



The Edmond J. Safra Family Lodge has housed close to 70,000 caregivers of Clinical Center patients since it opened on June 1, 2005. It offers convenience and community to the loved ones of our partners in research.

## Safra Family Lodge marks fifth anniversary

A haven opened for caregivers of Clinical Center patients five years ago. A place where loved ones can find support and a break from the stress of serious illness, the Edmond J. Safra Family Lodge welcomed its first guests on June 1, 2005.

Since then, about 70,000 family caregivers from around the world have stayed at the Family Lodge. "The lodge was first conceived by Clinical Center nurses and having a resource like the Family Lodge was a goal of mine for many years," said Dr. John I. Gallin, CC director. "Patient volunteers make clinical research and medical discovery possible. The lodge makes it possible for their loved ones to stay close and be comfortable during what can be a very stressful time."

Just steps away from the CC, the 34-room guest house is an extension of the patient experience, said CAPT Denise Ford, chief of CC Hospitality Services.

"We know how much our patients need the support of their loved ones while they are inpatients. It gives them peace of mind to know that family is close by and well cared for by our wonderful staff at the lodge," Ford said.

### Getting here

The CC initiated the NIH Guest House pro-

gram in 1996 in Building 20, the former staff Apartment House. Building 20 was torn down in 1998 to make way for the Hatfield Building. The six-unit Guest House moved to a nearby apartment building on Battery Lane in Bethesda then to six rooms in a local hotel. These pilot programs demonstrated the need for housing. The CC approached the Foundation for NIH, asking that the foundation's board spearhead a campaign to solicit support from private sector partners to build the Family Lodge. As the project closely reflects its mission—supporting NIH's efforts to improve health through scientific discovery—the foundation board made fundraising for the much-needed lodge its highest priority.

On April 17, 2002, a ceremony marking the naming of the facility as the Edmond J. Safra Family Lodge was held at the Russell Senate Office Building in Washington, DC. Massachusetts Sen. Ted Kennedy was a keynote speaker in support of the lodge. Contributors of the \$9 million raised to build the lodge, besides the main benefactor, the Edmond J. Safra Philanthropic Foundation, included the Merck Company Foundation; the Bristol-Myers Squibb Foundation; GlaxoSmithKline; the Harry and Jeanette Weinberg Foundation; and

## Faculty bring clinical research course to Nigeria

The course "Introduction to the Principles and Practices of Clinical Research" (IPPCR) was presented at the University of Ibadan, Nigeria, in May. Co-sponsors were the Clinical Center, the NIH Fogarty International Center, and the University of Chicago Global Health Initiative.

"This was the first time an adaptation of this course, which was developed by the Clinical Center, has been taught in sub-Saharan Africa," noted Dr. John I. Gallin, CC director and lead of the NIH faculty.

Faculty members traveled to the most populous nation in sub-Saharan Africa for four days of classes and conversations. They touched on highlights of the course that is offered annually at the CC and videocast to locations around the world.

Dr. Olufunmilayo (Funmi) Olopade, Walter L. Palmer Distinguished Service Professor in Medicine and Human Genetics and director of the Center for Clinical Cancer Genetics at The University of Chicago, learned of IPPCR while on the NIH Advisory Board for Clinical Research.

After hearing that the CC brought IPPCR to China in 2008, Olopade asked, "Why not Nigeria?" (her native country), recalled professor Dr. Laura Lee Johnson, statistician in the Office of Clinical and Regulatory Affairs at the National Center for Complementary and Alternative Medicine.

Around 90 people attended the course in Nigeria, ranging from heads of departments to fellows. Highlights of IPPCR—data safety monitoring, epidemiological design, ethical issues, community engagement—brought a new perspective to the students.

Nigerian investigators were interested in "all-over-the-map research," Johnson said. From nutritional choices

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## IPPCR course advantage to Nigerian investigators *continued from page 1*

to encourage fertility to eye disorders, pregnancy-related issues to parasitic diseases, the students asked about a variety of studies, Johnson reported.

Faculty split the class into smaller discussion groups to address questions on investigators' specific research. Students learned from each other, too, Johnson said. They compiled a list of 22

local statisticians and epidemiologists that others could call on to help advance their studies.

