



WATSONIAN NEWSLETTER- February 7, 2007

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NOTES FROM WATSONIAN PRESIDENT

My Fellow Watsonians,

A new year is upon us, and my personal hope is that it finds you all in good health, and high spirits. Like all other years here at CDC, this promises to be one of, well, something. My hope is that it will be one without a major disaster or disease outbreak requiring our response, but should one of those happen, I know we'll be ready. More close the home front of the Watsonian Society, I want to let you know that I'm looking forward to an exciting year. My intent is to try and focus on three specific areas: morale, philanthropy and involvement.

As I stated at our banquet last December, our agencies low morale is no secret. At the same time, there are over 1200 685's at CDC, and I think we can do something to support morale and contribute to CDC's organization excellence. In January I took the liberty of inviting Dr. Gerberding to meet with her Public Health Advisors and discuss our perspectives and ideas and what we believe we can contribute to our workforce. I am happy to report that she readily accepted, and I hope for this event to occur within the first quarter of 2007. The meeting will occur in bldg 19, here on the Roybal Campus and, barring the unforeseen, we will have phone lines and possibly Envision available for the participation of our non-Atlanta staff and retirees (and retirees in the Atlanta area will be welcome to attend). Aside from Dr. Gerberding's acceptance, this event is still somewhat embryonic, and **I would like to generate a small (4-5 person) workgroup to help facilitate the logistics.** My goal is to host four "seminars" this year and I am considering this the first. My intent will be to have the seminars focus on the development of CDC's Public Health Advisors, and I would like to have us host one per quarter. **If you have any ideas for these seminars, please don't hesitate to send them to me.**

I would also like us to undertake a major philanthropic activity this year, and am wide open to your suggestions for that as well. Hope King continues to pursue various opportunities for us to benefit Atlanta, and I hope that those of you with the time to do so volunteer to participate. Some larger ideas that have been floated are:

Raise money to subsidize CDC's day-care for low salaried staff.

Create a car donation program for CDC's low salaried staff.

Coordinate a childhood vaccination campaign for Buford Highway and its various immigrant communities.

Like the desire for seminars, I am wide open for ideas and volunteers to assist with leadership and will need your participation and assistance to do any of these.

I would also like you all to get more involved in the Watsonian Society, and hope to see you all at something other than our Holiday Party. My intent with the aforementioned seminars and potential philanthropic events may help towards that end, but I will need your commitment and desire to be more active to see either of these come to fruition. After all, it's your society, and therefore, it can only be as worthwhile as you'll let it.

Lastly, we are going to attempt to revise the newsletter a little bit. Rita and Bill work hard to pull this together, but I don't know how much of what we send out actually gets read. We will maintain the current promotions/new arrivals/sick bay portions, but will try to cut down on some of the other extraneous components. We will also be adding **brief** Chair reports to each issue, and I hope that you can take the time to keep up with what's going on, and come out when we have things to bring us together.

That's more than enough for right now, but please know that I want your comments and suggestions for making us a more vibrant Society. So please keep those cards and letters coming, and I hope to see you around the campus.

Your President,
Ted Pestorius

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**Awards Committee** Chaired by **Marcia Brooks**

Since 2003, the Awards Committee has been charged with selecting the annual Watsonian Society "Outstanding Public Health Advisor" recipient (separate from the CDC PHA award). The process includes: 1) submitting recruitment messages via the WS newsletter, 2) receiving nominations, 3) selecting the recipient based on an established rating system, and 4) ordering and securing the award for presentation at the annual WS Banquet. If you would like to serve on this committee, please contact Marcia Brooks at (404) 639-6272

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Family Support Committee. Chaired by **Heather Duncan**

Did you know that the Watsonian Society's Family Support Committee sends cards congratulating members, associates, and other PHAs on accomplishments such as marriage, birth/adoption, obtaining graduate degrees, etc.? In addition, the committee sends condolence cards, flowers and/or memorial charitable contributions to those who have lost a family member and get well cards to those recovering from illness. The PHA grapevine is as strong as ever, but we need your help in identifying people who fall into one of the above categories. If you know of a PHA or member who is deserving of recognition or could use some cheering up after surgery or an illness, please send the information to any Watsonian officer or to **Heather Duncan, Gail Grant or Karen Arrowood** of the Family Support Committee. Thanks for your help!

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**Professional Development Committee-** Chaired by **Stacy Harper**

The Professional Development Committee was formerly known as the Mentorship activity within the Watsonian Society. The goal of the committee is to develop methods and establish mechanisms to advance the professional skills of PHAs that will make the

series and individuals more essential and more efficient in the changing world of public health. (This will complement efforts of the agency.)

Further, the mentorship activity was designed to enhance the quality and value of the Public Health Advisor (PHA) 685 series as an integral part of the public health workforce of the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR). Recently, the efforts of this committee have included bringing recent changes made by the Atlanta Human Resources Center (AHRC) to the attention of upper management, which affects those of us in the Public Health Advisor portion of the 0685 series. The 685 series (officially titled Public Health Program Specialist) is one of the most diverse and largest series at CDC. The series includes both Public Health Analysts and Public Health Advisors. Despite some cross-over (Public Health Advisors becoming Public Health Analysts for some positions due to classification by AHRC), these are two very distinct career paths, and the committee is working with AHRC to ensure that the standards for being a Public Health Advisor are vigorously maintained.

The Committee also continues to try and match mentors to less-experienced Public Health Advisors. If you would like to volunteer to be part of the committee, be a mentor to a less-experienced PHA, or be a mentee, or if you know someone who would like to become a PHA and would benefit from mentoring, please contact Stacy Harper, chair of this committee.

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Communications Committee- chaired by **Bill Boyd**

The Communications Committee's charge is keeping you in the know about the Society and what's happening among current and retired PHAs. To attain our objectives, we employ two vehicles:

The monthly newsletter (along with frequent "news bulletins"), reaching you via the WS listserv or for about 40 of you by snailmail.

Our website (<http://www.cdc.gov/watsonian/>).

We are now spiffing up and streamlining the newsletter & to this end, we need to hear your thoughts, suggestions, critiques, and kudos. We update the website periodically, but possibly too often concentrating on the short term. Fortunately for the WS, one reader, with a longer term perspective, has forwarded some very thoughtful suggestions:

"**Membership** page is 3 years old and needs updating. Recommend the following for the membership page: Indicate center, e.g. CCID/NCHHTSP, and membership renewal date."

"Updating annually the number of CDC 685s by current locations (i.e., HQ or the field) would allow us to see how the 685 series itself is expanding or contracting over time."

Great ideas! But, we need to hear from other Watsonians, too. At a minimum, let us know how often you visit the webpage.

Bill Boyd, Communications Chair and Rita Varga, Newsletter Editor await your emails, phone calls, and letters.

