

## Chaplain Michael Zoosman does a different type of research



Michael Zoosman,  
Clinical Center Chaplain

Science perpetually builds on itself, working on the knowledge and discoveries of the past. For example, we would likely never have had laparoscopic surgery if the utility of a sterile operating environment hadn't been discovered in the

generations before.

This too was the case for Clinical Center Chaplain, Michael Zoosman, in his personal research to uncover his family's history. Zoosman, a former prison and psychiatric hospital chaplain, works as a multi-faith hospital chaplain in the Clinical Center's Spiritual Care Department, providing resources and support for patients and their families during their hospital stay.

Zoosman had heard stories from his grandmother of his family's escape from Poland during World War II, but the tales were fragmented. His aunt had attempted to document the specifics of the family's history and eventually that torch was passed to him.

Zoosman knew that his grandmother, Clara, was part of the Spektor family, a family of 10 who lived on a small farm in Volyn, Poland (which falls in present day Ukraine). The five sisters and three brothers grew up modestly, selling produce for income. But it wasn't until he proactively recorded his grandmother and his aunt's accounts – using a karaoke machine – that the story came into focus.

In 1941, when Poland was occupied by Nazis, the Spektor family who were still living in Volyn were forced to migrate to a Jewish ghetto nearby called Kozin, also in (then) Poland. The eldest sister, Faiga, was living with her husband and son further away in a town called Operand and managed to flee

By the summer of 1942 they were no longer safe in the ghetto and most of the family fled when it was rumored that Nazis were coming to kill the occupants of Kozin. In spite of the family's desperate attempts to save themselves, the brothers and parents were murdered by Nazis and security services.

The four unmarried sisters were on the run long enough to eventually connect with a Polish Catholic farmer, a man the family knew only as Mr. Cegielski, who harbored them at great personal peril.

He hid them first in straw stacks and eventually in a small bunker that he allowed the girls to build for themselves out of sticks, roots and straw. He brought them each a potato and a bottle of water when he could manage it.

Local Nazi sympathizers came to pillage Cegielski's home and ultimately murdered him for harboring Jews. The four sisters managed to stay hidden until Cegielski's son let them know of his father's death.

The sisters decided their best chance of survival was to split up and use aliases and false documents to hide their identities. Despite their efforts, one sister was killed when it was discovered she was Jewish. After the war ended, the remaining sisters reconnected with three of them eventually moving to the United States and one emigrating to Buenos Aires, Argentina.

As Zoosman documented his grandmother's memories and conducted research, the process continued to yield dead ends. The names and locations from the stories were hazy and resources for tracking information were sparse. He wrote an extensive thesis for Brandeis University on the history that his grandmother dictated orally, but verifying the information was grueling and often unfruitful.

Assistance came from an unlikely source – an old friend of Zoosman's from high school read his thesis and was able to locate a small museum in Markowa, Poland: The Ulma Family Museum of Poles Saving Jews in World War II. Even without Cegielski's first name, the museum had enough contextual evidence to make a match. The Polish Catholic farmer who had saved the lives of the four Spektor sisters was named Michal Cegielski.

With the identity of the man who had saved the Spektor sisters uncovered, Zoosman's 100-year-old grandmother applied for Cegielski to be recognized by the Yad Vashem museum in Israel. Yad Vashem translates to "a memorial and a name" in Hebrew and serves as a museum and memorial to victims of the Holocaust. On December 8, 2021, the request was granted, and Mr. Cegielski was acknowledged by the museum as "Hasidei Ummot ha-Olam," a Hebrew term meaning "Righteous Members of the Nations of the World."

In a twist of fate, 40 years after Michal Cegielski sheltered Zoosman's relatives, Cegielski's great-grandchildren are working to support Ukrainians who are fleeing the current conflict and into Poland.

