



FEBRUARY 7, 2006

COMMITTEE NEWS HOLD THE DATE
STAYING IN TOUCH: CDC ALUMNI CONNECTION
CONDOLENCES GET WELL
A BIRTHDAY OF NOTE HAVE YOU HEARD?
TRANSFERS/PROMOTIONS/ TDYs NEW ADDRESSES:
WHERE'S OLE/ WHAT'S HIS/HER NAME?
CDC CONNECTS JOB ANNOUNCEMENTS
SHARE INFO RETIREMENT LIST



COMMITTEE NEWS:

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE MEETING - all are invited to call in and participate.

FEBRUARY 21, 2006 2:30-4:00 pm

Where: 6B Bldg. 8 (Corp. Sq.)

Call In: Toll free #: 866-732-9603, Passcode 873632

Executive Committee Meeting is open to all

NOTE: SOCIAL THURSDAY, February 23,

PLACE: **FUZZY'S PLACE**

2015 N. Druid Hills Rd., NE Atlanta, GA 30329

404-321-6166

{Between Buford Highway and I-85}

TIME: 5-8 pm

Come join your fellow Watsonian members for a good time, open to all- bring a friend .



\$

A NOTE FROM THE TREASURER- Kathryn Koski:

Dear Watsonian Member:

It's time again for renewing membership dues. If you are not sure whether your dues are current, please let me know The dues costs are as follows:

Public Health Advisors:

\$15 for one year (active and retired)

\$40 for three years (active and retired)

Associates:

\$6 for one year

\$15 for three years

In addition, we have a **Lifetime Membership**, with eligibility as follows:

LIFETIME MEMBERSHIP ELIGIBILITY:

1. Members in good standing during the previous five years.
2. Member meets the minimum age requirement, at least 52 years of age as of Jan.1.
3. Lifetime membership application is submitted during the first quarter of each calendar year (January-March).
4. Lifetime membership application includes payment in full.
5. Member will have 15 days after application and payment is submitted to rescind their decision and obtain a full refund.

Lifetime Membership Options:

Option A: Members who are 52-59 years of age as of January 1, may exercise the Lifetime Membership Option with a one-time payment of \$225.00.

Option B: Members who are 60-69 years of age as of January 1, may exercise the Lifetime Membership Option with a one-time payment of \$150.00.

Option C: Members who are 70+ years of age as of January 1, may exercise the Lifetime Membership Option with a one-time payment of \$75.00.

For new members, there is a one-time initiation cost of \$10 (\$5 for associate members), **plus** the appropriate annual dues.

For those who have fallen behind in paying dues, there is a \$5 reinstatement fee.

Please remit your 2006 Watsonian Society dues payment to the following address by **NO LATER THAN March 31, 2006:**

The Watsonian Society

P.O. Box 95032

Atlanta, GA 30347-0032

Thank you in advance for your continued membership in the Watsonian Society. If you have questions, please let me know.

Kathryn Koski

Treasurer, Watsonian Society

~~~~~  
**HOLD THE DATE:**

**The Watsonian Society is sponsoring a  
Public Health Recruitment Conference**

Saturday, March 25, 2006 at 9 a.m.

Marriott Century Center Hotel, Atlanta, GA

Plan to attend if you are retired or planning retirement. Or, you may just be interested in exploring the exciting and rewarding opportunities that are available to skilled professionals seeking a career change.

There will be approximately 12 consultant companies on-site who would like to discuss full/part-time positions and project-specific consultant opportunities with you.

Information about registration will be available soon.

~~~~~

Office of the Director, Office of Enterprise Communications Announces

Staying in Touch: CDC Alumni Connection

CDC recognizes the valuable contribution of each employee, both past and present. As such, we would like to stay in touch with retired CDC employees. To connect with our alumni and receive input from this valuable constituency, OEC is pleased to introduce project *Staying in Touch*. *Staying in Touch* is a voluntary electronic community of retired CDC employees with whom we can share information regarding current CDC activities and receive feedback on issues of interest.

The types of information we will share through the listserv include the *State of CDC* Report, Pandemic Influenza Updates, CDC's 60th anniversary event plans, personnel changes, various *CDC Connects* stories and MMWR Reports. We are just beginning to gather contact information for the mid-February launch message. As interest grows, we plan to offer an Internet site for alumni with the most current CDC news, as well as post information for CDC and fellow alums.

While we are reaching out to alumni through other channels, we ask that you help us by spreading the word. Attached is an invitation to join the *Staying in Touch* listserv that we hope you will pass on to retired employees with whom you are in touch. If you have ideas or suggestions for listserv message content, please send them to StayinginTouch@cdc.gov or call Carrie Downing.

**Staying in Touch
CDC Alumni Connection**

Dear CDC alumni,

Although you have left CDC, you are an important part of the CDC extended family and we would like to stay in touch with you through project *Staying in Touch*. It would be nice if we could give you regular updates about what is happening at CDC today. Also, we would like to see information flow both ways, and hope that you will consider sharing your wealth of public health and CDC knowledge with us.

Staying in Touch is starting as a simple group email sent twice a month to those who sign up. It will share information like the *State of CDC* Report, Pandemic Influenza Updates, CDC's 60th anniversary event plans, personnel changes, various *CDC Connects* stories and MMWR Reports. We welcome your feedback on the types of information of importance to you. As interest grows, we will offer an Internet site for you where you can get the most current news, as well as post information for CDC and your fellow alums. We hope that you share our excitement about *Staying in Touch* and ask that you help us by spreading the word.

Though you may often be in touch with your former colleagues still at CDC, Carrie Downing will be your point of contact for direct information about current CDC programs.

Feel free to email Carrie at StayingInTouch@cdc.gov if you have questions or comments that you'd like to share either with CDC leadership or others on the listserv.

How to join the Staying in Touch Listserv

1. Put the CDC Listserv address in the TO line:
LISTSERV@LISTSERV.CDC.GOV
2. Leave the SUBJECT line blank.
3. On the very first line of the message section, simply write: SUBSCRIBE
STAYINGINTOUCH (one word)

You will receive an introductory email after you subscribe. For your privacy, only the listserv owner (CDC) and secure CDC IT Administrators have access to the list of subscribers.

We know that you still are committed to protecting the public's health and we hope that this gives you another way to continue this commitment. Project *Staying in Touch* gives a critical connection to a knowledgeable and valuable asset – CDC alumni.