Community Service Committee – chaired by **Hope King**

Please join the Watsonian Society Community Service Committee as we support the:

First Annual TB Awareness Walk

Did you know that tuberculosis (TB) is the leading cause of death among those with HIV/AIDS? Did you know that TB is the leading cause of death among women from infectious disease, worldwide? To educate and raise awareness of this disease is the purpose of the First Annual TB awareness walk to be held on World TB Day, March 24, 2007. The walk will begin at 9 a.m., and will be about two miles. The National TB Controllers Association has partnered with the Fulton County Health Department, the Georgia Department of Public Health, The Watsonian Society (a CDC employee organization), local business such as Superior Painting and Renovations, and others for this awareness raising event.

To register to walk, go to www.TBWALK.org. Please email Hope King if you are joining the walk.

To volunteer to help with the walk, contact **Vic Tomlinson**, TB Walk Committee Chair at 404.639.5315.

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**CONDOLENCES**

**Kevin O'Connor's** mother Jeanne C. O'Connor has died at the age of 87. She had hospice for the last few hours of her life at her home at the Arbor in Annapolis. She was comfortable at the end with her husband and four of her kids with her.

In lieu of flowers, the family suggests a donation to

The Gift of Grace House  
995 St. Charles AVE  
Atlanta, GA 30306  
In memory of Jeanne C. O'Connor.

This is a hospice run by Catholic nuns who take in terminal AIDS patients. These patients are very poor and referred by Grady Hospital. I have been to the home of these nuns who so lovingly take in the sick, the poor and the needy and treat them with dignity until the end.

With appreciation,  
Kevin and Teresa O'Connor

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SICK BAY

Rita Varga is recuperating at home following back surgery in January.

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**MEMBER HIGHLIGHTED**

**CDC CONNECTS** 1/29/2007 Meet San Francisco's Q Station OIC

**Susan A. Dwyer** is the Officer in Charge, San Francisco Quarantine Station, NCID, DGMQ. She says the rewards of her job "always know there's plenty of opportunity to be

of service, the honor of working with such dedicated people, in public health and in public service arenas, and having spent very little time being bored since working for CDC.”

The challenges include “consistently, frequently feeling as if there’s much more to be done than the time or tools necessary to do it.”

Dwyer has a BA in Foreign Languages from Bellarmine College, Louisville, Kentucky. “I lived a year in South America (volunteer service-1975) prior to working with CDC.” She started CDC as PHA with the Bureau of State Services (VD) in 1979 and worked 11 years with the STD program in Los Angeles and New Orleans.

“I did a TDY assignment at the Texas border (Brownsville) in 1989, where I first learned about (and worked with during that stint) the Division of Quarantine. In September of 1990, I took position as Quarantine Inspector at the JFK location, and in 1992 became Assistant OIC at JFK. Ten months later (Sept., 1993) I took assignment as OIC at San Francisco Int’l Airport, and have been here since then.”

Her favorite things about San Francisco are the incredible beauty of the central California coastal location, and “living life outside” as residents frequently do here. She also appreciates the varied and boundless opportunities to enjoy wonderful food and drink, and a lively cultural and artistic scene.

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CDC CONNECTS

Time Capsule and Public Health Memorial 1/25/2007

CDC is burying a time capsule to be opened in 2046, on the agency’s 100th anniversary. Loaded with historical documents and memorabilia, the capsule will be entombed near the CDC Public Health Memorial.

“Now that we have entered 2007, it is time to take the final steps on a project we began six months ago during our 60th anniversary celebration—the installation of our 2006 time capsule,” said CDC chief of staff Lynn Austin, PhD, announcing the event. “The capsule’s home for the next 40 years will be underneath one of the horizontal surfaces of the CDC Public Health Amphitheater.”

Two New Names Added to CDC’s Public Health Memorial

A crowd of CDC leaders broke from their annual retreat to participate on January 16, a blustery, cold day. CDC Director Julie Gerberding, MD, MPH, spoke at the event which coincided with the recognition of two new names added to the memorial. It commemorates “the people who have given themselves in service to CDC and the country,” Gerberding said.

The inscription reads: “In honor of the employees of CDC who gave their lives in the service of the public’s health.”

The first name on the Memorial, dedicated last July, is that of Paul C. Schnitker, MD. He was an EIS officer in the EIS Class of 1969 who died on November 20, 1969, when the plane carrying him to his duty assignment in Nigeria crashed near the Lagos airport. He was joining the CDC team that had been participating in the Famine Relief Action in the minority areas and among the displaced populations resulting from the civil war.

Now two more names have been added: Robert Dubingon and George Flowers. These CDC employees died as a direct result of their public health service. In 1977, the men, both laboratory workers, died of Rocky Mountain spotted fever acquired in the laboratories of CDC.

“Today we acknowledge two new names,” said Gerberding. “Many of you worked with these men in NCID. They lost their lives in service to science, and we memorialize them today. Thank you to all the public health heroes who put their lives on the line every day.”

William L. Nicholson, PhD, Viral and Rickettsial Zoonoses Branch, is glad to see the men recognized in this way so many years after their deaths. “At long last, the names of the two CDC employees who died of Rocky Mountain spotted fever have been added to the CDC Public Health Memorial on the Roybal campus. This memorial serves as a lasting reminder of the employees who died in the line of duty as a direct result of their work with the CDC.

“Robert Dubignon and George Flowers died after contracting Rocky Mountain spotted fever in an apparent laboratory exposure,” continued Nicholson. “The circumstances of how they may have become exposed was investigated, but the exact mechanism was never identified. They had worked as a janitor and an autoclave technician in the area of building 7 near the laboratory where rickettsiae were cultivated and processed.

“Their unfortunate deaths were regrettable and upsetting to the CDC, but this tragic incident led to the enhanced biosafety procedures and improved laboratory facilities that we now enjoy on the campus,” Nicholson added. “It is fitting that their names at last be engraved on the memorial.”

Time Capsule Links Present to Future

The time capsule is also now part of CDC history. Decades from now, CDC employees will dig up the buried capsule to uncover the items buried this month.

“This time capsule captures CDC milestones and activities from 2006, and even a bit of our culture,” says Austin. “Photos, the first article from CDC Connects, an aerial photo of the Roybal Campus, 2006 coins, a CDC pin, Time and Newsweek magazine articles that featured Nancy Cox, a blackberry, a fob, and much, much more. Since July, the items for the time capsule have been on display in the Global Health Odyssey—but today, we close this small piece of our CDC history. The important mementoes that have been included in the capsule will have historical significance, even 40 years into the future, and will show the tremendous progress of CDC’s move into the 21st century.”

It contains a copy of the State of CDC, OWCD director Steve Thacker’s CDC history presentation, a history of the labs by Gerald Cooper, MD, a copy of the master plan for the Roybal campus, and other “artifacts of science and documentation of our successes.”

Noting that a key fob was encapsulated, Gerberding said, “It will be interesting to see if they will even know what that is forty years from now when it is completely dead.” And what about the DVDs? Will they be obsolete at that point?

