

# Interaction Research News

Seattle Children's Research Institute

March 2010 vol.6 no.3

## Special Interest



### **Following the Path From Origins to Cures: New PI Uses Developmental Genetics as the Foundation for Discovery** [Page 2](#)

Mark Majesky, PhD new principal investigator in the Center for Tissue and Cell Sciences, joins Seattle Children's in its quest to "prevent, treat and eliminate pediatric disease" – specifically diseases of the heart. Dr. Majesky will lead Children's groundbreaking program in stem cell biology and regenerative medicine as the Director of the Myocardial Regeneration Initiative.



### **Continuous Performance Improvement in Action: Focus on the Customer** [Page 4](#)

Three Rapid Process Improvement Workshops focus on improving how research is conducted at the research institute by eliminating wasteful steps and processes. Who will benefit the most? The ultimate customer of the research institute - patients waiting for a cure.



### **Behind the Scenes: RIT Service Desk** [Page 6](#)

The term "computer bug" was coined in 1947 when a moth was found trapped inside an innovative five-ton computer, and since then people have specialized in fixing computer bugs. Seattle Children's Research Information Technology (RIT) department does more than just fix computer bugs. In continuing the *Behind the Scenes* series, Interaction takes a closer look at the RIT Service Desk and how submitting a work order can benefit everyone.



### **Let Your Voice Be Heard: Participate in Staff Focus Groups** [Page 7](#)

The Research Staff Development Committee wants to hear from you. As advocates for research staff, the RSDC will be holding center specific focus groups to gather feedback about staff work experiences to take to leadership. Participation in focus groups is supported by leadership and will be completely anonymous. Read further for details.

### **Did You Know?**

...that there have been notable changes in the National Institutes of Health (NIH) grant application forms (effective Jan 25)? **Dedra Schendzielos**, center business manager (CBM) for the Center for Clinical and Translational Research, put together a PowerPoint explaining the changes. Investigators are encouraged to view the [PowerPoint](#) and become familiar with the changes. Please refer all questions to your specific CBM.

### Also in this issue...

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**Change to ClinicalTrials.gov Registration Requirements** [Page 8](#)

**Research Billing Systems Workshop** [Page 8](#)

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Click on the calendar icon to view upcoming research events.



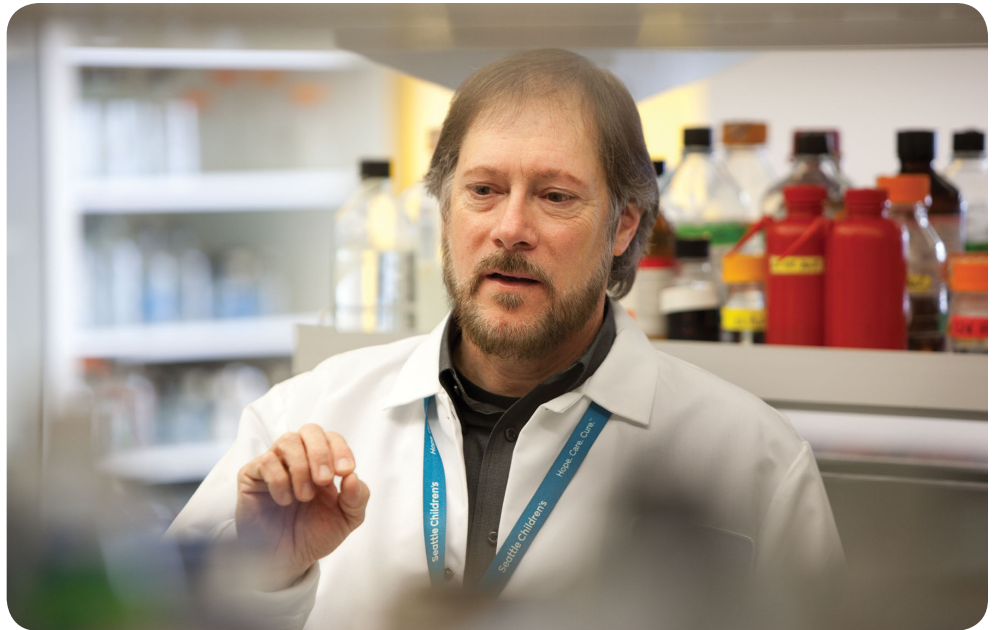
## SPECIAL INTEREST - PRINCIPAL INVESTIGATOR FOCUS

### Following the Path From Origins to Cures: New PI Uses Developmental Genetics as the Foundation for Discovery

"The rapid advances being made in the field of developmental genetics are driving new technologies for stem and progenitor cell-based therapeutics," said **Mark Majesky**, PhD one of the newest members of Seattle Children's Research Institute's team of world-class principal investigators. "A detailed understanding of the molecules and mechanisms utilized in embryonic development of the heart and vascular system will provide the tools necessary to open doors to very exciting therapeutic opportunities based on reprogramming one cell type into another."

Dr. Majesky began his research training at the University of Washington and now returns to the Pacific Northwest to join the Center for Tissue and Cell Sciences to lead its groundbreaking program in stem cell biology and regenerative medicine as the Director of the Myocardial Regeneration Initiative.

"The program started with the energy and foundation provided by **Robert J. Boucek** [MD, MS]." Majesky continued, "Our team is now made up of Dr. Boucek, **Mark B. Lewin** [MD, clinical co-director of Seattle Children's Heart Center], **Tim McQuinn** [MD] and me. We are in the process of recruiting three more principal investigators to join us at the research institute. When we are fully constituted we will have enough investigators focused in the area of heart and vascular development to provide the synergy and interaction to be self-propelling towards discovery and application."