Sincerely,
Your CDC Family

~~~~~  
**CONDOLENCES**

**The wife of Sumner Glassco**, an Honorary Watsonian has passed away.

I am sorry to report the death of Sarah Glassco, January 7th. She had been having problems for some time. Sumner said that she just couldn't breathe any more and finally gave up. She was aid to rest on January 11th, after a brief ceremony at church.

Sumner said that she requested donations to the Church Health Center, 1210 Peabody, Memphis, TN, 38104, in lieu of flowers.

~~~~~  
Death of AHRC Employee

Dorothy Knight-Crawford passed away Sunday, February 5, 2006, at Piedmont Hospital after suffering a cerebral hemorrhage on December 28, 2005.

Dottie, as she was affectionately known, began her career at CDC in 1990 as a Secretary with the National Center for Infectious Diseases, Division of Viral & Rickettsial Diseases, Epidemiology Activity. She also worked as a Health Technician and Program Operations Assistant in NCID/VRD, Viral Exanthems & Herpesvirus Branch before moving to the Office of Minority Health in 1998. Since 2000, Dottie has worked in the Human Resources Management Office, now Atlanta Human Resources Center, as a Human Resources Assistant.

Dottie was an outstanding and dedicated worker who always had a smile for everyone. She will be deeply missed by her many friends and co-workers at AHRC and CDC.

Funeral arrangements will be announced at a later time. In the interim, you can send cards and letters to Dottie's husband, Brint, and her children at: 3405 Wake Robin Way, Cumming, GA 30040.

~~~~~  
**Death of Former CDC Employee**

**Joel Hardee**, 70, of Atlanta, Georgia (formerly from Homerville Georgia), died Wednesday, January 11, 2006 in Piedmont Hospital after an illness. Joel spent several years as an employee in the National Center for Infectious Disease, Scientific Resources Program, Laboratory Support Section, and retired from CDC in 1998 after 23 years of faithful service. He is survived by his wife, Annie Hardee and four children, Petra Mote (William), Barbara Vazquez (Luis), Geanette Hardee and Diana Williams.

Funeral services were held Monday, January 16, 2006 at 11 AM at Brown Chapel A.M.E. Church in Homerville, GA with Reverend Howard Wilson officiating. Funeral arrangements were with Fluker Funeral Home, 100 Robinson St., Homerville, GA. 912-487-3598

~~~~~  
A Condolence Response

George DeRoller's family has sent an appreciation of sympathy note to us:

The DeRoller Family thanks you for the cards and notes of sympathy sent by George's friends and colleagues in the WATSONIAN SOCIETY. I know George was very proud of his membership. Thanks very much, Pat Gore

HAVE YOU HEARD?

Please join me in welcoming **Ted Pestorius** and **Michael Detmer** aboard as the acting management officials for the current NCID and NIP effective January 22nd. Their leadership and management skills will prove vital during the remaining CCID reorganization efforts. As a reminder, our goal is to stand up the new CCID by October '06, which will include an additional center as well as the strategic business and scientific units.

As an FYI, CCID is currently finalizing certain design aspects and preparing for implementation. There are many more challenges ahead and I am more than confident in our cadre of leadership.

Also, many thanks to Kay Lawton as the acting management official for NIP over the past 4 months!

Kay will be transitioning back to NCID and she has also graciously agreed to assist as the acting management official during the reorganization for the upcoming National Center # 2.

As always, your continued support is very much appreciated.

Reginald R. Mebane
Chief Management Officer
Coordinating Center for Infectious Diseases(CCID)
Centers for Disease Control & Prevention(CDC)

GET WELL WISHES:

Jack Benson is resting at home following early intervention cardiac treatment following a brief hospitalization in early February.

~~~~~

**A SPECIAL BIRTHDAY CELEBRATION**

**BART** aka **Bob Bartholomew** sent in this notice- All those PHAs assigned to Los Angeles CA STD Program will recall **MIKO**

Miko's 80th birthday was Tues. 1/17. Thought I'd send this to "a few" CDC folks who have known and loved this legend over the last 30 or 40 years in case they want to send a card or note.

I spoke with Miko at length today at her daughter's home in Sacto. Helen and Kevin are taking good care of her, getting her to dialysis, etc. but I'm sure she'd appreciate any cheerful words folks want to send.

She still hopes to return to the "Southland" after the apartment house sells and assisted living arrangements can be made.

**A NOTE FROM MIKO:**

Dear Friends,

There have been some big changes for me since the first of December. I've moved to Sacramento to live with my daughter Keiko and grandson Kevin. After living in East LA for more than 50 years, it was very hard for me to leave my home, family, friends and many activities. You're all such a huge, important part of my life. I really miss you all!!!

I'm starting to settle into my new routines and surroundings. Dialysis still takes up the better part of my Tuesdays, Thursdays and Saturdays. Keiko and Kevin are finding senior classes/activities for me to attend. They're trying to convince me that a chair exercise class would be good for me. I'm not exactly thrilled with the idea, but at least I won't have to wear a little leotard to class! My goal is to start walking daily so that I can maybe take a ballroom dancing class. Can you imagine me doing the waltz or tango? Quite a mental picture, isn't it?

My grandson Kevin has been taking care of me during the day while Keiko teaches. He makes sure that I eat regularly and take my daily medications. He's been wonderful! I think that he takes after his Jii-chan.

Brian who is an officer in the Navy was home for Christmas. He had just come home from a 6 month deployment to the Middle east and is now back at Little Creek Amphibious Base in Norfolk Virginia.

I hope to keep in touch with all of you. If you have a few minutes to spare, please write or phone me. I'd love to hear from you!!

Love, Miko  
Miko Wakabayashi

P.S. from Keiko: Mom says - Thank-you all for remembering my birthday! Now that you know where I am - be sure to stop by whenever you're in my new neck of the woods! Miss you!

**TRANSFERS/PROMOTIONS/ TDYs**

**Lin Parsons:** writes: I leave for Zambia a week from Saturday. This trip will be for seven weeks. I can't play golf in Boston 'til April so I might as well be somewhere warm! Happy New Year to all and hugs all around!  
Lin

Lin Parsons  
Projects Consultant  
Centers for Disease Control and Prevention  
Global AIDS Program  
American Embassy  
Lusaka, Zambia

~~~~~

After 14.5 years **Richard Kahn** has decided he has moved beyond the incubation period and is leaving DSTD to become Assistant Branch Chief in Malaria.