The plaque covering the time capsule reads, “Beneath this plaque, a sealed capsule placed in the year 2006, holds documents and artifacts representative of the achievements of the CDC staff in promoting and protecting health in the United States and around the world. The capsule is to be opened in 2046, on the 100th anniversary of CDC.”

“Some of you will be here for that occasion,” said Gerberding. “We are leaving a legacy, a future for our family and friends.”

This Inside Story by CDC Connects reporter Kathy Nellis.

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## HAVE YOU HEARD?

All--I wanted to update you on several important developments in goals planning that are occurring in CCID.

First, I am happy to announce that **Dr. Blake Caldwell** accepted a detail to CCID/OD as Acting Strategy and Innovation Officer effective January 8. Blake has been serving as the Goal Team Lead of the Healthy Healthcare Settings goal team, and will function in both positions for the near future. She is particularly suited for these positions, with an extensive background in both infectious disease research and healthcare policy. I have asked Meredith Hickson to stay and assist in the transition.

Second, work on the CDC Health Protection Goal Teams is proceeding at a rapid pace. First drafts of the Goal Action Plans were submitted to the Office of Strategy and Innovation on December 15th. Summaries of these plans were discussed at the retreat of the Executive Leadership Board on January 16-18. The presentations from the retreat are posted on the OSI Web Site (click on Goals Implementation), as is the report on the Goals from the Partners Task Force.

The next draft of the Goal Action plans is due March 15. This draft will contain more content including specific sections on scientific underpinning, health disparities, and partnership engagement/activities.

Third, I want to commend the CCID staff who have stepped forward to lead and/or staff one or more of the goal teams. I have included their names and (proposed) Center on the list below, by goal. These individuals are representing not only their own specialty area, but also their Center and CCID on these teams. Their input must be broad and cross-cutting to be effective, so they will need your help. Please contact them if you have concerns, suggestions, or additional information they need to know to ensure that their plans accurately reflect your Center's issues and programs.

There may be additional CCID staff needed for these teams as their work progresses, so staff who volunteered but were not selected for the initial phase of plan development may yet have an opportunity to serve. Additional volunteers may also be needed for some of the teams now, so if you are interested in serving please obtain your supervisor's approval and then contact Blake Caldwell.

### **PEOPLE GOAL:**

#### Infants and Toddlers

Lisa Jacques-Carroll (NCIRD)  
Susan Wang (NCHHSTP)  
Karen Wooten (NCIRD)

#### Children

Sabina Dunton (NCZVED)  
Carol Stanwyck (NCIRD)  
Susan Want (NCHHSTP)

### **PREPAREDNESS GOAL:**

Scott Schmid (NCIRD)  
David Johnson (NCHHSTP)  
Han Li (NCIRD)  
Roger Nasci (NCZVED)  
Shelly Bratton (NCZVED)  
Sarah Wiley (NCZVED)  
Sherif Zaki (NCZVED)  
Rebecca Noe (NCPDCID)  
Laura Jevitt (NCPDCID)

Karen Wooten (NCIRD)  
Lisa Jacques-Carroll (NCIRD)

Adolescents

Team Lead: Kathleen Ethier (NCHHSTP)

**Nicole Lidden (NCHHSTP)**

Jennifer Galbraith (NCHHSTP)

Mary McCauley (NCIRD)

Adults/Older Adults

Joe Icenogle (NCIRD)

Teresa Durden (NCHHSTP)

Karen Hoover (NCHHSTP)

Gene Shelley (NCHHSTP)

**PLACES GOAL:**

Communities/Travel and Recreation

Michael Beach (NCPDCID)

Ben Beard (NCZVED)

Joseph Carpenter (NCPDCID)

Homes

Don Sharp (NCZVED)

Schools

LaShaun (NCHHSTP)

Carol Stanwyck (NCIRD)

Workplaces - None

Healthcare Settings

Team Lead: Blake Caldwell (CCID)

Norma Allred (NCIRD)

Matthew Kuehnert (NCPDCID)

Michele Pearson (NCPDCID)

Chesley Richards (NCPDCID)

Julie Taylor (NCPDCID)

Institutions

Team Lead: Hugh Potter (CCID)

Norm Fikes (NCHHSTP)

**Joel Fletcher (NCHHSTP)**

Carolyn James (NCHHSTP)

Robin MacGowan (NCHHSTP)

Cindy Weinbaum (NCHHSTP)

**Samantha Williams (NCHHSTP)**

Kenneth Gage (NCZVED)

Maureen Wilce (NCHHSTP)

Mark Lamias (CCID/SPU)

Paul Mead (NCZVED)

Katherine Robinson (NCPDCID)

Terence Daley (NCPDCID)

Michelle Weinberg (NCPDCID)

Beth Skaggs (NCZVED)

By scenario:

Anthrax Team Lead: Mary Ari (NCZVED)

Plague Team Lead: David Withum

(NCZVED)

Emerging Infections Team Lead: Louisa

Chapman (NCIRD)

Pandemic Flu Team Leads: Steve Redd

and Charles Shepherd (OD)

**GLOBAL GOAL:**

Paul Rota (NCIRD)

Richard Keenlyside (NCHHSTP)

Steve Wiersma (NCHHSTP)

Michele Evering-Watley (NCHHSTP)

Alexandra Zuber (NCHHSTP)

David Sniadack (NCIRD)

Jason Cecil (NCIRD)

Meghna Desai (NCZVED)

Ronald Rosenberg (NCZVED)

Anthony Mounts (NCIRD)

Charles Wells (NCHHSTP)

Annelise Canano-Dicerson (NCPDCID)

Helen Perry (NCPDCID)

Marian McDonald (NCPDCID)

Sonja Hutchins (NCIRD)

If there are additional staff who are serving on the above teams, but are not listed, please contact Meredith Hickson. Again, I'd like to thank those of you who have been participating in the various goal activities for your involvement and commitment.

Mitchell L. Cohen, M.D.  
RADM, USPHS  
Assistant Surgeon General  
Director, Coordinating Center for Infectious Diseases  
Centers for Disease Control and Prevention  
Telephone: 404-639-2100  
Fax: 404-639-2170

**If you have any goal-related questions please contact: Meredith Hickson, 639-2109.**

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Dear Colleagues:

I am pleased to announce that **Ms. Susan DeLisle**, ARNP, MPH, will be serving on detail as the acting Associate Director for Program Integration, NCHHSTP. This newly created position will lead our National Center's activities to advance cross-collaboration between our divisions and with other National Centers within CCID.

Before joining NCHHSTP Office of the Director on detail, Susan worked with the Portfolio Management Project (PMP) where she has been the Senior Management Official (SMO) with the Louisiana Department of Health and Hospitals and the District of Columbia, Department of Health.