To continue the education of Nigerian researchers, the local coordination group helped assemble a sustainability team of participants who were young Ibadan faculty. The team will keep the training going for other cohorts, "so it's not just a single

shot, and we walk away," Johnson said.

Thanks to the Internet, trainees in Nigeria and other nations around the world can learn from IPPCR, archived and/or broadcast live. The world could follow the course in the African nation, too, thanks to Johnson's Twitter connection (through @CCMedEd).

The immediacy of the technology connects likeminded groups across distances, Johnson said. Her tweets included photos of the celebration locals threw for them on their last night in Nigeria. NIH and HHS faculty who went to Nigeria were Dr. John I. Gallin, CC director; Johnson; Dr. Charles Natanson, CC Critical Care Medicine Department; and Dr. Jerry A. Menikoff, director, Office for Human Research Protections, Office of Public Health and Science, Office of the Secretary, Department of Health and Human Services. They were accompanied by Dr. Letitia Robinson of the NIH Fogarty International Center. Also teaching were Dr. Oladosu A. Ojengbede, University College Hospital, Ibadan, Nigeria; Dr. Christopher 'Sola' Olopade, University of Chicago; and Dr. Olufunmilayo (Funmi) I. Olopade.



Dr. Charles Natanson, head of the anesthesia section in the CC Critical Care Medicine Department, lectured on limitations to those gathered for the IPPCR course in Nigeria in May.

## Lasker Foundation directors tour CC's unique space

The Albert and Mary Lasker Foundation—dedicated to the support of biomedical research toward conquering disease, improving human health, and extending life—held its board of directors meeting at the NIH on April 20.

Clinical Center Director Dr. John I. Gallin (in lab coat) gave the visitors a tour of the hospital, including its interstitial space between floors. This unique feature of the CC houses mechanical, electrical, and venting systems, a design that allows renovations and adjustments to be made much more quickly and with no disruption to activities in patient-care areas or adjacent laboratories.



### **Clinical Center News online:**

[www.cc.nih.gov/about/news/newsletter.html](http://www.cc.nih.gov/about/news/newsletter.html)

# news

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*Submissions may be edited.*



## Fellows introduce CC training staff to industry partner

Two past and one future NIH Clinical Research Training Program (CRTP) fellows, also past and future Student National Medical Association (SNMA) presidents, met with Clinical Center and Pfizer Inc representatives at the

SNMA 46th Annual Medical Education Conference (AMEC) in Chicago on April 3.

From left are Kenny Williams, CRTP program coordinator; Dr. Frederick P. Ognibene, CC deputy director of educational affairs and strategic partnerships and CRTP direc-

tor; Dr. Brandi K. Freeman, pediatrics resident at The Johns Hopkins University; Dr. Freda C. Lewis-Hall; chief medical officer and senior vice president of Pfizer Inc; Dr. Lisa J. Green, OB/GYN resident at Howard University Hospital; and Michael G. Knight, student at Cleveland Clinic Lerner College of Medicine of Case Western Reserve.

Ognibene presented "Training Opportunities and Career Development at the NIH" at the AMEC. Lewis-Hall was the keynote speaker during the AMEC president's installation and mentoring luncheon.

Freeman was SNMA national president and a CRTP fellow from 2006 to 2007. Green held both positions in 2008 to 2009. Knight was accepted into the 2010 to 2011 CRTP class, and will be SNMA national president for 2011 to 2012.

The CRTP is a public-private partnership established in 1997 and supported jointly by the NIH and the Foundation for the NIH with a grant from Pfizer Inc.