After 14+ years with syphilis, Richard has gotten something in his head, and he has opted for malaria therapy (see reference). Richard started his new job on November 28, 2005.

Reference: Austin SC, Stolley PD, Lansky T. The history of malariotherapy for neurosyphilis: modern parallels. JAMA 1992;268:516-519.

Stacy Harper (our current President) has joined DTBE in the Clinical and Health Systems Research Branch as a Senior Public Health Advisor (PHA) and will work particularly on facilitating cross-branch activities and procurements. Stacy has served as a PHA for CDC for nearly 15 years, with field assignments including West Palm Beach, Florida, Washington, DC, and San Diego, California. In these previous assignments she served as a disease intervention specialist (DIS), Training and Education Coordinator, and Surveillance Coordinator before coming to CDC headquarters in Atlanta. In that new assignment as a Public Health Advisor and Training Specialist, she provided training, developed surveillance and epidemiology courses, and provided technical assistance to the STD/HIV Prevention Training Centers. She has served on details to San Antonio to assist Katrina evacuees; to the newly formed Office of Workforce and Career Development (OWCD); to the West Nile Virus program (blood transfusion and organ transplant team); to the Smallpox Vaccine Program Plan, training states for implementation of Smallpox Vaccine; and to SARS assignments. Most recently she served as a Project Officer for the National Center for Injury Prevention and Control, Division of Injury Response (proposed). She is the current President of the Watsonian Society and serves as Chair of the Professional Development Committee for the Society. Stacy holds degrees in optometry and music, and attended graduate school at the University of Washington in epidemiology.

NOTE to **TED PESTORIUS** – Recent trend is for president-elect on eve of taking office to MOVE to DTBE! (We'll look for you next FALL Ted! ☺)

~~~~~

Since Labor Day, **John Ray** has been the acting team leader for the NCHSTP Extramural Funding Activities Unit. Megan Foley, who used to be the team leader, accepted a position in DHAP.

**Deidre Kelly Hector**, an EFAU team member, is on detail to the Coordinating Center

~~~~~

Sheldon Black is now at headquarters, as a project officer in the DSTD Program. This was effective January 7, 2007.

~~~~~

**Kate Ruck-Guillén**, DTBE, has transferred from New Jersey TB to Louisiana TB Program, effective February 5, 2006.

~~~~~

"Where's WhatisName?"

Greg Donabedian. After Greg retired to the outskirts of Chester, Vermont, I've tried to catch up on him with occasional letters. Greg, ever the loyal correspondent, is more faithful than I am. And, he's OK'd my forwarding to the newsletter the following few nuggets on Greg's current goings-on from his January 23, 2006, letter. Those nuggets:

"I have indeed built and moved into a house in the woods.. My brother came up and worked several summers to build the concrete block foundation and then to frame up the house...It is 16 x 40, two stories with an 8 x 20 'lean-to' EL (as they call them hereabouts)...This EL contains the bathroom and most of the kitchen and, of course, all the water pipes... I have a propane refrigerator, a propane kitchen stove and 3 wood stoves. A large coal-wood stove in the cellar... provides most the heat... All my energy, effort, time and money have gone into building the house and keeping the 8/10 mile driveway in working order. Now, in the winter, I park at the entrance to the driveway and march in on snow shoes, pulling a sled with groceries if I have gone shopping. Much of my time throughout the year goes into cutting, splitting, drying and stacking firewood...I have a solar electric set-up (I just had the panel installed 1st year), so I have electric lights and a DC water pump. I pump water uphill (a 1000 foot 'run' over the ground, with about a 210 foot 'rise' from the spring to the tanks in the cellar) periodically... I also tutor 3 home-schooled children in Spanish--my 'payment' is a wonderful home-cooked meal their mother makes...My nephew, who just graduated from college... is currently staying with me...[and] is talking about wanting a garden--as I indeed also do--and perhaps some animals...It might be nice to keep bees...Today is a cloudy day and the batteries are a bit run down--my nephew was using the computer yesterday for quite a while--so I am writing this by hand. I hope you can read my handwriting. ***Please give my best to those who know me.***"

]

Greg D.

~~~~~

Greetings from Washington D.C. - **Dean Mason**

I wanted to let you know that I am resigning my position as President and CEO of the Albert B. Sabin Vaccine Institute, effective January 31st. It has been a truly great experience to have been in a leadership role with this non-profit organization which advocates for safe and effective vaccines on a global scale. The opportunity to meet and often work with some of the best scientists and immunization experts in the world has been one of the many highlights for me over these past two years.

I also look forward to contributing in other areas of public health though I do not know exactly where I will land at this time. If you could share with others my announcement and my locating information it would be greatly appreciated

Warm regards,

Dean Mason

~~~~~

A History maker:

John Spande retired several years ago; most notorious for his Chicago days where he was one of the few who did not relocate before going from co-op to GS-12 (1963-74).

~~~~~

MLK Program - Taken from CDC Connects Dated 1/23/06

**Sharon Martin, Public Health Advisor**, moves the crowd with a stirring rendition of poem, "Anything is Possible."

Anything is Possible

Following a warm welcome by Chief of Staff **Lynn Austin, PhD, Sharon Martin**, Public Health Advisor, NCIPC, set the tone of celebration with her moving recital of the poem, "Anything is Possible." While the author of the piece is unknown, its words and Martin's raw passion captured the essence of King's dedication to not giving up the fight for equality and justice until they are enjoyed by all. "Persist," the poem challenged listeners, adding, "because with an idea, determination, and the right moves, you can do great things." ...

~~~~~

A member's son is in the news:

CDC Connects - Inside Story - Posey Shines in Refugee Response Efforts

Posey Shines in Refugee Response Efforts 1/31/2006

Drew Posey, MD, MPH (LCDR USPHS), Medical Officer, Division of Global Migration and Quarantine, NCID, sometimes sounds like a magician in his colleagues' accounts of his work with refugees from some of the most desperate places on earth. Posey, 33, is being honored as January's Employee of the Month, but a closer study of his outstanding contributions reveals more quiet determination and commitment than luck or magic.

John Bateman, Officer in Charge, Newark Quarantine Station, accompanied Posey to Abidjan, Côte d'Ivoire, with a team tasked with vaccinating more than 4,000 Liberians in five days. He vividly recalled the resolute way in which Posey approached his work.