Susan previously was the Deputy Director of the Division of STD Prevention (DSTD) from 2004 to 2005. From 1998 to 2004, Susan worked as the Chief of the Program Development and Support Branch within DSTD. Her branch supported 65 project areas through grants and up to 250 field staff. She also worked in DSTD's Epidemiology and Surveillance Branch where she initiated, scaled up, and coordinated the National Infertility Prevention Program and was instrumental in the development of the first STD HEDIS measure.

Prior to joining CDC, Susan was the Regional Manager and Associate Executive Director of the Center for Health Training and James Bowman Associates in Seattle, Wash.

Susan received her Bachelor's degree in Community Health Nursing from San Jose State University, and Masters in Public Health (Administration and Epidemiology) from the University of Hawaii. She is also a certified nurse practitioner.

Please join me in welcoming Susan back to NCHHSTP.

Sincerely,
Kevin A Fenton, MD, PhD, FFPH
Director, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
(proposed)

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**PROMOTION/TRANSFERS**

**Mary Schauer**, longstanding former PHA (morphed to Health Scientist) with Chronic's Division of Reproductive Health, heads to Chronic's Division of Adolescent and School Health (DASH as a project officer. Mary, second longest tenured staffer with

DRH's Applied Science Branch (née Program Services and Development), began her CDC career providing TA on contraceptive logistic management to the international community (on one trip with TA team-member Bill Boyd, Mary learned about Kyrgyzstani "hydrotherapy" first hand!). Mary also did ace yeoperson service as one of the original core staffers for DRH's Teen Pregnancy Prevention Program. ASB and DRH will miss that smile and PHA spirit, Mary!

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RETIREMENTS

Phil Moncrief's Farewell after 38 Years of Public Service

By: Phil Moncrief

It's hard to believe that I am retiring on January 3, 2007. As I get closer to the magic date I sometimes wonder why I spent 98% of my career in STD Prevention and Control when I had opportunities to go to other programs. Looking back and pondering the past 38 plus years, I realize it was the challenge of the job. It was never the same from day-to-day. No two patients were the same, each presented a different unique challenge that had to be identified and solved. Developing rapport and trust with the patient, getting them to reveal some of their most private information and taking that information and locating and notifying a person of their exposure to a STD are the same challenges I first faced as a young VDI (Venereal Disease Investigator) in 1968 as today's STD Epidemiologists. The axioms that patients will withhold information, that there is always another partner and 99% of STD infections are acquired by having sexual intercourse with an infected individual are still true today as when I reported to the Mobile County Alabama STD Control Program on June 16, 1968. While some aspects of the job are still the same, to paraphrase an old commercial "STD Prevention and Control has come a long way baby." Things that use to take days to tabulate by little tick marks on a piece of paper can be done in minutes with a computer. Using the internet we can get exact directions to an address instead of following a rural mail route for 20-30 miles to locate a box number. The internet has also provided us access to other records, i.e. driver licenses, correctional, real estate, that a DIS can access to locate an individual or verify addresses and phone numbers.

With the advent of PRISM and the single patient record, DIS eventually will be able to do statewide searches from a Blackberry in the field while you are talking to the patient. No more driving back to the office, finding no record and then trying to locate a patient who has moved in less than 24 hours. The program has become multifaceted. There has been numerous diseases added to the list of infections/conditions that can be transmitted sexually, most notably chlamydia, HIV, hepatitis B. Terms such as PPNG (Penicillinase Producing Neisseria Gonorrhoea) HIV/AIDS, HPV cancer causing stains, neonatal HSV infections, chlamydial pneumonia, STD*MIS, PCRS, Gen-Probe, Western Blot and HbsAg has all become part of our business language. There are now two vaccine preventable infections (Hep B and HPV) and hopefully it will not take another 38 years for others.

During the past 38 years I have learned:

1. Most people do not know addresses. Think about that statement: Can you name the address of your five (5) best friends? Probably not, therefore, do not expect our patients to know their partner(s) address. Ask for directions and description of residences or even

draw a map. This is usually much more accurate than an address provided by the patient.

2. Always verify phone numbers, even out-of-area ones before ending an interview. Remember cell numbers are portable; therefore a person with a 202 area code might be down the street instead of in Washington D.C.

3. Always expect the unexpected and be prepared. I cannot count the times I found a significant other or a spouse at the home of a person who was supposed to be single or living alone or the times I ran across an at-risk person or a partner in the field who needed a blood test.

4. Organize and prioritize your work. This goes with out saying it saves time and work. Also look at your field records before you go home or report to work. You will be surprised how many can be worked going or coming each day with very little effort.

5. Contrary to popular belief, most clients work. That's why field visits and phone calls early in the morning, after 4 PM or even on weekends are usually more successful than at 10 AM.

6. Do not assume or take anything for granted. I vividly remember the merchant marine I interviewed early in my career who claimed he knew everything about STD's in fact he was in charge of the ship health education classes. Therefore, I assumed he knew the signs and symptoms of syphilis and did not educate him about the disease. During the re-interview another DIS educated him about the stages of the disease and he recognized his partner's palmar plantar rash. What was a busted case became a case with disease intervention.

7. Educate not only yourself but others including practitioners, nurses and other medical personnel about STD's. We have become the experts so each of us have an obligation to learn about the legal, medical and laboratory aspects of STD's and be able to pass that information on to health care professionals. How many of you know about the recent changes in FI. Adm. Code 64D-3 regarding which STD's are reportable, when to report, where to report, how to report and what form should be used? These are all questions each you should be able to address along with testing during pregnancy.

8. Every patient has at least one partner that can be located. Anonymous sex was occurring before I started and will continue after you and I are long gone. Our job is to develop rapport with the patient to get that partner. All too often I've seen DIS give up the moment a patient mentions they use the Internet to meet partners or that they were a sex worker. It takes time and motivation to get information. PCRS cannot be done in 15 minutes.

9. When you think you are overworked, please think about the 80 DIS in 1988 who had to provide PCRS to almost 8,400 cases of infectious syphilis or 1986 when they had to verify the treatment of over 67,000 cases of gonorrhea and provide PCRS to 3,000 persons with resistant gonorrhea and over 700 cases of associated PID.

As I look back it has been a wonderful train ride. Lots of challenges, some ups and downs, worked with lots of wonderful people and a few turkeys along the way. Developed some life-long friendships, and had more busted cases than I care to admit. Even when I did every thing by the book I still failed at times.

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**Loretta M. McCroskey** retired on January 3, 2007 with more than 40 years of dedicated government service. She will be missed for her many contributions to the field of public health, especially in the area of laboratory testing for botulism.

Loretta began her CDC career as a microbiologist when she joined the Aerobic and Anaerobic Laboratory in September, 1966. She remained as the principle laboratory

testing personnel when the Botulism Laboratory was split from the Anaerobe Laboratory and joined the Enteric Diseases Laboratory.