Zoosman has given a detailed account at an event hosted by the CANDLES Holocaust Museum and Education Center. CANDLES was founded by a survivor of the Auschwitz concentration camp and is a museum dedicated to education about the Holocaust. Zoosman first heard about CANDLES from the NIH Clinical Center CEO, Dr. James Gilman, as the museum stands in Terre Haute, Ind., Gilman's childhood home.

- Dan Silber

Full story online at [www.cc.nih.gov/ccnews](http://www.cc.nih.gov/ccnews)

## Clinical Center program trains often-overlooked transfusion medicine professionals



Current SBB student Robel Seifu examines a blood sample.

As blood banks throughout the country navigate the challenging environment caused by the pandemic, their staff play a key role in supporting this vital component of the health care system. An often-overlooked part of that group are certified Specialist in Blood Banking (SBB) professionals. According to research, SBB programs play an important role in preparing medical technologists to become leaders and contributors to the field of transfusion medicine through dedicated education and training.

If someone decides to become a specialist in blood bank technology in the United States, there are 12 accredited programs for certification, one of which is hosted by the NIH Clinical Center's Department of Transfusion Medicine (DTM).

DTM's SBB program delivers face-to-face, onsite training - one of only three programs to do so.

The Clinical Center's program was established in 1966 as a continuing education opportunity for staff and has since evolved into an established and accredited program.

The current curriculum includes formal and informal teaching sessions that address blood donations; genetics; molecular immunohematology (the study of antigen-antibody reactions in the blood); viral disease testing; blood preservation and storage; blood component therapy; hazards of blood transfusion; blood bank administration and other relevant topics.

DTM's SBB program consists of four components, which are performed concurrently during the 1-year certificate program. The components focus on instruction, examinations, homework assignments and journal clubs; hands-on practical experience through clinical rotations and work as temporary, part-time employees of the blood bank; and research on scientific, educational or management-oriented projects that introduce students to performing literature reviews, practicing time management, collecting and analyzing data, writing findings, presenting and potentially submitting their work for publication.

## Patient Library reopens

The NIH Patient Library has faced challenges since its inception in 1955, from relocations to federal government shutdowns - but perhaps no time has been more challenging than the COVID-19 pandemic and the resulting pause in library services from March until September 2020.

Gradually and incrementally, and always with an eye on safety, the library has resumed patron services. First to staff only, then to patients and staff through "curbside delivery" and finally to open door and concierge service to inpatients, outpatients and their caregivers.

Located off the 7th floor atrium, the library is now open to visitors from 11 am until 6 pm, Monday through Friday, and 11 am until 4 pm on Saturdays.

In September 2021, head librarian Marie Kaplan was very happy to revive one of the most important services the librarians provide, bringing library materials to the patients at their bedside, be it the daily newspaper, a new movie on DVD or the latest bestselling book.

Though printed volumes remain their focal point, several digital offerings were initiated, expanded and promoted during the pandemic: popular digital eBooks and audiobooks using the patient library Libby library reading app, as well as streaming guided imagery via the library's "Healing Streams" meditation page. Both resources are available to staff as well as patients.



*Newest librarian Liz Maloney (left), discusses a children's book with Head Librarian Marie Kaplan.*

"Not surprisingly," Kaplan says, "the sleep meditation was especially popular among staff this past year!"

In addition to print books, DVDs and online services, the library also loans laptops to patients. The Patient Library also has a collection of musical instruments available to borrow, including guitars, ukuleles, keyboards and a doumbek drum - an Egyptian percussion instrument.

Kaplan notes that among the many losses suffered during the pandemic year of 2020, the most wrenching for library staff was the passing of dear colleague and librarian Martha Caro, who worked there for 15 years. Kaplan said, "She left a deep and abiding mark on the library and its services, and in so many hearts."

The newest librarian, Liz Maloney, brings her experience as a children's librarian with the DC Public Library System to serve the pediatric as well as adult patients at the Clinical Center. She also brings her creative talents to bear in storytelling as well as managing the popular NIH Patient Library Facebook page.

