

July 2001

# Clinical Center News

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## Board of Governors appoints four new members

The Clinical Center announced the appointment of four new members to its Board of Governors—Brent Henry, Dr. Maria New, Dr. Lynnette Nieman and Dr. Peter Lipsky.

Henry served as vice president and general counsel of the Medlantic Healthcare Group from January 1985 until assuming his current position in 1998 as senior vice president and general counsel of MedStar Health. Additionally, Henry is secretary of the board of directors.

Henry obtained his juris doctor degree from Yale Law School and master's of urban studies from the Yale School of Art and Architecture. He also received his A.B. degree from Woodrow Wilson School of Public and International Affairs at Princeton University.



**Dr. Maria New (left) and Brent Henry were two of four members appointed to the Clinical Center Board of Governors.**

Dr. Maria New is the Professor of Pediatrics and Chairman of the Department of Pediatrics at the Weill Medical School at Cornell

University. Dr. New is the Harold and Percy Uris Professor of Pediatric Endocrinology and Metabolism and See **board**, page four

## Final JCAHO score puts Clinical Center on top

The final results are in! Once again the Clinical Center has demonstrated that we provide exceptional care and services to our patients and their families.

The CC received an overall score of 94 out of a possible 100 points from the Joint Commission on Accreditation of Healthcare Organizations, based on the accreditation survey conducted last November.

"This is a terrific score and is reflective of the high-quality staff and services we provide here at the

Clinical Center," said CC Director Dr. John Gallin.

JCAHO assesses healthcare facilities every three years in an effort to assure that healthcare organizations throughout the country provide safe and quality care to the public. Each facility is rated on patient functions, organizational functions and structure.

The CC received one Type I recommendation related to past documentation practices regarding conscious sedation. Type I recommendations indicate that the organization

has room for improvement in the area assessed. At the time of survey, the Clinical Center had already addressed this deficiency. A formal response to this recommendation will be submitted to JCAHO within six months.

In the meantime, the CC already is preparing itself for the next JCAHO survey in 2003. "Our focus is for continual readiness in order to maintain a momentum that keeps the Clinical Center at the top of all healthcare facilities in the nation," said Gallin.

# The generation gap: A workforce diversity issue

Organizations have become increasingly diverse in terms of their employee populations and the customers they serve. Managers are learning that the "one size fits all" approach to leadership is outmoded and does not promote employee recruitment or retention.

Organizational consultants are helping managers and employees to adjust and improve their communication methods and techniques to complement the values, ambitions and world views of the diverse workforce.

Mr. Ron Zemke, a noted author who has published seminal work on generational differences in the workplace, was a guest speaker and trainer on June 12 at an HHS-sponsored, cross-generational communications workshop. This activity included a presentation by the author, a panel discussion with representatives from the various "generations" and a workshop with case studies.

Zemke explained that understanding generational differences is critical to making them work for, not against, organizations. It is essential to creating harmony, mutual respect and joint effort where there is often mistrust, isolation and turnover. He described four categories of generational cohorts:

**Veterans** (born 1922–1943)

**Baby Boomers** (born 1943–1960)

**Generation X** (born 1960–1980)

**Generation Next** (born 1980–later)

Zemke pointed out that people resemble their times and their peers more than they resemble their parents. Each group has core values for

which it is known, as well as assets and liabilities.

Core Values:

**Veterans:** Dedication, sacrifice, hard work, conformity, law and order, respect for authority, patience, delayed reward, duty before pleasure, adherence to rules, honor.

**Baby Boomers:** Optimism, team orientation, personal gratification, health and wellness, personal growth, youth, work, involvement.