"Late one afternoon, in the middle of our vaccination campaign, in a darkening room, with one dim light bulb hanging from the ceiling and six Ivoirian vaccinators moving through their duties, it was apparent that there was not much daylight left and somewhere near a hundred more refugees needed to be vaccinated," Bateman said. "Drew came into the room and gave a rousing pep talk to the vaccinators which implored them to push on diligently. This reminded me of a young high school football coach standing on the sidelines of the football field in the last minutes of the fourth quarter of the big game and his team behind...in this darkening room in faraway Abidjan, I witnessed the vaccinators' speed pick up and the rhythmic clatter of empty vials hitting the metal trays as they sped up the process and were able to finish before darkness overtook the room."

As Employee of the Month, Posey was cited specifically for “his outstanding contributions to improving the health of refugees through his leadership in two massive refugee response efforts: the resettlement of Liberian refugees and the Lost Boys and Girls of Sudan epidemic aid investigation.”

Posey himself said with characteristic understatement simply that “I do really enjoy my job and I do think one of the things I’ve enjoyed about our division is how we have the potential to positively impact the health of the refugees we’ve been working with.” Posey said this award means a lot to him and also reflects the great people he works with and the opportunities they have given him.

The Liberian Refugee Resettlement Response

For many years during the late 1980s and 1990s, civil war raged in Liberia, causing thousands of Liberians to flee to neighboring Côte d’Ivoire. Then, the dangerous political situation in that country led to the decision to urgently resettle approximately 8,000 Liberian refugees to the United States, according to Terry Comans, Deputy Chief, Immigrant, Refugee and Migrant Health Branch. During the resettlement, which began in September 2003, four large outbreaks of rash illness in the refugee population temporarily halted this urgent resettlement process.

The vaccination campaign, in which Posey led a multidisciplinary team of experts to respond to the outbreaks, allowed the resettlement to resume. “As a result of Posey’s efforts,” his nomination reads, “over 5,000 refugees were vaccinated and outbreaks of measles, varicella, and rubella were stopped. The vaccination campaigns prevented morbidity and mortality, allowed refugee movement to resume, and prevented disease spread on international airlines and in the United States.”

Treating the Lost Boys and Girls of Sudan

The second contribution for which Posey was cited is his work on the Lost Boys and Girls of Sudan epidemic-aid investigation. The Lost Boys and Girls are Sudanese orphans and youth refugees who were resettled to the United States in 2000-2001 after fleeing violence in Sudan. Genocidal violence in Sudan uprooted more than a million people and created a humanitarian crisis of enormous proportions.

“Beginning in the mid-1980s,” Posey has written about the investigation, “one group of displaced Sudanese, which was mostly composed of children and young adults, became known as the Lost Boys and Girls of Sudan. During a journey of several years, the Lost Boys and Girls walked first to Ethiopia and later to Kenya or to Egypt. Many arrived at the Kakuma refugee camp in western Kenya in 1992. From Kakuma, the United States resettled approximately 3,800 Lost Boys and Girls from 2000 through 2001. Lost Boys and Girls have also entered the US through other refugee resettlement channels and from different locations. Approximately 3,800 to 5,000 Lost Boys and Girls are currently living in the US.”

In 2004, CDC received reports of chronic abdominal pain among these refugees and learned that some of the Lost Boys had been diagnosed with the parasitic infections schistosomiasis and strongyloides. Schistosomiasis can cause chronic abdominal pain and lead to hepatic failure and bladder cancer. Strongyloides can also cause chronic

abdominal pain, as well as severe, fatal, disseminated disease in people who are immunocompromised, said Comans.

Again in this instance, Posey led a multidisciplinary team that conducted an epidemiological investigation of the chronic pain and its possible association with schistosomiasis and strongyloides. Posey then wrote recommendations for the presumptive treatment of schistosomiasis and strongyloides in the Lost Boys and Girls and in 20,000 other refugees from Sudan. Next he planned and implemented the first nationwide mass presumptive treatment program for parasitic infections among refugees in the United States, said Comans. He is also designing other strategies to address abdominal pain in these refugees.

“Posey has worked tirelessly to implement the treatment recommendations,” said Comans, “even appealing directly to the pharmaceutical companies so that these refugees, most of whom have no health insurance, could receive treatment.”

Comans noted, too, that Posey’s commitment to the refugees had also led him to do extensive outreach, education, and advocacy on their behalf with the Sudanese refugee community, clinicians, state and local health departments, the Health Services and Resources Administration, the Council of State and Territorial Epidemiologists, Association of State and Territorial Health Officials, National Association of County and City Health Officials, and other organizations, such as the Lost Boys and Girls National Board of Directors and the Lost Boys and Girls Center.

Comans said Posey also participated in the development of presumptive treatment guidance for schistosomiasis and strongyloides for other US-bound Sudanese and African refugees from endemic areas and that these guidelines are being implemented and have “great potential to benefit residents of other regions of the world where parasitic diseases contribute substantially to the health burden.

“Posey assumed a leadership role in these responses, while still completing his two-year assignment in the Epidemic Intelligence Service,” Comans continued. “Posey’s extensive efforts on behalf of the 8,000 Liberian and 20,000 Sudanese refugees resettled in the United States demonstrate a passionate commitment to international health and the public health problems of vulnerable refugee populations.”

Downplaying the heroic nature of his work, Posey himself stressed that he never set out to do work with refugees. Rather, he said he was most interested in public health and sought out the type of medical experience he could obtain in the Division of Global Migration and Quarantine. However, he said, he “really enjoyed” the work he has done and continues to do.

“I Grew Up With CDC”

No stranger to CDC, Posey is the son of **Larry Posey**, who was a public health advisor at NCEH. “I grew up with CDC,” he recalled. “There was never a time when I was not aware of something called CDC.” A graduate of Western Carolina University, Drew Posey received his MD from Mercer University and his MPH in epidemiology from Emory University. A native of Marietta, Georgia, he worked at CDC on summer and winter breaks while an undergraduate and later while earning his MPH, in what was then the Division of Birth Defects and Developmental Disabilities and in polio eradication at NIP.

Posey started as an Epidemic Intelligence Service Officer in the Division of Global Migration and Quarantine in 2003, following his residency. He said that division interested him because it offered him the opportunity to work with a wide variety of experiences, diseases, public health problems, and populations. “He quickly proved himself as an outstanding leader and joined DGMQ as permanent staff in July 2005. He is dedicated and hardworking,” said Martin Cetron, MD, Director of Global Migration and Quarantine. “He has a ‘can-do’ attitude and excellent professional judgment—he’s a personal delight with whom to work.”

