochemistry, department of microbiology, Biozentrum, University of Basel, Switzerland, and will be hosted by the Structural Biology Interest Group.

The series then goes on summer vacation—no lectures in July or August—until Sept. 4, when the series resumes with the NIH Director’s Cultural Lecture, to be given by Dr. Deborah Tannen, professor, department of linguistics, Georgetown University. Her topic will be “Women and Men in Conversation: A Linguistic Approach.”

For more information or reasonable accommodation, call Hilda Madine, 4-5595.

For those not up for a morning run, the 1-mile Fun Walk was the ticket to healthy outdoor activity.

Postmenopausal Vols Needed

The Cardiology Branch, NHLBI, needs postmenopausal volunteers for an outpatient study comparing estrogen and lipid-lowering therapies. Participants must not be taking any medications, hormone replacements or vitamins or must be willing to stop medications for 2 months. Volunteers will be paid. Call Rita Mincemoyer, 6-3666.