**Generation Xers:** Diversity, thinking globally, balance, technoliteracy, fun, informality, self-reliance, pragmatism.

**Generation Next-ers:** Optimism, civic duty, confidence, achievement, sociability, morality, street smarts, diversity.

Each generation has its strengths and weaknesses in the workplace. Here are tips to remember about each group:

**Veterans:**

- They comprise 27% of the population and 12% of the workforce
- They are good mentors for Next-ers
- They are traditional, formal
- They have slowed down
- They prefer part-time and project work

**Baby Boomers:**

- 11,000 people in the U.S. turn 50 each day
- Personal recognition and legacy-building are key
- They are classic workaholics
- They want to make a difference
- They enjoy involvement and participation

**Generation Xers:**

- They are skilled portfolio builders
- They are self-directed learners
- They are tech-oriented and friendly
- They dislike meetings/group decision making

- They are task, not process, oriented

**Generation Next-ers**

- They want challenging, interesting jobs
- They are socially conscious, activist, project oriented
- They need guidance in how to work (structure, direction)
- They expect career planning and counseling
- They like collaborative action, group work and high involvement
- Trust is an issue; they will not work for those they do not trust

If managers and employees remain aware of the core values, assets and liabilities represented by the various generations, it is possible to avoid much conflict and motivate staff to remain in an organization.

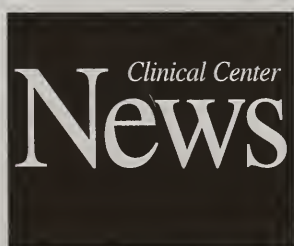
Zemke remarked that organizations can earn high marks if they will do the following to address diverse generations in the workforce:

Accommodate and respect differences  
Create nontraditional learning choices

Operate from a flexible work/management style

Respect competence and initiative  
Nourish retention beginning the day the employee signs on

*This story was brought to you by the Clinical Center Quality of Worklife Initiative and Diversity Council.*



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Clinical Center News online: [www.cc.nih.gov/ccc/ccnews/current](http://www.cc.nih.gov/ccc/ccnews/current)



## Healthy children

Healthy children, ages 5-8, are sought by NINDS to participate in a study comparing language organization with that of children with epilepsy. Your children may be eligible if they speak English as their first language, do not have a learning disability, attention deficit disorder or any serious medical condition and do not wear braces or glasses (contacts allowed). Participation involves 2-4 outpatient visits over one year. Compensation is provided. Call Lynn at 301-402-3745.

## Women needed

NICHD is seeking healthy women ages 18-55 or 60 and older, to participate in an ovarian function study involving five brief outpatient visits. Blood draws, ultrasound and an injection of a natural body hormone are involved. You may be eligible if you do not smoke or take any drugs including birth control. A past pregnancy is necessary. Compensation is provided. For information call 301-435-8201.

## Men needed

NIAAA is seeking healthy males, ages 40-59, to participate in cognitive/psychological studies. No medication is involved. Call 301-594-9950. Compensation is provided.

## Healthy kids

NIMH is seeking healthy children, ages 6-17, to participate in reviewing film clips, included among which will be humorous, sad and spooky clips. Your children may be eligible if they do not have a history of psychiatric problems or take any prescribed medications. Participation involves one outpatient visit and a possible second visit. Compensation is provided. Call 301-496-8381.

## Outpatient study

College-educated middle-aged adults needed for a two-day outpatient study at NIMH. Involves blood draw and routine clinical, neurological and cognitive procedures. Compensation provided. For information call 301-435-8970.

## Emotion Study

The National Institute of Mental Health is seeking healthy children, ages 6-17, to participate in a mood and emotion study. Your child may not be eligible if he/she has medical or psychiatric problems, takes prescribed medications, or has any first-degree relatives with psychiatric problems. Participation involves three-day screening and evaluation, two-day follow-up evaluation, MRI, physiological and psychological testing, and one month of at-home ratings. Compensation is provided. Call 301-496-8381.

## Stuttering study

NIH seeks adults and children ages five or older who stutter or have family speech disorders for an experimental study of the causes of these disorders. Researchers offer speech, voice and language testing. There are no study-related costs to participants. Compensation provided. For information call 1-800-411-1222 (TTY: 1-866-411-1010).