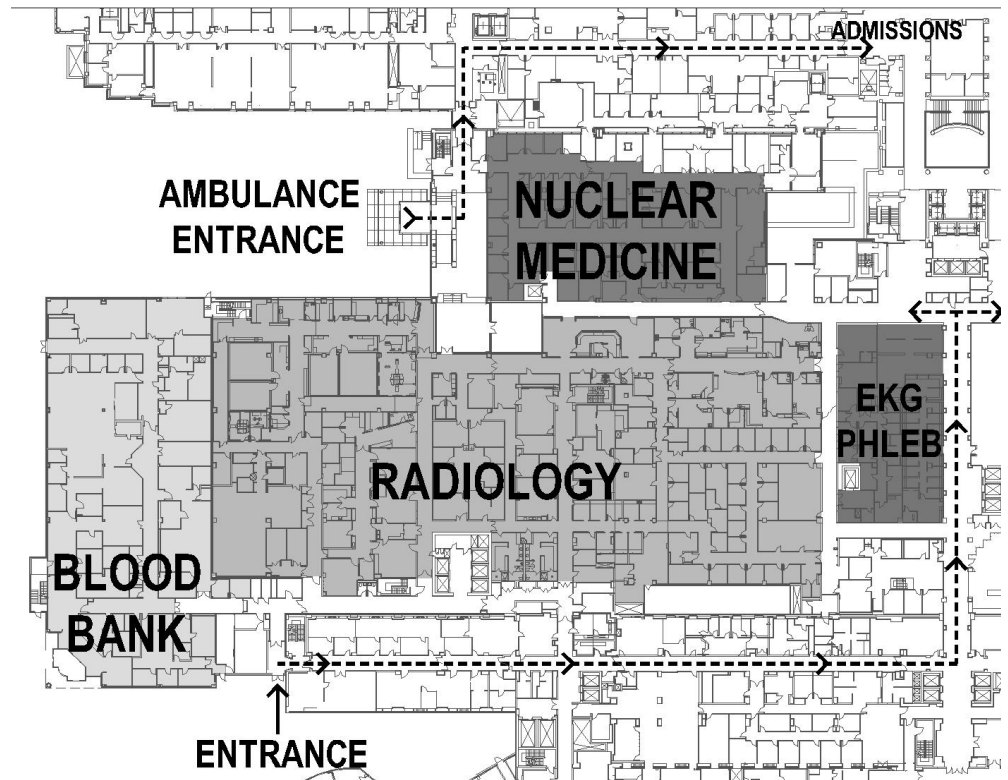


## Alternatives paths around imaging sciences diminish disruptions

Radiology and Imaging Sciences would like to discourage unnecessary foot traffic through its halls. With patient census high and construction limiting waiting area space, more patients may be in public areas more often. To maintain patient privacy and support patient care, please do not walk through the department to reach other parts of the Clinical Center. In addition to affecting the patient experience, pedestrian traffic distracts radiologists reading scans in other sections of the department.

If entering from the doors near the NIH Blood Bank, proceed down the north corridor to the new hallway that runs from Masur Auditorium straight to the Hatfield Building. When coming in through the ambulatory entrance, turn left to head down the 1SE-South hallway, past the main playroom to admissions.

Signs at the Radiology doors will point staff and visitors in the right direction. Admission to some areas soon will be access-protected.



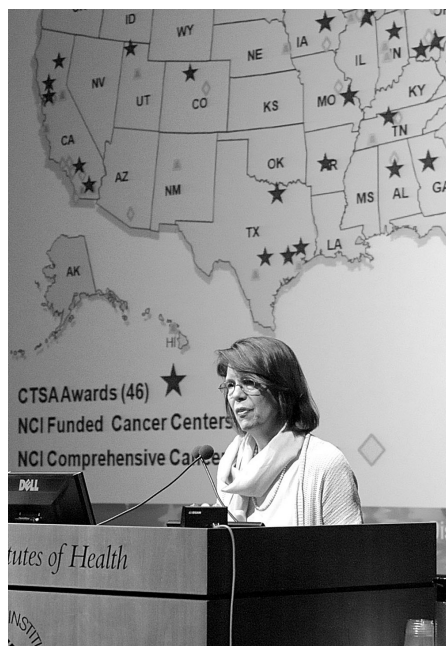
# Nurses Week 2010 celebrates creating a clinical research specialty

## Nurses Week kicks off with keynote from chief

At the opening ceremony of 2010 Nurses Week, Clinical Center Chief Nurse Officer Dr. Clare Hastings referenced the influence the CC has in the network of Clinical Translational Science Awards consortium institutions and NIH-funded centers across the country that perform clinical research. "We represent the flagship that people look to for leadership in this whole structure," she said.