“With my background, when I got interested in medicine, public health made a lot of sense,” Posey explained. “It was very appealing to me. I knew I would be able to do something that would impact a large number of people in a positive way.”

Posey and his wife Kristen have two daughters, Katherine, 2, and Ashley, 10 months. Posey said his main focus away from CDC is on his family, his church, and doing outdoor activities.

~~~~~

**CDC CONNECTS:** CDC Leadership Profile: Meet Kevin Fenton, 1/10/2006

As part of our series of leadership profiles, we continue with a profile of Kevin Fenton, MD, PhD, Director, NCHSTP

**Name:** Kevin Fenton, MD, PhD

**Title:** Director, NCHSTP (November 2005)

**Responsibilities:** Lead the National Center for HIV, STD, and TB Prevention

**First Job at CDC:** Chief, Syphilis Elimination Effort (January 2005)

**Path to Public Health:** “At age 18 I entered medical school in Jamaica, and there—largely due to an innovative curriculum and inspiring tutors in public health—I decided to pursue a career in public health medicine. My first epidemiologic investigation involved collecting data for a case-control investigation of an outbreak of typhoid in western Jamaica. The experience resulted in a profound respect for the synergism between quantitative and qualitative data, and the ability to use primary and secondary data sources to derive comprehensive solutions for improving the public’s health.

“Following a series of pre- and post-graduation medical assignments in Jamaica, I earned a scholarship to pursue a Masters in Public Health at the London School of Hygiene and Tropical Medicine in 1992. In this academic setting I collaborated with public health colleagues from around the world, providing further inspiration to my commitment to public health.

“In 1995, after completing a clinical practicum in infectious diseases, I was appointed as a lecturer in HIV epidemiology at the Medical Research Council Coordinating Center for the Epidemiological Study of AIDS at the Royal Free and University College Medical School (RFUCMS). In 1998, I was appointed as a senior lecturer and honorary consultant epidemiologist, specializing in HIV, STDs, and behavioral surveillance at the Communicable Disease Surveillance Centre. In 2002, I became the director of the Health Protection Agency HIV and Sexually Transmitted Infections Department and held this post until my departure to the United States.

“During my time in at the Health Protection Agency, I established a behavioral surveillance team, expanded the STD surveillance team, led the development of a European Union STI Surveillance Network (ESSTI), and established large national surveillance and prevention programs including the Chlamydia Screening Programme in England. I was an investigator on the second British National Survey of Sexual Attitudes and Lifestyles (Natsal 2000), and I implemented a range of national studies on ethnic variations in sexual health outcomes. My PhD thesis investigated the reasons for ethnic variations in STIs in western industrialized settings.

“Training future public health and medical professionals has always been important to me. At the Royal Free and University College Medical School, I directed a research program on Migration Ethnicity and Sexual Health between 1999 and 2004, which involved teaching and supervising MSc and PhD students. I was also committed to disseminating research to, and the training of, people living with and affected by HIV, and established an African HIV Research Forum in 2002, the first community research forum of its kind in Western Europe. I also practiced my passion for public health through my work with communities affected by, or living with, HIV/AIDS and served on the Boards of a number of charitable organizations, government committees related to HIV and STD prevention, and sexual health research during this time.

“In January 2005, I joined the CDC Division of STD Prevention to serve as chief of the US syphilis elimination effort. I spearheaded the revitalization of this ambitious national program whilst being involved in numerous HIV and STD prevention workgroups.”

**Last book(s) read:** The Four Agreements: A Practical Guide to Personal Freedom by Don Miguel Ruiz. “It is an amazing book which succinctly summarizes key principles of surviving and thriving in today’s world, while providing affirmation of the power of positive thinking and the importance of treating all others as you would be treated.”

Fenton is also an avid reader of management theory and has, most recently, been inspired by the writings of Richard Koch on the 80/20 Principle.

**Family:** A native of the U.K., Fenton now resides in Atlanta, with his partner of seven years. In December, their family was expanded to include a beautiful Basset hound named Avery.

**What are the top priorities you are working on?** “We will be welcoming the Division of Viral Hepatitis to our Center in the near future, and my first priority is ensuring that this transition goes as smoothly as possible. I look forward to working with the Divisions to establish procedures that facilitate robust, sustained collaboration, and information sharing between our programs.

“Scientific and programmatic excellence has always been a top priority for our Center, and one which I fully intend to support and develop further. New and emerging strategic areas of focus should provide additional opportunities for collaboration between Divisions and across Centers. For example, as our understanding of the importance of social determinants of disease epidemiology evolves, so too should our prevention and control programs, taking into consideration innovative and comprehensive ways to measure, monitor, and intervene to effect greater public health gain. Similarly, the emergence of new prevention technologies should encourage us to work with our

partners and stakeholders at state and local levels to assess, implement, and evaluate these initiatives in a timely manner.

“I recognize and value the need to maintain and strengthen collaboration with our partners and stakeholders, both within CDC and externally, and will prioritize meeting with our constituents during my first six months on the job. It is my intention to build on these relationships because effective partnerships are absolutely crucial for us to achieve our health protection goals. Our partners help us to develop acceptable, appropriate, and culturally competent interventions for those in greatest need. They also help to hold us accountable to our primary clients—the public. I look forward to developing innovative models of partnership working to enhance our scientific and programmatic portfolios.

“Another major priority will be to participate in, and support, the development of the Coordinating Center for Infectious Disease and the other new National Centers. During this time of change, I would like for our Center to be a proactive participant in the change process, while ensuring that our critical functions continue to be provided, and where possible, enhanced. There are many short- and medium-term challenges facing CDC and now more than ever, it is important that all of our staff are kept abreast of the changes and have an opportunity to have their voices heard and represented in this process.

“Finally, my vision is for our Center to be a highly productive, stimulating, and enjoyable place to work. One that continues to attract high-caliber professionals to work both in program and in science, and one that contributes to reducing the impact of these devastating diseases both at home and abroad. Especially in a time of change, it is important that our staff continue to feel valued and supported and I shall be prioritizing innovative ways to improve communication across our Center.”

~~~~~  
CDC CONNECTS: CDC Leadership Profile: Meet Barbara Harris, 1/17/2006

As part of our series of leadership profiles, we continue with a profile of Barbara Harris, Chief Financial Officer, CDC, and Deputy Director, Finance and Accounting, Financial Management Office (FMO).

