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PROJECT ABSTRACT

I. ORGANIZATIONAL SETTING

Project Title: The South Texas AIDS Center for Children and Their Families

Organizational Name: The University of Texas Health Science Center at San Antonio, Department of Pediatrics

Project Director: John A. Mangos, M.D.

Assistant Director: Barbara Aranda-Naranjo, RN, MSN

Medical Director: Terence I. Doran, M.D., Ph.D.

The South Texas AIDS Center for Children and Their Families (**Center**) is the major component within the Department of Pediatrics Community Pediatrics Division. The mission of Community Pediatrics is to provide clinical service, conduct research, and create opportunities for clinical teaching in community settings, focusing on the needs of children with special care needs and their families.

II. PURPOSE - The Center's purpose is to provide medical, psychosocial, and related support services to children and families affected by HIV/AIDS residing in South Texas. A secondary aim is to engage in community prevention, professional training and advocacy activities on behalf of infants, adolescents, and women at risk of contracting the disease. The Center operates two clinics in San Antonio, and satellite clinics in Corpus Christi and Harlingen in the Lower Rio Grande Valley. Bilingual case managers coordinate the family's care; HIV-infected parents receive medical services at the same time and same clinical setting as their children at the San Antonio clinics. The Center has an active caseload of 166 clients, including 98 HIV-infected families, 65 children 18 years of age and younger, 32 infected women, and 23 children with hemophilia, also infected with HIV/AIDS.

In collaboration with the Sisters of Divine Providence, the Center helped establish and supports Providence Home. Opened in 1991, the Home is a fully licensed foster and respite care facility for infants and small children, and is an important component in the Center's activities to prevent the abandonment and neglect of infants. Community-based risk reduction activities targeting high-risk adolescents are high priorities. In collaboration with The Bexar County Juvenile Probation Department, the Community Pediatrics Program was awarded a HRSA funded Linkage Demonstration Grant to provide AIDS prevention/risk reduction services, linked with primary medical care and substance abuse treatment to juveniles detained in the juvenile justice system. Since 1989, over 1500 high risk youngsters have received HIV risk reduction intervention. The Center's staff is also committed to professional education. The care of the HIV infected family is an integral part of our medical school curriculum and rotational experience for third year students and residents. In 1992, 25 presentations were made to physician groups, nurses, and other health professionals throughout the South Texas region.

III. PROBLEM - The Center was established in 1988 to address the problem of providing access to high quality, culturally competent, clinical, case management and prevention services to a predominantly Mexican-American population, residing in a large, rural area. The South Texas region spans a geographical area one and a half times the size of New York state. A majority of the area's 3.1 million population is

Mexican-American. The 47 county target area is an area of intermediate HIV/AIDS prevalence rates in other states. There were a total of 1334 persons infected with AIDS in the target area as of August, 1992. The predominate mode of transmission among the infected women in the program is heterosexual, not IV drug use.

IV. GOALS AND OBJECTIVES - The Center's 1993 objectives are as follows: (1) to enhance the effectiveness of existing comprehensive, coordinated family-centered services by integrating in psychiatric services; (2) to continue to develop the regional service delivery in Corpus Christi and Harlingen by centralizing psychosocial and medical services at the Driscoll Children's and South Texas Hospitals and to formalize agreements with the hospitals' administration; (3) to continue to refine our protocols for the prevention of neglect and abandonment by piloting an acuity scale and strengthening our collaborative relationships with the Texas Department of Human Services in Public Health Region 8; (4) to improve access to substance abuse treatment services by expanding our local service network through collaborative agreements with the Alcohol Rehabilitation Center (the ARC), a licensed treatment center for substance abusing women and their children, funded by the Texas Commission on Alcohol and Drug Abuse and the Texas Children's Mental Health Plan; (5) to enhance the capacity of our satellite clinics to provide logistical and early childhood intervention and support by training volunteers in the recently funded Buddy Program in the LRGV; and (6) to expand professional training by offering a graduate-level course to 50 nurses (taught by the Center's Associate Director) beginning in fall of 1993, and to participate in a regional conference on HIV in adolescents in summer of 1993.

V. EVALUATION - The program's evaluation plan includes implementation, process and outcome indicators. Quality of care will be assessed against the clinical protocols for family-centered care, developed in 1991 and now operational. The major evaluation objective is to further refine the Center's existing computerized tracking system to compile client-specific information.

VI. COORDINATION - The Center plans to continue its activities with the Texas Department of Health Bureau of Maternal and Child Health and the Title V Program, the public health regional office of DHHS, and the local Ryan White AIDS Planning Consortia. Specifically, in the Lower Rio Grande Valley, the Center integrates its medical and case management activities with those funded by the Title V (CIDC) Program and has begun to offer clinical services at the Texas Department of Health South Texas Hospital. The Center's medical director (Dr. Terence I. Doran), the departmental division chief (Dr. Victor German), and departmental chair (Dr. John Mangos) meet with the public health leadership on a regular basis to discuss programs of mutual interest. In the summer, 1993, the Center staff will participate in a DHHS regional public health conference focusing on HIV in adolescents, to be held in San Antonio, Texas.

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UTHSC, partners launch statewide mental health effort

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The Media Report

— Page 2

The News

Volume XXVI
Number 44
November 5, 1993

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO



Veterans Day

is Thursday, Nov. 11.
We remember all
veterans on this day,
and this year's
Veterans Day is

South Texas AIDS Center cares for babies and young parents

*National AIDS policy coordinator visited
program, which is considered a model*

When President Clinton's policy coordinator on AIDS, Kristine Gebbie, visited San Antonio late this summer, she made sure to see a Health Science Center program that is considered a model in the treatment of HIV-positive children and young adults. She listened to three adolescents infected with the human immunodeficiency virus (HIV) and asked for their thoughts on measures that might have prevented their infection.

The two adolescent girls, who have HIV-positive children, and one adolescent boy indicated that education about AIDS is the key.

"The adolescent boy said that in his school, the teachers weren't allowed to talk about HIV," says Barbara Aranda-Naranjo, pediatrics.



Barbara Aranda-Naranjo (left) of the South Texas AIDS Center for Children



NOV 17 1993
Washington, D.C./ Baltimore Edition

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November 16, 1993

Ms. Kristine Gebbie, RN
National AIDS Policy Coordinator
750 17th Street, NW
Suite 1060
Washington, DC 20503

Dear Kristine:

On behalf of *The Nursing Spectrum Magazine*, we would like to thank you for your inspiring words, your help, and your patience with us throughout our photo shoot at the White House. We are sending 20 copies of this issue, our compliments.

Please let us know how we can be of further assistance.

Best wishes and thank you,

Patti Rager, RN
Executive Director

Pat Lakatta, RN
Editor

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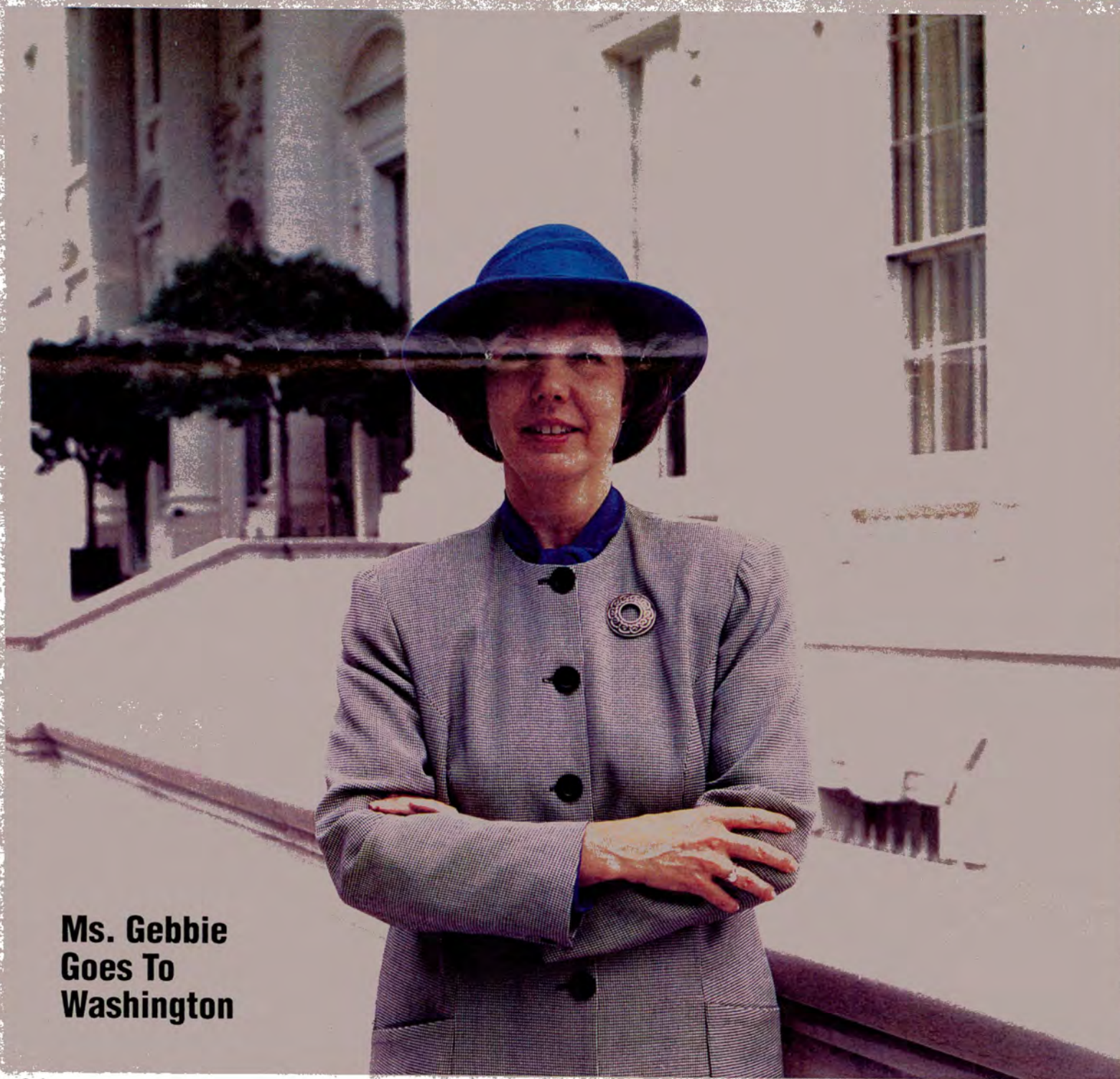
The NURSING spectrum

D.C./Baltimore Metro Edition ■ The Ultimate Career Guide ■ For RNs, By RNs

November 8, 1993

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VOLUME 3, NO. 23



**Ms. Gebbie
Goes To
Washington**

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The White House, Washington, DC.

Photo by Claude Seymour

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A Friendly Place

What comes to mind when you think of a friendly place? Do you think of your home, where your family waits to greet you warmly and lovingly? Do you think of a house of worship where members gather to pray collectively or to share in acts of humanity and charity? Or do you think of a park bench, where you can sit amidst the greenery and feel at peace? Or perhaps you envision the seashore, where the sound of the waves perpetually breaking against the sand creates a sense of continuity with time and space.

What do you think of when you think of a friendly place? Do you think of the nursing unit where you work? Or the home care office that has become your base of operation? How about the school where you teach, or the nursing home where you spend more than 2,000 hours each year?

What do you think of when you think of a friendly place? Do you think of the emergency department you visited when your child fell and broke his arm? Do you think of the intensive care unit where your frail, elderly parent received life-saving care? Do you think of the nurses' station in which the nurses, responsible for your loved one, interacted with each other and with other members of the healthcare team?

At the American Organization of Nurse Executives/*Nursing Spectrum* Focus Groups, more than 467 RNs told us that friendliness is most important to them in order to feel comfortable and respected in their institution. So consistent a response makes me think that these nurses are asking for something that they don't perceive they have. After all, if they had it, why would they ask for it?

What is a friendly place? To construct such a place, we must be able to define it. *Webster's Dictionary of the English Language* defines friendly as amiable, showing interest, manifesting kindness, sympathetic, and causing feelings of well-being. The park bench and the seashore certainly generate feelings of well-being, but in a nursing unit, a friendly place is not so much the place as it is the people.

A labor and delivery nurse recently told me that the nurses on her unit perceive the atmosphere as friendly. They communicate well with each other, so well, in fact, that they talk freely about their dates, their families, and their off-duty activities. The trouble is, they talk within earshot of patients. Do you suppose the patients also view this unit as a friendly place?

A patient I know was initially pleased when greeted by a staff who smiled at her and welcomed her to the unit. She believed she was in a friendly place — until she had to wait for the end of report before she could get her pain medication.

I know a nurse who was welcomed into the office of the nurse recruiter, and then of the nurse administrator. They were interested in her because she had exactly the right experience and education to fill a long-standing vacancy. This nurse believed that she was in a friendly place, until she was ignored by a member of the medical staff, who played deaf when asked for assistance in caring for a difficult patient.

I know lots of nurses, lots of patients, and lots of family members who *thought* they were in a friendly place, until they expected one form of response and received another. We all need people to show interest in us. And it matters little what status we occupy. What really matters is being treated in a kind, sympathetic, polite manner no matter who or what we are.

This is not a very friendly world. Crime, poverty, and hopelessness are not friendly. Unfortunately, they are facts of life in our country. So don't you agree that it's particularly important to create and nurture a friendly atmosphere in our work environments?

Nurses work very hard. And nurses are, in general, friendly people. They are people who are committed to generating feelings of well-being. After all, compassion remains one of our important moral imperatives. But if the responses of the 467 focus-group participants can be

extrapolated to a broader population of RNs, then countless nurses, far more than 467, wish for friendliness where they are employed. And this brings us back to the beginning. If they wish for it, does that mean they don't have it? See "A Time To Listen," *The Nursing Spectrum* vol 3(22) p.8.

Harriet Forman RN

Harriet Forman, RN
Executive Editor

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The Envy of the Nation: Maryland's Healthcare Reform Package

Mary Jane Zusy, RN, MA

At long last, President Clinton announced his plan for a revamped healthcare system. Now, federal lawmakers are preparing to tackle the complex issues raised in the proposal. But at least one state has beaten them to the punch. Maryland's General Assembly, with the support of the governor, has made a very important first step in conforming to the very basis of Clinton's agenda for healthcare reform, that is, providing health insurance to all citizens.

Marilyn Goldwater, RN, executive assistant to Maryland's Governor William Donald Schaefer on health issues, says, "The General Assembly, with the encouragement and support of the

governor, has made a very important first step in Maryland's effort to provide health insurance for all of our citizens. It is all voluntary and provides flexibility for us depending upon what the federal government may do."

This legislation—passed in the closing days of the 1993 session—attempts to extend affordable healthcare coverage to many of the state's 600,000 uninsured citizens, who are employed by businesses with 2 to 50 employees. Not only does this legislation deal with malpractice reform, it endeavors to stabilize soaring healthcare costs. It calls for the establishment of a seven-member Healthcare Access and Cost Commission, charged with tackling many of the unresolved issues over a two-year period.



Marilyn Goldwater, RN

The commission has been asked to develop cost-containment strategies, establish a database on all licensed practitioners and office facilities, develop a payment system for health services, prepare standards for and license electronic claims clearinghouses, foster the development of practice parameters, and reduce administrative costs of claims submission for both payors and practitioners.

In May of this year, Maryland Governor William Donald Schaefer appointed Johns Hopkins President William C. Richardson—a nationally recognized health policy expert—to chair the commission. Unfortunately, however, no nurses have been appointed to serve. This disappoints Senator Paula Hollinger, RN, the only registered nurse in the Maryland legislature. "Nurses deliver the bulk of healthcare. It only makes sense to include them as participants in the process of revamping the system," she says.

Richardson agrees, saying that he believes that nurses can deliver cost-effective care in the areas of primary care, prevention, and health maintenance; and that Maryland, with a system of fair and

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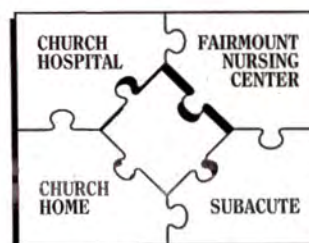
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ready access to healthcare already being developed, will be in a very favorable position if the Clinton plan goes through somewhat as outlined.



Photo by Jerry Esterson

Senator Paula Hollinger, RN

While she believes that some aspects of the new legislation require fine tuning, Senator Hollinger feels that the key elements of the state's plan prove what she has known all along—Maryland is a pacesetter in the field of healthcare. The phasing out of barriers to insurance coverage caused by exclusion of those with pre-existing medical conditions and the elimination of so-called job lock, which presents barriers in making insurance portable from one job to another, are but two of the stipulations contained in the legislation that she believes will stimulate national discussion.

Two elements of the reform plan are especially intriguing to healthcare consumers. The medical care data base, which will include information on health services rendered by all healthcare practitioners, will provide data that will be used by the commission to develop cost-containment strategies. The forthcoming electronic clearinghouses will require practitioners and payors to submit and receive claims electronically by July 1, 1995.

At present, Maryland's Health Services Cost Review Commission sets rates in an all-payor system. Through it, hospital costs of the uninsured are spread across all groups, and "dumping" of uninsured patients on some hospitals is eliminated. So, in a sense, much of the healthcare access problem has already been addressed. The annual rise in hospital costs in Maryland is lower than in any other state in the nation, although the giant increase in numbers of newly insured is certain to have a biting financial impact.