## Outstanding clinical teacher

Dr. Thomas J. Walsh, senior investigator, pediatric oncology branch, NCI, was awarded this year's Clinical Teacher Award. The award recognizes excellence in clinical training involving the direct care of patients by any senior clinical investigator at NIH. Clinical associates nominate individuals who, in their judgment, have contributed significantly to the professional development of clinical trainees. A panel of NIH fellows makes the final selection. Pictured (l to r), Dr. Thomas J. Walsh, Dr. James Gully, Dr. John Gallin and Rob McClure.

# Making historic rounds in August

*Special Grand Rounds for Fellows lecture series offers broad view of medicine*

Grand Rounds in August may sound unusual. In fact, it's never been done before.

Each Wednesday in August, a special Grand Rounds for Fellows will be held in Lipsett Amphitheater from noon to 1:00 p.m.

The series of lectures will cover some of the core curriculum requirements for graduate medical education training as outlined by the Accreditation Council for Graduate Medical Education. The ACGME accredits 17 residency and subspecialty programs at NIH.

"This is an exciting and interesting way to supply core requirements and allow fellows to think more broadly of medicine," said Dr. Frederick P. Ognibene, director, critical care medicine fellowship training program, CC, and co-chair, Graduate Medical Education Committee.

Five speakers from inside and outside of NIH will discuss critical reading of biomedical literature, ethical issues, medical malpractice law, culture and the patient-physician relationship, and physician impairment.

"These are case-based presentations that will stimulate interaction

with the audience and bring home the relevance of these particular areas of study," said Brenda Hanning, acting director, NIH Office of Education, and co-chair, Graduate Medical Education Committee.

The lecture series is part of the Clinical Center's commitment to provide continuing education and training to physicians and other health professionals. Other programs include the Introduction to the Principles and Practice of Clinical Research, a course designed to teach researchers how to design good clinical trials, and the Ethical and Regulatory Aspects of Human Subject Research course, designed to study ethical issues related to the conduct of research, clinical practice and health policy.

Although the lecture series was created for fellows, Dr. Ognibene encourages everyone to attend.

"These lectures will have a broad applicability and will be of benefit not only to fellows at NIH, but to other researchers as well," said Ognibene. "This is information that will be used throughout their careers, whether here at NIH or at another institution."

## Clinical Grand Rounds for Fellows

### August 1

*Separating Wheat from Chaff: Critical Reading of the Biomedical Literature*

Michael M. Gottesman, M.D., NIH

### August 8

*Ethical Issues Related to Medical Practice*

Marion Danis, M.D., CC

### August 15

*Medical Malpractice Law, the Physician's Best Friend: A Case-Based Examination*

Heidi Li Feldman, J.D., Ph.D., Georgetown University

### August 22

*Culture and the Patient-Physician Relationship: Achieving Cultural Competency in Health Care*

Glenn Flores, M.D., FAAP, Boston University

### August 29

*The Scope of Physician Impairment*  
Tom Dolan, MEDCHI

## Four new members join the Board of Governors

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is program director of the Children's Clinical Research Center.

Dr. New received her bachelor's degree from Cornell University and her M.D. from the University of Pennsylvania. She is a world-renown expert in the evaluation of congenital adrenal hyperplasia, an endocrine disorder for which she has pioneered prenatal diagnosis and treatment.

Dr. Lynnette Nieman is the clinical director and a senior investigator with NICHD. She also heads the section on clinical investigation in the Pediatric and Reproductive Endocrinology Branch.

Dr. Nieman received her bache-

lor's degree in molecular and cellular biology at Smith College and her M.D. from State University of New York at Buffalo. Dr. Nieman joined NICHD in 1982 as an endocrine fellow.

Dr. Peter Lipsky is the scientific director of NIAMS. Previously, Lipsky was a professor of internal medicine and microbiology at University of Texas Southwestern Medical Center at Dallas and the Harold C. Simmons Professor of Arthritis Research. He also served as director of the Simmons Arthritis Research Center. Currently, Dr. Lipsky is on the board of directors of the American College of

Rheumatology; he is the former editor-in-chief of the *Journal of Immunology*.

Dr. Lipsky received his A.B. degree from Cornell University and his M.D. degree at New York University School of Medicine.