Name: Barbara Harris

Title: Chief Financial Officer and Deputy Director, Finance and Accounting, FMO

Responsibilities: “As the CFO for CDC, I help ensure the agency exhibits the highest degree of financial integrity and fiscal stewardship for public funds entrusted to it. I am the executive official responsible for the proper execution of the budget, perhaps the most complex in DHHS, with over 200 programs, projects and activities. I provide proactive oversight of the processes and systems to ensure that funds are obligated to achieve the greatest public health impact in an accurate and timely manner. As Deputy Director, Finance and Accounting, FMO, I also oversee approximately 120 staff in the Accounting, Financial Services and Financial Systems branches.”

First Job at CDC: Management Analyst, ATSDR, Atlanta (1988)

Path to Public Health: “I am a Certified Public Accountant from Elizabethtown, Tennessee, and earned a Bachelor’s of Business Administration with a major in accounting from East Tennessee State University. I began my career as a revenue

agent for the Internal Revenue Service in both Johnson City and Knoxville, Tennessee. I moved to Atlanta in 1988, where I took a job at the Environmental Protection Agency (EPA), working in the Superfund program.

“My experiences with EPA were extremely rewarding, and my work there laid the foundation for my move to ATSDR in 1988. While there, I instituted the first cost-recovery program, which was funded by Superfund. I learned a tremendous amount about environmental and public health issues. In 2001, I had the opportunity to come to FMO and serve as the Deputy Director for Finance and Accounting. Then, in 2002, I had the honor of being selected as CDC’s CFO.

“As CFO and through my work with FMO, I have found that through understanding the paramount public health issues of the day I am able to perform my job at a higher level, while always trying to stay abreast of current program activities. My ability to contribute to the agency strategically is intertwined with my continued involvement in programmatic issues. Drawing from my experiences with ATSDR in health assessments and community interventions has certainly contributed to my performance in this area. Working with FMO provides me with a broad programmatic perspective to further my contributions to CDC at large.

“What resonates most with me is CDC’s work with environmental, injury, and chronic issues dealing with the aging population. I come from a family of civil servants—my mother was a schoolteacher and my father worked for the Tennessee Department of Human Services, so I’ve always considered it a privilege to work in public service. I wanted to work with an organization where I believed in their mission and CDC is certainly that organization.”

Last book(s) read: A Good Year by Peter Mayle. “The author is an Englishman who writes books about living in the south of France.” Also, Following the Equator by Mark Twain and A Moveable Feast by Ernest Hemingway. “At least once a year I like to go back and read a grand old author. The last two I read by Twain and Hemingway both were travel-related.”

Family: Resides in Atlanta with husband of 22 years, Chris, who runs a family-owned concrete business.

“We love to travel, be it short trips on the weekend or trips to Europe. We love the Caribbean. I started running late in my life, and have finished 10 Peachtree Road Races—hoping for my 11th next year. We are big Georgia Bulldog football fans. In the fall we always tailgate with a group of friends who join us at home games.”

What are the top priorities you are working on? “In April, we implemented the Unified Financial Management System for the Department here at CDC, so we are now working on enhancements to that system. It’s a pretty tremendous learning curve for our staff, going from a 15-year-old mainframe financial system to a state-of-the-art Oracle-based software system. It has a much better and more efficient transactional capability. The new system has a commitment accounting capability that helps all of CDC track status of funds throughout the fiscal year much more timely and accurately. We are steadily working to produce financial statements directly from the finance system in 2006, which will be less resource-intensive.

“Another priority is the OMB A-123 initiative, the federal government’s equivalent of Sarbanes-Oxley in the private sector, for internal financial controls. I am working with MASO and a senior assessment team made up of representatives from each of the CIOs to look at internal controls within CDC to ensure that they are appropriate and adequate. As stewards of the public’s funds, we are obligated to spend CDC money appropriately to ensure the public’s trust. A-123 will affect all the offices and coordinating centers, because cost controls are not just in the Financial Management Office, they are throughout each of your programs from the project officer putting together an application and a technical panel, to properly working with PGO to select a grantee or a contractor, to the authorization to approve time-keeping, travel, and training—and everything else we do on a daily basis. Although CDC has had internal controls in place for quite some time, this is just an opportunity to look at the controls, make them better and make sure they have a value added. I don’t believe controls should be over burdensome, but should add value.”

CDC CONNECTS: CDC Leadership Profile: Meet Rima Khabbaz , 1/25/2006
As part of our series of leadership profiles, we continue with a profile of Rima Khabbaz, MD, Director, NCID.

Name: Rima Khabbaz, MD

Title: Director, National Center for Infectious Diseases (NCID)

Responsibilities: The mission of NCID is to prevent illness, disability, and death related to infectious diseases among persons in the United States and throughout the world. As part of the agency’s overall reorganization, a new organizational structure has been established for NCID under CCID. Khabbaz will be leading NCID through this transition, working closely with CCID leadership and the other newly appointed Center Directors in CCID to effect these changes.

First job at CDC: Epidemic Intelligence Officer, assigned to the Hospital Infections Program, 1980.

Path to public health: “I became interested in infectious diseases during medical school and my residency. I find the field fascinating, and initially envisioned a career in clinical medicine.

“I did my medical training in Lebanon at the American University of Beirut (AUB). While there, I had the good fortune to cross paths with Dr. Gene Gangarosa, who had recently retired from CDC and joined AUB as Dean of the Faculty of Health Sciences. Dr. Gangarosa recommended that my classmate (and future husband) Muin Khoury and I consider applying to the EIS program at CDC, and we did. It was a wonderful experience and a great opportunity.

“After EIS training, Muin and I went to Baltimore for further training—he in genetic epidemiology and I in clinical infectious diseases—but we continued to be drawn to public health. We had originally planned to return to Lebanon, but our plans changed because of the civil war that was ravaging the country. We both received job offers from CDC, so we returned to Atlanta and have been here ever since.

“I truly enjoy the different and broader impact of public health compared to clinical medicine. The public health mission is so compelling—you can reach many more people

beyond the one-on-one doctor-patient relationship. That is a very powerful draw, and the connection to the community is so important.

“My CDC experience has been a terrific, exciting journey. I have been fortunate to work on a wide range of infectious disease issues, including healthcare-associated infections, viral diseases, blood safety, and food safety. I was also given the opportunity to serve in leadership roles during CDC's responses to the anthrax bioterrorism attacks, outbreaks of new diseases such as SARS, and, more recently, infectious disease responses to natural disasters.”