"Maryland has been a pace setter in the field of healthcare for some time," says Senator Hollinger. "Our Medicare waiver, which exempts us from the federal DRG payment system, is the envy of most states. It recognizes Maryland's successful effort at keeping hospital costs down," she says.

Senator Hollinger supported the current legislation on the basis of its strengths, but has some reservations about what she believes to be serious shortfalls. "The tort reform segment bases malpractice

premiums and coverage on community standards. On that basis, rural communities will certainly receive substandard levels of care," she says. Another problem is an unresolved mandate for the uninsured to purchase health insurance. "While the bill will eventually require employers of from 2 to 50 employees to offer insurance coverage to employees who work at least 30 hours a week, individuals are not required to buy it," she explains.

Finally, Senator Hollinger is alarmed because provisions for mental health services and drug rehabilitation programs are practically nil. As a former psychiatric nurse, she is a believer in the cost effectiveness of early intervention for mental illness and alcohol and drug dependencies. She offered an amendment to include these benefits; but after a hard-fought effort, it lost by two votes.



Mary Jane Zusy, RN, MA, is a freelance writer.

EDITOR'S NOTE: From 1974 to 1990, Maryland residents were fortunate to have at least two nurses in the General Assembly. Since 1990, however, Senator Paula Hollinger has been carrying the ball alone. But her broad background of experience in the healthcare system has awarded her respect as one of the Assembly's true healthcare experts.

Much to the delight of patients and nurses alike, she has been successful in pushing through legislation that expands the role of advanced practice nurses. Within the past two years, Senator Hollinger has helped pass bills that grant prescriptive privileges to certified nurse midwives and nurse practitioners.

Before tossing her hat into the political ring, Hollinger traveled nursing avenues that included psychiatric, intensive care, public health, emergency room nursing, staff education, and nursing management. Beginning her political career in 1978 as a delegate from Baltimore County, to the State Senate in 1987, Senator Hollinger has provided leadership on healthcare, nursing, and social issues that affect the entire state.



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U.S. News & World Report, July 12, 1993.

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The Overstressed Nurse

Joyce Good Reis, RN, CNOR

At some point in their nursing careers, most nurses experience an accumulation of overwhelming stress, possibly triggering physical and emotional symptoms. Such stress is especially prevalent among people who are overachievers and who, in their jobs, must confront unchangeable reality on a regular basis. Typical daily stressors include abusive physicians, nonfunctioning or missing equipment, the

unavailability of necessary supplies, coworkers who do not do their share of the work, patients' life-threatening emergencies, dirty equipment, the threat of communicable diseases, long hours, heavy workloads, and the need to keep current with new procedures and technologically sophisticated equipment.

An unexpected, sudden, stressful event can produce symptoms of overload; but, more often it is the thousand little, daily hassles that accumulate and generate overwhelming stress. A downward spiral of chronic stress can make a nurse feel disillusioned, stagnant, ineffective, bitter, visionless, and resigned. Caring becomes apathy; involvement becomes distancing. Overwhelming stress makes a person surrender to the realities of a job where nurses, no matter how hard they try, cannot change the situation.

Overwhelming stress takes its toll on the body and on the mind. Physical manifestations include headaches, insomnia, fatigue, constant complaining, a lack of energy, depression, sweating, heart palpitations, high blood pressure, indigestion, diarrhea, ulcers, irregular menstrual cycles, and an increased susceptibility to infection. Emotionally, an overload of stress may show up as a denial, a change in dependency-related needs, crying, mood swings, depression, anger, impatience, fears and phobias, nightmares, eating and sleep disorders, forgetfulness, poor concentration, indecisiveness, disorganization, disintegration of daily routines, loss of motivation, and substance abuse.

There is no quick cure for overwhelming stress. A day off or even a week away from the job may help, but a better approach is reducing the accumulation of stress by becoming more stress-resistant. Successfully battling chronic stress requires a daily coping plan. Identifying sources of stress can help, but it is more important to learn to recognize and modify responses to stress. A daily action plan can help you to keep stress to a minimum:

- Maintain a sense of humor and a positive attitude. Exchange negative vocabulary for positive words.
- Redefine priorities to identify personal needs and how best to meet them. For many nurses, *overcommitted* translates to *overwhelmed*. Learning to say no actually helps a person do more by doing less, but doing it better.
- Avoid perfectionism. Perfection is unattainable, frustrating, and neurotic. A more realistic approach encourages excellence—and that is healthy, attainable, and worthwhile.
- Learn to view stress as an enabler that provides the energy to finish a project, the impetus to seek answers to a problem, or the power to champion a cause. Beneficial stress encourages a person to distinguish what is urgent and what is merely important.
- Build rewarding, supportive relationships, both on the job and at home, that create a healing environment and develop inner strengths.

Stress-resistant nurses view unexpected events as challenges and opportunities. They are committed to what they do, and they confront problems immediately and solve them. They are in control of their lives, maintaining a positive attitude, setting realistic goals, and determining their own priorities. They are able to redirect their thinking, to develop inner autonomy and assertiveness, and to counteract the effects of accumulated stress.



Joyce Good Reis, RN, CNOR, is an operating room nurse.

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THE UNION MEMORIAL HOSPITAL

Q. I am a new head nurse on an orthopedic unit, and I need some advice. We hear a lot about autonomy nowadays, but I'm not sure what that really means in relation to nursing practice in a hospital, especially on my unit. Doctors' orders are written for medications, treatments, ambulation, activity level, diet, and, it seems, just about everything else. Where does autonomy come in?

A. For many years, the nursing literature has been replete with articles and studies suggesting that nurses seek more autonomy in their practice. Increased autonomy improves nurses' motivation and job satisfaction, and provides nurses with substantial freedom, independence, and discretion in carrying out their clinical functions.



Sue Hudec, RN, MSN

Nurses and physicians generally collaborate regarding an individual patient's plan of care: physicians are responsible for determining the patients' medical diagnosis, and for writing appropriate treatment orders. Nurses are responsible for implementing those orders. However, nurses do have autonomy concerning how those orders are carried out, and they have decision-making authority in developing a nursing plan of care. These acts and responsibilities are at the heart of the professional role of nursing.

Nurses are responsible and accountable for patient care through the nursing process: assessing, planning, implementing, and evaluating the nursing care a patient is to receive. Utilizing professional nursing knowledge and judgment, nurses establish a nursing diagnosis and nursing orders. Nursing standards of care and standards of practice guide nurses' autonomous decisions in those activities.

Nurses seek autonomy in their clinical practice and responsibility for developing their own professional practice model. Nursing administrators and managers currently utilize several approaches to meet the staff nurse's desire and capacity for autonomy. Innovative management techniques such as clinical ladders, case management, and shared governance are being implemented by nursing departments in order to increase staff nurse

input into clinical decisions, and to help nurses achieve professional growth and autonomy.

One effective means to involve staff nurses in decision making and to foster professional practice is shared governance. This technique empowers nurses to be responsible and accountable for decision making in patient care and in management decisions, underscoring the belief that workers know what works best. In essence, each nurse has the opportunity to make a difference. At the unit level where patient care is actually being delivered, shared governance can create a positive, rewarding environment for both the nurse and the patient.

Shared governance and modified approaches provide opportunities to restructure a nursing department and to ensure that decision making, responsibility, and accountability are distributed among nursing staff members. This requires the positive support of nursing management in giving staff nurses authority to make decisions about matters that affect nursing care. Standards of controlling both clinical and professional practice and resolving issues that have impact within the organization should also be within the purview of the nursing staff. Each staff nurse thereby becomes more aware of the impact of decisions on day-to-day unit activities.

Shared governance is not just an organizational change, but an entirely new way of thinking, feeling, relating, and behaving. This process values and recognizes the expertise that nurses bring to their organizations. Increased nursing

autonomy is the key to creating a successful practice environment that is both rewarding and professionally challenging.

NS

Sue Hudec, RN, MSN is Chief of Nursing Service at The Veteran's Affairs Medical Center in Washington, DC.

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LOCATION: Heritage II
Mercy Medical Center
TIME: 9:00 AM - 5:00 PM
(Stop in anytime!)

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Kristine Gebbie, RN: Speaking Out On AIDS

Pat Lakatta, RN, BA

"AIDS is real. AIDS is here. As a nation, we have weaknesses in our response to it, but we also have potential strengths. My job is to help build on those strengths and to help the American people respond to AIDS in a healthier way."

Kristine M. Gebbie, RN, MN, FAAN

Four months ago, President Clinton appointed Kristine Gebbie National AIDS Policy Coordinator. Her multi-focal career experience and history in health and public policy have armed her to tackle what has become a national and worldwide public health issue.

went to school in Minnesota and worked professionally in California, Missouri, Oregon, and Washington state, where she served as Secretary of the State Department of Health.

Her first nursing position was on a surgical floor at Los Angeles County Hospital. Later, she was involved in mental health consultations in public health settings. "I'm interested in how people move through healthcare systems and in system building," she says.

Gebbie's first management job was serving as coordinator of ambulatory care for St. Louis University Hospitals. She taught courses there and at the Washington and Oregon Health Sciences Universities. "I believe in being active in professional organizations," she adds.



Kristine M. Gebbie, RN, MN, FAAN, the nation's first AIDS Policy Coordinator.

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The Washington/Baltimore edition of *The Nursing Spectrum* recently talked with Ms. Gebbie at her Washington, DC office. Her responses as the nation's first AIDS Policy Coordinator reflect the growth, determination, and development of a registered nurse whose purview reaches well beyond Capitol Hill. Her success in this new role depends on her abilities to educate publics of all ages, races, and denominations, and to transform national views about human sexuality from what she calls "pseudo-victorian" to contemporary open dialogue.

Gebbie, a registered nurse and healthcare leader, was born in Ireland; she came to the US with her family and spent her early years as an "Air Force brat." So, she's lived lots of different places. She

Supporting that belief, Gebbie has served as a member of the Executive Board of the American Public Health Association and the Association of State and Territorial Health Officials. She has chaired the Centers for Disease Control Advisory Committee on the prevention of HIV infection, and the Environment, Safety and Health Advisory Committee of the US Department of Energy. Gebbie has been an active member of the Institute of Medicine, especially on the AIDS Oversight Committee.

Nursing Spectrum was particularly interested in knowing how Gebbie felt her appointment as AIDS Coordinator would impact national health policy, state and local policies, and future direction for the country.

"I think it really depends on how people react to what I do. Part of my job is to give voice to this epidemic, to help people bring it out of the closet and make it a disease that we all understand we have to embrace. It's the same way that the entire nation understands immunizing kids and fighting cancer. AIDS isn't a disease we can run away from."

Gebbie believes that many aspects of healthcare are in need of reform. "It's important to understand that if we don't reform the prevention part of the system, strengthen state and local health departments, and really use community health nurses to do what they were educated to do, we won't get any farther ahead than we are right now. We would just keep spending money treating conditions instead of investing in prevention."

The plan is to fight HIV infection properly. To do this, several things are needed: first, anyone who is HIV-infected absolutely needs the best of care. From the time they are first diagnosed and are not yet ill, they need support, information, and encouragement until they actually become ill. At this juncture, they need expert medical care, nursing care, and supportive services up until what is still, an untimely death. Health reform is a big part of the picture because far too many HIV-infected individuals don't have a way to pay for care and are fearful that if they are diagnosed with HIV, they'll lose their insurance. "A big part of my job," says Gebbie, "is to see that we get comprehensive health insurance through health reform systems and that the package includes the right benefits packages and support systems for people with HIV."

Each state will have the job of implementing healthcare reform because the proposed package is really a state-built plan each state puts the package together in ways that best suits its needs. At some levels, it's also a neighborhood-built plan because different communities respond differently. This is the treatment side of responding to the HIV epidemic; the other side is prevention. According to Gebbie, "Our real goal should be to prevent further spread of the epidemic—people changing behavior and helping people not to become addicted to injectable substances."

Safe sex is a major concern, according to Gebbie. "Helping people understand that if they are sexually active in other than a mutually monogamous sexual relationship, they need to be practicing safe sex. They need to be using condoms and making choices about their sexual behavior."

This requires a totally different approach in our societal thinking and communicating about human sexuality. "It means," says Gebbie, "seeing human sexuality as an affirmative value that we discuss positively with young people so that they build it into a life plan in a positive way. If we are really going to change attitudes and practices among our young people, we've got to start with their parents and teachers."

Gebbie is a registered nurse. Her views as to whether or not nursing roles will be augmented as a result of a focused AIDS policy are particularly important. "I think that the approach nursing takes to health and illness is a comprehensive one, looking at a whole person who experiences an illness or health event and trying to help that person to cope in the

most effective way possible. To some degree, this is what I'm trying to do with the nation and our AIDS policy."

Gebbie takes pride in the many nurses who have provided "wonderful" care for HIV-infected people. However, she believes that there have been far too many nurses who haven't bothered to do their homework, who haven't understood the violence of this disease, who haven't wanted to talk to their colleagues about sexuality, who haven't wanted to educate their own kids, but who have gotten as frightened as the general population about the disease."

"If I do my job well, I will help people to get over those fears and to understand that until we talk openly about this disease and all of its uncomfortable implications, we can't prevent it or properly treat those who have the disease. If I say that effectively enough in the right places, nurses will ask what they can do, how they can help, and what kind of education they should further to become more involved."

There are some good programs already in place. At the graduate level in any highly populated, AIDS-infected area like Washington, DC, there are faculty members who have personally worked with this epidemic. Curricula must include an in depth understanding of human sexuality and that it's not enough to teach universal precautions in the schools; precautions must be modeled in every care setting. Working with family and diverse communities should also be an expected part of every program.

please see *Gebbie* on page 11

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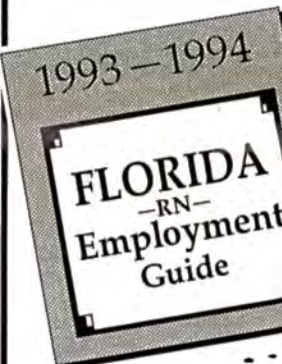
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Gebbie continued from page 9

Appropriate anthropology, sociology, and communication skills need to be included as basics.

Gebbie firmly believes that nurses have made the difference for tens-of-thousands of people with HIV infection. It has been nurses who have been there for patients during the panic of an early diagnosis and nurses who understand the range of care that is needed. Gebbie reports a fascinating conversation with a young, HIV-infected physician, who at least 20 times in the course of an hour's conversation, told Gebbie that what made the difference for him was the nursing care he had received.

Clinically and statistically, the AIDS profile hasn't changed much. The largest number of infected people in this country are gay white men; however, the fastest growing group is now women whose source of infection is heterosexual sex. There are disproportionate numbers of African American and Hispanic people who are infected, a number that continues to grow phenomenally. Gebbie says that as far as teenagers are concerned, if you look at the date of diagnosis of AIDS, often made in the early 20s, it's clear that the infection was contracted during the teenage years.

Gebbie believes that although many people are discouraged that early anti-viral research hasn't yet yielded cures, there is a lot of good research currently going on. In addition to the fact that we have not yet determined such basic information as why the virus attaches to the cell, one of Gebbie's biggest concerns is that we haven't accepted the need for basic behavioral research to go along with biomedical and biochemical research. "We still have far too few nursing researchers going into this area, but it's good to see more money going into the National Center for Nursing Research next year. I believe that far more practicing nurses need to collaborate with their nearest nursing academic center and with nursing researchers to share what they learn in each area of practice."

Gebbie comments that most larger communities already have good HIV referral networks and case management systems. The problem seems to lie in middle-sized and smaller communities where there aren't large numbers of HIV-infected people. In this case, it's harder to tap into appropriate resources because attitudes about AIDS and access to care continue to present barriers.

"Now, and in the future, too many people will have to drive long distances to receive treatment and care. Far too many general practitioners and too many community hospitals are still nervous about AIDS and are not eager to provide basic primary care to HIV-infected individuals. This is clearly an area where nursing can make a difference."

Currently, the Ryan White Care Act provides wrap-around funding for non-insured people and for uninsured services. This includes grants to state and local governments that are used through a local planning process to support AIDS service organizations. This legislation allows patients to receive some direct care, case management, in-home services, and transportation services. In many instances, these services are directed toward helping patients stay at home or be where they want to be while living with their disease. If continued, Ryan White legislation would help patients avoid

unneeded institutionalization, and thereby support an improved quality of life.

With the reform package the President has put together, our healthcare future becomes much brighter. The plan, in essence, is a package of insurance that is transportable. Payments won't be based on the disease one has, and the plan won't be cancelable. As healthcare consumers, each subscriber pays a community rate and, whether or not they have cancer, HIV, or an ingrown toenail, they are covered. What's equally important is a good comprehensive benefits package that includes not just hospitalization and outpatient visits, but also diagnostic work, clinical preventive services, prescription drugs, home care benefits, and treatment for substance abuse. These components are critical pieces that make it possible for many HIV-infected people to get the full realm of services needed.

Meanwhile, nurses remain instrumental in AIDS education, prevention, and treatment. Gebbie believes that we need to encourage Congress to continue the funding of Ryan White in support of state and local programs.