Hastings thanked the nurses for their development of the domain of practice for the specialty of clinical research nursing as part of the Clinical Research Nursing 2010 initiative. Depending on their role—for example, clinical research nurse, research nursing coordinator—nurses balance their days among the different dimensions, Hastings said. The five foci of the specialty of clinical research nursing are clinical practice, study management, human subjects protection, contributing to the science, and care coordination and continuity. Read more about the initiative at [http://clinicalcenter.nih.gov/nursing/crn/crn\\_2010.html](http://clinicalcenter.nih.gov/nursing/crn/crn_2010.html).

Heather Rhine, chair of the Nursing and Patient Care Services Recognition and Retention Committee, which organized the week's activities, welcomed her peers "who all serve with passion for the profession and dedication to patient safety."



## Nurses learn and laugh at fair

Nurses Week 2010 included a fair to educate and celebrate nurses on May 5 in the 1SE atrium. Nurse and massage therapist Judith Lowitz treated nurse Kim Scott to a relaxing break. Publications from Nursing and Patient Care Services staff presented what staff were researching and finding.



## Leaders share tactics for success

Inpatient and ambulatory care services nurse managers shared their strategies for creating and implementing tools to support the specialty practice of clinical research nursing at a roundtable discussion on May 5. Panelists were (from left) Bruce Steakley, nurse manager of 1SW and OP4; Nicole Gamba, nurse manager of 1NW; Betsy Wendell, nurse manager of OP 7 and OP10; and Joan Sheeron, nurse manager for the pediatric clinic.

Gamba spoke of the diversity on her unit—among the experience levels and backgrounds of her nurses and among the types of patients and protocols that they see. Nurses attend rounds with the investigators. "They participate in the conversation. They initiate the conversation," she said.

Wendell's teams are involved in protocol development, she said, formulating an impact statement to communicate to researchers how many clinic visits and how much staff time their studies will demand.



# Week celebrates those who “serve with passion and dedication”

## *Nurses Week closes with service awards*



The Nurses Week Closing Ceremony on May 6 noted the department’s dedication to defining their specialty practice and honored a special few who embody that passion.

Speaker Julie Kohn, nurse consultant in professional development, told those in the Lipsett Auditorium audience that nurses at the Clinical Center have at least two specialties: those they came in with and now clinical research nursing. Defining the domain of practice gives their work structure and boundaries and shows their dedication, Kohn said. She ran a slideshow of staff demonstrating the activities of

clinical research nursing in action and announced that that nursing department staff recently wrote a paper that has been accepted for publication on a taxonomy validation of the domain of clinical research nursing practice. A second study looking at role delineation is slated to begin this summer.

A special acknowledgement award was presented to nurse Bernadine Crago (at right in top left photo) for 50 years of service, first in oncology and, since 1983, in adult behavioral health. Judie Johnson (left), nurse manager of 1SE, presented the award to her preceptor. She said Crago “calms patients with her presence.”



Nursing and Patient Care Services received 22 nominations (seen below) for the Exemplary Clinical Research Nurse Award meant to show competence and resourcefulness in all five dimensions of clinical research nursing. Two nurses earned the distinction: Dolores Medina of OP9 (at right in near left photo, with her nominator Debra Nixon-Jones) and Marlene Peters-Lawrence (at right in far left photo with Dr. Clare Hastings, chief of Nursing and Patient Care Services), research study coordinator who works for the Pulmonary and Vascular Medicine Branch of the National Heart, Lung, and Blood Institute.



# Safra Family Lodge lets guests choose quiet respite or community

continued from page 1 many other corporations, foundations, and individuals.

Considered by many to have been the twentieth century's greatest private banker, Safra quietly carried out many philanthropic activities. The Edmond J. Safra Philanthropic Foundation carries forth Safra's lifetime commitment to medical research and humanitarian causes. His namesake organization gave millions to the Foundation for NIH. Safra's wife, Lily, serves on the foundation's board of directors.

A groundbreaking ceremony on October 29, 2002, marked the beginning of construction of the Family Lodge. It was designed by Amy Weinstein of Weinstein Studio in conjunction with the architectural firm Louviere, Stratton and Yokel. Designed in the unique style of an early 1900s English Manor House, the lodge offers a retreat to the families and caregivers who make it their temporary home.