Last book(s) read: “I recently read *The Great Influenza* by John Barry. I saw Mr. Barry at a meeting I was attending, and he autographed my copy. It's a fascinating book. “I've also just finished reading several other really good books. *Improvisations on a Missing String* is by my high school teacher Nazik Saba Yarid. Originally written in Arabic, the book gives a thoughtful and unique insight into Arabic cultures and the role of intellectual women within those societies.

“I also enjoyed reading *Death by Meeting* by Patrick Lencioni. This book is quite relevant to today's workplace, stressing the importance of only having meetings for the right reasons and having the right meetings. On the fiction side, I just read *Harry Potter and the Half-blood Prince*. In my family, we are all big Harry Potter fans, so I had to read the latest one to keep up with the dinner-table discussions.

“Currently, I am reading *Living to Tell the Tale*, the first published of three projected volumes in the memoirs of Gabriel García Márquez, one of my favorite authors.”

Family/Hobbies/Interests: Khabbaz is married to Muin Khoury MD, PhD, Director, Office of Genomics and Disease Prevention, CCHP. They have two daughters in college, Nayla and Lamyia. “We are a close-knit family and really enjoy spending time together.”

Khabbaz is an avid reader. “I read whatever I can put my hands on—however, my pleasure reading is getting lots of competition from my blackberry these days. I also like to travel and be outdoors, and I really enjoy cooking, especially Middle Eastern food. It is fun teaching my daughters how to make certain dishes. They call from college now for recipes.”

What are the top priorities you are working on? “I see my top priority as supporting and maintaining the excellent science and programs of NCID to ensure that we stay on the cutting edge and focused on our critical public health mission as we proceed with our reorganization.

“In this highly connected world, microbes continue to challenge us, both here and globally. We must be alert and prepared to detect these threats and respond as quickly and effectively as we can.

“Other major priorities include enhancing our synergies and public health impact through alignment with CDC's strategic goals and imperatives, broadening our partnerships, and improving our ability to measure our health impact. Of course, the evolving global avian influenza situation continues to be a major concern and is appropriately commanding a lot of attention. Pandemic influenza preparedness is a top priority and effort for NCID, CDC, and HHS. At the same time, however, we must remain alert for other threats and keep focused on efforts to address the leading infectious causes of disease and death as we pursue our mission.”

Position Description: Works under the general administrative oversight of the Community Preparedness Section Director. Provides complex managerial work directing the activities of the Preparedness and Response Unit. Provides leadership, guidance and management oversight of the preparedness programs in the following branches under the unit: Strategic Science, Response and Recovery, Program Planning, and Program Services. Work involves strategic planning, development, implementation, monitoring and evaluation of statewide preparedness and response. Provides strategic guidance to the unit regarding business and operational issues. Plans, assigns and supervises the work of the CPS Preparedness and Response staff to include the Strategic Science, Response and Recovery, Program Planning and Program Services Branches. Coordinates with CPS management staff to ensure efficient operations and coordinated services delivery. Maintains working relationships with Fiscal, Legal and contract management units and divisions. Serves as a liaison to federal, state and local agencies and entities to ensure a coordinated, seamless and integrated public health response and recovery system for Texas, and may represent the Community Preparedness Section as well as the DSHS leadership at national, state and local meetings, conferences and workgroups. Duties are performed under minimal supervision with general latitude for the use of initiative and independent judgment.

Knowledge Skills Abilities:

Knowledge of public health

Knowledge of Texas legislative process and public accountability systems Knowledge of strategic planning Knowledge of project management

Skill in leadership and interacting effectively with various leadership styles Skill in reviewing reports/documents for audience appropriateness Skill in working collaboratively and cooperatively with diverse groups Skill in communication and public speaking Skill in managing multiple and competing priorities Skill in building effective teams Skill in organizing information effectively, both orally and in writing

Ability to direct and organize program activities Ability to establish program goals and objectives Ability to identify potential problems, evaluate alternative, and implement effective solutions Ability to develop and evaluate policies and procedures Ability to prepare concise reports Ability to communicate effectively Ability to plan, assign, and supervise the work of others Ability to make timely and effective decisions Ability to establish and maintain effective working relationships with staff, other agencies, elected officials, and stakeholders Ability to effectively manage and motivate staff

Contact Information:

Interested persons should contact Texas DSHS Access HR Service Center
Telephone: 888-894-4747

Open until filled.

For full details, please see full job listing:

https://rm.accesshr.hhsc.state.tx.us/ENG/careerportal/Job_Profile.cfm?szOrderID=19488&szReturnToSearch=1&szWordsToHighlight=director%201

~~~~~  
**Services to Help All Regular Employees SHARE**

**SHARE Family Fun**

Ringling Bros & Barnum and Bailey Circus Tickets

Location: Philips Arena

When:

Saturday, February 11, 2006, 11:30 a.m.

Sunday, February 12, 2006, 11:30a – 2:30p

Saturday, February 18, 2006, 11:30a – 2:30p

Sunday, February 19, 2006, 11:30a – 2:30p

Monday, February 20, 2006, 3:30 – 6:30p

Where: Philips Arena, Sections 112 or 108

Ticket Cost: \$25.00 + \$1.00 SHARE Service Charge (Children who have celebrated their 2nd birthday MUST purchase a ticket.)

Parking: \$10 and up

Don't miss the show before the show!!! Want to join the circus?? The All Access Pre-Show is your chance. Step inside the three rings one hour before show time to visit with circus elephants and dogs, learn to juggle with a clown, and get Circus Fit with the acrobats and animal stars. It's free for all ticket holders!!! The fun starts an hour before show time!!!!

**Web site:** <http://intranet.cdc.gov/share/shnews.html#circus>

**(For details about this event)**

~~~~~

Event type: SHARE Fun

'Menopause The Musical'