"When I feel perplexed by the task that lies ahead, I stop to think about our societal responses to smoking. When I was a teenager, we would not have envisioned as many smoke-free areas as we have today. Everybody then seemed to smoke. Now, we still have far too many kids learning to smoke, but it is way down from what it was. The moral of the story," says Gebbie, "is that societal attitudes can change."

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Fax (410) 947-3210
EOE



BON SECOURS HOSPITAL
Work For The Dignity Of Life

The Nursing Spectrum

PHOTOCOPY
PRESERVATION

Did You Know?

Each year The Black Nurses Association of the Greater Washington, DC Area, Inc., sponsors an award luncheon to honor a black nurse who has made an outstanding contribution to the profession and to the community.

This year's event will be held February 5, 1994. The association requests that you submit nominations for "Black Nurse of the Year" no later than Tuesday, November 30, 1993. For nomination criteria, a nomination form, or additional information, please call 202/291-8866.

NS

The Classifieds

- | | |
|------------------------|---------------------|
| 00 Miscellaneous | 19 Occup. Health |
| 01 Ambulatory | 20 Office |
| 02 Case Management | 21 Oncology |
| 03 Chem. Depend. | 22 O.R./PACU |
| 04 Clinical Specialist | 23 Orthopedic |
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| 14 I.V. Therapy | 33 Traveling Nurse |
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| 17 Nurse Pract. | 36 Situation Wanted |
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Educational Opportunities

00 Miscellaneous

GEICO — See our ad for outside rehab. nurse under Category 02.

CAMP RN
CAMP LOUISE for girls and CAMP AIRY for boys... one- or two-week openings... mountains of western Maryland, 60 miles north of Washington and Baltimore. Join an excellent staff of two physicians and five nurses each week of camp... modern facilities... children can become campers if at least 7 years of age, and spouses are encouraged to come as guests... various weeks are available depending on the camp. Write or call ED COHEN, 5750 Park Heights Avenue, Baltimore, MD 21215... telephone (410) 466-9010 (Mon.-Fri.) and (410) 833-9595 (eves. and weekends), or Fax (410) 466-0560.
What an incredible summer experience!!!!

RN Evenings-Nights

Perhaps you have seen our ads before and wondered if correctional nursing was for you. NOW IS A GREAT TIME TO FIND OUT! We are Correctional Medical Systems. We have positions available immediately for RNs in the women's unit at the Baltimore City Detention Center. We also have a full-time psych. RN position on days in the men's unit. We offer a competitive salary and excellent benefits and the chance to see why corrections is one of the fastest growing specialties in nursing. Contact **Blanche Shenosky, RN, DON**, at (410) 637-1162 or 1163. Pre-employment drug screen required. EOE.

NURSING CONSULTANTS INC.
Registered Nurses
For DC Hospitals
All Specialties — All Shifts
Contact Gail Bolling, RN, at (301) 840-1841

NRI HEALTHCARE has the following nursing positions available:
*ER/Chest Pain Center
*OR
*Assistant Head Nurse/Cardiac OR
*Nurse Recruiter
Prior experience required. Competitive salary and benefits. Sign on bonus. Contact Barbara Gogel.
NRI Healthcare
(301) 230-0440
Fax: (301) 770-6125

PRNs: Enhance Your Nursing Career and Earn Extra \$!

Discover how you can enhance your nursing career, apply your skills and expertise, PLUS earn extra \$5 while you do it! At Northern Virginia Doctors Hospital, an affiliate of HealthTrust Inc., you'll enjoy your nursing practice in the warmth of a small, friendly community setting with all the advantages of a "big city" hospital.

NVDH makes it easy for you to decide. We currently have ALL SHIFTS on ALL UNITS available for qualified RNs with a minimum of 1-year recent experience in a hospital environment. One weekend a month as well as one major holiday and one minor holiday are required for these positions.

Don't pass up this opportunity to earn extra \$5 and work for an exceptional hospital. For immediate consideration, call (703) 578-2045. Or send resume to: Northern Virginia Doctors Hospital, Attn: Human Resources/PRN, 601 S. Carlin Springs Rd., Arlington, VA 22204-1098. EOE M/F/D/V.

NORTHERN VIRGINIA DOCTORS HOSPITAL

MEDICATIONS NURSE

2:30pm to 11:00pm, Monday through Friday. Nationally recognized and accredited facility serving emotionally disturbed youth in residential treatment program. Responsibilities include administering medications, attending to somatic care, working with on-call physicians, and liaison between health suite and residents. 2-years nursing experience and current Maryland license required. We offer generous paid-leave, non-contributory retirement system, health/life insurance, tuition assistance, and free parking. Salary \$31,392 to \$36,699. Resumes to **RICAROCKVILLE**, 15000 Brochart Road, Rockville, MD 20850. EOE/AA

RN

Full- and Part-Time

Correctional Medical Systems is seeking Registered Nurses for a variety of full- and part-time positions in Jessup, MD. The full-time positions are on the 4pm-12 midnight shift, offer a Mon.-Fri. schedule, a competitive salary and differentials, a benefits package, and several different units to pick from. The part-time positions are mostly on weekends and offer 12-hour shifts and a base salary of \$23 per hour plus differentials. For more info., call **Maureen Joyce, Staffing Coordinator**, at (410) 247-6715. Pre-employment drug screen required. EOE.

ASSISTANT DIRECTOR OF NURSING

Northwest Health Care Center is a 355-bed rehabilitation and skilled nursing facility conveniently located in Northwest DC. We are seeking an RN with strong clinical and managerial skills to join our three-member ADON team. Our ideal candidate will possess strong leadership ability and a caring and compassionate attitude, at least 5 years of experience in geriatrics, and some background in rehabilitation programs.

We offer an exceptional salary and comprehensive benefits, including retirement and stock purchase options.

Submit your resume, in confidence, to:

NORTHWEST HEALTH CARE CENTER
Dept. ADN
3333 Wisconsin Avenue, NW
Washington, DC 20016
EOE

Army Nurse

ARMY NURSES GO RIGHT TO THE FRONT LINE OF HEALTH CARE

Whether you're working on the front line of nuclear medicine in a modern hospital, as an Army Nurse you're in the center of the action.

The Army offers the dedicated nurse a stimulating professional environment. Get the hands-on experience, high-level responsibilities and respect that an Army Nurse commands. If you want to challenge yourself again, see your local Army Nurse Recruiter today.

Colesville (301) 427-5915
Conkling St. (410) 563-7873
Seaford (302) 629-5527

ARMY NURSE CORPS. BE ALL YOU CAN BE.

Publishing Opportunity!
Resources for Excellence
Nurse-owned company looking for nurses. Write medical, surgical, gerontological nursing training materials. Our publications are used nationally. No publishing experience required. We will guide you through the process. Call **Anita Finkelman**, (301) 340-2077.

RNs

Pediatric Nurses (Part-Time)

\$25 - 28/Per Hour
Top Rates \$\$\$\$



HealthCare Services
Call Desiree (202) 393-2900

Our Nursing Clinical Ladder offers several levels of advancement and enables RNs to move on to supervisory, leadership, clinical resource, or administrative roles. Opportunities are available in the following areas:

Nursing Unit Coordinators

Surgery • Medicine

- Medicine
- Neuroscience
- Bone Marrow Transplant
- Post Coronary Care
- Rehab
- ICU
- Emergency Room
- PER DIEM
- Enterostomal Therapy
- Critical and Concentrated Care

Contact the Nurse Recruitment Office: 202-994-4485/1-800-543-0423, or fax to 202-994-3045 or mail resume to GWU Medical Center at 901 23rd Street, N.W., Washington, D.C. 20037—across from the Foggy Bottom Metro stop.

The University is an equal opportunity institution.

The George Washington University
WASHINGTON DC
MEDICAL CENTER
See the difference in yourself.

Top 10 Reasons Why Nurses Choose FAVORITE

1. \$5 Referral bonus \$5
2. Insurance subsidy
3. Flexible schedules
4. Paid vacation
5. 401(k) plan
6. Travel assignments
7. Pd. malpractice/workers' comp.
8. Variety of assignments
9. Openings in: ICU/CCU, Med/Surg, PEDS, NICU, Recovery Room & Post Partum
10. We have the shifts!

If you are looking for a new and busy agency that promises to be your FAVORITE in the Baltimore, Washington DC, and Maryland areas, call:

MD/DC/VA
(301) 585-1592
Baltimore
(410) 583-8282



FAVORITE NURSES

AA-EOE Temp-No Fee

NURSES/RN/LPN—P/T, 12-15 hrs. Exped'd. nurse for small 8-bed infirmary serving HIV/AIDS homeless adults. Min. of 3-yr. exp. & DC license req'd. Homecare or hospice care exp. pref. Must be flexible & able to work day/evening shifts/weekend/holiday shifts. Resume & cover letter to: **HIV Services Coordinator, Health Care for the Homeless Project**, 1234 Mass. Ave., NW, Suite C-1009, Wash., DC 20005. EOE.

INFECTION CONTROL PRACTITIONER

Fairfax Hospital, a 656-bed facility recognized as one of Northern Virginia's leading teaching hospitals, provides an ideal setting in which to initiate or continue your professional career.

We are currently seeking an individual to support our Quality Services Department by adding hospital personnel in preventing, identifying, and controlling infection of patients and hospital staff. Your responsibilities will be to conduct surveys and research, monitor nursing units, consult hospital staff, and implement education programs for employees.

The successful candidate will possess a BSN in Nursing or a BA/BS plus MT (ASCP) Registry, coupled with two years of clinical hospital practice as an RN or in a laboratory as a Medical Technologist. Individual must possess knowledge of hospital asepsis and microbiology in order to interpret cultures and their significance as related to infection.

Enjoy an excellent compensation package including on-site child care. For more information, call (703) 698-3298; outside VA call (800) 234-4405 or forward resume to: Office of Nurse Recruitment, Fairfax Hospital, 3300 Gallows Road, Falls Church, VA 22046. EOE.

FAIRFAX HOSPITAL
INOVA HEALTH SYSTEM

01 Ambulatory

ARUNDEL AMBULATORY CENTER FOR ENDOSCOPY in search of two PT RNs w/endoscopy or critical care background. Excellent salary. Resume: **Pam Reese, RN, NM**, 621 Ridgely Ave., #101, Annapolis, MD 21401.

02 Case Management

OUTSIDE REHAB NURSE

Stay in the Suburbs

INSURANCE CLAIMS

GEICO, a Fortune 500 property and casualty insurance industry leader, has an excellent opportunity for a qualified health professional with experience in rehabilitation to monitor injury claims from both our policyholders and claimants in the Baltimore and central Maryland area.

Qualified candidates must be a registered nurse with 3-years hands-on experience. Prior rehabilitation experience, CIRS, and previous auditing experience preferred.

In return for your dedication and expertise, GEICO offers a competitive compensation package including profit sharing, stock ownership, health/dental/life insurance, and a company car. Please send your resume in confidence to:

GEICO
Human Resources/RN
100 Riverside Pkwy., Suite 110
Fredericksburg, VA 22406

FAVORITE NURSES

AA-EOE Temp-No Fee

CASE MANAGEMENT

Kemper National Services, Inc., a leader in the managed care/rehab. industry, has a full-time position for an RN in the Baltimore area. NART, cert. CRRN, or CIRS considered a plus. Exper. in Rehab, Ortho/Neuro or Med/Surg pref. As a Kemper Case Manager, you will enjoy the freedom to work from your home with a M-F work week. We offer a competitive salary, bonus, allowance & excellent benefit pkg. Contact **A. Abraham**, (800) 877-3515, ext. 1446. KNS conducts pre-employment drug screening. EOE.

04 Clin. Specialist

CLINICAL NURSE SPECIALIST Neuro/Ortho

Fairfax Hospital, a 656-bed acute care teaching facility, brings all aspects of Neuroscience together in our Neuroscience Center. Features include a 63-bed unit with a 10-bed rehab. section, full-time physician, collaborative practice committee, assistant patient care directors on all shifts, a dedicated Trauma/Neuro ICU, and a core curriculum for neuro nurses. Our renowned Orthopedics Center offers the latest technological advances as well as exceptional expertise in joint replacement, spine surgery, and sports injuries.

If you're an experienced CNS with an MSN and demonstrated expertise in research and education in Neuro/Ortho, this outstanding opportunity really has it all, including highly competitive compensation and comprehensive benefits. Candidates with similar background in Neuroscience or Orthopedics who would like to work full- or part-time are encouraged to apply.

Call or fax your resume for immediate consideration. Office of Nurse Recruitment, (800) 234-4405. Fax (703) 698-3448. Or, forward resume to: Fairfax Hospital, 3300 Gallows Road, Falls Church, VA 22046. EOE. Committed to work force diversity.

FAIRFAX HOSPITAL
INOVA HEALTH SYSTEM

05 Critical Care

ICU RN

Diversify Your Career Options

Take a look outdoors and witness the beautiful changes of Fall. Vibrant green makes way for fiery red and luminous gold. Diversify your career options by taking advantage of the challenging opportunity currently available for an ICU RN at Northern Virginia Doctors Hospital.

We currently have weekend days (12-hour shifts) available. Prior ICU experience is required; ACLS certification is preferred. PRN shifts also available. Discover how you can join our quality-focused team of nursing professionals! For consideration, please call (703) 578-2045, or send resume to: Northern Virginia Doctors Hospital, Attn: Human Resources, 601 S. Carlin Springs Rd., Arlington, VA 22204-1098. EOE M/F/D/V.

NORTHERN VIRGINIA DOCTORS HOSPITAL

07 Dialysis

DIALYSIS
Per diem and temporary full-time positions avail. for RN w/dialysis exper. Flex. scheduling options. Supportive environment. EOE. To arrange an interview contact **Pam Martin, RN**, (202) 543-9105.

To advertise in The Nursing Spectrum, call

703/914-8008, or

Fax your ad to 703/914-8012.

Next ad deadline: Thurs., Nov. 18

BMA Of Camp Springs

is seeking a P/T PD coordinator. 1-yr. hemo, 1-yr. med/surg & teaching exp. req'd. PD exp. pref. Call **Rosemary** at (301) 423-5657.

Nurse—Licensed RN or LPN, dialysis experience preferred. No weekends. Inquire **M.W.F.**, 9am-3:30pm. (703) 644-7500.

ACUTE DIALYSIS

F/T position for acute hemodialysis RN. Position offers the opportunity to function independently in an exciting hospital environment. Exp. in hemodialysis req. Exp. in nephrosis a plus. Salary low to mid \$40s. Exc. benefits. M/F, (301) 340-8679. EOE

DIALYSIS Sign-On Bonus

BMA Of Camp Springs is seeking a F/T Charge Nurse. 6 mos. dialysis exp. & 1-yr. med. surg. nursing in req'd. Supv. exp. pref. Call **Rosemary** at (301) 423-5657. **BMA Of Camp Springs**, Dept. PP, 3700 St. Barnabas Rd., Suitland, MD 20746.

REGISTERED NURSE ACUTE HEMODIALYSIS

INDEPENDENT DIALYSIS FOUNDATION has an opening available for a registered nurse for its acute program in Glen Burnie. We are seeking a nurse with strong hemodialysis skills who is interested in providing high quality care. This is a full-time position which requires flexibility in scheduling and some "on-call."

IDF offers a competitive salary and benefits package. To arrange for an interview, please contact:

STELLA CARTON, RN
(410) 659-0133 or 366-5400

09 Education

NURSING EDUCATION DIRECTOR

Full-time, (36 hrs./wk.) position in a 130-bed pediatric specialty and rehabilitation hospital to plan, implement, and evaluate nursing educational programs under the direction of the Vice Pres. for Nursing. The dynamic professional we seek will possess a BSN (master's preferred), current Md. RN license, and 3-yr. maternal/child experience. Proof of clinical/classroom teaching experience required. Please send your resume to:

MT. WASHINGTON PEDIATRIC HEALTH SYSTEM, INC.
Human Resources Dept.
1708 W. Rogers Ave.
Ballo., MD 21209
EOE M/F/D/V



PROVIDENCE HOSPITAL
Washington, DC

Unit Educator Operating Room

Enjoy the challenges of a newly created position that offers the experienced OR nurse the opportunity to perform both clinically in the perioperative role and as the unit-based educator.

We are seeking an RN with a BSN and a minimum of 5 years of acute care experience with a focus in the Operating Room.

For more information, please call **Carol Lieberman, Nurse Recruiter**, at (202) 269-7925 or our TDD line at (202) 269-7884. To request an application, call (202) 269-7035.

EOE

NURSING INSTRUCTOR

Full-time position available developing and implementing educational programs for patients and staff and providing instruction in training and orientation. Requires master's degree in nursing or education, with psychiatric nursing and teaching experience. EOE, M/F/H/V. Call...

V. Tysinger
Highland Health
Psychiatric Facility
(410) 558-9005

10 Ger/LTC

DIRECTOR OF NURSING

90-bed nursing/domiciliary care facility located in Baltimore County, Md. seeks DON with experience with OBRA and staff supervision. Excellent salary and benefits package. Call **David Ferrell**, (410) 298-1403.

NURSES—RNs

Almost Family—growing adult day care center in Lanham, MD, is seeking part-time and PRN nurses. Low-stress environment in a beautiful new center. Send resume to: **Almost Family**, 5200 Philadelphia Way, Suite 1, Lanham, MD 20706

DIRECTOR OF NURSES

Leader for state-of-the-art, quality institution. Clinical and managerial experience in long-term care required. Potential to growth and reward. Excellent salary and benefits.