The library's services are provided primarily for patients and their families at the Clinical Center. However, NIH staff employed in Building 10 may access the digital offerings and check out books and audiobooks from the library. If staff check out an item that is then requested by a patient, a librarian will contact them and request its return for patient use. Magazines, music CDs, DVDs and computers are reserved for use by patients and their guests only.

2022 marked the library's 67th year of operation. The patient library will continue to live up to its motto of being "your home library away from home" for Clinical Center patients and their caregivers.

Kaplan says the librarians "always strive to accomplish the simply stated goal of the first NIH patient librarian, Peg Hannigan, who aimed to 'make the patients happy!'"

- Debbie Accame

## Clinical Center Fine Art Program

Do you know you don't necessarily need to go to an Art Gallery to see Fine Art?

Since 1984, the Clinical Center Fine Art Program (CCFAP) has displayed carefully selected works in common areas, patient care areas and galleries throughout the Clinical Center. Patients, NIH employees and visitors all benefit from the stimulating, hope-filled pieces that promote healing in an aesthetically pleasing environment.

For the 2022 lineup, the Clinical Center is pleased to echo the efforts of NIH's UNITE initiative which focuses on diversifying the portraiture within NIH buildings and digital spaces. The hospital has made extra efforts to display the work of a local, more diverse group of artists.

So the next time you're walking down the halls of the Clinical Center - look at the art! Hopefully you will be stimulated and inspired. The exhibits change quarterly. Featured artists for 2022 include:

Shelley Lowenstein's Beta Cells were on display through the first week of April. Her goal is to use art as a bridge between scientists and lay audiences to raise awareness and understanding about the life-giving beta cells in our bodies. Her studio is in Mt. Rainier, Md. <https://shelleylowenstein.com/home.html>



*Painting titled Face 2 Face by James Terrell*

Marie Amegah will exhibit her digital prints from April - June. Her work includes themes of immigration, identity, queer storytelling, nostalgia and human connection.

Halimah Smith will be exhibiting April - June. She is the only artist in this list not local to DC. Her primary mission is to uplift and celebrate black people and culture. Through sales of her art, she has been able to donate funds to expand the learning day for low-income children.

Rose Jaffe will exhibit April - June. She is a DC Native, talented printmaker and muralist. Her work is vibrant and often playful, with themes of political activism, natural healing and spiritual grounding.

James and Zsdayka Terrell will exhibit in two galleries October - January 2023. To see James's painting which was commissioned for Community of Hope's Family Health and Birth Center in North East D.C., go to [instagram.com/p/CaaUhdVukIH/](https://www.instagram.com/p/CaaUhdVukIH/) James is also a musician and frequently explores musical themes in his artwork.

Zsdayka [instagram.com/p/CaapLhKOSFu/](https://www.instagram.com/p/CaapLhKOSFu/) is doing a 60 ft. mural for the Community of Hope of larger-than-life figures. Zsdayka is passionate about having a Family Health and Birth Center in their neighborhood. <https://www.terrellartsdc.com/>

For information about the CCFAP and to see the current exhibit online, go to: [https://lintranet.cc.nih.gov/fine\\_arts/index](https://lintranet.cc.nih.gov/fine_arts/index) [Staff Only]

- Debbie Accame

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### Clinical Center News

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Clinical Center

Dr. Willy A. Flegel, chief of DTM's Laboratory Services Section, and his team recently completed a review of the SBB program titled: "An outcome-based review of an accredited Specialist in Blood Banking (SBB) program: 25 years and counting." According to Flegel, "We collected, reviewed and organized data which provided a useful internal assessment to review the history of our program and prepare for the future."



Current SBB student Ashley Collins uses the lab's pneumatic tube system.

From 1994 to 2021, the SBB program at the NIH Clinical Center graduated 57 students, with an overall pass rate of 95 percent for the American Society for Clinical Pathology SBB examination. Program graduates hold a variety of positions in transfusion medicine-related fields, with hospitals, blood centers and Immunohematology Reference Laboratories being the most common categories of employer.