Loretta's work cut new roads into CDC's understanding of laboratory investigations of botulism, botulinum toxin, and neurotoxin producing Clostridia species that are involved in human cases. The research articles Loretta authored or coauthored provide a tremendous resource for laboratory investigators. These articles have been cited in more than 140 research manuscripts and book chapters. The procedures she helped develop were adopted as "gold standard" methods across the United States and in many International laboratories. And these methods continue to be utilized as part of the US preparedness for bioterrorism through the CDC's laboratory Response Network. Loretta's work on the identification and characterization of Clostridium baratii type F and Clostridium butyricum type E provided a world-wide recognition of these species as causes of botulism. The thoroughness of Loretta's work is evident by the number of discoveries made, including the laboratory confirmation of over 50 unique foods which have caused botulism. Loretta demonstrated the true heart of public health commitment by sharing her knowledge and expertise with countless US and international visitors. And she trained numerous students, through the Emory Work Study Program, many of who went on to become research scientists or medical practitioners.

Loretta's dedication, throughout her career, was demonstrated through numerous outstanding performance awards. Even when faced with numerous organizational changes that have occurred during her 40 year career at CDC, Loretta recognized the value of focusing on the goal- Do the best work possible to help improve public health.

Please join us in wishing Loretta well as she welcomes this opportunity to spend more time with her family. At her request, there will be no formal retirement ceremony. Please contact Susan Maslanka if you wish to send Loretta a message or if you wish to contribute to a retirement gift.

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Gladys H. Reynolds, PhD, MS Senior Mathematical Statistician-- Office of the Director, Office of Strategy and Innovation, Office of Minority Health and Health Disparities
Please join us in celebrating an outstanding career in federal service
Friday, February 23, 2007 1:00 PM - 3:30 PM
Roybal Campus, Thomas R. Harkin Global Communications Center, Auditorium A
After 41 years of outstanding federal service, Dr. Gladys H. Reynolds will be retiring from CDC on January 3, 2007. Gladys joined CDC in 1960 as a Mathematical Statistician and an Epidemic Intelligence Service (EIS) Officer in the Statistics Section of CDC's Epidemiology Branch. She received her undergraduate training in history and political science, mathematics, and education from Yankton College in South Dakota; obtained her Masters degree in the field of statistics at Virginia Polytechnic Institute. She also was on the faculty in the Department of Biometry and Biostatistics at Emory from 1965 to 1967 and then received a National Institutes of health Special Research Fellowship. She received a PhD in biometry with a minor in Biostatistics at Emory University. She was recruited to work at CDC after receiving her Masters degree in statistics.
During her tenure at CDC, Gladys has -1-held the positions of Mathematical Statistician and Unit Chief, in the Statistics Section of CDC's Epidemiology Branch, Chief, Research Statistics Sections, Operational Research Branch, and Chief, Research and Evaluation

Statistics Section, Evaluation and Statistical Services Branch, Division of Venereal Disease Control, Chief, Evaluation and Statistical Services Branch, Division of Sexually Transmitted Diseases, Center for Prevention Services, and Mathematical Statistician for the Office of Minority Health and Health Disparities. Dr. Reynolds was the first woman and the first statistician to serve as the head of a Statistics Branch at the CDC. As Chief of the Evaluation and Statistical Services Branch, Division of Sexually Transmitted Diseases, and as Senior Statistician in the Office of Minority Health and Health Disparities, her contributions included extensive collaborative work on major public health problems, especially the health of women and minorities. At CDC, Dr. Reynolds is the only woman to have served as both an Epidemic Intelligence Service Officer (EIS) and as a Supervisory Public Health Advisor, pioneering these roles for women.

Dr. Reynolds' CDC Career has been characterized by exceptional service, leadership, and outstanding achievements that are a model of commitment to excellence. She was instrumental in helping to develop student training programs for minorities such as Project IMHOTEP. She chaired both the first CDC Tribal Consultation Policy Work Group (1996-1998) and the first CDC Tribal Colleges and Universities Work Group, (1997-1998). She has authored numerous journal articles, received a host of honors and awards and been an invited speaker in numerous national and international meetings. In 1987, she organized and chaired the first CDC awards committee for the best paper written by a statistician or statisticians. She organized and chaired the first and third CDC Statistical Symposiums. She chaired the 1991 Annual Meeting of the American College of Epidemiology on the topic, "The Morbidity/Mortality Gap: Is it Race or Racism?" and was the Guest Editor for a Special Volume in the Annals of Epidemiology on the proceedings in 1993. She was the first statistician in the CDC Atlanta campus to be elected a Fellow in the American Statistical Association (1985) and is still the only statistician in the CDC Atlanta campus to have been elected to the International Statistical Institute (1986).

Dr. Reynolds has always been especially concerned about the biases that women and minorities face in professional and management positions and has served as a role model for statisticians and women in management positions and in professional societies. As a statistician, her work on mathematical modeling of sexually transmitted diseases (STDs) was among the earliest in the area and the statistical work that continued under her direction on modeling, including simulation models and time series has been vital in clarifying relationships between risk factors, incidence and prevalence of disease, and control methods. In addition to her work in modeling, she was involved in the design, analysis and interpretation of clinical trials and program evaluation.

She has also served as an anchor for CDC organizations and committees. She served as President of the Association of Executive Women, and was an organizing member of the association. As a member of the CDC Equal Employment Opportunity Advisory Council and Chair of the Affirmative Action Committee, Dr. Reynolds developed two models: the first estimated the approximate percent of positions that must be filled by each race-sex category to meet parity (e.g., workforce or population representation) in a certain number of years, and the second model projected the number of persons needed in each race-sex category in year 1, 2, ... (N-1) to ensure progress toward the goal. In the American Statistical Association (ASA), she served on the Board of Directors, held many positions and served on many committees.

She received the CDC Award for Contributions to the Achievement of Women in 1986. For her efforts and scientific achievements, she was awarded the Women in Science and Engineering (WISE) Lifetime Achievement Award in 1989. In 1999, she

received the ASA Founders Award for longstanding service to the Biopharmaceutical and Statistics in Epidemiology Sections and to many ASA Committees, and for leadership in advancing women and minorities in the professions. In 2004, Dr. Reynolds was awarded the Elizabeth L. Scott Award by the Committee of Presidents of Statistical Societies, including ASA, International Biometric Society-Easter North American Region and Western North American Region, Institute of Mathematical Statistics, and the Statistical Society of Canada. The award was presented for her outstanding leadership and commitment to the field of Biostatistics/Epidemiology, to national and international health, and to the promotion of women and underrepresented groups to the full potential of their roles in statistics and public health management and professional society positions. These are just a few of her many awards and honors.

In retirement, Dr. Reynolds plans to spend time with family and friends, travel, and walk on the beach. As well, she will continue her commitment to improving the health and well being of all people in all countries.