Send resume to:
PO Box 3683
Baltimore, MD 21214

NURSE MANAGER SUB-ACUTE & ALZHEIMER'S UNITS

Two full-time positions are available for RNs with 5-10 years Sub-Acute Units, 2-3 years of exp. in long-term care might prefer. Excellent salary and benefits. Contact: **Patricia Gyorda, RN, C.DON**, **CHARLES COUNTY NURSING HOME**, LaPlata, MD 20646. (301) 934-1900 DC (301) 870-366 EOE M/F

RNs

Stable work environment. Not downsizing. Join VSM group of nursing service leaders.

Some supervisory and clinical positions still available due to our expansion of services and program development in IV therapist nursing rehabilitation, an hospice-oriented services.

For consideration, please contact **Marion Taylor, R/DNS**, at:

VILLA ST. MICHAEL NURSING AND RETIREMENT CENTER
4800 Seton Drive
Baltimore, MD 21215
(410) 358-3410

RNs/LPNs

There's a given rule that a pro or service is only as good as the people who stand behind it. At Colton Villa Nursing Center we believe our staff members are among the best in the business.

We are currently seeking experienced, professional nursing applicants for assignments in our nursing department. We are a member of Beverly Enterprises, the nation's largest long-term healthcare provider. That means competitive salaries and excellent benefits, like medical/dental insurance, credit union membership, tuition reimbursement, and much more.

To become a part of our health care team and a valued member of our community, stop in and complete an application Monday through Friday, or tel fax a copy of your resume.

Nancy Petersen, RN, Director Nursing.
COLTON VILLA NURSING CENTER
750 Dixie Highway
Hagerstown, Maryland 21740
(301) 787-4020
FAX: (301) 787-2558

Equal Opportunity Employer

Clinical Supervisor

Come join our management team at Alice Manor, a new nursing center. Two full-time RNs needed for 8am-5pm shift with alternating weekends. Call Sue Parr at (410) 889-9700.



Asbury Methodist Village, a continuing care retirement community, has several exciting professional opportunities. Our philosophy of nursing is participatory management.

• 3-11 Shift Supervisor, 16 hours

• Charge Nurse, 3-11, FT & PT

• RNs/LPNs, PRN Pool, all shifts

Benefits, salaries, differentials, and growth opportunities are competitive. Please send a resume & cover letter to Asbury Methodist Village, 201 Russell Ave., Gaithersburg, MD 20877; or call Jean Rodriguez, Healthcare Recruiter, at (301) 216-4320 for further information.

Asbury Methodist Village: Long Term Care Long Term Life Long Term Satisfaction EOE

12 Home Health

N. VA. home care co. seeks RN w/ pediatric/neonatal exp. for our Infant Apnea Program. Mon.-Fri., 8:30-4:30. Send resume to Home Health Clinical Services, 5701-E General Washington Dr., Alexandria, VA 22312, or FAX: (703) 642-5499.

DON
Clinical IV Nurse
Sales Rep.
Md., DC, No. VA
\$45-\$80K + Pkg.
Call Bob C. (410) 666-1100
or fax (410) 666-1119
FALLSTAFF SEARCH

PEDIATRICS
Looking for RNs & LPNs to work home care cases in the following areas: Glen Burnie, Middle River, Annapolis, Randallstown. Please call (410) 486-4555.

HOME CARE NURSES

Full-time and part-time registered nurses for home visits in Montgomery County. Join the fastest-growing area in home care. Provide supervision and consultation to home care aides and professional staff. Some training responsibilities. Flexible hours, excellent salary. Home care experience preferred. Call C. Washington at (202) 638-2382. Send or fax your resume to:

HHAS
1234 Massachusetts Ave., NW
Suite C-1002
Washington, DC 20005

Home Health Nurses
NURSING
SUPERVISORS
Move Up The
Career Ladder

Maryland's fastest growing healthcare company is seeking a career-minded, MD-licensed RN for our MONTGOMERY COUNTY office.

Must have strong administrative and communication skills, and a diverse clinical background, including one year of direct supervisory experience. Please call our Nurse Recruiter at:

(800) 257-1178

HomeCall provides a competitive salary and benefits package and excellent career potential with a growing company. EOE.



Home Care Nurse for:

Leadership, management position to develop new program in home care agency. Join the fastest growing aspect of home care today! Previous home care experience essential. Managerial experience a plus. Excellent salary and benefits. Flexible hours. Contact C. Washington at (202) 638-2382. Send or fax your resume to:

HHAS
1234 Massachusetts Ave., NW
Suite C-1002
Washington, DC 20005
Fax (202) 638-3169

IMMEDIATE POSITIONS AVAILABLE

Experienced RNs, LPNs, PTs, and OTs needed for a busy home care agency. Assignments include case management, home care, and some staffing. We offer competitive pay, flexible schedules, and a variety of geographic locations. Call today for an immediate interview.

INTERIM HEALTHCARE
(410) 823-7065
1407 York Road, Suite 204
Lutherville, MD 21093

Home Health

Staff Nurses

The Visiting Nurse Association of Baltimore currently has the following full-time positions available:

STAFF NURSES to work full-time in the Baltimore area.

WEEKEND OPTION
HOSPICE NURSE to work 12-hour Sat. and Sun. shifts with 6 hours flex time. Paid 40 hours, full benefits.

STAFF DEVELOPMENT
COORDINATOR Must have 3 years of home health exp., BSN required. Master's preferred.

If you're interested in joining a progressive, supportive team of professionals, call Kathy Groves, RN, at (410) 358-1895, ext. 8161, or send your resume to: The Visiting Nurse Association, 6000 Metro Drive, Baltimore, MD 21215. EOE.

Visiting
Nurse
Association
OVER 95 YEARS OF CARE



It's the Dawn
of a New Day
in Home Healthcare

INTAKE NURSE

Enjoy the Challenge of Home Care without the Travel. We seek an experienced, organized nurse with strong home care skills and knowledge of third party reimbursement to do clinical triage of all patients coming into Johns Hopkins Home Health Services. Will interact with referral sources.

This key position is full time with competitive salary and benefits.

If you're up to the challenge send resume to:

SUSAN HARVEY
Human Resources

JOHNS HOPKINS
home care group

2400 Broening Highway
Baltimore, MD 21224
Equal Opportunity Employer

DISCHARGE PLANNER

Assertive RN needed for busy community hospital setting. A self-directed individual will have a strong home health background and be able to function as a liaison between the hospital and the home health agency. Experience as discharge planner a plus. For more information, call Tuesday-Friday:

Sandy Cimino, RN
Diversified Health
Services, Inc.
(410) 882-0000

RN HOME INFUSION

JCAHO-accredited home infusion company seeking RN to do home visits in Maryland and Washington, DC. Home infusion experience preferred. Will consider candidates with appropriate background.

We are offering a competitive salary and benefits package for highly skilled and motivated individuals. This is a full-time, salaried position with one week-end on-call.

Please send resumes or call:

Director of
Operations/Nursing Services
ALTERNATIVE HOME CARE
1531 Greenspring Drive
Timonium, MD 21093
(410) 252-5556

PEDIATRIC HOME CARE RN

The expansion of Mt. Washington Pediatric Home & Community Care has created a full-time, Mon.-Fri., day position for experienced pediatric RN to provide physical assessments and nursing intervention in the homes of infants and children in Balto. City and surrounding counties. If autonomy, flexibility, and participation in a team of outstanding professionals (RN, PT, OT, Speech) appeals to you, please send your resume or call:

MT. WASHINGTON
PEDIATRIC HEALTH
SYSTEM, INC.
Human Resources Dept.
1708 W. Rogers Ave.
Baltimore, MD 21209
(410) 578-8600, ext. 323
EOE M/F/D/V

13 Hospice

HOSPICE OF PRINCE GEORGE'S COUNTY

Hospice is a special kind of nursing. If you want competitive pay, flexibility, and autonomy in a supportive, caring work environment and you have a strong medical/surgical background, we have the following positions:

• Weekend on-call RN
Provide home visits as needed, telephone advice, and triage

• Full time RNs
Hospice/home care experience preferred.

Send resume or call:
HOSPICE OF PG
98 Harry S. Truman Drive
Largo, MD 20772
(301) 499-0550

14 IV Therapy

IV Nurses Needed Per Diem

IVonix, a rapidly expanding home infusion therapy company, is in need of a Montgomery County, MD. RN to service its clients; a Prince George's County, MD. RN to service its clients; and a Prince William County, VA RN to service its clients on a per diem basis.

Strong IV skills and comfort with central access care necessary. Home care experience and familiarity with Midlines and PICC lines a plus.

Interested applicants please call Beverly Moore, RN, Clinical Manager, at (800) 734-0502.

IVonix, INC.
751 Miller Dr., Ste. A-1
Leesburg, VA 22075

15 Managerial

BALTIMORE COUNTY SNF—
See our ad for DON under cat. 10.

BMA OF CAMP SPRINGS —
See our ad for Dialysis Charge Nurse under cat. 07.

WEEKEND HOUSE SUPERVISOR

Take A Fresh Approach

Take a look outdoors and witness the beautiful changes of Fall. Vibrant green makes way for fiery red and luminous gold. Why not take a fresh approach to your nursing career by taking advantage of the convenient weekend positions currently available at Northern Virginia Doctors Hospital?

The successful candidate must have broad-based hospital experience, preferably in Med/Surg and ICU. Prior supervisory experience is required. Weekend day shifts or alternate weekends are available.

Discover how you can join our quality focused team of nursing professionals! For consideration, please call (703) 578-2045, or send resume to: Northern Virginia Doctors Hospital, Attn: Human Resources, 601 S. Carlin Springs Rd., Arlington, VA 22204-1096. EOE M/F/D/V.



NURSE MANAGER

Suburban Hospital is seeking a dynamic Nurse Manager to oversee our Cardiology Center, which is one of Suburban's prestigious service lines. The Cardiology Center is a 24-bed unit consisting of hardwired, telemetry, and cardiac short-stay beds. The unit's approach to the profession of nursing is through shared governance and differentiated case management.

This position will provide you the opportunity to utilize your management, marketing, and collaborative skills through interaction with cardiologists, directors, and nursing staff.

The ideal candidate must have 1-2 years of strong management experience supported by 3-5 years in a critical care or coronary care setting. BSN required.

If management is the direction of your nursing career, then working with this innovative nursing team will be your reward. We offer a competitive salary and comprehensive benefits package. To learn more about this position, please contact Lisa McDermott at (301) 360-3630, or send your resume to:

SUBURBAN
HOSPITAL
Human Resources Dept.
8600 Georgetown Road
Bethesda, MD 20814
Equal Opportunity Employer

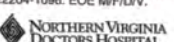
TELEMETRY NURSE MANAGER

Monitor Your Expertise At NVDH

Take a look outdoors and witness the beautiful changes of Fall. Vibrant green makes way for fiery red and luminous gold. Monitor your growth as you take advantage of this challenging, full-time (weekdays with alternate weekends) opportunity currently available at Northern Virginia Doctors Hospital.

The take-charge, independent thinker we seek will be responsible for managing our recently installed, state-of-the-art telemetry system. The ideal candidate will possess broad-based hospital experience, preferably including Med/Surg and ICU. Previous supervisory experience and ACLS certification are required.

Discover how you can join our quality-focused team of nursing professionals! For consideration, please call (703) 578-2045, or send resume to: Northern Virginia Doctors Hospital, Attn: Human Resources, 601 S. Carlin Springs Rd., Arlington, VA 22204-1096. EOE M/F/D/V.



UNIT MANAGER

Dulaney-Townson Health Care Center, a 151-bed facility, has an opening for a Unit Manager.

This position requires RN licensure in the state of Maryland, strong leadership skills, and the ability to manage a unit with complex resident needs. Excellent opportunity to combine clinical expertise and management skills. Rehab/critical care/acute care experience preferred. Medicare knowledge helpful.

We offer competitive salary, good benefits, and the satisfaction of enriching the lives of others in a pleasant working environment. Please apply to: Felicia Jones, Dulaney-Townson Health Care Center, 111 West Rd., Towson, MD 21204, (410) 828-6500. EOE.

DIRECTOR—HEALTH CENTER

Baltimore Medical System, a JCAHO-accredited, ambulatory facility, has an exciting career opportunity for an RN to join our management team. The individual in this position will be responsible for community health center operations and preventive health programs. Qualifications include RN with bachelor's degree and management experience in a community health and ambulatory care setting. Established track record in team building, health education and preventive health. Effective community outreach skills are a must.

We have EXCELLENT benefits including five-weeks paid annual leave and tuition assistance. For a chance to join a team of healthcare professionals dedicated to serving community needs, send resume to:

Baltimore
Medical
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We emphasize professional practice in a case management system and active staff participation in unit decision-making. This position will give you an opportunity to expand your management expertise by building a team accountable for the quality of care it provides. 3-years experience and BSN required. MSN strongly preferred.

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HOSPITAL

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DRUG SCREENING
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17 Nurse Pract.

5-person, internal medicine practice in Bowie, MD, seeking P/T Nurse Practitioner. Send CV to: Bowie Internal Medicine 3231 Superior Lane, A-6 Bowie, MD 20715

NURSE PRACTITIONER

For private practice. Very unique and enormously successful program of health and nutrition education with weight control. Part-time with full-time potential at Towson office. Send resume to: Manor Professional Building 3421 Sweet Air Rd. Phoenix, Maryland 21131 Attn: Barbara

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NURSE PRACTITIONERS

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Experienced and highly credentialed candidates are needed to help revolutionize American healthcare delivery. Please send your resume to:

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OB/GYN Nurse Practitioner
(Part-time)
Dewitt Army Community Hospital, located in Alex., VA, is seeking qualified applicants. Candidates must be certified with a min. of 2-yr. of specialized experience. Education may be substituted for experience. Full-time position with excellent benefits, paid vacations, and sick leave. Salary range from \$39,228 to \$49,317 per year. Interested applicants may send or fax Standard Form 171, application for federal employment to:

US Army Medical
Department Activity
9415 Stimson Road
Resource Management
Division, Suite 221
Attn: Diane M. Day
Fort Belvoir, VA 22062-2228
Phone: (703) 805-4445
Fax: (703) 805-0474

UNIQUE RESEARCH & CLINICAL PRACTICE OPPORTUNITY

The Johns Hopkins University (JHU) Center for Immunization Research and The Johns Hopkins Medical Services Corporation (JHMSC) seek qualified, enthusiastic CPNP to provide primary healthcare to children at a JHMSC site and to conduct studies of new pediatric vaccines for respiratory and diarrheal diseases. Maryland RN license and previous clinical pediatric experience required; previous research experience desirable. Competitive benefit package includes: insurance options, generous leave accrual, and tuition remission/grant programs. Please send your resume referring to position #93-1130 to:

THE JOHNS HOPKINS
UNIVERSITY
School of Hygiene and
Public Health
Office of Human Resources
615 N. Wolfe St., 621 Bldg.
Baltimore, MD 21205
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FREE CLINIC in Shaw neighborhood expanding services, needs Family Practice NP with clinical/management experience. Full/part-time. Flexible. (202) 265-2400

PEDIATRIC NURSE PRACTITIONER

Busy Northern Virginia pediatric practice with four MDs seeks experienced CPNP for autonomous position at Alexandria and Fairfax offices. Part-time. Call (703) 931-2359.

18 OB/Gyn

Fairfax Hospital is at the top of your list for leadership, staff, and education opportunities in a variety of general and specialty nursing areas. We're also recognized as one of Northern Virginia's leading teaching hospitals. If you would like to explore your options with a leading facility, consider the following opportunities now available.

NURSE PRACTITIONER

We require certification with broad-based pediatric experience. Bilingual Spanish skills are a must. Full- and part-time positions are now available.

OB CLINIC NURSES

You will work in an outpatient setting for Women's Health and Patient Education which handles 20,000 visits a year. We have one full-time RN and one part-time (3 days per week) LPN position available. We require at least one year of experience in a clinical setting and bilingual Spanish language skills.

Enjoy an excellent compensation package including on-site child care. For more information, call (703) 698-3298; outside VA, call (800) 234-4405, or forward your resume to: Office of Nurse Recruitment, Fairfax Hospital, 3300 Gallows Road, Falls Church, VA 22046. EOE.

FAIRFAX
HOSPITAL
INOVA HEALTH SYSTEM

19 Occup. Health

OCCUPATIONAL HEALTH

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20 Office

RN/LPN
PT, 2 days. Nursing position in Silver Spring pediatric office. Peds. exp. preferred. Phone (301) 681-1515 weekdays. Evenings and weekends phone (301) 441-3428. Ask for Barbara.

RN

Busy medical group near Dupont Circle metro seeks experienced RN and one part-time busy internist, Mon.-Fri., Vatter Medical Group, 1780 Mass. Ave. NW, Wash. DC, 20036, or Fax to Kay, (202) 296-2884.