Michelle Lodermeier graduated from the NIH Specialist in Blood Banking program in 2017 and is now the Assistant Director for the American Red Cross' SBB Program in St. Paul, Minn.

She feels the strength of the NIH program is exposing students to different facets of blood banking not often encountered in hospital transfusion services, such as cellular therapy, molecular immunohematology, blood component processing and advanced immunohematology techniques. Her experience at NIH also taught her the value and importance of being actively involved in the transfusion medicine community, contributing to research, publications, education and networking.

Lodermeier noted, "The dedicated people in this program are all truly invested [in] the students' ultimate success. I was actively invited to take part in various learning opportunities. What I love most about my current position is that I have the opportunity to inspire passion for blood banking in others and help improve their livelihoods, just as the NIH program did for me. Without a doubt, I would not hold the position I have today or have the enthusiasm for my job if I had not attended the NIH SBB program. While I only spent a year at the NIH, I have the utmost respect for the people and work being done at the Clinical Center, and that time will always hold a special place in my heart."

- Debbie Accame

Learn more about the NIH Specialist in Blood Banking program at [www.cc.nih.gov/dtm/research/sbb.html](http://www.cc.nih.gov/dtm/research/sbb.html).

## Clinical Center's Blood Bank Plays a Vital Role in Treatment and Research

### *Donor pool has dropped by 25% due to the pandemic*

Blood is essential to life and health. Prolonging life and improving health are at the foundation of the NIH Clinical Center's mission, so maintaining an adequate and safe blood supply is vital to so much of what happens in the hospital. The NIH Blood Bank is where it all begins.

The NIH Blood Bank has two locations: one in the Clinical Center on the NIH campus in Bethesda, Md., with an additional donor center in nearby Rockville, Md. The Clinical Center focuses on whole blood donations, where all blood components are collected in a single visit. The Rockville location offers easy access for community donors and collects only platelet and 'double red cell' donations, the latter being a specialized process where one donor can provide two units of red blood cells at one time while sparing the other elements of blood compared to conventional single unit donations.

As a part of the Clinical Center's Department of Transfusion Medicine (DTM), the Blood Bank manages blood donations from its generous donors. Many donors are recruited from the local community but NIH staff and some patients and families represent a substantial proportion of blood donors - in 2019, 55% of blood donors were either NIH staff or patient family members. DTM uses most of these donations for transfusions in support of patient care at the hospital. About 20% of all blood donations are used for research conducted in over 200 NIH and U.S. Food and Drug Administration (FDA) scientific laboratories. Additionally, the DTM collects cellular products for development of experimental therapeutics for various illnesses, from sickle cell disease to many cancers.

"The Blood Bank obtains the blood used in transfusions for both adults and pediatric NIH patients," said Al Decot, the Blood Bank's marketing coordinator.

"Red blood cells are frequently used to treat patients with anemia related disorders, platelets are needed for blood clotting for bleeding patients, and granulocytes - white blood cells - are needed for patients with infections."

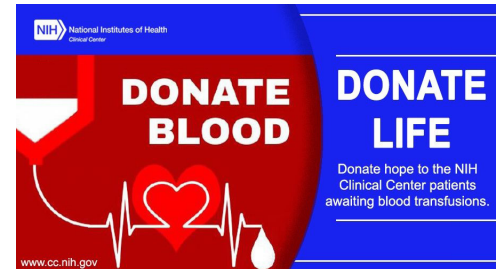
Many NIH Institutes and Centers need a reliable blood supply for experimental and routine treatments, as well as laboratory research. The Blood Bank remains in continuous communication with patient care teams in the Clinical Center to anticipate their needs. All blood products used for NIH patients must meet the same FDA regulations that other organizations, such as the Red Cross, must meet. Donations used for research purposes are categorized and inventoried differently, having less restrictive criteria for donor eligibility.

Recruiting new donors through NIH-based blood drives and cooperative efforts with external organizations is key to maintaining an adequate supply. This has become more challenging as the COVID-19 pandemic reduced the active donor pool by 25%.