If you would like to contribute to the retirement celebration, have letters, notes, photographs, and/or cards for a memory book, or have any questions, please contact the following individuals before February 9, 2007 :

Karen Harris Bouye

Sarah Berry

Judith Wellen

Dr Andrew T. Chen, Ph.D., FACMG, is retiring and his last day at work will be on February 2, 2007. Dr. Chen has worked for CDC approximately 33 years and has been a participant in the development of genetic laboratory testing and related issues at the Agency.

Dr. Chen received his undergraduate degree from the Chinese University of Hong Kong (Chung Chi College), master degree in genetics from McGill University, Canada, and Ph.D. degree in human cytogenetics from the University of Western Ontario, Canada. He joined Emory University, Department of Psychiatry as Associate in psychiatry in 1969 and was promoted to Assistant Professor in 1970.

Dr. Chen came to the Centers for Disease Control and Prevention (CDC) in Atlanta in 1974 as Chief, Genetics Laboratory, Pathology Division, Bureau of Laboratories. He is currently Assistant Director for Genetics and Extramural Affairs, Division of Laboratory Sciences, National Center for Environmental Health (NCEH). Prior to this appointment in 1989, he was Chief, Genetics Branch, Division of Environmental Laboratory Sciences, NCEH. After he joined the CDC, he co-organized the CDC Ad Hoc Meeting on Genetic Diseases on April 1, 1976. He also assisted formulating cytogenetics regulations and initiated the CDC DNA Bank. He served on national committees, e.g. Genetic Disease and Advisory Committee, Health Service Administration, HHS; Scientific Advisory Committee, Lower Mississippi River Interagency Cancer Study. He also served as temporary advisor to the Pan American Health Organization in Costa Rica (1981). Internationally, he has been invited to lecture in Europe, Australia, China, Malaysia, etc. He served as consultant (genetics) to the Department of Health, the Executive Yuan, Republic of China, 1988. Currently, he is a senior advisor to the Shanghai Municipal Center for Disease Control and Prevention (Shanghai CDC), China and also works with the China Center for Disease Control and Prevention (China CDC).

Dr. Chen is a Diplomate, American Board of Medical Genetics. He founded and was the first President, Association of Chinese Geneticists in America (ACGA). He was appointed as visiting professor by the Shanghai Medical University in Shanghai and the

Henan University in Zhengzhou, China. He was co-chair of the International Symposium on Environmental Mutagenesis and Carcinogenesis in Shanghai in 1991. He also chaired or co-chaired sessions of many scientific organizations on the national and international level. He authored and coauthored 100 scientific articles, abstracts, manuscripts and chapters and co-edited a book. He is also an advisor to the Chinese Journal of Environmental & Occupational Medicine.

After his retirement, Dr. Chen will be Executive Director, ACGA. The head quarter of the Association is in Atlanta.

Please join us in wishing Dr. Chen well as he begins this new phase of his professional life. Dr. Chen has requested that there be no retirement party planned; however, his office has planned a small, informal luncheon on his behalf. If anyone has questions about Dr. Chen's retirement, about this announcement, or the informal luncheon, please contact Ms. Mildred Jordan (myj0@cdc.gov) or 770-488-7950.

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Date: Thursday, March 01, 2007 2:00 – 4:00pm  
Place: Koger Center 2900 Woodcock Blvd, Atlanta, GA 30341  
Columbia Building, Conference Room 1064/1065

After a distinguished 32-year career in public health, **Dr. Phyllis A. Wingo** will be retiring from Centers for Disease Control and Prevention (CDC) on Thursday, March 1, 2007. In addition to Dr. Wingo's numerous career achievements, she is a nationally- and internationally-known cancer epidemiologist. In October, 1974, Dr. Wingo began her career at CDC in the Division of Bacterial Diseases, but transferred in 1976 to her long-term home at CDC in the Division of Reproductive Health (DRH). In DRH she served as the project director for the Cancer and Steroid Hormone Study (CASH)—a landmark study of the long-term safety of oral contraceptive (OC) use and cancer; as the initial principal investigator for the Women's Contraceptive and Reproductive Experiences (CARE) Study; and as the editor of *An Epidemiologic Approach to Reproductive Health*—a collaboration between DRH, Family Health International and the World Health Organization.

From 1994-2000, Dr. Wingo served as the Director of Surveillance for the American Cancer Society's National Home Office, where she oversaw their annual hallmark publication, *Cancer Facts & Figures*. From 2000-2006, Dr. Wingo led CDC's cancer surveillance activities as Branch Chief of the National Program of Cancer Registries (NPCR). She has overseen the publication of the United States Cancer Statistics, the official federal cancer statistics that cover more than 90% of the U.S. population and provide data for most states and District of Columbia ([www.cdc.gov/uscs](http://www.cdc.gov/uscs)). She has come full circle in her illustrious career and is currently working in DRH as a Senior Scientist (March 2006-present).

In 2005, Dr. Wingo was the National Center for Chronic Disease Prevention and Health Promotion's nomination for the Charles C. Shepard Lifetime Scientific Achievement Award. Over and above her efforts to implement a nationwide system for cancer surveillance, Dr. Wingo has fostered research programs in women's health and cancer patient care. She has authored more than 100 publications in peer-reviewed medical and epidemiologic journals and 13 book chapters with topics ranging from cancer surveillance, reproductive factors and cancer, hormones and cancer, gynecologic

conditions among women of reproductive ages, teen pregnancy, and international studies in family planning.

Dr. Wingo serves as a reviewer for numerous scientific journals and is an Associate Editor for the American Journal of Epidemiology. She has made presentations at congressional briefings and to the President's Cancer Panel and the Institute of Medicine; she has served on the Advisory Committee on Reproductive Health Drugs at the Food and Drug Administration. She is a member of the Senior Biomedical Research Service in the Public Health Service and has an adjunct professor appointment in epidemiology in the Rollins School of Public Health at Emory University. She has an M.S. in mathematical statistics from the University of Georgia and a Ph.D. in epidemiology from the Rollins School of Public Health at Emory University.

In addition to Dr. Wingo's impressive public health credentials, she is admired as a hard-working friend, dedicated mentor, trusted colleague, devoted wife to Rick—her husband of 38 years, and loving mother to Jennifer, Cara, and the four-legged energetic boxer, Ginger. Her retirement plans include cooking, gardening, traveling, and playing with Ginger, who rules the Wingo household.

If you would like to send items for Dr. Wingo's scrapbook please contact Missy Jamison at 770.488.3154 or send them to her via interoffice mail at MS K-53. If you are able to attend the celebration, please RSVP to Stacey Mattison at 770-488-6338 or [smattison@cdc.gov](mailto:smattison@cdc.gov) by February 16, 2007.

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Retirement Celebration for Lanette Wolcott
Friday, February 9, 2007, 1:30-3:30 p.m.
Century Center, Bldg. 1825

On December 30, 2006, **Lanette Wolcott** bade farewell to CDC/ATSDR after 25 years of public health service.