NURSE/RN

For pediatric & adult allergy asthma practice in Shady Grove & Silver Spring. Responsible experienced, clinically astute individual who enjoys challenging of direct patient care & education in a fast-paced environment. Call (301) 251-0880

Head Nurse

GYN/Oncology Practice
FT RN needed for Head Nurse position in busy GYN/Oncology office. Ind. must be able to handle the diversified needs and manage nursing staff. Must have exp. venipuncture, access device and IV administration. Oncology exp. pref. Please send your resume to: Dodek, Kolz Grodin, MD, PA, 10215 Fernwood Rd., #303, Bethesda, M 20817. ATTN: Barbara Hoover

25 Psychiatric

POTOMAC RIDGE TREATMENT CENTER
BRIDGE RESIDENTIAL TREATMENT CENTER—Se our ads for psychiatric nurse on page 11.

PSYCHIATRIC/MEDICAL NURSE to work in homebased mental health outpatient program. Office & field work, 15-20 hr/week. Staff training skills & flexibility needed. EOE. Resumes only to: Linda Miller, LICSW, Pt Box 29055, Washington, DC 20017-0058.

JUST A FEW

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Silver Spring, MD 20901
Fax: (301) 681-3541

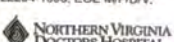
PSYCHIATRIC RN

Analyze This Exceptional Career Opportunity

Take a look outdoors and witness the beautiful changes of Fall. Vibrant green makes way for fiery red and luminous gold. Analyze this exceptional career opportunity currently available at Northern Virginia Doctors Hospital.

This part-time (weekend/alternate weekend nights, 12-hour shifts) position requires strong psychiatric assessment skills and extensive psychiatric work experience.

Discover how you can join our quality-focused team of nursing professionals! For consideration, please call (703) 578-2045, or send resume to: Northern Virginia Doctors Hospital, Attn: Human Resources, 601 S. Carlin Springs Rd., Arlington, VA 22204-1096. EOE M/F/D/V.



RNs & Per Diem Nurses

Crownsville Hospital Center is presently recruiting for all shifts in the following psychiatric inpatient areas:

- Acute adolescent unit
- Adolescent residential treatment program
- Acute adult units
- Adult behavior management unit
- Somatic services unit

Management & staff nurse positions available.

We are ideally located in rural Anne Arundel County, outside of Annapolis, between Baltimore and Washington, DC.

Very attractive State of Maryland benefits package. Premium starting salary. Compressed, flexible work week.

For more information contact:

**Pamela Dorsey, RN, BSN
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Exceptional opportunity to join a progressive team seeking to improve patient care through leading edge nursing practice.

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This opportunity offers flexible scheduling with ability to adjust hours as needed. Qualifications include an MS in Psychiatric Nursing and ANA Clinical Specialist certification. Strong background in Bio-Psycho-Social Nursing and ability to intervene physically with psychiatric patients. Experience developing educational programs preferred. We offer pleasant working conditions and a hiring range effective 12/1/93 of \$51,128-\$58,439 (salary range \$51,128-\$76,064). Comprehensive state of Virginia benefits package, including 85% paid health, 100% paid life and pension. Deferred compensation plan and credit union available. Free parking available. Closing date 1/1/95.

For further information, please call Lynn DeLacy, Director of Nursing, at (703) 207-7130, or Diana Mize, Recruiter, (703) 207-7204. To apply, send resume or state application to:

Human Resources
NORTHERN VIRGINIA MENTAL HEALTH INSTITUTE
3302 Gallows Road
Falls Church, VA 22042
Women, minorities, and persons with disabilities are encouraged to apply.

26 Public Health

Charles County Health Dept. has an opening for a Community Health Nurse (RN) to work with Cardiovascular Risk Reduction & Tobacco Prevention in the community. Contractual position through 6/30/94, with renewal possibility. 40 hrs/wk., \$11.55-\$12.44/hr. One-year experience required. Please send resume to the Personnel Dept., PO Box 640, La Plata, MD 20646 by 11/15/93. State of Maryland is an Equal Opportunity Employer.

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Salary up to \$33,359 per year. Requires bachelor's degree in nursing, or graduation from an accredited school of nursing, or an AA degree in nursing, plus two-year's experience, under supervision, in nursing. RN required.

Applications accepted until further notice. For more information and application form, contact:

Baltimore County
Office of Personnel
(410) 887-3135
or (410) 887-JOBS
EOE

27 Rehabilitation

REHAB NURSES

KERNAN HOSPITAL is seeking experienced, self-directed RNs to assume staff leadership positions as **FULL-TIME EVENING AND NIGHT CHARGE NURSES** on our Rehab. Units.

FLOAT POOL RN positions also available on all shifts on Rehab. and Surgical Units.

We emphasize professional practice in a modified primary nursing system, and active participation in unit management and decision-making. CRRN preferred.

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28 Research

RN/RESEARCH COORDINATOR
M-F days, DC lic'd., exp'd. in asthma & allergy preferred. Ask for Judy at (202) 877-8777.

30 School Nurse

SCHOOL NURSE POOL

EXPLORE THE CHALLENGING WORLD OF SCHOOL NURSING. RNs/LPNs needed for permanent and PRN positions in a central Maryland county public school system. School year with summers off. Salary \$23,100. Current CPR and first aid certification required. BSN preferred for permanent positions. Contact the Department of Human Resources, Howard County Public School System, at (410) 313-6895.

31 Spec. Procedures

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- BSN or BS (MS preferred)
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EOE/OAA

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- experience in vent-dependent patients
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Please contact: Marie Lister, RN, at (703) 321-6090 for further information. EOE

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33 Traveling Nurse



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34 U.R./Q.A.

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If you are ready for a challenge and meet these requirements, please send resume and salary history to: Aetna Health Plans, 7799 Leesburg Pike, 1100-South Falls Church, VA 22043. Attn: QI Manager. NO PHONE CALLS PLEASE. Equal Opportunity Employer M/F/D/V.

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New Jersey—*The Nursing Spectrum*

New York—*The Nursing Spectrum*

North Carolina—*Nursing Matters*

Ohio—*Nursing News (Cleveland)*

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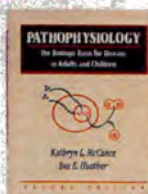
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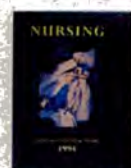
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To place your order, simply return this coupon to:

The Nursing Spectrum
PO Box 190
Wauconda, IL 60084

MSA-720

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Call TOLL-FREE:
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Please mention this number when calling: MSA-720.



Spectrum

Nurse Diabetes Educator

Tina Bauman, RN, MEd, CDE

Education is a critical component of patient care delivery; and diabetes education has received national attention since June 1993, when the Diabetes Control and Complications trials began. This ten-year study has proven that optimum blood glucose can delay the onset of major complications in up to 70 percent of patients with Type I & Type II diabetes.



Tina Bauman, RN

The American Association of Diabetes Educators (AADE) has, for the past 20 years, been an advocate of diabetes education for optimum home management and a promoter of an improved lifestyle for those living with diabetes.

As a CDE and the parent of a child with diabetes, I take my role as nurse educator seriously, professionally, and personally. At Franklin Square Hospital, our team approach to diabetes management is essential, with the patient

serving as captain of the team. In this setting, it no longer seems appropriate to use a medical care model to provide patients with information and self-care skills. Because diabetes is the leading cause of new onset blindness and is the primary reason for more than 50 percent of all amputations performed in the US, education and prevention are imperative. Yet it is a daily battle for families living with diabetes to obtain third-party reimbursement for diabetes supplies used to prevent those complications.

TELEMETRY We're bringing the nation's best to the nation's capitol

Washington Adventist Hospital, located in suburban Takoma Park, Maryland, near the nation's capitol, is expanding its state-of-the-art critical care center, with new telemetry units opening in October. And if you sign-on before December 15th, we're offering an extra two weeks of paid vacation -- or the cash equivalent -- to attract the very best telemetry nurses in the country for our world-class facility.

At Washington Adventist Hospital, you'll work collaboratively in an environment of mutual

respect, where our professional practice model assures you'll play an important, active role in shaping the future of the unit. This is a professionally-rewarding situation for the experienced nurse clinician.

Your skills will be challenged at Washington Adventist Hospital, a regional cardiac referral center performing a variety of sophisticated procedures. Plus, you'll interact with experienced educators and physicians, with ample opportunities for certification through our Education Department.

TELEMETRY NURSING

Call for more information about the positions available and our generous relocation package, competitive, market-adjusted salaries, flexible shift-scheduling, and much more.

1-800-352-1290



Advanced technology. Timeless compassion.

7600 Carroll Avenue • Takoma Park, Maryland 20912

As multidisciplinary healthcare professionals, RN educators need to continue asking important questions: Why are we, as a country, willing to pay for amputations rather than for prevention? Why are healthcare providers willing to settle for blood glucose values in the 200/dl range when we have now proven that good control of blood glucose levels can improve the quality of life.

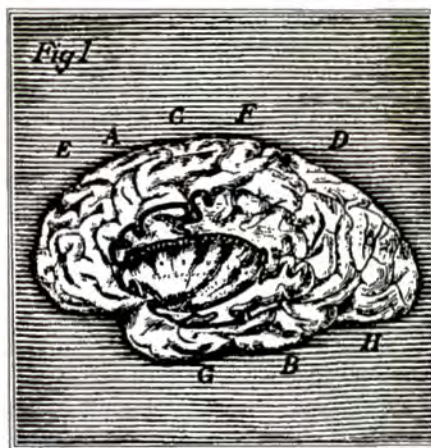
At Franklin Square, our CDEs hold bi-monthly meetings to listen, network, and learn. We are acutely aware of patient education as a part of the Nurse Practice Act, mandated by JCAHO, and of those rights of every patient, regardless of when their illness began. We really go to bat to help our patients improve their quality of life. I encourage RNs to find out who the CDEs are in your facility and to explore many

exciting possibilities in the realm of diabetes education.

For additional information about certification, call AADE National Headquarters at 800/338-DMED or write to MD/ADE, PO Box 36232, Towson, MD 21286.

NS

Tina Bauman, RN, MEd, CDE has been a diabetes nurse clinician at Franklin Square Hospital for the past five years. She recently assumed a new role as school nurse for the Board of Education in Baltimore.



UMMC NURSES BRING MORE TO WORK EVERY DAY THAN A PAIR OF RUNNING SHOES.

They bring a part of themselves that sees more use in one day than those shoes see in a week. That's what we expect. Because to us, a nurse is more than just a pair of hands.

You Can Add a Lot More Than You'd Expect.

We have positions available for RNs and Per Diem nurses in the following areas:

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- Cardiothoracic ICU Level I and II
- Surgical ICU
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- Oncology
- Women's and Children's Health
- Senior Organ Transplant Coordinator
- Family/Adult Nurse Practitioner - Organ Transplant
- Family/Adult Nurse Practitioner - Ophthalmology Clinic
- Adult Nurse Practitioners - Cardiology Inpatient
- Family Nurse Practitioner - Admission Testing Center

Our benefits package includes highly competitive compensation based on experience, as well as relocation assistance, 100% tuition reimbursement, and more.

For additional information, contact:

Rachel Powell, RN, BSN, or
Marilyn Nicholson, RNC, BSN
(410) 328-5312

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It's using your brains to lead and gain respect for your input. It's expanding your mind with a wealth of opportunities. And then being compensated according to experience. It's thinking on your feet to put forth ideas and initiate change.

UMMC nurses are expected to use their brainpower. And in return, we get a smooth running operation where everybody wins.

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HERBERT W. PERRY, LPA/EA
ENROLLED TO PRACTICE BEFORE THE INTERNAL REVENUE SERVICE
6442 BRISTLECONC CIRCLE
LAS VEGAS, NV. 89102-6618
(702) 253-1969

August 31, 1993

Kristine Gebbie
National Aids Policy Coordinator
Office of National Aids Policy Coordination
Executive Office of the President
Washington, DC 20500

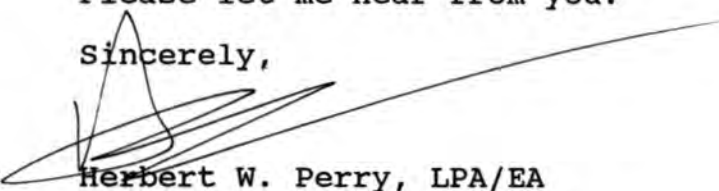
Dear Kristine:

It was a real pleasure to meet and visit with you on August 2, 1993.

I will be in Washington September 12, 13, and 14. If at all possible, I would very much like to sit down with you and discuss some ideas that I have.

Please let me hear from you.

Sincerely,


Herbert W. Perry, LPA/EA

HWP:dh

Form 1040		Department of the Treasury — Internal Revenue Service	SINCE 1970	
U.S. Individual Income Tax Return				
For the year Jan. — Dec. 31, 1991, or other tax year beginning				
HERBERT W. PERRY LPA / EA				
ENROLLED AGENT				
(702) 253-1969		FAX: (702) 253-7306		
Use the IRS test. Other-wise, please print or type.				
Presidential Election Campaign	Do you want \$1 to go to the fund?			
Filing Status	1	• BOOKKEEPING		
Check only one box.	2	• INCOME TAX RETURNS		
	3	• FINANCIAL STATEMENTS		
	4	Las Vegas, NV 89102		
	5			

ROUTING AND TRANSMITTAL SLIP

Date

9/9/93

TO: (Name, office symbol, room number, building, Agency/Post)

Initials

Date

1.

Kristine

File

2.

3.

4.

5.

Action

File

Note and Return

Approval

For Clearance

Per Conversation

As Requested

For Correction

Prepare Reply

Circulate

For Your Information

See Me

Comment

Investigate

Signature

Coordination

Justify

REMARKS

I have a call into Mr. Perry to see if you can meet with him some other time when he is in D.C. because your calendar is full.

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)

Room No.—Bldg.

Retro

Phone No.

5041-102

U.S. GPO: 1990-254-313

OPTIONAL FORM 41 (Rev. 7-76)
Prescribed by GSA
FPMR (41 CFR) 101-11.206



NORTHERN ILLINOIS CONFERENCE

THE UNITED METHODIST CHURCH

ROCKFORD DISTRICT OFFICE

Raymond K. Rhoads, Superintendent

Phone: 815/968-0697 FAX: 815/968-8859

Mailing Address: P.O. Box 1904, Rockford, IL 61110-0404

Street Address: 1203 Third Avenue, Rockford, IL 61108

August 23, 1993

Ms Kristine Gebbie
National AIDS Program Office
200 Independence Avenue SW
Room 738 G - HHH Building
Washington, D. C. 20201

Dear Ms Gebbie,

The Rockford District Council on Ministries of the United Methodist Church cordially invites you to address its Fall Conference to be held on Sunday, October 24th, 1993 in Cedarville, a small town about 30 miles west of Rockford, Illinois.

Our Fall Conference will address the issue of how local churches can be welcoming communities offering loving care, support and hope to persons with HIV/AIDS and their friends and families.

Soon after your appointment I listened to a National Public Radio report concerning your goals. Our conference's aim is not only to help persons and communities understand concerns clustering around the medical problems but, more importantly, to motivate them to reach out in caring and supportive ways.

Our planning committee hopes that you will be able to attend.

Sincerely yours,

Rev. Ray Rhoads, Superintendent
Rockford District

RR:im

(Signed in his absence.)

\\my-files\KGebbie.ltr



SUPERINTENDENT ROCKFORD DISTRICT
UNITED METHODIST CHURCH
P.O. Box 1928
Rockford, Illinois 61110-0428



Ms. Kristine Gebbie
National AIDS Program Office
200 Independence Ave. SW
Room 738 G - HHH Building
Washington, DC 20201



*Att 1 Buete
were
ideas or not
available.
alternatives?
attaches 2*

Send Regrets

August 18, 1993

*C. chair**Susan Goldwater
(Barry's new wife)*

Ms. Christine Gebbie
AIDS Czar
200 Independence Avenue S.W.
Washington, DC 20201

Dear Czar Gebbie:

As the Chairperson for the Phoenix Community AIDS Council (CAC), devoted to prevention through education, I am writing to invite you to be our guest speaker at an October 17 fundraiser. Recognizing that you have a busy calendar, we would be delighted to schedule the time of this event to accommodate your schedule.

This fundraiser will be the "1st Annual AIDS Recognition Dinner," honoring local community and business leaders for their contributions. An event of this form has never been conducted in Phoenix -- and your participation will assist in making it an even more valuable event.

I have attached some background information on the CAC for your review. Like so many AIDS agencies that are not located in major metropolitan cities, we do not have the funds nor the local public support to enable us to progress in our programs at a pace that would enable us to better support the almost 30,000 HIV infected persons in our city. The results of this upcoming event, however, will bring us one step closer to meeting our goal.

I apologize for contacting you at such a late date. However, the opportunity to conduct this affair only recently came our way when an entrepreneur in town offered to underwrite the events dinner, drinks, and location as his way of recognizing and supporting the untiring efforts of the CAC's small staff and volunteer core.

We expect to draw between 150 and 300+ persons to our fundraising dinner. It would be an honor to the CAC and our community to welcome you to this important function.

I look forward to hearing from you soon and appreciate your attention to our invitation. I can be reached at my office all day - (602) 279-7977.

Sincerely,



Beth Meyer-Lohse
CAC Chairwoman

BMM/jr
attachments

Videotape?*Mr. Aronin*

Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602 255 2437

CAC BACKGROUNDER

The Community AIDS Council's (CAC) mission is "To stop AIDS in Maricopa County by halting new infections, and by assisting persons infected with HIV to not progress to disease and death." Our sole program areas are HIV/AIDS prevention/risk reduction and health promotion.