Significant efforts are made to ensure a pleasant donation experience for new and returning donors. To ensure donating is safe for the donor, a detailed questionnaire is completed to identify risks for potential complications. People donating blood must be at least 17 years old, and the Blood Bank works hard to expand their pool of younger donors to help complement the roster

of older donors who cannot donate as frequently. There is no upper age limited as long as donor health is stable and established criteria are met.

Other screening rules are applied to assure donated blood is free from many potential types of blood borne infections. The FDA sets the screening criteria, which evolve as ongoing studies provide new information regarding donor eligibility and infectious dangers to the blood supply.



"Blood banking historically started with donors being paid. Then about 50 years ago, screening became increasingly recognized as an absolute necessity and paid donations were phased out with screened voluntary donations replacing them as a way to begin ensuring the safety of donated blood," stated Dr. Leonard Chen, Staff Clinician of the Blood Services Section in the Department of Transfusion Medicine.

"The FDA and CDC carefully monitor the blood supply - right down to geographic regions, where certain types of infections may be more prevalent, and even for pathogens that are more likely to occur in certain seasons of the year," added Chen.

Collecting a variety of blood types is key to maintaining a healthy blood supply. There are eight main types of blood: A, B, AB and O which can be either RhD positive or RhD negative. Group O (positive and negative) can be used for most patients who need blood transfusions and is constantly in need, along with platelets, which only have a short, five-day shelf life.

Using a patient's correct blood type is vitally important as transfusion of an incompatible type can cause damage to multiple organs or even death.

"The blood type really clues us into to what kind of cell donation will benefit the patient the most. Sometimes there's lab work involved to find what transfusable product will be best for a particular patient," said Decot.

The Blood Bank has invested time and resources into screening to ensure donations are safe for the blood donor and recipient. "Don't automatically rule yourself out - potential first-time donors should not assume that age, a particular health condition or other concern will inevitably lead to not being accepted as a donor. If anyone has questions about eligibility, call us to find out if you can help save lives," added Decot.

- Robert Burselson

Visit the NIH Blood Bank at [www.cc.nih.gov/blooddonor](http://www.cc.nih.gov/blooddonor) or by calling 301-496-1048 to donate blood and 301-496-4321 to donate platelets.

## Women's History Month 2022

*Every woman has a story and a gift worth sharing with the world*

Every March, Women's History Month presents an opportunity to honor and reflect upon the achievements and accomplishments of generations of trailblazing women who have played an instrumental role in building our nation, shaping our progress and strengthening our character.

The NIH Clinical Center celebrates Women's History Month and acknowledges the contributions women have made towards advancements in science, medicine and research. This year's Women's History Month campaign focuses on representation and highlights the power of identity, inclusion and belonging.

Four women at the NIH Clinical Center share their thoughts on the importance of career, positive examples and finding their voice.



**Marilyn Farinre, PharmD, Project Coordinator Pharmacy Department, Clinical Center**

Dr. Marilyn Farinre serves as the Chief of Pharmacy Operations and is responsible for leadership, management and

supervision of the inpatient and outpatient pharmacies that support clinical research and provide pharmaceutical care services. Farinre joined the NIH in 2018 and assumed leadership of Clinical Center Pharmacy Operations in 2019. She has a Doctor of Pharmacy degree from the University of Florida and an MBA from Temple University. Before joining the NIH, Dr. Farinre practiced in various clinical settings including five years as a transplant pharmacist.

When thinking of the next generation of female leaders Farinre had some thoughts on how they could make an impact on NIH and their careers. Knowing they are here on their own merits, she encouraged young leaders to find their voice and use it, to know their worth and to resist settling for less than they deserve. She also hopes women will recognize the importance of expanding their professional networks to exchange information, support one another and develop professional and social contacts.

When Farinre thinks of the women who joined the workforce before her, she's thankful. "They broke the status quo and made it possible for women to choose independence."



