RCMI and CienciaPR: Partners in Promoting Science and Research in Puerto Rico

Dr. Wilson González Espada, Mónica Feliú-Mójer, and Daniel Colón, editors of Ciencia Boricua

The RCMI Program co-sponsored two activities celebrating the fifth anniversary of Ciencia Puerto Rico (CienciaPR), a non-for-profit organization established in 2006 with the mission of providing a portal in which the members of the scattered Puerto Rican scientific community could have a meeting point (www.cienciapr.org).

The first activity focused on the presentation of the book "¿Ciencia Boricua!: Ensayos y Anécdotas del Científico Puertorriqueño". This work, written entirely by scientists’ members of CienciaPR.org, covers in an interesting way and a familiar language many science related situations and anecdotes from the "boricua" living perspective. This activity was conducted on September 22, 2011 at the Library of the "AteneoPuertorriqueño" in Old San Juan. The activity, co-sponsored by Pfizer and the RCMI Program, was attended by local investigators, science teachers, K-12 students and representatives of the industry and communication sectors.

The second activity targeted over a 100 undergraduate and graduate students interested in pursuing a scientific career by organizing the first educational symposium titled, "I want to be a scientist... and now what?" - The event held on September 24, 2011 at the UPR Medical Sciences Campus, touched topics such as how to apply to graduate school, strategies to excel before, during and after my Ph.D., funding opportunities, and career options after the Ph.D., and was co-sponsored by Amgen and the RCMI Program. Welcome messages were delivered by administrative officials of the University of Puerto Rico, Dr. José Lasalde, UPR VP of Research and Technology and Dr. Ilka Rios, Dean of Academic Affairs at the Medical Sciences Campus, and by Amgen representative, Mr. Miguel Pereira.

The agenda included presentations by Dr. Daniel Colón and PhD Candidate Monica Feliú, as well as a panel of scientists who shared their experiences in pursuing a career in science and the opportunities available for those interested in this endeavor.

continued on page 4
CNN's Dr. Sanjay Gupta Interviews Morehouse Dean and Executive Vice President Dr. Valerie Montgomery Rice

CNN's Dr. Sanjay Gupta interviewed R-Center PI, Dean and Executive Vice President Valerie Montgomery Rice, MD, on October 20, 2011 to discuss breast cancer and African American women.

A renowned infertility specialist and researcher, Dr. Montgomery Rice is a champion and advocate of women's health and a leader in studying diseases that disproportionately impact women of color. The show will air Saturday, October 29 and Sunday, October 30 at 7:30am EST.

Submitted by: Roderoo Sidney

---

Cynthia Davis Receives NAACP Award

CDU would like to congratulate Cynthia Davis, MPH on receiving an award from the San Bernardino NAACP. The award will be conferred during the annual Freedom Fund Dinner on October 27th, an evening that will focus on “Health Education and Prevention Passports for Healthy Lifestyles”. Ms. Davis is being honored for her work as an HIV/AIDS awareness pioneer. She has been working in the South Los Angeles community for over 27 years developing service level HIV/AIDS related projects which target multiple at-risk populations. Ms. Davis was responsible for the development of the first pilot demonstration HIV mobile testing and community outreach project in Los Angeles County in 1991. This project has now provided free HIV screening services to over 60,000 at-risk individuals. She was instrumental in the development of the first community-based hospice targeting racial/ethnic minority populations with HIV/AIDS in South Los Angeles and was responsible for the development of the first dedicated HIV/AIDS treatment clinic for racial/ethnic minority women at T.H.E. Clinic. Ms. Davis is also the founder of the Dolls of Hope Project, which has provided over 6000 handmade cloth dolls to HIV/AIDS orphans around the world.