Location: 14th Street Playhouse

Saturday, March 25, 2006

From: 04:00 PM To: 06:00 PM

Web site: <http://intranet.cdc.gov/share/shnews.html#menopause>

(For details about this event)

~~~~~

**RETIREMENTS**

Special Projects Officer \* Division of Global Migration and Quarantine (DGMQ)

Retired on January 3, 2006

A retirement luncheon will be held in her honor:

Wednesday, February 22, 2006

Casa Grande Restaurant

1860 Peachtree Road, NW, Atlanta, GA 30309

11:30 am – 1:30 pm

**Roz Dewart** retired on January 3, 2006, after 30 years of Federal service with the Centers for Disease Control and Prevention. Roz's career began in 1975 as a "co-op" in the Venereal Disease Program in Washington, DC. She had assignments in Virginia and ended her STD stint as the Area Manager for the six counties in the central coast of California. Highlights of her STD work included developing a special unit in the District of Columbia STD program for handling child abuse cases (principally children between 3

and 10 years of age diagnosed with a sexually transmitted infection). In California she developed STD training modules to be used for training new staff in the state and led an evaluation team to assess a longstanding examination and treatment program for prostitutes in the central coast.

From 1988 to 2001, she was Chief of Travelers' Health, Division of Quarantine. During that time, Roz oversaw the development of a voice, fax and Internet health information system for international travelers. These automated services for the first time allowed the public 24/7 access to important travel recommendations. The Internet website for travelers became an instant success and was awarded citations throughout the medical and travel industry as an essential "destination" before travel. In addition, Roz oversaw publication of Health Information for International Travel (the "Yellow Book"), CDC's authoritative text for travelers' health. In 2001, Roz assumed the position of Special Projects Manager within the Division and worked with Division management on projects addressing health disparities, emergency response, and migrant health.

Roz sends many thanks to everyone for their support and friendship over the years. She has enjoyed her career immensely.

Roz is greatly missed but we wish her much happiness as she begins this new chapter in her life. In her retirement she plans to "get addicted to exercise," enjoy more time with her family, go to more film festivals, and do more travel abroad.

~~~~~  
Dear Colleagues:

It is with mixed emotions that I announce the retirement of one of the Division of STD Prevention's most tenured and well respected employees: **Janelle Dixon**. Janelle retired January 3, 2006 with more than 33 years of service to CDC, all of which has been as a Public Health Advisor with DSTDP. She began her career with CDC as the first female "VD investigator" in the state of South Carolina in 1972. She also had assignments in Philadelphia, North Carolina, Washington, DC, Tennessee, and Maryland. In 1988, Janelle came to headquarters in Atlanta as a Project Officer. Eventually Janelle moved into the role of Deputy Chief for the Health Services Research and Evaluation Branch, a position with which she has held for the last 10 years. The Branch, Division, CDC, and STD Prevention across the country will continue to be indebted to Janelle for her contributions to the field long after she has retired and with her departure comes the enormous loss of institutional knowledge with which we will have a difficult time adjusting. Her intense desire to keep science and program intimately related is legendary and has provided the field of STD prevention innumerable dividends. Not only did she contribute to our field, she became a very good friend to many of us in the process. We will miss her presence in the office, but we will not let her friendship retire to a dream house in the country! Thank you Janelle for all of your hard work, contributions, and friendship!

Please join me and our entire Division in congratulating Janelle on her distinguished career and wishing her well on her retirement.
John Douglas

~~~~~

**Jeanne Gilliland** will retire on February 3rd after more than 25 years of government service. She began working in 1980 as a computer specialist with the Family Planning and Evaluation Division which later became the Division of Reproductive Health in the Center for Health Promotion and Education. She joined CDC at a time when the mainframe was the only computing environment and witnessed the evolution to personal computers, networking, and office automation. She was fortunate to be a part of early initiatives to leverage the PC for public health projects in developing countries as well as family planning programs in this country.

In 1991 Jeanne joined the Office of Director in the National Center for Chronic Disease Prevention and Health Promotion as the Information Resources Management (IRM) Coordinator and later as Chief, Office of Informatics and Information Resources Management. In this capacity she worked with CDC's Information Resources Management Office and IRM Coordinators in other centers to help manage the network environment. She also supported the Public Health Informatics Fellowship in order to build an informatics workforce and helped to establish contracts to provide information technology resources. In the center she worked to automate business processes, provide training for staff, and to effectively leverage new technologies such as the Internet. This year she received the Jeffrey P. Koplan award for her contributions to NCCDPHP.

Jeanne has enjoyed her work at CDC and is very grateful for the many opportunities, the wonderful colleagues, and the lasting relationships. Upon retirement, her plans include spending more time with family and friends, gardening, traveling, and doing volunteer work in the community.

~~~~~

Elliott Churchill is retiring from CDC after nearly 37 years of outstanding management and leadership that spanned the agency. Her distinguished public health career with CDC began in 1968, when she came to CDC on loan from the University of Kansas to assist in planning for the largest study on nosocomial infection control that had ever been conducted in the United States (the SENIC Project). She returned to the university for two years, and then came back to CDC in 1975 to join the SENIC staff as a quality control officer.

Elliott transferred to the Bureau of Laboratories in 1976, and worked as an author's editor and information officer there until CDC's reorganization placed her in the Bureau of Epidemiology and then in the newly created Epidemiology Program Office (1980-1981). She was appointed Chief of the new publishing office that EPO set up to house the *MMWR* series of publications, as well as scientific publications and administrative reports from the EIS Program and other components of EPO's organization. Elliott continued in this post until she gradually assumed more and more duties in a CDC Director's Office project to work with health officials in the failing Soviet Union's Ministry of Health (1989 and following).

That project began a whole new career for Elliott. She went to Russia for the winter and stayed on for the spring. In all, she had 7 months of intensive learning about how things could be accomplished in a system that was as strange to her as the language in which it was conducted. She met and worked with some wonderful people, although many were convinced initially that she was an agent from the U.S. Central Intelligence Agency sent to cause them grief. That international assignment taught her a level of patience

she had never before enjoyed; taught her to view surprises as possible benefits; taught her to take every easing of a task as a huge gift; and taught her to value her taken-for-granted Western freedoms of movement and speech as she never had before.

The Russian Adventure, in which Elliott assisted the Ministry of Health staff to set up a publishing office to disseminate public health information to multiple target audiences, opened the door for similar assignments in 27 other countries. This in turn led to requests to do other types of training, and Elliott joined the staff in the Division of International Health, EPO, when it was created in the fall of 1997. Since that time, as the division's Senior Communications Officer, she has traveled to and worked in 93 countries for CDC. Much of the public health world recognizes the name "Mama Elliott," and welcomes her back to visit with open arms.

An informal reception will be held on **Thursday, February 09, 2006**, from 2-4 pm in Building 19, Room 232, Auditorium B2. Friends and colleagues interested in sending donations for a gift, cards, letters, or pictures can direct them to Juliette Mannie, MS E93.

~~~~~