The CC Board of Governors was established in 1996 to oversee the management of the hospital. The group consists of physicians, scientists and managers from the nation's top hospitals and research facilities. The board was an outgrowth of a recommendation of a review team appointed by former Health and Human Services Secretary Donna Shalala in 1995.

# Youth initiative opens doors for Native-American Indians

## Youths learn of opportunities in biomedical research

A half-hour talk on diabetes presented by Dr. Sanford Garfield, senior advisor, NIDDK, peaked Justin Norris's attention. Most of his family suffers from the disease, which is one of the most serious health challenges facing Native-American Indians.

"I want to learn more about diabetes and research other ways to prevent the disease so that I can go back to the community and help my tribe," said Norris, a member of the Gila River Pima tribe in Gila River, AZ.

But ask any of the 60 high school students why they came to the Clinical Center as part of the National Native-American Youth Initiative, designed to bring Native American Indians into the field of biomedical research, the answers are all the same—to give back to their people.

"We have an obligation to give back to our communities," said Erin Tansey, an intern with NHGRI and member of the Navajo tribe. Tansey, a native of New Mexico, was one of two interns who spoke to the students as part of a panel. "All throughout New Mexico and especially on reservations, there is an extremely underserved population of American Indians. So we are all privileged to have a positive experience like this that will help us accomplish our goals."

The program, sponsored by the Association of American Indian Physicians, began four years ago in an effort to motivate Native-American students to remain in academics and pursue a career in the health profession or biomedical research.

Nearly 60 students from across the U.S. participated in the week-long program that also included tours through the Library of Medicine, Uniformed Services University of Health Sciences, and U.S. Capitol.

The students spent one day touring the CC and listening to presentations on the Human Genome Project and research training opportunities at NIH.

"Many of these kids are from disadvantaged backgrounds and had the opportunity to either succeed



**Monica Burness (right), a summer research fellow with the surgery branch, NCI, spoke to Shilah Noland (left), Jessica Onsaie and Candace Watts about her experiences working in one of the labs. All of the students had an opportunity to visit a lab and speak to researchers.**

academically or fail," said Lancer Stephens, program coordinator for the National Native-American Youth Initiative. "But they chose academics because they care about their families and improving the lives of their people."

Marlon Footracer lives in a community where going to college is unheard of. A member of the Navajo Tribe from Page, AZ, he was accepted into five universities and will attend Stanford University in the fall. Footracer came to NIH through the NINDS summer internship program after participating in the youth initiative last year.

"I've always been encouraged by

my parents and members of the community to pursue intellectual interests," said Footracer. "I'm discouraged by the lack of healthcare and the health disparities in my community, and now I am motivated and have the opportunity to fix it."

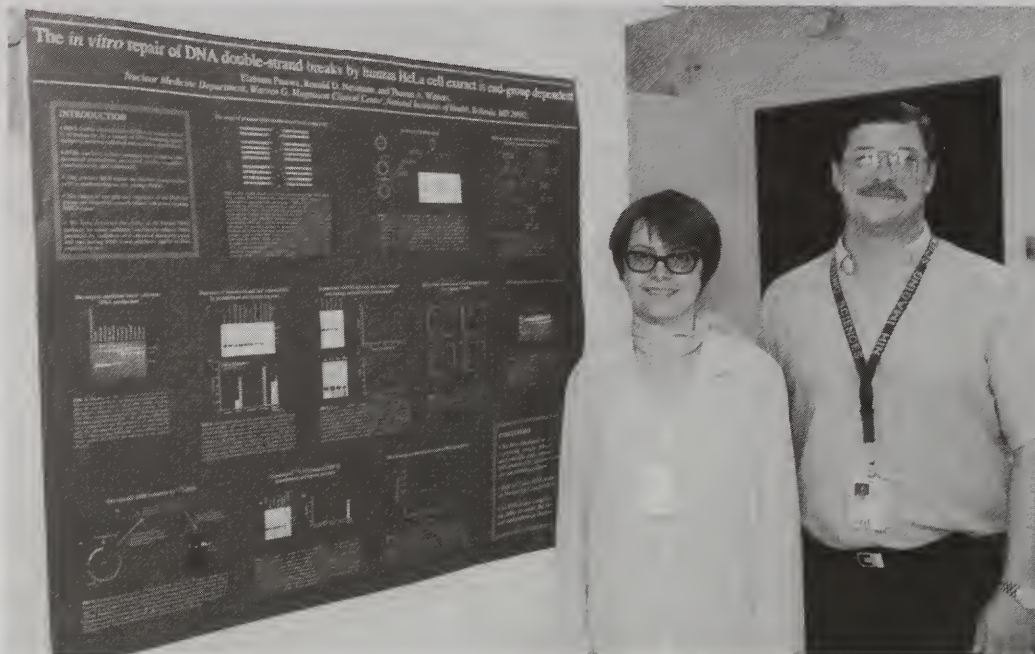
Of the 1,000 students interning at NIH this summer, fewer than 10 are Native-American Indians, according to Levon Parker, minority and special concerns program officer, NINDS. Fewer than 70 applications were submitted by Native-American Indians,