Continued on page 5
Meharry Medical College Welcomes Samuel Adunyah, Ph.D. as Principal Investigator of R-Center

July 29, 2011, Dr. Samuel Evans Adunyah was officially appointed as Principal investigator of Meharry’s R-Center (Meharry Translational Research Center – MeTRC). Dr. Adunyah brings over 30 years of education/research experience to MeTRC. For the last two years he has served as the Chair of MeTRC’s Internal Advisory Committee. Additionally, Dr. Adunyah directs Meharry’s NHLBI T32 Pre-doctoral Training grant. He co-directs a NCI R25 Imaging Training grant based at Vanderbilt University and is Co-Principal Investigator for a National Cancer Institute Cancer Partnership U54 grant between Meharry Medical College, Vanderbilt Ingram Cancer Center, and Tennessee State University.

Dr. Adunyah serves as a board member for the Vanderbilt CTSA (Clinical and Translation Science Award) and has served on several study sections including the former NCI’s Cancer Molecular Pathobiology Study Section, has reviewed F30/F31/F32 National Research Service Award fellowship applications, has reviewed Howard Hughes fellowship applications, and serves on the Special Emphasis Panel for NCI’s Diversity R21 grants. He has served on the American Association for Cancer Research Science Policy Committee and the Government Affairs Committee of the American Society of Hematology.

Dr. Adunyah is Professor and Chair of the Department of Biochemistry and Cancer Biology at Meharry Medical College. In his roles as chair he has recruited successfully five new tenure track faculty members, one of whom secured a R01 grant within 15 months of employment, and has trained many PhD students, post-doctoral researchers, and junior faculty. Dr. Adunyah’s research focuses on molecular mechanisms of cytokines in regulation of cell growth and differentiation.

Dr. James E. K. Hildreth, former MeTRC Principal Investigator, is the Dean of the College of Basic Sciences at the University of California at Davis.

Submitted by: Corey Jones, Ph.D., M.B.A.

Building Partnerships and Networks in Research Design and Biostatistics

University of Hawaii RMATRIX Research Design and Biostatistics Key Function contributed recently as part of the Clinical Research Design, Epidemiology, and Biostatistics (CRDEB) Core in the Mountain West Research Consortium (MWRC) IDEA-CTR application. The development of CRDEB will help create a coordinated infrastructure for clinical and translational researchers of the Mountain West who may need assistance in developing study design, biostatistical methods, and epidemiological design. Many colleges and universities within the MWRC have recognized that clinical research design, epidemiology, and biostatistics are critical to investigation, from initial study design through data analysis and presentation of results. As a result, a number of independent efforts in these areas exist throughout the MWRC and operate somewhat autonomously. While many successful and established researchers have access to these groups, other researchers’ access may be limited and haphazard, particularly for more junior researchers. To date, obstacles to effective integration and dissemination of clinical research design, epidemiology, and biostatistics into translational science—both clinical and those dealing with populations—exist due to the fractured nature and geographical barriers of the Mountain West. In addition, there is no coordinated system that provides such support to investigators. In order to overcome this barrier, the MWRC will develop a central contact point for such activities. This will foster an energetic and productive climate that encourage innovative and pioneering clinical and translational research and will enhance the training of potential and established researchers of the Mountain West. The CRDEB will be physically based in University of New Mexico (UNM). It will leverage the Clinical Research Design, Epidemiology, and Biostatistics core of the UNM CTSA and the Biostatistics continued on page 4
RCMI and CienciaPR: Partners in Puerto Rico

The Symposium also offered the students the opportunity of meeting the team of CienciaPR and networking with the speakers and local scientists.

RCMI Program Director, Dr. Emma Fernández-Repollet, addressed the students at the conclusion of the activity. Special recognition was given to RCMI Staff, Mr. Alejandro Ramirez, Ms. Margarita Diaz, Ms. Jennifer Lorenzo, and Ms. Coral Rosa for their technical and logistical support and contributions to the success of the activity.