Lanette began her career at CDC in 1980 as a layout artist and typesetter in the CDC Graphics office, which was part of the Management Analysis and Services Office (MASO). From there, she moved through a succession of positions that landed her in the CDC Library (MASO); the Chamblee Coordinator's Office (MASO); the MMWR Office in the Epidemiology Program Office (EPO); the Agency for Toxic Substances and Disease Registry's (ATSDR's) Office of Policy and External Affairs, Editorial Services; and the National Center for Environmental Health (NCEH)/ATSDR Office of Communication's Editorial Services. She served in such capacities as visual information specialist, library assistant, editorial assistant, program specialist, technical writer-editor, ATSDR senior writer-editor and Editorial Services team lead, and finally as lead technical writer-editor for NCEH/ATSDR Editorial Services.

Lanette is thankful that she could spend almost half of her life at CDC, working with such diverse, intelligent, dedicated, and good-hearted people. With sincerity and pride, she said that "not many people are presented with the opportunity to do something truly worthy during their lives, and CDC gave me the chance to contribute—in my own small way—to a greater purpose."

Lanette is excited about having unfettered time to travel and to pursue her many creative and intellectual interests. We who watch her embark on a new phase of life with her husband, Marlon, wish her "fair winds and following seas." We also expect that from time to time she will revisit this old home port of hers to report on her latest voyages, in whatever form they may take!

Please join us on Friday, February 9, to celebrate this important milestone in Lanette's life.

POC is Larry Furphy, 404-498-0025.

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**Sharlyn L. Wilkinson**, Atlanta Human Resources Center (AHRC), formerly HRMO, will be retiring on Friday March 2, 2007 with almost 35 years of federal service.

Sharlyn joined CDC on November 1, 1985 as a Personnel Management Specialist. Her time with CDC has been very rewarding and challenging. During her tenure at CDC, she has been a part, in some small way, of many major changes, events and activities in CDC's history, including being one of the founding members of the CDC/ATSDR Chapter of Blacks in Government. She quickly went from being the "youngest" and the "newest" Personnel Generalist to being the "senior" Personnel Generalist in 1990; served as the first Deputy Chief of the Operations Branch, HRMO from 1992 to 1995; and, in 1996, became the first Black female Branch Chief. When HHS decided to consolidate the number of Personnel Offices from 40 to 4, Mrs. Wilkinson took this opportunity to change positions. She applied and was reassigned to the senior HR expert and advisor position. Shortly thereafter, a new opportunity and challenge came along for AHRC, Competitive Sourcing. Mrs. Wilkinson's expertise and experience was a perfect match for this assignment and she was asked to assume this role. She has worked with the Competitive Sourcing/A-76 Program (mandated by the President's Management Agenda) serving as the Human Resource Advisor (HRA) to management and employees. As the HRA, she has tried to ensure a smooth landing and transitioning of CDC/ATSDR employees into this new way of doing business at CDC.

Sharlyn plans to spend her time after retirement taking care of her parents, enjoying life, and doing some of the things she has put off because of working and rearing children. She also looks forward to one day experiencing the joys of being a grandparent.

Although no formal celebration is being planned at this time, cards, letters, etc. may be sent to Sharlyn at MS-K06 for her memory book; emails may be sent to her at or you may contact by telephone.

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SHARE --Services to Help All Regular Employees

Ringling Brothers and Barnum & Bailey Circus

Location: Philips Arena

Saturday, February 17, 2007
From: 11:00 AM To: 1:00 PM
From: 3:00 PM To: 5:00 PM
From: 7:00 PM To: 9:00 PM

Sunday, February 18, 2007
From: 11:00 AM To: 1:00 PM
From: 3:00 PM To: 5:00 PM
From: 7:00 PM To: 9:00 PM

Monday, February 19, 2007
From: 11:00 AM To: 1:00 PM
From: 3:00 PM To: 5:00 PM

Web site: <http://intranet.cdc.gov/share/index.html>

(For details about this event)

Contact: Youlanda Outin

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**'Sister Act' the Musical**

Location: Alliance Theatre at the Woodruff

**Saturday, February 24, 2007** From: 08:00 PM To: 10:30 PM

Web site: <http://intranet.cdc.gov/share/index.html>

(For details about this event)

Contact: Youlanda Outin

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JOB VACANCY

Overseas Business Officer, GS-301-15

Job Announcement Number: HHS-CDC-T3-2007-0596

Agency: Centers for Disease Control & Prevention

Sub Agency: Department of Health and Human Services - CDC

SALARY RANGE: 93,063.00 - 120,981.00

USD per year

SERIES & GRADE: GS-0301-15/15

PROMOTION POTENTIAL: 15

OPEN PERIOD: Tuesday, February 06, 2007

to Tuesday, February 27, 2007

POSITION INFORMATION: Full-Time

Temporary, Not-to-Exceed 2 Years

DUTY LOCATIONS: 1 vacancy - Guatemala

City, Guatemala 1 vacancy - Nairobi, Kenya

<http://jobsearch.usajobs.opm.gov/getjob.asp?JobID=53369708&AVSDM=2007%2D02%2D06+11%3A24%3A47&Logo=0&sort=rv&jbf574=HE35,HE39&brd=3876&vw=d&ss=0&CustomApplicant=15509,15511,15668&caller=/index.asp&tm=3d>

WHO MAY BE CONSIDERED:

This vacancy is open to current permanent CDC employees with competitive status only. Competitive status refers to employees who are serving on a career or career conditional appointment. PHS Commissioned Corps Officers interested in performing the duties of this position within the Commissioned Corps may apply online to this announcement. Candidates will be referred to the selecting official as Commissioned Corps (CC) personnel and not as candidates for conversion to a permanent career or career-conditional

CDC is an Equal Opportunity Employer.

The positions are located at HHS, Center for Disease Control and Prevention, Coordinating Office for Global Health, **Nairobi, Kenya and Guatemala City, Guatemala**

Serves as principal official with responsibility for planning, organizing and directing the day-to-day operations of a complex international office.

Overseas Assignments: Employees selected to serve on an overseas assignment are assigned for two years and must sign a rotational agreement. The assignment may be extended based on the needs of the agency.

This position is eligible for special pay allowances (e.g., post differential, housing, relocation, etc.)

Immunizations are required and will be administered by the CDC before relocating overseas.

A Department of State medical clearance is required.

The position will remain stateside until security clearances and approval for overseas travel is obtained.

This is a 2 year assignment, that may be extended for an additional 2 years. Current permanent CDC employees will be processed using the appropriate temporary appointing authority. The selectee will have statutory return rights to their permanent position titles, series and grade once the appointment is completed.