Born of an insidious crisis that begs a thousand questions, Community AIDS Council is dedicated to finding answers, sharing insights and, ultimately turning the tide on a disease that has touched every segment of our society. And, as much as the "community" part of our name refers to the greater Phoenix metropolitan area, it also emphasizes something far more profound:

That to successfully wage our war against AIDS, we must be united as a community -- straight and gay, the healthy and afflicted alike -- whose collective conscience recognizes that this is a fight from which no one can shy away, and whose collective capability can be harnessed to assure victory.

CAC's efforts are far-reaching and multi-faceted, dealing with prevention, care for the sick, the promotion of understanding and compassion and, of course, the search for the ultimate cure.

CAC Programs

Stop AIDS Project - Providing HIV prevention activities for the Valley population, the Stop AIDS Project promotes healthy behavior by encouraging participants to take personal responsibility for their own lives -- as well as the lives of those who are touched by their actions.

Peer-facilitated discussion groups encourage participants to confront personal issues that effect their behavior within a safe, supportive environment.



Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602-265-2437
FAX 602-265-0374

CAC Backgrounder

CAC Programs/cont'd

Being Alive - This CAC program is devoted to helping to maintain the good health of people with HIV infection. Participants are enabled to stay current with the latest information, treatment options, health care resources, and a drug buyer's club. Currently the Being Alive discussion group meets every Tuesday evening at the CAC building.

Phoenix AIDS Resource Center (PARC) - CAC has established a focal point for HIV/AIDS information and referral resources.

Gay Men's Sex Project - These discussion groups provide HIV prevention information and skills development workshops for gay men.

HIV Prevention For Women - This program is the newest to CAC and is in the process of being developed. A Steering Committee has been created and has agreed that the program will be operated by CAC in collaboration with other AIDS agencies.



**COMMUNITY
AIDS COUNCIL**

Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602-265-2437
FAX 602-265-0374



*Duplicate
Resnet* →

F A X T R A N S M I T T A L

DATE: 8/18/93 FAX NUMBER 202-632-1096
TO: Czar Christine Gebbie
FIRM NAME: _____
CITY/STATE: _____
DOCUMENT DESCRIPTION: _____

FROM: Community AIDS Council Chairwomen Beth Meyer-Lohse
NO. OF PAGES INCLUDING THIS COVER SHEET 4

COMMENTS: Per my conversation with your assistant,
the Community AIDS Council needs your assistance
in helping to make the 1st Phoenix AIDS Awards
Dinner Banquet a successful fundraiser. Info follows.
Thank you for your consideration.

Beth Meyer-Lohse

If you did not receive all of the pages, please call us at
602/279-7977.

Thank you.

All Media Communications
FAX NUMBER: 602/279-7924

August 18, 1993

Ms. Christine Gebbie
AIDS Czar
200 Independence Avenue S.W.
Washington, DC 20201

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Sincerely,



Beth Meyer-Lohse
CAC Chairwoman

BMM/jr
attachments



COMMUNITY
AIDS COUNCIL

Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602-265-2437

Mr. Aronin

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Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602-265-2433
FAX 602-265-2433

CAC Backgrounder

CAC Programs/cont'd

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Phoenix AIDS
Resource Center

506 East Camelback
Phoenix, Arizona
85012-1616
602-265-2437
FAX 602-265-2437



F A X T R A N S M I T T A L

DATE: 8/18/93 FAX NUMBER 202-632-1096TO: Czar Christine Gebbie

FIRM NAME: _____

CITY/STATE: _____

DOCUMENT DESCRIPTION: _____

FROM: Community AIDS Council Chairwomen Beth Meyer-LohseNO. OF PAGES INCLUDING THIS COVER SHEET 4

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Thank you for your consideration.

Beth Meyer-Lohse

If you did not receive all of the pages, please call us at
602/279-7977.

Thank you.

All Media Communications
FAX NUMBER: 602/279-7924

London 8/25

Aug 16 - San Antonio -

Natl Rural Health Assoc -

Call
venue re
mtg CBd

2-1/2 RAN as exhibitor/other participant

Quick feedback on 2 ppts to new Adv Bd - rural names -

Research project on rural incidence

needs update - possible funding source?

have consultant possibility

★ Herman Maisonneuve - going to DC - Div of Communicable
Diseases head of infectious diseases

Can we get info/tie ins with religious

? Rural AIDS Summit -

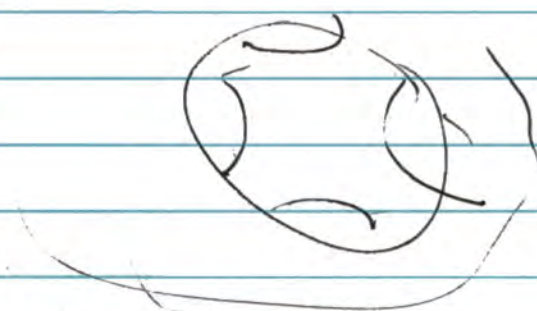
PLWA/CBO/state - - -

AIDS grant - USDA ??

Bowen ✓ on RAN #1's

Matthew M - send info on Minority Conf -

Don Donaldson - send info/contact on FWAI



WOODWARD & LOTHROP



JOHN WANAMAKER

*Buck - we need some
White House guidance
re: invite like this -
do you have any
ideas?*

Robert B. Mang
President

August 16, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Office of National Policy Coordination
Executive Office of the President
Washington, DC 20500

Dear Ms. Gebbie:

I am delighted to announce that in conjunction with the grand re-opening of our Chevy Chase store, Woodward & Lothrop will be hosting a fund-raising event to benefit the **Elizabeth Taylor AIDS Foundation**. Ms. Elizabeth Taylor has graciously agreed to be the Honorary Chairman, and Washington's own Critic-at-Large, Mr. Arch Campbell from WRC-TV, will chair the event locally.

This very special fund-raiser will be held in our newly renovated Chevy Chase store on Tuesday, September 28, 1993 starting at 7:00 p.m. The evening will include a cocktail buffet, fashion vignettes and entertainment. Woodies will underwrite all costs associated with the event, allowing the entire proceeds from the \$75 per person ticket to be donated to the Elizabeth Taylor AIDS Foundation (ETAF).

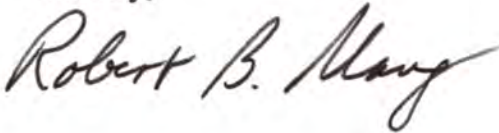
The ETAF was established by Ms. Taylor to raise much needed funds to fight the spread of AIDS and to provide assistance for those who have already contracted the disease. The Foundation's mission is threefold. It supports organizations delivering care and services to AIDS patients, assists in educating the public regarding the spread and prevention of the virus and, finally, it supports organizations conducting research to develop treatments and a cure for AIDS. Through various fund-raising activities, such as ours, the ETAF receives and disburses contributions to organizations all over the country which are involved in the fight against AIDS.

At Woodies, we are committed to supporting foundations such as the ETAF whose efforts also benefit our community. In order to make our event a grand success, we cordially invite you to serve on the fund-raiser's Honorary Committee and, if your schedule permits, to attend the event on the evening of September 28. Your participation can be confirmed by completing the enclosed Honorary Committee form and returning it in the envelope provided as soon as possible.

Ms. Kristine Gebbie
August 16, 1993
Page 2

I look forward to your affirmative response and support. Your endorsement is important to us and to all those who will benefit from our donation to the Elizabeth Taylor AIDS Foundation.

Sincerely,

A handwritten signature in cursive script, reading "Robert B. Mang". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".

RBM:bd
Enclosures

WOODWARD & LOTHROP



JOHN WANAMAKER

AN EVENING TO TREASURE

TO BENEFIT THE
ELIZABETH TAYLOR AIDS FOUNDATION
HOSTED BY
WOODWARD & LOTHROP

TUESDAY, SEPTEMBER 28, 1993
WOODWARD & LOTHROP - CHEVY CHASE, MD

HONORARY COMMITTEE FORM

☐ YES, I/WE WOULD LIKE TO SUPPORT THE ELIZABETH TAYLOR AIDS FOUNDATION
AND WILL SERVE ON THE HONORARY COMMITTEE OF "AN EVENING TO
TREASURE."

KINDLY PRINT THE FOLLOWING INFORMATION:

NAME: _____
(AS YOU WISH TO BE LISTED)

ADDRESS: _____

(ZIP)

ALTERNATE CONTACT: _____

TELEPHONE: _____

PLEASE MAIL BY AUGUST 20, TO

AN EVENING TO TREASURE
TO BENEFIT
THE ELIZABETH TAYLOR AIDS FOUNDATION
C/O WOODWARD & LOTHROP
PUBLIC RELATIONS OFFICE - 9TH FLOOR
11TH AND F STREETS N.W.
WASHINGTON, D.C. 20013

RETURN ENVELOPE ENCLOSED

FOR FURTHER INFORMATION PLEASE CALL (202) 857-0060 OR (202) 879-8750

Woodward & Lothrop Incorporated • Washington, DC 20013



WOODWARD & LOTHROP



JOHN WANAMAKER

Washington, DC

20013



Debbie Miller
DVP/Public Relations
Woodward & Lothrop
1025 F Streets, NW
Washington, DC 20013



JAN 24 1994

January 11, 1993

Ms. Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator
THE WHITE HOUSE
Washington, DC

Dear Ms. Gebbie:

Thank you for inviting Michelle Wright to be part of the "Break the Silence" campaign launch at the U.S. Capitol building on January 13th.

Michelle was unable to attend the event due to previous scheduling, but asked me to send best wishes for a successful launch. I have high hopes that "Break the Silence" will increase public awareness of AIDS and contribute positively to the efforts of many others like yourself.

Best regards

Dawn Costigan
Manager of Client Services
SAVANNAH MUSIC INC.
DLC/sm

SAVANNAH MUSIC INC.

1207 17th AVE. S., SUITE 305
NASHVILLE, TENNESSEE USA 37212
TEL: (615) 329-4747 FAX: (615) 329-4692

15 South Ninth Street
Newark, New Jersey 07107
201-268-8251
800-362-0071
201-485-2752 FAX



900 Second Street, NE
Suite 211
Washington, DC 20002
202-289-5970
202-408-9520 FAX



December 21, 1993

JAN 4 1994

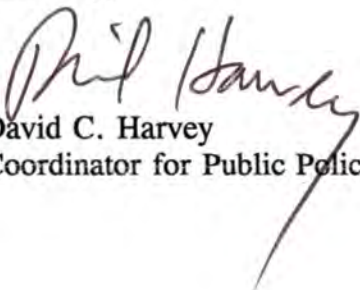
Kristine Gebbie, R.N., M.S.N.
National AIDS Policy Coordinator
Executive Office of the President
The White House
750 17th Street, NW
Suite 1060
Washington, DC 20503

Dear Kristine:

I appreciated hearing your encouraging news tonight about the President's FY 1995 budget request for the Ryan White CARE Act and particularly, Title IV.

Thank you for your efforts and hard work. I hope you have a restful and relaxing holiday - it is well earned.

Sincerely,


David C. Harvey
Coordinator for Public Policy

*A Special
Thank You*



AMERICAN GREETINGS

PHOTOCOPY
PRESERVATION

+ 929062 +



+ 135T 742-3F +

© AMERICAN GREETINGS CORP.
MADE IN U.S.A.



You didn't have to take
the time to forward our
materials to the COC.

But because you did,
the COC is considering
our project.

Thank you!

Doelyn Perkins, President
Empower Us Inc

Just can't begin
to tell you
how very much
your thoughtfulness meant.

JANUARY 6, 1993

DEAR AIDS CZAR,

SAW YOU ON CROSSFIRE LAST NIGHT AND I THINK
YOU ARE CARRYING OUT CLINTON'S POLICES OF LYING
AND DECEIT VERY WELL.

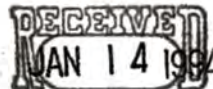
YOU ARE PROMOTING MORE SEX AND MORE DISEASE
BY STATING THE USE OF CONDOMS WILL REDUCE THE
INCIDENCE OF AIDS. CONDOMS ARE NOT FOOLPROOF.
AND THE NATIONAL PUBLIC SERVICE ADVERTISEMENTS
ARE A DISGRACE.

YOU AND SHALALA SHOULD BE RUN OUT OF TOWN.
WE THE TAXPAYERS PAY YOUR SALARIES? UNBELIEVABLE!

CLINTON AND HIS ADMINISTRATION WILL GO DOWN
IN HISTORY AS "THE GREAT PREVARIKATOR"



KRISTINE GEBBIE
AIDS POLICY COORDINATOR
THE WHITE HOUSE
WASHINGTON, D. C.



© USPS 1991



PHOTOCOPY
PRESERVATION

1
Delyn Perkins
206 Todd
Park Forest, IL 60466



1
Ms. Kristine M. Gebbie
National AIDS Policy Coordinator
200 Independence Ave S.W.
RM 729 H
Washington, D.C. 20201
1



We are dedicated to ensuring and maintaining the
highest quality of life for people living with HIV and AIDS,
to preventing the spread of HIV and AIDS,
and to advocating for all those whose lives have been
affected by HIV and AIDS.



LCVD
NOV - 6 1993

T H A N K Y O U

**PHOTOCOPY
PRESERVATION**

file

Kristine -

You're having fun now! Lots of press
& movement! Congrats.

I met with Randy Jacobs. A
wonderful man who I'd like to involve
in health care reform lobbying.

If you can get him to invite
to one of the APEC receptions (not
the business but there is supposed to be
1 expensive FR, it might be nice. The man

Not W.W.



Kristine Giblin
The White House
Washington DC

Personal

Nancy Campbell - NWAF
127 Broadway East Suite 200 Seattle, WA 98102 - 5786

Dear Iris —

NOV - 5 1993

10/25

Thanks so much for being a
part of October 20. Would
you ever have expected such a
furor over such an obvious
statement?

So glad you're out there,
speaking the obvious - keep it up!

Thanks again DENNIS BARBANK

Southwestern
Pennsylvania
**AIDS
Planning
Coalition**



ALLEGHENY
ARMSTRONG
BEAVER
BUTLER
CAMBRIA
FAYETTE
GREEN
INDIANA
SOMERSET
WASHINGTON
WESTMORELAND

Fourth Floor
905 West Street
Pittsburgh, PA
15221-2833
412/242-2441
Fax 412/242-2440

August 25, 1993

Ms. Kristine M. Gebbie
National AIDS Policy Coordinator
The White House
Washington, D.C.

Dear Ms. Gebbie:

Thank you for taking the time to met with me and to listen to the concerns of the member organizations of the Southwestern Pennsylvania AIDS Planning Coalition. I really appreciate your openness to a candid discussion of the areas for improvement on the State and federal level.

I would like to re-emphasize the following areas that we discussed and that our Coalition believes need to be addressed:

* The process the Pennsylvania Department of Health uses to make allocation decisions and delays in the contracting process cause eligible persons not to have access to needed services.

* There is a need for increased funding to create a core infrastructure for AIDS service organizations to continue to exist and provide support services and education and prevention.

* There is a need for increased funding to HIV positive persons for supportive services especially for in-home services that help persons to continue to live in their communities.

* The financial burden of providing medical care to persons with HIV and AIDS who are on Medical Assistance or are uninsured falls disproportionately on a few major hospitals in large cities.

* Health care reforms must address adequate coverage for the comprehensive medical and chronic care needs of persons with HIV/AIDS.

* Effective prevention efforts can only be accomplished by targeted media messages that are explicit. Federal funds are needed for such efforts.

* A federal AIDS plan should be developed and implemented with input from consumers and providers.

Thank you again. I hope that you will be able to visit Pittsburgh in the future. We would be delighted if you would visit the Pittsburgh AIDS Center for Treatment and the Pitt Treatment Evaluation Unit at the University of

*Copy to
DA/Ben/George/Carlos
the note last # for future
schedule —*

Pittsburgh Medical Center as well as the other member organizations of the Coalition.

If there is any way in which the Coalition, the AIDS program at the Medical Center or I can be of service to you, please do not hesitate to contact me. I can be reached at 412-647-2038.

Sincerely,

Cynthia M. Klemanski

Cynthia M. Klemanski, MHA, ACSW, LSW
President, Southwestern PA AIDS Planning Coalition



OREGON NURSES ASSOCIATION

August 17, 1993

Kristine Gebbie, MN, RN, FAAN
Room 2132, Switzer Building
330 C. Street, SW
Washington, D.C. 20201

EVALUATE
"11 20 1994"

Dear Ms. *Kristine* Gebbie,

On behalf of the CNA 1993 Western Regional Conference Advisory and Planning Committee I want to express our special thanks for your contribution to the conference. As you may have noticed, the 160 registered participants were an enthusiastic and supportive audience. Analysis of the conference evaluations reveals that participants thoroughly agreed that the conference objectives were met via a well organized and well "mediated" (audio/visual contributed to the presentations) program. Of the 82% of the registrants who completed the evaluation tool, respondents reported that the syllabus enhanced achieving the objectives, and complemented the presentations.

Your presentation was well received and highly rated! We have enclosed a summary of your evaluation scores. For your thorough preparation, for a superb presentation and for your contribution(s) to the syllabus, we are truly appreciative.