Submitted by:
Emma Fernández-Repollet, PhD
PI, RCMI Program UPR Medical Sciences Campus

Partnerships in Research Design & Biostatistics

Key Function of RMATRIX, and other biostatistical resources throughout the Mountain West Research Consortium to provide comprehensive support from a centralized, coordinated resource, including service, education, and collaboration.

The RMATRIX Research Design and Biostatistics Key Function, together with other RCMI institutions including Charles Drew University and University of Puerto Rico, recently also participated in the establishment of a Biostatistics National Consulting Network, centered at the Biostatistics Core of the UCSF CTSA Program. While each RCMI institution is developing its local biostatistics/epidemiology unit, some of the more specialized research design and biostatistics needs from local clinical and translational researchers might exceed the current scope and expertise of the local biostatistics units or that of the RCMI Translational Research Network. This Biostatistics National Consulting Network, leveraging the strength and experience of biostatistics core faculty at UCSF CTSA program, will provide a mechanism for clinical and translational researchers of each participating RCMI institution to have access to such support.

For more information, contact Dr. John J. Chen, Director, Research Design and Biostatistics, University of Hawaii RMATRIX (jjchen@hawaii.edu).

Submitted by: John J. Chen, Ph.D.
Cynthia Davis Receives NAACP Award  

In 2001, she partnered with researchers from the School of Public Health at UCLA on a HRSA Special Project of National Significance (SPNS) which assessed the needs of medically underserved, HIV positive clients who were lost to follow up or were not seeking medical care. For 10 years, she directed the Agape House, a residential shelter for HIV positive women and their children in South Los Angeles and for the last 5 years, Ms. Davis has been working on a project which provides transitional case management to HIV positive parolees being released in Los Angeles County. Ms. Davis’ goals are to “continue to provide culturally relevant HIV/AIDS related prevention, community outreach and testing services programs targeting medically underserved communities with dignity and compassion”. She is also working to become more engaged in HIV/AIDS related community based participatory research.

Written by: Jessica Escobedo, Ph.D.

Morehouse School of Medicine Hosts Georgia’s Personalized Medicine Day

Morehouse School of Medicine (MSM) served as host for Georgia Governor Nathan Deal who was joined by Former United States Ambassador Andrew Young, Georgia State Representative Calvin Smyre and Dr. Leroy Hood, founder of the Institute of Systems Biology, in formally proclaiming September 1, 2011 Personalized Medicine Awareness Day in the State of Georgia. R-Center PI, Dean and Executive Vice President Valerie Montgomery Rice, MD, served as host of this prestigious event, which was attended by over 500 guests.

The event was sponsored by Georgia Bio; the Atlanta Clinical & Translational Science Institute (ACTSI, which is funded by the NIH and includes MSM’s collaborative partners Emory University and Georgia Tech); and Iverson Genetics, Inc.

A visionary in the personalized medicine field, the keynote speaker, Dr. Hood, developed the DNA gene sequencer and synthesizer and the protein synthesizer and sequencer – four instruments that paved the way for the successful mapping of the human genome.

Personalized Medicine Awareness Day also celebrated the first-of-its-kind personalized medicine study, approved by the Centers for Medicare and Medicaid Services; the Warfarin Study. The study will determine the utility of genetic testing in calculating doses and reducing the incidence of adverse events associated with the initiation of Warfarin therapy. Warfarin is the world’s leading anti-blood clotting drug. The Warfarin Study is led by R-Center, Director of Clinical Programs, Elizabeth Ofili, MD, MPH, Director of the Clinical Research Center, Chief of Cardiology and Associate

continued on page 6
Morehouse Hosts Personalized Medicine Day  
continued from page 5

Dean for Clinical Research at MSM, and will engage 50 sites across the country and 7,000 participants. The first participant was recently enrolled at Grady Memorial Hospital.