which is far below the number of applications for African Americans, Hispanics and people with disabilities.

"The only careers that some of these young people are exposed to are those they see in the communities and local high schools. Their role models are not research oriented," said Frank GrayShield, MPH, public health advisor, NHLBI. "It's important that these young people have a vision for the future, and with that vision they are able to make their lives worthwhile and to have made a difference not only to the people in their tribes, but to everyone."

—by Tanya Brown

# Postdoctoral fellow awarded prestigious blue-ribbon award



Dr. Pastwa's (left) award-winning poster hangs in the Nuclear Medicine Department. Dr. Pastwa, pictured with Dr. Thomas Winters, is one of the few researchers to win the award as a postdoctoral fellow.

Elzbieta Pastwa, Ph.D., a postdoctoral fellow in the Clinical Center's Department of Nuclear Medicine's DNA Radiobiology Lab, was awarded \$500 and a blue ribbon at the Radiation Research Society's meeting in San Juan, PR, April 21-25, 2001. Dr. Pastwa's award was based

on her abstract entitled *The in vitro repair of DNA double-strand breaks by HeLa cell extracts is end-group dependent*. The abstract was illustrated in a poster that Dr. Pastwa presented at a mini-symposium. Dr. Pastwa is first author on her paper; Dr. Ronald Neumann, chief, Nuclear

Medicine Department and lab chief, DNA Radiobiology Lab, is second author. Thomas Winters, Ph.D., DNA Radiobiology staff scientist and Pastwa's postdoctoral mentor, is third author.

The goal of the winning project was to establish an *in vitro* DNA double-strand break repair assay and determine possible structure and function for the enzymes involved in repair. For Dr. Pastwa to win this prestigious award in this, the 30th year of the great war on cancer, is a great honor not only for her, but the lab, NMD and the Clinical Center. The work of this lab points to finding a more accurate way to "focus" radiation therapy, via a new type of instrument, on a cancer tumor so directly and precisely that it can specifically eliminate a targeted gene.

Dr. Pastwa, a Polish national, graduated from Technical University of Lodz in Poland. She received her Ph.D. from the Medical University of Lodz in Poland in 1998 and came to NIH in 1999.

Her research is concentrated on the study of enzymatic requirements for the repair of radiation-induced DNA double-strand breaks.

—by Babs McMahon

## Forms analyst, designer retires after 42 years

Spend a few minutes with Jo Abbott and it's clear that she has made her mark at NIH and the Clinical Center. Yet after 42 years of making her mark, Abbott will retire this month from her position as a forms analyst in the Medical Records Department.

Just one month out of high school at age 17, Abbott began working at NIH as a secretary/stenographer. "In those days you had to have a work permit to start working at that age," said Abbott.

Although her plans to become a medical illustrator didn't pan out, she didn't let that stop her. Abbott moved to the main campus to Building 36, where she began designing blueprints and artwork detailing the interfacing of electronic instruments in

the development of image processing. The Civil Service later certified her as an engineering draftsman.