We hope your conference experience was rewarding and that you were richly compensated by the response of participants, the warm regard of your colleagues and the hospitality of San Francisco, for your generous gift of expertise.

Once again, thank you! *Best wishes!*

Sincerely,

Nancy

Nancy E. Donaldson, RN, DNSc.

Chair

CNA Western Regional Advisory Planning and Program Committee



13. Please rate the conference speakers:
1=Poor, 5=Excellent

Marilyn Chow, DNSc., RN, FAAN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Norma Lang, Ph.D., RN, FAAN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Kathleen McCormick, Ph.D., RN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Sally Sample, MN, RN, FAAN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Susan Dean-Baar, Ph.D., RN, CRRN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Suzanne Henry, DNSc., RN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Bill Holzemer, Ph.D., RN, FAAN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Kristine Gebbie, MN, RN, FAAN $\bar{x}$ 4.80					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5
Carol Lockhart, Ph.D., RN, FAAN					
Organized	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Clear/Effective	1	2	3	4	5
Open to comments and questions	1	2	3	4	5



File

OCT 1 1993

September 24, 1993

Kristine, M. Gebbie, RN, MN
National AIDS Policy Coordinator
Office of National AIDS Policy
Executive Office of the President
Washington, DC 20500

Dear Kristine,

I want to thank you very much for the opportunity to meet with you and for your participation in the interview for *Nursing Approach*. I have had a chance to review the tape and the interview was excellent. The producers are most pleased and are excited about incorporating it into the program focusing on AIDS issues.

I enjoyed getting to know you and wish you the best in your new role. I hope that our paths will cross again. If there is anything I can do to support you in your efforts, please let me know. Stay in touch.

Warmest regards,

Tim Porter-O'Grady, EdD, RN, FAAN
President & Senior Partner

/mp



AMERICAN ASSOCIATION
OF COLLEGES OF PHARMACY

SEP 22 1993

*Back - write
File*

September 16, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Office of National AIDS Policy Coordination
Executive Office of the President
The White House
Washington, DC 20500

Dear Ms Gebbie:

Thank you very much for the opportunity to meet today to discuss the plans and work of your office and the Clinton Administration in addressing AIDS/HIV education, prevention, and treatment. Drs. Maine and Moore and I are very appreciative of the time you spent with us, and look forward to establishing an even stronger link between your office and pharmacy's practitioners and educators.

Our organizations will be pleased to keep your office informed of current and new AIDS initiatives in which we are involved. I hope you will call upon us at any time that we may be of service, and encourage you to actively consider additional ways in which our profession can be a full partner in your efforts.

Sincerely,

C. Edwin Webb, Pharm.D., M.P.H.
Director of Government Affairs and Health Policy

CEW/

cc: Dr. Lucinda L. Maine, APhA
Dr. Terri Smith Moore, NPhA
Dr. Arthur Lawrence

SIECUS

Sex Information and Education Council of the U.S.

8/3

Back,

FYI on two priorities.
Good luck on your "paper."

Alan
Gambrell
265 2405

SIECUS

Sex Information and
Education Council of
the United States
130 West 42nd St.
Suite 2500
New York, NY 10036
212-819-9770

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Sex Information and Education Council of the U.S.

Alan E. Gambrell
Washington, D.C. Representative

SIECUS D.C. Office:
2700 Connecticut Avenue N.W. • Suite 302A • Washington, D.C. 20008
Phone/Fax: (202) 265-2405

July 29, 1993

Kristine Gebbie, RN
National AIDS Policy Coordinator
Executive Office of the President
Washington, DC 20500

Dear Ms. Gebbie:

On behalf of SIECUS, the Sex Information and Education Council of the U.S., congratulations on your appointment as National AIDS Policy Coordinator.

We were pleased to hear a core perspective, shared by SIECUS, that you voiced in a recent McNeil-Lehrer interview about the complexity of HIV/AIDS prevention efforts. You stated, in part, that prevention involved "helping people sustain behavior change over a life time, behavior change around sex, around what they do for pleasure, about addicting substances, and that's very difficult." These were indeed reassuring words.

As you settle into your new responsibilities, I wanted to provide you with background information about SIECUS and an outline of our priorities specific to HIV/AIDS and their relevance to your office. Two key areas are highlighted below that SIECUS feels are relevant to the mission of your office. (NOTE: We appreciated the opportunity to share these ideas with your office in the recent brain-storming session with Buck Buckingham of your staff.)

SIECUS Priorities on HIV/AIDS Prevention.

1. **Improving HIV/AIDS prevention efforts targeting: school-age youth and gay/bisexual men.** Earlier this year, SIECUS completed a study on state HIV/AIDS education activities. The key finding is that, although all states have developed the infrastructure to support HIV/AIDS education programs, youth are not being provided with information they need to reduce the risk of becoming infected with HIV. This includes: a balance of information between abstinence and safer sex, discussion of sexuality in a positive framework, condom information, discussion of issues about sexual orientation, instruction about sexual responsibility and decision-making, among others.

In addition, efforts targeting out-of-school and disproportionate youth are severely-underfunded. This includes efforts targeting gay/bisexual youth, runaway/homeless youth, and youth with high rates of STDs.

Needs/Priorities.

- CDC programs that promote continued and improved HIV/AIDS education programs, particularly on providing more straightforward information on sexuality, safer sex, condoms, and responsibility and decision-making skills development. An integral component of these reform efforts is improved targeting of disproportionate risk populations (e.g., redesign of RFPs, technical assistance to communities and states, and funding of appropriate HIV/AIDS prevention programs).
 - Coordination between CDC and the Department of Education on: (1) school-based HIV/AIDS prevention and (2) promoting an expanded focus at the Department of Education on HIV/AIDS prevention within the context of comprehensive health education. Of particular concern is the omission of health education as a priority subject in Goals 2000 and its omission in pending federal legislation authorizing educational reform activities. The National AIDS Policy Coordinator seems well-suited to play a role in facilitating communication between Secretary Shalala and Secretary Riley on these issues.
2. Sexual behavior research out of NIH. Recent Congressional opposition to the conduct of sexual behavior research, including efforts specific to HIV/AIDS prevention, have resulted in a disruption of long-delayed sexual behavior research efforts. As you have stated, we need to know more about human sexuality in order to design prevention programs that will have an impact on HIV/AIDS, as well as STDs and teenage pregnancy. With the recent passage of the NIH Revitalization Act, and the formation of the new NIH Office of Behavioral and Social Science Research, there is an opportunity to promote new efforts on HIV/AIDS prevention and sexual behavior research, particularly through coordinated agreement among federal agencies on the importance of such efforts and education of Congress about the critical need for research in combatting AIDS.

Priorities/Needs.

- Coordination between key officials at NIH and HHS in educating Congress on the role of sexual behavior research in HIV/AIDS prevention efforts.
- Interaction between CDC and NIH (i.e., the Office of Behavioral and Social Science Research as well as the new AIDS office at NIH) on prevention priorities.

Background on SIECUS.

SIECUS is committed to the basic principle that sexuality is a natural and healthy part of living and that each individual must have the right and the ability to make responsible sexual choices. SIECUS is a national nonprofit organization with over 2,500 members, including sexuality educators, university educators, family planning providers, psychologists, social workers, and other professionals focused on sexuality education and sexual rights issues. Founded in 1964, SIECUS provides technical assistance and information clearinghouse services on a range of sexuality issues.

SIECUS Public Policy Priorities. There are five priority areas guiding the advocacy efforts of SIECUS. They are outlined below. In addition, enclosed is a position paper outlining our priorities.

- * support for comprehensive sexuality education;
- * implementation of straightforward and explicit HIV/AIDS prevention education;
- * support for reproductive rights;
- * elimination of bias based upon sexual orientation; and
- * opposition to censorship of art and sexually-explicit materials (elimination of restrictive regulations on funding through the National Endowment for the Arts).

Once again, congratulations on your appointment. Please feel free to call upon SIECUS in your efforts to bring about improved coordination and mobilization of the federal government's resources in the fight against AIDS. I can be reached at (202) 265-2405 (phone/Fax) and look forward to working with your office.

Sincerely,



Alan E. Gambrell

SIECUS DC Policy Office
2700 Connecticut Ave., NW, Suite 302A
Washington, DC 20008

enclosures

Institute
for
Health Policy

The Heller School
Brandeis University

415 South Street
Waltham
Massachusetts
02254-9110

617-736-3900
617-736-3009
TTY/TDD

June 16, 1993

Kristine Gebbie, M.N.
Consultant
Office of Disease Prevention and Health Promotion
U.S. Dept of Health & Human Services
Switzer Bldg., Room 2132
330 C Street, SW
Washington, DC 20201

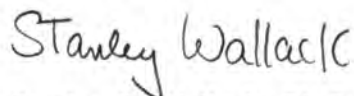
Dear Ms Gebbie:

On behalf of the Institute for Health Policy at Brandeis University, I would like to thank you for your participation at the Pew Fellows Conference on "Health Care Reform: Meeting Community Needs." Your session was particularly insightful, pertinent and very useful. The conference gave us all the opportunity to come together and look at the proposed health care reform in terms of the diverse needs of the community.

I, for one, found the meeting to be helpful in seeing how community interests could be built into national health reform in terms of how we finance, risk share and deliver services.

Once again, thank you for helping to make the conference a success. We appreciate the time and effort you gave to make it possible.

Sincerely,



Stanley S. Wallack, Ph.D.
Director
Institute for Health Policy and
Pew Fellows Program

cc: Jon Chilingirian, Ph.D.
Kathy Raskin, M.M.H.S.

SIECUS

Sex Information and Education Council of the U.S.

Alan E. Gambrell

Washington, D.C. Representative

SIECUS D.C. Office:

2700 Connecticut Avenue N.W. • Suite 302A • Washington, D.C. 20008

Phone/Fax: (202) 265-2405

Buck,
Thanks
for your help.
AL

**PHOTOCOPY
PRESERVATION**

SIECUS

Sex Information and
Education Council of
the United States
130 West 42nd St.
Suite 2500
New York, NY 10036
212-819-9770

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Trish Moylan Torruella

Susan E. Vasbinder

Ralph Weaver

Brian Wilcox, PhD

Pamela M. Wilson

Debra W. Hallner
Executive Director

October 5, 1993

Kristine Gebbie, RN
National AIDS Policy Coordinator
Executive Office of the President
Washington, DC 20500

Dear Ms. Gebbie:

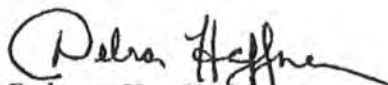
As Executive Director of SIECUS, the Sex Information and Education Council of the U.S., I would like to schedule a meeting with you on November 11 to discuss how SIECUS can be of assistance in your efforts to improve the nation's HIV/AIDS prevention strategies. Specifically, SIECUS believes that a key to success in HIV/AIDS prevention is to ensure that HIV/AIDS education programs address human sexuality in a more positive, honest, and straightforward manner.

Last week, Alan Gambrell of the SIECUS staff spoke with Buck Buckingham of your staff about arranging a SIECUS meeting with you next month. (SIECUS was pleased to have met with Mr. Buckingham in July, along with other national organizations, to discuss priorities for the National AIDS Coordinator's Office.)

In our meeting, I would like to discuss a number of key issues. Among them are: improving HIV/AIDS prevention efforts targeting school-age youth and gay/bisexual men; and sexual behavior research at NIH. Your coordinating role is a critical component of improving federal responses in these and other areas.

In confirming a convenient meeting time, Alan Gambrell of the SIECUS DC Policy Office will be in contact your staff next week. His number is (202) 265-2405. SIECUS is pleased to have you as the nation's National AIDS Coordinator. I look forward to meeting you in November.

Sincerely,


Debra W. Hallner
Executive Director

cc: Retina Holmes

PHOTOCOPY
PRESERVATION



MEMORANDUM

DATE: NOV 04 1993

TO: Ms. Kristine Gebbie, Office for National AIDS Policy

FROM: Deputy Director, Office of AIDS Research, NIH

SUBJECT: Tenth International Conference on AIDS/
International Conference on STD
Yokohama, Japan, August 7-12, 1994

Attached is abstract submission, registration, and housing information for the upcoming Tenth International Conference on AIDS/International Conference on STD to be held August 7-12, 1994, in Yokohama, Japan. Individuals are responsible for submitting their own abstracts. Individuals must also register themselves for the conference and secure their own lodging. Group blocks of conference registrations and hotel accommodations will not be provided by the Office of AIDS Research (OAR), NIH.

We ask you to forward the attached logistical package and Announcement/Call for Abstracts to persons whom you deem appropriate. It is not necessary for you to send this information to persons who attended the IXth International Conference on AIDS in Berlin (list of participants attached), as OAR has already done so. This package represents all of the information and guidelines you will receive from the OAR related to abstract submission, registration, and housing. Information regarding onsite office support will be forwarded prior to the event.

If you need additional copies of this package, please contact Ms. Linda Jackson, Office of AIDS Research, at (301) 496-0358. Thank you for your assistance.

Jack Whitescarver

Jack Whitescarver, Ph.D.

Attachments

NOV 4 1993
CUC. info copy to staff -
everybody - I appreciate
ideas if you think I/we
should submit
an abstract(s).
Steve - note dates for conf
we need to plan on
me
attending

IXth International Conference on AIDS/
IVth STD World Congress

Berlin, Germany
June 7 - 11, 1993

PARTICIPANT LIST

CBER

Quinnan, Gerald
Clouse-Strebel, Kathleen

HRSA

Bowen, G. Stephen
Deigh, Lauren
Fernandez, Enrique
Goosby, Eric
Gordon, Shelley
Macher, Abe

FIC, NIH

Bridbord, Kenneth

NCI, NIH

Bader, John
Biggar, Robert
Blattner, William
Blumenthal, Robert
Clerici, Mario
Dimitrov, Dimiter
Gallo, Robert
Lewis, Linda
Mann, Dean
McMahon, James
Mitsuya, Hiroaki
Obrams, Gunta
Rosenberg, Philip
Ruscetti, Francis
Shearer, Gene
Weinstein, John
Yarchoan, Robert

NCNR, NIH

Ropka, Mary

NEI, NIH

Whitcup, Scott

NHLBI, NIH

Nemo, George
Sloand, Elaine

NIAAA, NIH

Kincaid, Randall

NIAID, NIH

Barker, Lewellys
Biswas, Priscilla
Dayton, Andrew
Dayton, Elahe
Deyton, Lawrence
Dieffenbach, Carl
Duncan, William
Fauci, Anthony
Franzoso, Guido
Hafner, Richard
Hill, James
Hitchcock, Penelope
Jeang, Kuan-Teh
Johnston, Margaret
Kaslow, Richard
Kinter, Audrey
Maldarelli, Frank
Martin, Malcolm
Miller, Heather
Pantaleo, Guiseppa
Peden, Keith
Poli, Guido
Polis, Michael
Power, Maureen
Quinn, Thomas
Randall, Patricia
Reichelderfer, Patricia
Rosenberg, Zeda
Ruxrungtham, Kiat
Schultz, Alan
Siebenlist, Ulrich
Stanley, Sharilyn
Strebel, Klaus
Vermund, Sten
Vicenzi, Elisa
Walker, Robert
Weissman, Drew

NIAMS, NIH

Misra, Manoj

NICHHD, NIH

Mofenson, Lynne

NIDA, NIH

Battjes, Robert
Cooper, James
Genser, Sander
Haverkos, Harry

NIMH, NIH

Fernandez, M. Isabel
Pequegnat, Willo
Stover, Ellen

OAR, NIH

Jackson, Linda
Whitescarver, Jack

Off. of the Sec'y, Off of Gen. Coun

Riseberg, Richard

SAMHSA

Johnson, Elaine
Perez, Lucille

NAPO

Setlow, Valerie

U.S. Dept. of Health and Human Serv.

Fleming, Patsy
Novello, Antonia
Zonana, Victor



NOV 01 1993

TO: Potential Registrants
Tenth International Conference on AIDS/International Conference on STD

FROM: Office of AIDS Research
National Institutes of Health

The Office of AIDS Research (OAR), NIH, is providing information about conference registration, abstract submissions, and lodging arrangements to potential participants of the *Tenth International Conference on AIDS/International Conference on STD* to be held August 7 - 12, 1994, in Yokohama, Japan. The conference is sponsored by the International AIDS Society, the World Health Organization, the Japanese Foundation for AIDS Prevention, the Global Network of People Living with HIV/AIDS, and the International Council of AIDS Service Organizations. The information which follows outlines arrangements which have been made for the conference.

ABSTRACT SUBMISSIONS

Individuals are responsible for submitting their own abstracts directly to the conference organizers. Guidelines and deadlines for abstract submissions are as follows:

1. **ABSTRACT SUBMISSION DEADLINE: FEBRUARY 28, 1994**
2. **The Rule of One will apply.** An investigator may serve as the presenting author on only one abstract submission. However, investigators may be listed as co-authors on any number of submissions.
3. The original abstract form, plus 8 copies, must be received by February 28, 1994.
4. The abstract information form, plus 2 copies, must also be submitted along with the abstract form.
5. Contact information must be complete: include name, affiliation, address, telephone and facsimile numbers.
6. Indicate your preference for oral or poster presentation format.