A panel session featuring leaders in the medical and research field provided their insight on personalized medicine. Along with Dr. Hood, this panel included: David Satcher, MD, PhD, Director of the Satcher Health Leadership Institute at Morehouse School of Medicine and the 16th Surgeon General of the United States; Kenneth L. Brigham, MD, Associate Vice President and Director of the Predictive Health Institute at Emory University and Georgia Institute of Technology; Elizabeth Ofili, MD, MPH, Associate Dean and Director of the Clinical Research Center at Morehouse School of Medicine and national principal investigator of the Warfarin Study; Roger Simon, MD, Director of Translational Programs in Stroke and Professor of Neurology and Neurobiology at Morehouse School of Medicine; David Stephens, MD, Vice President of Research at Emory University’s Woodruff Health Sciences Center; Fred Sanfilippo, MD, PhD, Director of the Emory University and Georgia Institute of Technology Healthcare Innovation Program and Mauricio Flores, JD, Co-Director of the P4 Medicine Institute.

To view the Personalized Medicine Awareness Day event in its entirety, visit Morehouse School of Medicine’s website: http://mediasite.msm.edu/Mediasite/Viewer/?peid=fe5e424fadf8412b8d6edc067789052d1d

Submitted by: Rondereo Sidney

CDU Community Partner Conference on Safety Net Systems

On Friday, October 21st, Healthy African American Families II (HAAF II), a community partner with CDU held a conference entitled “Healthy Families – Protecting the Ties that Bind (A Close Look at our Safety Nets)”. The conference took place at the California Science Center and was widely attended by members of community health organizations and academic researchers. Among the 20 presenters and moderators were former Congressman Dr. Mervyn M. Dymally, now Director of the Urban Health Institute; and Ms. Loretta Jones, Founder and CEO of HAAF II and community faculty member at CDU. The conference was sponsored by the Centers for Disease Control and Prevention (CDC), Charles R. Drew University and the California Legislative Black Caucus.

As part of the Building Bridges to Optimum Health series, this conference brought together community partnered participatory research projects and created an opportunity for interaction between the lay community, community-based organizations, health care providers, the department of health services and academic medical centers. This conference focused on safety nets – methods, services or interventions that are designed to protect against harm. Diverse institutions were represented including the CDC, California Black Health Network, Homeboy Industries, Kinship in Action, Department of Children and Family Services, National Family Life & Education Center, The Community Coalition, religious institutions, performing artists, doctors, probations officers, community educators and more.

Through a series of presentations and discussions, the participants were able to examine the strengths in the current Los Angeles safety net system as well as the places where more help is needed. Best practices, partnerships within the safety net systems and extending the reach of services were all discussed. The organizers describe this conference as a depiction of the “seamless web of services that support, protect and mobilize families”. The conference was closed with a call to action and an evaluation by Ms. Martha Boisseau from the CDC. The next Building Bridges to Optimum Health conference will focus on Environmental Health on February 4th, 2012. More information can be found online at: http://haaflii.org/Upcoming_Conferences.html

Submitted by: Jessica Escobedo, Ph.D

Panelists discuss what communities perceive as strengths and challenges in the safety net system.

Martha Boisseau, Loretta Jones and Alana Trout
The Hawaii Biospecimen Repository (HiBR): A Unique Resource for Health Disparities Research

Clinical and translational science presently demands an unprecedented need for access to clinical and genomic information to ensure full population engagement in the emerging era of personalized medicine. The Hawaii Biospecimen Repository (HiBR) is a non-commercial, core research resource of the University of Hawaii’s RMATRIX initiative, created to facilitate reduction in health disparities through enabling researcher access to clinical, genetic, translational, and public health information arising from the integration of clinical data and biological samples. As a regional resource, HiBR has evolved to be one of the largest research tissue repositories serving the Pacific region; further, as a perinatal resource, HiBR is one of the only repositories of placenta, maternal, and cord blood inclusive of Pacific populations of sufficient sample size to support research with Hawaii’s ethnic groups. These goals support the overall RMATRIX mission to stimulate academic research aimed at disparities reduction in Hawaii, and to create sustainable research resources that stimulate clinical and translational research among Hawaii scientists, and among others interested in Hawaii’s unique population structure.