But Abbott wasn't fully satisfied, so she came to the Clinical Center where she drew illustrations for articles published in medical journals by research doctors in the NCI Department of Pathology. Throughout the years, many of her designs have been displayed throughout the CC.

She later moved to the Medical Record Department where, as a forms analyst, she designed all the medical records forms used in the Clinical Center. By her own initiative, Abbott wrote a book on the history of the medical records forms and how each form is used. The book is

used as a training and reference guide in the Medical Record Department.

In her spare time, Abbott designs crafts and donates them to the Friends of the Clinical Center Flower Shop. Her love for designing and creating will go with her into retirement, but as for her future plans, Abbott is still up in the air.

"The big question I get from everyone is 'what are you going to do now?' The answer to that is that I'm going to do nothing specific for a while," said Abbott. "I want to spend some quality time with my mother, do some interior decorating in my condo and, if it's still scheduled, I'll be back for Christmas Bazaar in the Clinical Center."

## Oncology fellowship

All registered nurses interested in a unique opportunity to provide compassionate care to oncology patients at the CC should consider the Oncology Fellowship Program. The program features a 96-hour didactic component that covers topics pertinent to your work setting, including pathophysiology, disease types, treatment modalities, symptom management, patient teaching and oncology emergencies. The clinical component consists of direct patient care experiences using a 1:1 preceptor model in the work setting. The clinical rotations will prepare you to care for the unique patient population served at NIH. For information, contact the nurse recruitment team at 1-800-732-5985 or visit the website at [www.cc.nih.gov/nursing](http://www.cc.nih.gov/nursing).

## Slogan contest

The Emergency Management Branch, Division of Public Safety, Office of Research Services, is sponsoring a contest to create the fire prevention slogans to be used in next year's official NIH Fire Safety Awareness Day poster. Contest rules: 1. You may enter as many times as you'd like. 2. The slogan should directly pertain to the objectives of fire prevention, and preferably not exceed one sentence in length. 3. All entries should be printed or typed on one side of an 8 1/2 x 11 sheet of white paper and in order of preference for consideration. 4. Entries should be original and unpublished at time of submission. 5. Judges' decisions are final. 6. Employees of the Emergency Management Branch, Division of Public Safety, and their immediate families are not permitted to enter. 7. All entries must be received by the Fire Prevention Section by the close of business on Sept. 4. Mail entries to Bldg. 15, Room 2, or fax to 301-402-2059. For information, call 301-496-0487.

## Flower shop help

The Friends of the Clinical Center Flower Shop is in need of volunteers. The shop temporarily closed its doors due to a lack of help. According to Randy Schools, president and CEO of NIH Recreation and Welfare, most of the volunteers working in the flower shop were elderly and could not continue to work, which leaves the shop closed until more volunteers can be found. Schools said he hopes to have students running the shop during the summer break, which will allow time to recruit more volunteers. To volunteer, call 301-496-6061.

## Research festival

The 15th annual NIH Research Festival, the yearly showcase for the NIH intramural research program, will be held October 2-5. The Research Festival Organizing Committee is now accepting submission of poster abstracts by all NIH staff and FDA/CBER staff from the Bethesda campus. Posters in any area of research conducted at NIH will be considered for presentation, but the committee is requesting a limit of one poster submission per presenter. The deadline for online poster submission is 5:00 p.m., Monday, August 6. Applicants will be notified of acceptance by e-mail in mid-August. For more information visit the Research Festival website at <http://festival01.nih.gov> or call Paula Cohen at 301-496-1776 or e-mail [pc68v@nih.gov](mailto:pc68v@nih.gov).

## Parking permits

NIH general parking permits for campus employees whose last names begin with M or N will expire on the last day of July 2001. In order to obtain a new general parking permit, an employee will need to visit the NIH parking office in Building 31, Room B3B04. Remember to bring your NIH identification card, valid driver's license and vehicle registration.