**Manjula Patel, IT Specialist Department of Clinical Research Informatics, Clinical Center**

Manjula Patel started work at NIH in 1992 and is currently an IT specialist with the Department of

*Manjula Patel*

Clinical Research Informatics. As an IT Specialist she works with providing expert technical support on an extensive range of information system topics and supports the various administrative, clinical and research activities of the NIH Clinical Center through the development, implementation, operation and management of software applications used by over 4,500 individuals.

Patel was lucky; she received inspiration from and connection with her very first supervisor she worked for at NIH. "My professional inspiration is drawn from Dr. Carol Romano, ever since I was hired at NIH in the year 1992," said Patel. "She was my first supervisor at NIH and was very supportive when I became a mother."

Patel considers what advice she would provide to her younger self and decided on two key aspects: "Never stop learning whether it is job related or for personal growth and don't be afraid to ask for help and speak up."



**Charlotte Pak, Chief Office of Workforce Management and Development, Clinical Center**

Charlotte Pak is the Chief of the Office of Workforce Management and Development (OWMD). She has been at the

Clinical Center and in OWMD since 2010, when she came over from NIAID as part of a 2-year administrative fellowship program.

Pak considered the advice she would give to the next generation of female leaders and encourages them to be confident and seize the opportunity to speak up or sit at the table. Reflecting on her past, she remembers many meetings where she sat in the back and didn't say a word when she had valuable contributions to offer. She believes this is much more common for women and hopes future generations continue to be more confident and not be afraid to step up to the plate.

"My advice to others, and what I continue to strive for myself, is to just not be so hard on yourself and be okay with doing your best," added Pak.



**Rebeca Rodriguez, Intramural Research Training Award (IRTA) National Heart, Lung, and Blood Institute and Clinical Center**

Rebeca Rodriguez was born in El Salvador, migrated to the United States when she was two years old and has lived in Maryland since. She graduated with a degree in Biomedical Sciences in 2021. Currently, she is a postbaccalaureate IRTA at NHLBI and conducting research on cardiovascular biology.

*Rebeca Rodriguez*

Rodriguez encourages women to avoid unrealistic expectations and disappointment by not feeding into the lie that as a working woman you can have it all. She feels that people have to pick and prioritize and that is completely okay. We're only human and only have 24 hours in the day.

"I have drawn major professional inspiration from all the female scientists here at the NIH but especially from my mentors, Dr. Leslie Kennedy and Dr. Elizabeth Murphy," said Rodriguez.

"As a young woman, it has been an extremely valuable experience for me to be a part of a team led by strong women. Being able to witness firsthand their confidence and creativity has greatly inspired my future professional endeavors."

*The Clinical Center Diversity, Equity, Inclusion and Accessibility (DEIA) committee aims to create and nurture belongingness at the NIH Clinical Center. For more information, please visit: <https://intranet.cc.nih.gov/deia/womenshistorymonth> [Staff Only]*

- Janice Duran

## Rehab Medicine tests new bodyweight support system



*Rehab Medicine testing ZeroG with patient.*

After suffering an injury, getting back on your feet can be hard. Therapists in the NIH Clinical Center's Rehabilitation Medicine Department (RMD) have a new tool to help patients on the road to recovery.

The ZeroG Gait and Balance System is a body weight support system that allows patients and therapists to safely practice balance and gait activities during therapy. The device is mounted on an overhead track that follows patients as they move while protecting them from falling.

"Impaired balance can put patients and therapists at risk of injury during rehabilitation," said physical therapists Joan Elliott and Kieu Capron. "The extra support of this system helps patients practice walking, getting up from the floor, using the stairs, sit-to-stand transferring maneuvers and posture re-education without the assistance of multiple providers."

Anecdotal feedback from patients has been positive. One patient, who uses a wheelchair for long distance mobility, said that the system makes her "feel like she can dance" after she practiced walking, stepping over obstacles and stepping up on to a curb.