Over the past decade, under the guidance of Dr. Lynnäe Sauvage, HiBR evolved from its start in the early 2000s as a Departmental repository in Obstetrics and Gynecology to its present role as a core resource of the RMATRIX initiative, with a much more expansive scope.

Development of the biospecimen repository and the phenotype core resources (both of which comprise HiBR) began in 2005 through the University of Hawaii’s Center for Clinical Research Excellence (CCRE) award – termed PCEH (Pacific Research Center for Early Human Development). The repository collected and stored placenta, maternal blood, and cord blood with the aim toward supporting perinatal researchers in the development of their research programs.

As the CCRE integrated into the RMATRIX framework, the scope and technological sophistication of the biospecimen repository and its accompanying phenotype core (the clinical perinatal database) evolved. Presently, HiBR consists of these two integrated components – the biospecimen repository, and the repository’s linked clinical database. The repository currently houses specimens from nearly 8,000 woman-child pairs, including placenta, maternal blood, and cord blood.

The clinical database that integrates with the biospecimen repository was developed as a Relational Database Management System (RDBMS) using MS SQL (Mac Version 5.0.85), and is housed on a MAC server in the School of Medicine’s Kaka’ako Campus. The front-end interface was created with FileMaker, PHP, and MS Visual Basic. Presently, the maternal database tables contain nearly 400 variables for more than 7,800 women, with the accompanying infant data tables containing more than 80 variables for approximately 8,100 infants. Electronic Medical Record (EMR) data is directly downloaded from Kapiolani Medical Center for Women and Children (KMCWC) to HiBR through the Hawaii Pacific Health (HPH) portal network. Data is transferred from the Clarity enterprise reporting system (from EPIC, the EMR system) on the server at the hospital (KMCWC) to the RMATRIX database at JABSOM. Data quality control checks are run on the downloaded data and conflicts are resolved through nurse review of medical records.

To date, the integrated biospecimen repository has been accessed by numerous Hawaii-based researchers. As the integrated system now approaches full functionality, presently HiBR is fulfilling multiple researcher requests for data and recognizes the potential to expand use of its biospecimen resources in support of science within and outside of Hawaii. Both HiBR components – the biospecimen repository and the clinical database – are co-located in the medical school on the Kaka’ako Campus, together with other RMATRIX personnel and research resources.

With its emergence as a core research resource of RMATRIX, HiBR is fully aligned with and facilitates the overall goal of RMATRIX to nurture clinical and translational research that addresses health disparities. The integration of the biospecimen repository and the accompanying clinical dataset positions researchers using this resource efficiently in addressing contemporary research questions requiring equal attention to genetic, clinical, and epidemiological information. HiBR’s utility continued on page 8
The Hawaii Biospecimen Repository (HiBR)  continued from page 7

increasingly has the capacity to serve, in some way, all of RMATRIX’s key function areas and health initiatives. Further, as a unique research resource within RCM and RTRN (HiBR is one of the only biospecimen repositories existing within the RTRN network), researchers from other institutions addressing minority health and health disparities can access HiBR for their research programs as well.

Interestingly, as a mechanism for collaboration across disciplines, institutions, and research questions, HiBR has the potential to directly stimulate research in serving as a core research resource for RMATRIX. Ethnic diversity is considerable among women participating in HiBR (reflected in the attached table) – which also reflects the ethnic diversity within Hawaii itself. Ethnicity is self-reported, and women are asked to identify the ethnic background of an additional two generations of their ancestors, enabling a variety of classifications.

HiBR biospecimens can be accessed to fulfill pilot information for grant applications and to provide researchers with specimens for funded research projects. For additional information, please contact HiBR Director, Dr. Timothy Dye (dyet@hawaii.edu).

Submitted by: Timothy De Ver Dye, Ph.D.