## NIH (ClinPRAT) training program

This three-year postdoctoral research fellowship training program is sponsored by the Clinical Center, the National Institute of General Medical Sciences and the NIH Office of Intramural Research, Office of the Director. This program emphasizes the application of laboratory pharmacology, biostatistics, pharmacokinetics and chemistry to the study of drug action in humans. Postdoctoral training will be available starting July 1, 2002, and in subsequent years. Candidates must have an M.D. degree and, in general, have completed three years of residency training and be board eligible in a primary medical specialty. Candidates must be U.S. citizens or permanent residents of the United States. Candidates' qualifications are evaluated by the Clinical Pharmacology Steering Committee. Selection is highly competitive, and preference will be given to applicants with outstanding potential. The stipend is determined by the candidate's educational and professional experience. For additional information visit our website at <http://www.cc.nih.gov/OD/clinprat/> or call Donna L. Shields at 301-435-6618.

## Support group

You are invited to attend the Thyroid Cancer Support Group for survivors, families and friends, every second and fourth Tuesday of each month from 7 p.m. to 8:30 p.m. Meetings are held in the Social Work Conference Room, 1N248, Bldg. 10. For more information, contact Margaret Sarris at 301-496-6020.

## CC News on web

Did you know that the *Clinical Center News* is online? Visit us at <http://www.cc.nih.gov/ccc/ccnews/current>.

# MIS celebrates its silver anniversary

The CC is celebrating 25 years of moving into the computer age. The medical information system, known as MIS, was installed and has been fully operational for a quarter of a century, which marks a milestone in CC history.

In 1975, NIH signed a contract with Technicon Medical Information Systems, Inc., to provide a computerized hospital information system for the Clinical Center. The system was designed to collect, transmit and store information about patients, with the hopes of broadening its scope to include storing clinical research protocols to assist investigators in carry-out clinical studies.

"We needed one master system that could communicate with other systems around the Clinical Center," said Gerald Macks, a now-retired management analyst and one of the overseers of the original project.

Once the contract was awarded, three terminals were set up in the admissions section of the lobby and on 7D48 of the Clinical Center for demonstration and training purposes. By April 1976, the system went live on the 5W nursing station, which served as the pilot.

The monitors, then known as video matrix terminals, were actual television sets with the knobs taken off. Each station was equipped with a



MIS video display terminals used a light pen to select information.



This photo, taken in 1976, shows Bill Creelman, Technicon Systems analyst, reviewing the MIS system with Nursing Department employees. (l to r) Shirley Butters, Esther McIntosh, Carol Romano and Karen Edwards.

keyboard and a light pen to select the information on the screen. A multi-printer was used along with each system to print forms and labels for permanent records.

Nearly 110,000 patient records had to be transferred to the system by October 31, 1996, when the sys-

tem was fully functional throughout the Clinical Center. There were 99 terminals and 57 printers.

"The team effort for the hospital information system was special, and in its day was the greatest team effort in Clinical Center history," said CC Director Dr. John Gallin.

## j u l y

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**Grand Rounds  
noon-1 p.m.  
Lipsett Amphitheater**

*No Grand Rounds Lecture*

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**Grand Rounds  
noon-1 p.m.  
Lipsett Amphitheater**

*The Ataxias*  
Mark Hallett, M.D., NINDS

*New Drugs for Old Bones: A  
Cure for Osteoporosis?*  
Joan A. McGowan, Ph.D.,  
NIAMS

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**Grand Rounds  
noon-1 p.m.  
Lipsett Amphitheater**

*Osteogenesis Imperfecta:  
Kinetic and Nonkinetic  
Factors Related to Motor  
Performance in Infants and  
Children*  
Holly Cintas, Ph.D., CC

*Beyond Fight vs. Flight:  
Coping Responses of Patients  
with Chronic Diseases*  
Mark Mattiko, M.Ed., CTRS,  
CC

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**Grand Rounds  
noon-1 p.m.  
Lipsett Amphitheater**

*Obesity and the Brain:  
Neuroimaging Studies in  
Humans*  
Pietro Antonio Tataranni,  
M.D., NIDDK

*Molecular Genetics and  
Current Management of  
Dilated Cardiomyopathies*  
Lameh Fananapazir, M.D.,  
NHLBI