Lily Safra, on making her gift for the building of the Family Lodge, said, "We know that when illness afflicts one person, an entire family can suffer. The mission of the Edmond J. Safra Family Lodge is to give those families a place to remain resilient together."

On May 26, 2005, the six-year planning and construction project officially came to an end as the Family Lodge was formally dedicated and opened. When Lily Safra saw the completed building for the first time, she smiled and simply stated, "Beautiful."

## Special garden setting

Through an additional special gift to the Foundation for NIH made by Lily Safra, landscaping around the Family Lodge offers visitors a myriad of garden experiences, including the more private Claudio and Evelyne Cohen Garden. A peaceful, tranquil venue provides guests with a place of rest and refuge from their day-to-day concerns in an English park-like setting reminiscent of the lodge's architecture.

"My favorite time is right after sundown but when you can still see the garden and the warm lights coming on inside the building," said Margo Bradford, operations manager. "You really feel like you're in an English garden."

A path meanders along the perimeter of the lodge's property, and a number

of smaller pathways lead to more intimate seating areas. Each is distinctively treated with plantings and a water feature. Benches offer guests multiple areas for conversation and reflection. The gardens were designed by Madison Cox Design Inc.

## How it works

Guests are offered a room at the Family Lodge based on a priority system. Caregivers of patients in the intensive care unit are given first priority, followed by those with loved ones in palliative or end-of-life care. Close to 70 percent of guests are from the third priority group: those accompanying a patient having inpatient surgery or admitted for more than one week. The remaining priorities are for discharged inpatients (and their guests) transitioning home and outpatients (and their guests).

"It's unexpected for people who come here for the first time, to find that something this beautiful has been set aside for them," said Bradford.

The Family Lodge is located at the corner of Convent and Center Drives, across the street from the CC. "The proximity of the lodge to the Clinical Center offers ease of access," Ford said. "It gives them one less thing to worry about and let's them focus on caring for their loved one."

"Staff are customer service-oriented, but respect the guests' privacy," said Edmond J. Safra Family Lodge Executive Director Lawrence Eldridge. Many want to reflect or relax alone, while some guests may care to engage with others, frequently in the lodge's shared kitchen.

"One woman who accompanies her husband to the NIH brings cookie dough

to bake," said Bradford. "It fills the family lodge with delicious aromas. She takes cookies to the CC and also leaves cookies in the family lodge for the guests."

## Environment of giving

Guests can stay a maximum of 27 consecutive nights, and a lengthy stay from their home can take a toll. The lodge hosts holiday parties and occasional Sunday dinners made possible by donations from individuals and groups (see sidebar). Award-winning composer Marvin Hamlisch, a long-time friend of the Safras, has performed a holiday concert at the Family Lodge for the past five years. Hamlisch brings renowned musicians from The John F. Kennedy Center for the Performing Arts to accompany him each December.

The breakfast program funded through donations to the Foundation for NIH provides a continental breakfast for the guests. Donations to the foundation can be earmarked for the Family Lodge. Visit <http://www.fnih.org/> for more information.

Hopes for the future of the lodge include continuing to meet the needs of the diverse, international patient population of the CC in lieu of an increasing census and a growing variety of protocols.

"We try to make it as easy and comfortable as possible for our patients and their family members who travel here to participate in our clinical research," said Ford.



The Safra Lodge is designed in an English Manor style, with common areas and private rooms.



## Facts & figures

- Lodge guests have come from all 50 states and six continents (not Antarctica).
- In FY10, 68% of guests were from priority three (loved one having inpatient surgery or admitted for more than one week).
- 17 Institutes and Centers have utilized the Family Lodge. NCI protocols account for about 50 percent of guest room usage.
- Occupancy hovers in the high 70 percent range.
- Average length of stay in FY09 was 6.25 days, down from 7.7 days in FY07.



The English park-like garden provides a soothing environment for guests to wander.