Focus on Biomedical Informatics: The CDU-AXIS Center for Biomedical Informatics develops CEDRIC¹ and GeoCEDRIC²

There is a burden imposed by chronic diseases on our healthcare system — each patient with a chronic disease requires an entire multidisciplinary team of clinicians to manage their health. In low income urban areas, where there is a high occurrence of chronic diseases including diabetes, and cardiovascular and pulmonary diseases, this burden is keenly felt and translates to poor health outcomes. The limited number of urban safety net clinics and quick turnover of providers further exacerbate the situation. Absent an increase in the number of facilities and providers overall, or the prevention of chronic diseases to begin with, improving the management of health information is likely the key area where significant progress can be made in health outcomes.

CEDRIC (or the CDU Electronic Disease Registry to Improve Chronic Care) and GeoCEDRIC are informatics tools designed by CDU researchers to organize patient/population data to support clinical decision-making for chronic diseases management; doctors and nurses use these tools in patient care while healthcare administrators use them for assessing clinic-wide practices. Importantly, according to Dr. Lola Ogunyemi, the lead developer of CEDRIC, to achieve a user-centered design extensive consultations were conducted with clinicians at Hubert Humphrey Clinic as “CEDRIC focuses on diabetes management and is tailored for the inner city, urban safety net clinic setting.” With CEDRIC, providers have quick access to patient lab and preventive services, self-management goals (diet, exercise, etc) and status, co-morbidities, medications, broken appointments, and general clinical practice guidelines which have been adapted to local conditions. This last feature is important as patient preferences need to be considered if they are to actively and effectively participate in the management of their chronic disease. In addition, providers will have the ability to create alerts and reminders for proactive care.

continued on page 9
CDU-AXIS Develops CEDRIC\textsuperscript{1} and GeoCEDRIC\textsuperscript{2}  continued from page 8

Meanwhile, GeoCEDRIC takes local-adaptation to a whole new level. Dr. Paul Robinson, an expert on the application of Geographic Information Systems (GIS) to health information management, has recognized the impact of geography on a patient’s access to healthy nutritional outlets, parks and recreational facilities, and perceptions of neighborhood safety. GeoCEDRIC uses a patient’s address to provide context to their goals for self-management; thus, providers set goals that are realistic because now they know the conditions that exist in a particular patient’s locale. Lastly, a stand-alone geographic application is currently being developed for use by patients (on their mobile devices) that would tell them locations of healthy nutritional outlets and exercise facilities (including neighborhood safety survey information) wherever they are.

Both CEDRIC and GeoCEDRIC will help create more-informed patients and more-prepared providers which are crucial to chronic diseases management and to unburdening our healthcare system. To learn more, please contact Dr. Lola Ogunyemi (lolaogunyemi@cdrewu.edu) or Dr. Paul Robinson (paulrobinson@cdrewu.edu).


2 GeoCEDRIC: Spatially Enabling a Chronic Disease Management System for Urban Safety Net Populations. Robinson, PL, PhD, Mukherjee S, MS, Ogunyemi, O, PhD, and George S, PhD. In progress.

Written by: Romulo de Castro, Jr.

MeTRC Congratulates Investigators and Leaders for Publications

MeHarry Translational Research Center (MeTRC) would like to congratulate investigators and leaders for contributions to peer-reviewed journals.

**MeTRC Investigators**

Dr. Donald Alcendor\textsuperscript{1}

Dr. Pius Nde\textsuperscript{2, 8}

Dr. Hong Yang\textsuperscript{3, 6, 10, 12}

Dr. Lemuel Dent\textsuperscript{4}

Dr. Waldemar Popik\textsuperscript{5}

Dr. Smita Misra\textsuperscript{7}

Dr. Anthony Archibong\textsuperscript{11}

**MeTRC Leaders**

Dr. Fernando Villalta\textsuperscript{2, 8} (Deputy Director)

Dr. Siddharth Prapat\textsuperscript{2, 4, 9} (Proteomics)