7. Indicate first and second choices for submission track/category. Also indicate at least 3 key words.
8. Abstracts will be printed in the Abstract Volume exactly as submitted. No editorial corrections will be made.
9. **You must be registered with the conference in order to submit an abstract!**

REGISTRATION

Individuals are responsible for submitting their own conference registration forms directly to the conference Secretariat. Specific registration procedures are as follows:

1. Complete the registration form, ensuring that name, affiliation, complete address, telephone, and FAX numbers are included. **Submit the original registration form, plus one photocopy, directly to the conference Secretariat.**
2. Full payment of the registration fee, in Japanese Yen (¥), must be submitted with the registration form. Payment may be made by bank transfer, bank draft, or credit card according to the schedule below.

On or before March 31, 1994	¥60,000 (~\$572)
On or after April 1, 1994	¥80,000 (~\$762)

(exchange rate as of 10/13/93 \$1 = ~¥105)

3. Upon receipt of your registration form and fees, the conference Secretariat will send you an acknowledgement card and registration number. The card and number must be presented upon arrival at the conference in order to receive the conference materials. Acknowledgement cards and numbers will not be sent out for forms and fees received after June 15, 1994.
4. **No telephone or FAX cancellations will be accepted.** In the event you must cancel your conference registration, **written cancellations are required.** All refunds will be made after the conference. There is an administrative fee of ¥10,000 (~\$95).

Cancellation Deadline: June 15, 1994
No refunds will be made after this date.

5. **Conference registration is required in order to submit an abstract.**

HOUSING INFORMATION

Individuals are responsible for making their own housing arrangements. Details are provided below. **Please be advised that hotel accommodations are severely limited. Reservations should be made as quickly as possible.**

Requests for Hotel Accommodations

1. All housing arrangements are coordinated by Japan Travel Bureau, Ltd (JTB).
2. Requests for housing must be made on the Hotel Accommodation Form. Indicate your complete name, address, telephone and FAX numbers. Also indicate your preference for a single or twin (double) room, as well as the grade of hotel (Grade A - Grade D). **Hotels rated Grade C and Grade D do not provide the level of service and facilities with which most people from the US are accustomed. Rooms in these hotels are extremely small and few onsite services are provided.**
3. No request for housing will be confirmed without a paid deposit of ¥20,000. Deposits must be made in Japanese yen by bank transfer, bank draft, or credit card (MasterCard, Visa, Diners Club). **Personal checks are not acceptable.**
4. **The deadline for housing requests is June 15, 1994.**
5. Written notification of cancellations must be provided to JTB. **Telephone and FAX cancellations will not be accepted.** The minimum cancellation fee is ¥2,000 for cancellations made at least 9 days prior to the first night reserved. Higher cancellation fees apply for cancellations made less than 9 days before arrival.

TRANSPORTATION

Individuals are responsible for making their own air and ground transportation arrangements. All arrangements should be in accordance with standard Federal guidelines. Conference participants should arrange for airline reservations directly through their agency.

Government employees on official government business must secure a visa prior to their travel to Japan. Contact your agency for assistance. Visas are not required for those not traveling on official government business (e.g., family members).

ONSITE OFFICE SUPPORT

Plans are under way to provide very limited office space at the conference. OAR expects to provide office space for photocopying, facsimile transmission, word processing, and computer hardware and software. More information will be provided at a later date.

The conference "Call for Abstracts," which contains the conference registration form, the abstract form, and the housing form, is attached. In addition, checklists which have been developed for tracking essential items for the abstracts, registration, and housing are attached.

Attachments:

Abstract Submission Checklist
Registration Checklist
Conference Housing Checklist
Important Dates
Call for Abstracts

ABSTRACT SUBMISSION CHECKLIST

Use the ORIGINAL Abstract Form and Abstract Information Form

Deadline: February 28, 1994

COMPLETE THE CONFERENCE REGISTRATION FORM:

- ☐ Complete conference registration form.

COMPLETE THE ABSTRACT FORM:

- ☐ Type within the blue lines.
- ☐ Type the abstract title USING ALL CAPS.
- ☐ Type the presenter's name in full, last name first, and underlined. Co-author's names should be typed last name first, then initials of first name. Include affiliation.
- ☐ Abstract text should be single spaced. Text should be no less than 10 and no more than 12 characters per inch. Do not use italic type. Leave 1 blank line at the top of the text area.
- ☐ Type name, address, telephone and FAX numbers of the presenting author.
- ☐ Indicate preference for oral or poster presentation.
- ☐ Provide first and second choices for Track/Category.
- ☐ Sign verification that this abstract has not been published or submitted elsewhere.
- ☐ Enclose original plus 8 photocopies of the Abstract Form in BLUE envelope.

(see next page)

COMPLETE THE ABSTRACT INFORMATION FORM:

- ☐ Type this form, using a type face of 10 or 12 characters per inch. Do not use proportional spacing. Do not use accents, umlauts, cedillas, etc.
- ☐ Indicate presenting author's honorific, name, affiliation, address, country and phone/FAX numbers.
- ☐ Indicate each co-authors' honorific and name.
- ☐ Indicate abstract title and authors exactly as they appear on the Abstract Form.
- ☐ Indicate preference for oral or poster presentation.
- ☐ Indicate first and second choices for submission track/category.
- ☐ Indicate at least 3 key words.
- ☐ Enclose 2 photocopies of the Abstract Information Form.

Enclose the following materials in the self-addressed BLUE envelope:

- Original Abstract Form plus 8 photocopies
- Original Abstract Information Form plus 2 photocopies
- Conference Registration Form plus 1 photocopy

MAIL TO:

Secretariat
Tenth International Conference on AIDS/International Conference on STD
c/o Congress Corporation
Namiki Building, 5-3 Kamiyama-cho
Shibuya-ku, Tokyo 150 JAPAN

REGISTRATION CHECKLIST

Use the YELLOW Registration Form.

- ☐ Provide name, affiliation, address, country, and telephone and FAX numbers.
- ☐ Mark the code and amount of the registration fee to be paid.
- | | |
|-----------------------------|------------------|
| On or before March 31, 1994 | ¥60,000 (~\$572) |
| On or after April 1, 1994 | ¥80,000 (~\$762) |
- (exchange rate as of 10/13/93 \$1 = ~¥105)
- ☐ Indicate form of payment:
- Bank transfer (attach photocopy of the bank transfer to registration form)
 - Bank draft (personal checks not acceptable) OR
 - Credit Card (MasterCard, Visa, American Express, Diners Club)
 - Complete the BLUE credit card slip and retain the third copy for your records
 - Sign the registration form
- ☐ If submitting an abstract, include the abstract registration forms with the conference registration forms before mailing to Japan.

Enclose the following in the BLUE envelope:

- YELLOW registration form
- BLUE credit card slip (if paying by credit card)
- Abstract submission forms (if submitting abstracts)

MAIL TO:

Secretariat
Tenth International Conference on AIDS/International Conference on STD
c/o Congress Corporation
Namiki Building, 5-3 Kamiyama-cho
Shibuya-ku, Tokyo 150 JAPAN

CONFERENCE HOUSING CHECKLIST

Use the Hotel Accommodation and Tour Application Form

- ☐ Indicate full name, address, and phone/FAX numbers.
- ☐ Indicate name of accompanying persons, if any.
- ☐ Indicate flight information (airport, arrival date, flight number).
- ☐ Indicate hotel grade (A-D).
- ☐ Indicate number of rooms needed. Specify single or twin (double) rooms. Specify check in and check out dates. Indicate amount of deposit (¥20,000 x number of rooms).
- ☐ Indicate reservations for optional tour packages.
- ☐ Provide payment in one of 3 forms:
 - Bank transfer in yen (enclose copy of bank receipt)
 - Bank draft in yen (personal checks are unacceptable) OR
 - Credit card
 - MasterCard, Visa, or Diners Club -- **American Express not accepted!**
 - Sign the Hotel Application Form
 - Provide a photocopy of your credit card (both sides)
 - Only the original form is acceptable!

Mail the Hotel Application Form plus remittance to:

Japan Travel Bureau, Inc.
International Travel Division
Convention Center (Ref. CD100757-002)
1-13-1, Nihombashi
Chuo-ku, Tokyo 103 JAPAN

IMPORTANT DATES

Tenth International Conference on AIDS/ International Conference on STD

February 28	Abstract submission deadline
March 31	Registration deadline
	Registration Fee ¥60,000
	Late Registration Fee ¥80,000
	<i>(Begins April 1)</i>
	(exchange rate as of 10/13/93 \$1 = ~¥105)
June 15	Registration cancellation deadline <i>(No refunds made after this date)</i>
June 15	Housing request deadline

Housing Cancellation Deadlines

Up to 9 days prior to arrival	Cancellation Fee	¥2,000
From 2-8 days prior to arrival	Cancellation Fee	20% of daily room rate
Less than 2 days prior to arrival	Cancellation Fee	100% of daily room rate



ONE CNN CENTER, Box 105366, Atlanta, GA 30348-5366

July 8, 1993

Ms. Kristine Gebbie
White House
c/o Carol Rasco-Domestic Policy
1600 Pennsylvania Avenue
Washington, DC 20500

Dear Ms. Gebbie:

Thank you for sharing your comments and personal insights on "Sonya Live."

With your help, "Sonya Live" continues to provide our audience with a forum to discuss important issues that interest and affect millions of people.

We appreciate your time and expertise and look forward to talking with you again in the future.

Sincerely,

A handwritten signature in dark ink, appearing to read "Gail Evans", is written above the printed name.

Gail H. Evans
Sr. Vice President

A handwritten signature in dark ink, appearing to read "Jill Neff", is written above the printed name.

Jill Neff
Senior Booker

TO :
FROM : Nancy Paulson

PHONE NO. : 16144213422

JUL. 9.1993 8:27AM P 2
PHONE NO. : 1 818 341 7247

JUNE 1993

KRISTINE:

**MAY GOD BLESS YOU AS YOU START ON YOUR NEWEST
"JOURNEY".**

REMEMBER WE ARE ALL HERE SUPPORTING YOU AND

READY TO HELP IF YOU NEED US!

*I do have to
bring her address
in -
if I forget
Remind me -*

**YOUR "OLE" FRIENDS AND COLLEAGUES
ST OLAF COLLEGE
NURSING CLASS OF 1965**

*Nancy Paulson
19851 Greenham
Northridge Calif
91324*

THE WHITE HOUSE

Nancy -

I don't know how to get this
to all of our class so I'll
ask you to help... as I said on
the phone, the poster is great -
both the picture & the message.
We've all been on such a journey
since our Northfield days - what
a great start! Thanks again - Curtis

United States Senate

WASHINGTON, DC 20510-4704

June 25, 1993

Ms. Kristine Gebbie
Federal AIDS Coordinator
Domestic Policy Council
The White House
Washington, DC 20500

Dear Kristine:

Please accept my best wishes for success as you begin what will certainly be an enormous task as the coordinator of Federal AIDS policies.

I would very much like the opportunity to sit down with you and learn your thinking on this new position. I am pleased that a resident of Washington, the State which has launched model AIDS programs, will be the President's highest-ranking advisor on the epidemic. I am eager to begin working with you.

Would you please have your staff contact Margaret Ershler (224-2621) to arrange a meeting at your earliest convenience?

Sincerely,



PATTY MURRAY
United States Senator

SLADE GORTON
WASHINGTON

730 HART SENATE OFFICE BUILDING
(202) 224-3441

TOLL FREE ISSUES HOTLINE
1-800-282-8095

TDD 202-224-8273

United States Senate

WASHINGTON, DC 20510-4701

COMMITTEES:

APPROPRIATIONS

BUDGET

COMMERCE, SCIENCE,
AND TRANSPORTATION

INDIAN AFFAIRS

INTELLIGENCE

June 28, 1993

o Kennedy
• Victor 4³⁰ 7/19
for 11³⁰ - 11⁴⁵ Friday

Kristine Gebbie
Director, Office of AIDS Policy
The White House
Washington, D.C. 20500

Dear Ms. Gebbie:

I was delighted to hear of your appointment to the office of AIDS Policy Director. Your willingness to take on the enormous challenges and pressures of AIDS czar is inspiring and admirable to all Americans. Washingtonians are especially proud to have one of their own achieve such a position of responsibility.

As I'm sure you well know, that responsibility carries great risk and stress. I believe it is unfortunate that the office of AIDS director, like the drug czar, is so misrepresented by well-meaning advocates and the media. Both offices are perceived as being solely responsible for lessening or alleviating some of society's greatest problems - they are not, nor should they be.

Let me assure you that we are all in this together. The scientific challenges and social controversies surrounding the AIDS epidemic can lead to divisiveness and anxiety among policy makers. But make no mistake - we all want to alleviate the suffering, prevent further loss of life, and find a cure.

Washington state, largely due to your leadership, leads the nation in AIDS research, prevention, treatment, and education. As a member of the Senate Appropriations Subcommittee for the Departments of Labor, Health and Human Services, and Education, I am at your service to assist you in coordinating and funding our nation's AIDS programs.

I wish you the best of luck in your challenges ahead and look forward to working with you on our nation's efforts to combat AIDS.

Sincerely,



Slade Gorton
UNITED STATES SENATOR

3206 JACKSON FEDERAL BUILDING
915 SECOND AVENUE
SEATTLE, WA 98174
(206) 553-0350

15600 REDMOND WAY
SUITE #300
REDMOND, WA 98052
(206) 883-8072

130 FEDERAL BUILDING
500 WEST 12TH STREET
VANCOUVER, WA 98660
(206) 696-7838

697 U.S. COURT HOUSE
W. 920 RIVERSIDE AVENUE
SPOKANE, WA 99201
(509) 353-2507

Box 4083
402 EAST YAKIMA AVENUE
YAKIMA, WA 98901
(509) 248-8084

1350 GRANDRIDGE BLVD.
SUITE #212
KENNEWICK, WA 99338
(509) 783-0640

MORRIS BUILDING, ROOM 119
23 SOUTH WENATCHEE AVENUE
WENATCHEE, WA 98801
(509) 663-2118

2901 Bridgehampton Court
Falls Church, VA 22042

June 30, 1993

Kristine M. Gebbie
National AIDS Policy Coordinator
200 Independence Avenue, S.W.
Room 738
Hubert H. Humphrey Building
Washington, D.C. 20201

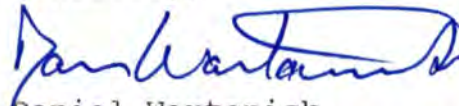
Dear Kris:

I was delighted when I heard the recent announcement of the President's AIDS Adviser -- and also that a grueling up and down experience for you had been successfully concluded! I read with some surprise the newspaper accounts of your name surfacing, re-surfacing and re-surfacing again in the selection process. Congratulations finally and the very best wishes in your new job.

When the President's Commission disbanded, I returned to the Social Security Administration to work with the Commissioner on Social Security and Medicare Trust Fund financing issues. I also worked for two years with the HHS Assistant Secretary for Legislation. I currently am Director of Executive Operations for Social Security's Office of Hearings and Appeals.

Once again, best wishes for a very successful tenure in your new position. If I can be of any assistance, please do not hesitate to call, 703-305-0193.

Sincerely,


Daniel Wartonick



CALIFORNIA
NURSES
ASSOCIATION

Shaping Tomorrow's Health Care

June 28, 1993

Kristine Gebbie, MN, RN, FAAN
Switzer Building, Room 2132
330 C Street, S.W.
Washington, D.C. 20201

Dear Kristine:

Congratulations on your new appointment. President Clinton couldn't have chosen anyone more qualified. I know you will bring to the position, not only knowledge and expertise, but also caring and compassion. I am offering my support and assistance in anyway that would be useful to you.

I'm looking forward to seeing you the end of July in San Francisco for the Nursing Conference at the Fairmont Hotel. Cliff Morrison and I would like to have a small reception for you in my home. It would only be 15-20 people. Most of them are nurses and could be of assistance to you as you tackle the problems of HIV in this country. Please let me know if this is agreeable with you. The best way to reach me is at home. The telephone number is (415)346-4758.

Again, best wishes, and please don't hesitate to contact me if I can be of assistance.

Sincerely,

Helen Miramontes, MSN, RN, FAAN
Director, HIV/AIDS Education & Training



COUNCIL OF CHIEF STATE SCHOOL OFFICERS

One Massachusetts Avenue, NW, Suite 700, Washington, DC 20001-1431 • 202/408-5505 • FAX 202/408-8072
Resource Center on Educational Equity State Education Assessment Center

June 30, 1993

Kristine Gebbie
Room 2132 Sweitzer Building
330 C. Street S.W.
Washington, DC 20201

Dear Kristine:

Congratulations on your appointment by President Clinton to the position of AIDS "czar". It is the considered opinion of the Council of Chief State School Officers that the President made an excellent choice. We certainly benefitted from your participation on our HIV Task Force during the early years of our CDC-funded HIV/School Health Project.

Enclosed is a copy of an evaluation of the Council's project. Please let us know if the Council can be of assistance to you in any way.

Sincerely,

Jane Kratovil
Director

HIV/School Health Project

Enclosure

Clinton Presidential Records Digital Records Marker

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1993

EVALUATION

OF THE

**COUNCIL OF CHIEF STATE
SCHOOL OFFICERS'**

HIV/SCHOOL HEALTH PROJECT

*Council of Chief State School Officers
One Massachusetts Avenue, NW-Suite 700-Washington, DC 20001-1431*