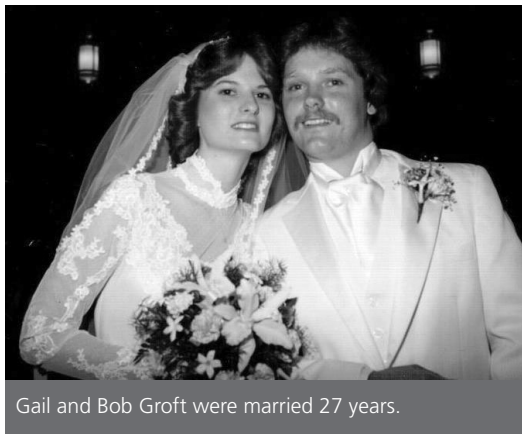
## Feeding the soul

Local individuals and groups are helping to heal the hearts of Edmond J. Safra Family Lodge guests through their stomachs, donating time and food to prepare meals for the residents.

"To have somebody bring in a dinner—first, it's enjoyable when someone else is doing the cooking, and second, it's so touching that someone who doesn't know you thought enough of your situation to want to help in some way," said Margo Bradford, Family Lodge operations manager.

If interested in volunteering to host a dinner at the lodge, contact Bradford at [mhbradford@cc.nih.gov](mailto:mhbradford@cc.nih.gov).

## Former lodge guests share experience



Gail and Bob Groft were married 27 years.

### Close for comfort

Mark Bardin of Oklahoma City thought of his stay at the Edmond J. Safra Family Lodge in practical terms. "My wife was really scared. It was a real comfort for her to know that I was only across the street," he said.

Bardin and his wife Marie were guests of the Family Lodge periodically from January through April 2008 as she participated in a National Cancer Institute protocol at the Clinical Center. He shared some of his memories about the friendliness of the Family Lodge staff.

"They were very nice," Bardin said. "I talked to the manager quite a bit, especially about good places to eat in the area—a real nice lady."

He bonded with other guests, as well.

"It was really good that I could talk to the other people who were staying there who were pretty much in the same boat as me," he said. "I met some pretty interesting people. There was some there from Canada and South America, and even a family from Oklahoma was there."

Mark said Marie is currently doing very well after starting to show improvement in April 2008, about the same time as the flower garden at the Family Lodge began to bloom. "We'd go walking there every chance we got," he said.



Mark and Marie Bardin toasted to surviving Marie's melanoma in Munich, Germany in July 2009.

### Support in a difficult time

Even though her husband, Bob, did not prevail in his struggle with melanoma, Gail Groft of Pennsylvania says she has warm memories of her stay at the Edmond J. Safra Family Lodge.

"I was absolutely blown away by how elegant it was and how friendly the staff were to the family members," she said. "It made our visit there just so much more enjoyable, especially on the one or two occasions when my husband was well enough to where he could come and spend the night with me."

Her husband was a participant in a National Cancer Institute protocol on melanoma, and Gail stayed at the Family Lodge for a few weeks in June, July, and September of 2009. Bob passed away in October.

Yet, Gail is enthusiastic about the NIH and the care she and her husband received, both in the Clinical Center and at the Family Lodge. "How much it means to know that the staff cares about, not only your family member, but they actually care about the entire family," she said.

### Connections made cross oceans

Lisa Moriarty of Dingle in County Kerry, Ireland, traveled with her family to the NIH in January 2010 for a National Institute of Neurological Disorders and Stroke protocol. While she underwent and recovered from surgery, Moriarty's caregivers stayed at the Edmond J. Safra Family Lodge for most of the month.

"Being so far from home, it took that extra pressure off of having to look for a place to stay," she said. "No hotel in the world could beat it. From the moment you walk in the door you just feel so welcome."

Moriarty also spent time at the Family Lodge, and said the family atmosphere helped her after a long day in the Clinical Center. "To hear the sound of laughter and see nice, friendly faces behind the front desk just means so much to sick people," she said.

Moriarty went back to her native country with friendships from the Family Lodge that she continues today—talking on Skype and meeting up with a couple visiting Ireland from California.

## Upcoming Lectures

For videocast: <http://videocast.nih.gov>.