KEY REQUIREMENTS:

Security Clearance Required

Financial Disclosure Required

Overnight Travel Required

This is not a bargaining unit position

Moving Expenses are authorized

Relocation Incentive authorized

CDC-Kenya is one of the premier CDC “consolidated” country programs. It has attracted the highest caliber of technical staff from the US, Kenya, and other countries. With over 700 staff and contractors working out of offices in Nairobi and Kisumu, CDC Kenya is the largest CDC program outside of Atlanta. CDC-Kenya encompasses at least 12 different programs representing 9 different CDC Atlanta offices with a total budget in 2007 expected to be \$115 million. The dynamic nature of CDC Kenya is reflected by the rapid growth due to the large number of new and growing programs associated with considerable challenges and rewards—the overall budget for CDC-Kenya was only about \$15 million 4 years ago. The Overseas Business Officer position is an integral part of CDC-Kenya, with considerable responsibility for overall fiscal, human resource, and programmatic management of the organization. CDC-Kenya regularly receives high level visits from CDC Atlanta, other USG agencies, senior USG elected or appointed officials, and other highly respected international or multinational representatives.

Nairobi provides a unique combination of modern cosmopolitan society with all the characteristics of a developing world African city. The population of Nairobi is about 2.5 million, with a substantial portion living in urban slums, while others live in conditions comparable to some of the best one would encounter in the U.S. While there are several excellent options for schools in Nairobi, the International School of Kenya is regarded as one of the premier international schools globally. Approximately 600 students representing 60 different countries attend distinct preschool, elementary, middle and high school programs (including an international baccalaureate program) on a stunning 60-acre campus.

Kenya is an incredible country for weekend travel, boasting some of the most spectacular game parks and beaches in the world, and Nairobi provides the perfect jumping off point for many of these sites. At almost 6000 feet above sea level and a very short distance from the equator, the weather in Nairobi is very nice and almost always quite temperate, usually with warm days (high 70s) and cool nights (high 50s). The major seasonal patterns revolve more around wet and dry than hot and cold and there is plenty of sunshine.

The CDC Nairobi office is in a brand new, modern building situated on the west side of town on the campus of the Kenya Medical Research Institute (KEMRI). From the second level, Mt Kiliminjaro is visible on a clear day, even though it is well over 100 miles away.

POC Ron Stoddard

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**CTS GLOBAL, Inc. (a division of Comforce Technical Services) Position Vacancy List as of February 1, 2007**

**Senior Laboratory Scientist, Angola**

Consultant will provide support services to satisfy the overall operational objectives of the Director of the National Institute of Public Health (INSP). Serve as a key advisor to the Director of INSP on programmatic, fiscal, technical and/or scientific issues for Public Health Laboratory services and supervises operations of the molecular biology laboratory. Analyzes laboratory processes and/or agency programs; with a primary focus on joint international collaborations on HIV /AIDS and Avian Influenza Initiatives. Communicates with colleagues, across Institute, and other contacts outside the agency to gather and analyze information about collaborative programs. Writes peer reviewed reports, letters, contracts, and other documents with recommendations for said research projects, policies and activities. Performs analytical and evaluative work associated with program activities and/or related operational research. Responsible for Policy and Program Development, Carrying Out Study Procedures, Preparing Reports and Making Recommendations, Serving as a Scientific Specialist, Reviewing Literature and Developing Methodology

Consultant must have: Master's degree in Microbiology or Molecular Biology. **Level IV Portuguese.** Experience must reflect the knowledge, skills, and abilities listed above. **Please submit CV in Portuguese.**

**Statistical Analysis and Data Management Oversight, Botswana**

Consultant will provide support services to satisfy the overall operational objectives of the HIV Prevention Research Unit (HPR). The primary objective is to provide contractor services & deliverables through performance of statistical analysis & data management oversight for the conduct of research. Collaborate with investigators in the design & implementation of research, including clinical trials, surveys, observational studies, & operations research. Provide management direction for all data collection, data management, and data analysis activities for HPR research. Provide management direction for system development, training, & maintenance, including all software used for data collection. Provide management direction in the design & implementation of data quality management procedures and reporting. Identify, characterize, and identify methods to resolve, and monitor resolution of, problems with: data validity, completeness, coding, timeliness, or data system efficiency. Collaborate with trial statisticians in preparing DSMB reports. Provide clean and complete datasets for timely analysis by investigators & statisticians. Operate data collection and management procedures in compliance with FDA Good Clinical Practice standard. Evaluate, guide, or implement possible alternative approaches to data collection and data management

Consultant must have: a **Doctoral** degree in biostatistics, statistics, or related statistical field. 3 years+ experience in a statistical leadership position involving data management for biomedical

health research (clinical trials, observational studies). Demonstrated experience in development of computer software systems for data collection & data quality management. Ability to communicate statistical ideas in plain English & to work well with interdisciplinary research teams. High degree of competency in SAS, or similar statistical analysis software. Experience must reflect the knowledge, skills, & abilities listed above.

**Qualified Candidates, please submit your CV (with position title) to [emyers@comforce.com](mailto:emyers@comforce.com) Due to the volume of resumes received, we are unable to accept phone calls. Should your qualifications meet our requirements, we will contact you.**

**Laboratory Program Advisor, South Africa**

Consultant will serve as a focal point on conceptualizing and implementing the laboratory component of the Field Epidemiology Laboratory Training Program (FELTP). Incumbent will provide expert assistance to National Institute for Communicable Diseases (NICD) and advice to facilitate the implementation of the South Africa FELTP. The incumbent will work closely with NICD, South African Department of Health at the national, provincial, district and sub-district levels, the National Health Laboratory Services (NHLS), the University of Pretoria, and other universities to support bilateral programs. Primary responsibility for providing assistance to the NICD regarding project activities and training programs to continue the institutionalization process within the NHLS. Work with the NDoH, PDoH, NICD, and NHLS to strengthen laboratory support for the surveillance of infectious and chronic diseases, including mortality surveillance utilizing SAFELTP as the major training approach in providing South Africa with trained laboratory scientists and mid-level public health professionals in order to improve human capacity in the country. Provide consultation to assist South Africa Department of Health/NICD with planning and implementation for laboratory system strengthening activities in supporting field epidemiologic investigations. Serve as team leader /supervisor for applied field projects of laboratory participants in the SAFELTP. Serve as Technical Advisor in all aspects of project implementation, with the project consisting of three components: laboratory support for communicable and non-communicable disease surveillance; a training program for laboratorians; and in-service training program for laboratory specialist in NHLS.

Consultant must have: a degree in medical technology (or other laboratory science degree), with five years of experience working in a clinical laboratory. A Master's of Public Health or equivalent with extensive experience in running international public health training is preferred. A doctoral degree in a laboratory science or related field is highly desirable. Experience in training laboratory scientists and technicians, developing laboratory curriculum, managing operations in a clinical or public health laboratory, and planning and policy development.

**Qualified Candidates, please submit your CV (with position title) to [emyers@comforce.com](mailto:emyers@comforce.com) Due to the volume of resumes received, we are unable to accept phone calls. Should your qualifications meet our requirements, we will contact you.**