Dr. Bogdan Nowicki\textsuperscript{9} (Deputy Director)

Dr. Stella Nowicki\textsuperscript{9} (Collaborations/Partnerships)

Dr. Maureen Sanderson\textsuperscript{9} (Research Design/Ethics)


continued on page 11
First Partnership of the Puerto Rico Clinical and Translational Research Consortium with a Private Hospital: San Jorge Children’s Hospital

The Puerto Rico Clinical and Translational Research Consortium (PRCTRC) was established to advance the translation of knowledge needed to address health disparities. The overall mission of the PRCTRC is to create a centralized clinical and translational research program focused on health problems prevalent in an under-served population. The mission of the PRCTRC is to create and establish an integrated island-wide program dedicated to the conduct of clinical and translational research focused on health problems prevalent in a Hispanic population. The Consortium includes the University of Puerto Rico (Medical Sciences and Rio Piedras Campuses), the Universidad Central del Caribe, and the Ponce School of Medicine and Health Sciences. One of the major key functions to be developed within the PRCTRC is the establishment of collaborations and partnerships to invigorate and diversify clinical and translational research.

San Jorge Children’s Hospital is a tertiary care state-of-the-art pediatric hospital with a medical faculty of 177 physicians that covers all Pediatric specialties and sub-specialties. The hospital is located in San Juan, Puerto Rico. San Jorge Children’s Hospital has established a Clinical Research Center to foster the development of research among its faculty members. Presently it is coordinating forty seven active research projects/clinical trials. The research conducted in San Jorge Children’s Hospital addresses important health disparities in our population, such as cancer and cardiovascular diseases, both defined as areas of scientific focus in the PRCTRC.

The leadership of the PRCTRC and San Jorge Children’s Hospital decided to collaborate to advance their overall missions and major programmatic goals and objectives. A Memorandum of Understanding was signed in September of 2011 to formalize the establishment of this partnership. Some of the focus areas of this partnership include: dissemination of information about both PRCTRC and San Jorge Children’s Hospital Research Center among active investigators in all participating institutions, promote and facilitate data sharing among the investigators of both entities and promote the participation of investigators from both entities to join efforts in clinical and translational research. In addition we will collaboratively share information on technological facilities, laboratories and other resources available in both entities. Within this partnership we will foster new collaborations among researchers from the PRCTRC and San Jorge Children’s Hospital.

Submitted by: Margarita Irizarry Ramirez, Ph.D.
PRCTRC Collaborations and Partnerships Key Function Leader

Interactive SAS Basics Workshop at Morehouse School of Medicine

The R-Center’s Study Design, Biostatistics & Data Management Core, led by its core Director, Robert Mayberry, MS, MPH, PhD and his team hosted two Interactive SAS Workshop on August 25 and September 30, 2011. The workshops were open to faculty, staff and students who were interested in acquiring “hands-on” SAS data analysis skills for preliminary reports, theses, and dissertation projects.

Submitted by: Rondereo Sidney
MeTRC Publications  
continued from page 9


Submitted by: Corey Jones, Ph.D., M.B.A.

SAVE THE DATE!

3rd Multidisciplinary Conference in Clinical Research & 3rd Summit of Translational Research in Health Disparities

Pathways towards Eliminating Health Disparities through Research Education and Career Development

SAVE THE DATE
February 23 and 24, 2012
San Juan, Puerto Rico

Objectives
Disseminate successful strategies to optimize the capabilities and resources to conduct clinical and translational research.

Promote the integration of effective models to develop independent clinical and translational researchers.

Strengthen research education, training, and networking through information technology tools.

Call for
Poster Presentations

Abstract Submission Deadline: December 2nd, 2011

Contact email address: ctr2012.rcm@upr.edu

Submitted by: Margarita Irizarry Ramirez, Ph.D.
PRCTRC Collaborations and Partnerships Key Function Leader