### CC Grand Rounds

Lipsett Amphitheater, 12 noon

**June 2, 2010**

#### ***Imaging of Localized Prostate Cancer: Prelude to Focal Therapy***

Peter Choyke, MD

Chief, Molecular Imaging Program, NCI

#### ***Revisiting Old Targets and Exploring New Ones in Patients with Advanced Prostate Cancer***

William L. Dahut, MD

Clinical Director, NCI

**June 9, 2010**

#### ***Contemporary Clinical Medicine: Great Teachers***

#### ***Seventh Annual John Laws Decker Memorial Lecture***

#### ***Hospital Infections: Rumors and Reality***

Tara Palmore, MD

Deputy Hospital Epidemiologist, CC, and Staff Clinician, NIAID

**June 16, 2010**

#### ***Exploring the Long Term Outcome of Allogeneic Stem Cell Transplantation***

John Barrett, MD

Chief, Allogeneic Stem Cell Transplantation Section, Hematology Branch, NHLBI

#### ***Bench-to-Bedside: From T Cell Homeostasis to Immunotherapy for Cancer***

Crystal L. Mackall, MD

Chief, Pediatric Oncology Branch, NCI

**June 23, 2010**

#### ***Undiagnosed Disease Program***

William Gahl, MD, PhD

Clinical Director, NHGRI  
(not videocast)

**June 30, 2010**

#### ***Updates in Hepatology***

Theo Heller, MD

Liver Diseases Branch, NIDDK

#### ***Familial Midgut Carcinoid Tumor***

Stephen A. Wank, MD

Chief, Digestive Diseases Branch, NIDDK

### Wednesday Afternoon Lecture Series

Masur Auditorium, 3 pm

**June 2, 2010**

#### ***Transcriptional Control of Adipogenesis and Systemic Energy Homeostasis***

Bruce Spiegelman, PhD

Stanley J. Korsmeyer Professor of Cell Biology and Medicine, Dana-Farber Cancer Institute/Harvard Medical School

**June 9, 2010**

#### ***A New Virus as a Culprit in Human Cancer***

Yuan Chang, MD

American Cancer Society Research Professor, University of Pittsburgh

**June 16, 2010**

#### ***Memory CD8 T Cell Differentiation***

Rafi Ahmed, PhD

Director, Emory University Vaccine Center

**June 23, 2010**

#### ***It Takes Tau to Tangle: Plaques, Tangles and Neurodegenerative Disease***

Karen Duff, PhD

Professor of Pathology and Cell Biology, Taub Institute for Research on Alzheimer's Disease, Columbia University Medical Center

**June 30, 2010**

#### ***Regulating the Activity of MicroRNAs in Vertebrate Cells***

Joan Stetiz, PhD

Sterling Professor of Molecular Biophysics and Biochemistry, Yale University, and Investigator, Howard Hughes Medical Institute

## Radiology offering mammograms to NIH community

As part of a new initiative at the Clinical Center, NIH staff and contractors will be offered free mammograms if they are eligible for a standard-of-care protocol in Radiology and Imaging Sciences (RIS).

Screening mammograms will be offered on Tuesdays throughout the year in RIS, which is on the CC first floor, to women due for their annual test.

Women age 40 years or older and women younger than 40 but with more than a 20 percent lifetime risk of developing breast cancer are eligible for mammography. Increased risk can result from prior thoracic radiation therapy, family history, or genetic predisposition, for example. Pregnant and lactating women also are not eligible.

The mammography report will be forwarded to the patient's personal physician. All women interested in mammograms at the CC must bring their prior mammograms with them for comparison.

The 1992 Mammography Quality Standards Act requires all mammography facilities to be accredited, certified, and inspected. The RIS mammography facility is accredited by the American College of Radiology, certified by the FDA, and staffed with dedicated mammography personnel using state-of-the-art mammography equipment.

To take part in the mammography program, contact the CC Office of Communications, Patient Recruitment, and Public Liaison at 1-800-411-1222 or 301-594-9774. If you have questions, contact the mammography team at 301-402-9800.

## Green Idea from the CC Green Team

Between 1960 and 2008 the amount of waste each person created almost doubled from 2.7 to 4.5 pounds per day. The most effective way to stop this trend is to prevent waste in the first place.

Reduce your environmental impact by being conscious of your food and beverage-related waste, and choose reusable materials whenever possible. Whether you are filling up your morning cup of coffee or grabbing a quick drink at a water cooler, using a reusable cup or mug conserves resources and can reduce the cost of managing solid waste.