**Dr. Mark Majesky, director of the Myocardial Regeneration Initiative, Center for Tissue and Cell Sciences**

Dr. Majesky and his team are taking a close look at how the heart and coronary vasculature develop. "A long range goal of our program is to be able to take a patient's own cells, convert one cell type (the adipocyte) to another (the cardiac myoblast) and then reintroduce them into the original patient, thus producing a fully immunologically matched cell-based graft."

Majesky explained, "We will start with detailed studies of development of the heart and coronary vessels. As we acquire this knowledge, we will work with our collaborators at the Institute for Stem Cell & Regenerative Medicine at the University of Washington, and our clinical colleagues at Seattle Children's Hospital, to translate this knowledge into clinical applications."

The program's current research is

focused in two areas: 1) the basic mechanisms of development of the epicardium and coronary vessels; and 2) the functions of resident stem cells in the adventitial layer of developing blood vessels. In studying the basic mechanisms of coronary vessel development, the focus will be on the epicardium — the outer layer of the heart. "Fate mapping studies in embryos point to these cells giving rise to cells that build the coronary vasculature," explained Majesky. "A critical step in the developmental sequence for coronary vessel formation is known as epithelial to mesenchymal transition (EMT) of the epicardium. EMT is a highly regulated and essential process in developing hearts. Studying EMT in detail will identify what promotes and at the same time what prevents the process from occurring in embryonic

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## SPECIAL INTEREST - PRINCIPAL INVESTIGATOR FOCUS

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epicardial cells. Knowledge of the pathways that prevent EMT as the epicardium matures will provide the tools we need to reprogram postnatal epicardial cells to re-express their developmental potentials and contribute to cardiac repair and regeneration.”

The second focus area relates to the discovery of resident stem cells in the outer layers of artery walls. “The adventitia is a complex and poorly studied layer of the artery wall,” shared Majesky. “We are applying genetic approaches to better understand the potentials of these resident stem cells to contribute to coronary artery repair, remodeling and disease.”

“The real work here will come from the formation of a multidisciplinary team of basic scientists and clinical colleagues to convert possibility into reality,” Majesky emphasized. “Our team will eventually consist of experts in developmental biology, genetics, bioengineering, pathology and clinical pediatrics drawn from Seattle Children's and partner institutions in the Seattle area. The resources and support provided by the goal-oriented leadership at Seattle Children's Research Institute is making this possible. This is a unique opportunity to translate what we find in laboratory studies to opportunities for therapeutic application in the areas of congenital defects in heart formation and cardiac insufficiency.” **lrn**

### 2010 Seattle Children's Ad Campaign

The 2010 Seattle Children's advertising campaign for research is well under way. With the goal of continuing to build the national stature of Seattle Children's Research Institute in the research and academic communities, this year's ads feature Dr. Mark Majesky, director of the Myocardial Regeneration Initiative with the Center for Tissue and Cell Sciences. You'll soon see Dr. Majesky in national publications such as *U.S. News & World Report*, *JAMA*, *Nature*, *Science*, *Pediatrics* and *Pediatric Research*.

### Save the Date: Sixth Annual Treuman Katz Center for Pediatric Bioethics Conference

**Conference Title:** Tiny Babies, Large Questions: Ethical Issues in Prenatal and Neonatal Care

**Date:** Friday and Saturday, July 23 and 24, 2010

**Location:** Bell Harbor International Conference Center, Seattle, Washington

For most families, pregnancy and the birth of a child is an exciting and joyous time of hope and celebration. But sometimes, difficult and challenging ethical issues can emerge regarding the application of medical technology, the role of parental decision-making, and the impact of these decisions on tiny and vulnerable human beings.

Ethical questions surrounding prenatal and neonatal care include:

- Should there be limits on the use of reproductive technologies that may adversely affect the health of the child?
- How should healthcare providers decide when to offer promising but untested invasive fetal intervention?
- When an infant is born very prematurely, should parents be allowed to forego life-saving treatment that a healthcare provider thinks could save the infant's life?
- Under what circumstances should a healthcare provider be allowed to refuse to resuscitate an infant over the parents' wishes?
- Does society have an obligation to support parents of children who have been born prematurely or with significant disabilities?

Come join leaders in the field of pediatric bioethics as they discuss these issues and others; add your perspective as these ethical questions are explored through oral presentations, panel discussions and abstract presentations.

For more information, including abstract submission and registration, please visit the [bioethics Web page](#).

## DEPARTMENT HIGHLIGHT

### Continuous Performance Improvement in Action: Focus on the Customer

In business vernacular, the definition of customer has morphed over recent years until its nearly lost its meaning. It seems that in the broadest sense the research institute has many customers. For instance, one might consider the lab technician a Glass Wash customer; a program administrator moving to a newly designed space a Facility's customer; or the investigator submitting a grant application a customer of the Office of Sponsored Research (OSR). Certainly all of these individuals depend on services provided by others at the research institute, but in the purest sense, they all work together to serve the ultimate customer, a child in need of a cure.

This distinction is especially important to avoid confusion about who will ultimately benefit from improvements. In Continuous Performance Improvement (CPI), the customer is always defined as "patients and families". Some believe that since much research and supporting activity is far removed from the patient, the customer might be better defined as those doing the research – those in need of support for funding, materials and services. However, by thinking of key groups as internal customers, it becomes very challenging to define how their needs might be prioritized, and multiple points of view accommodated. Because Seattle Children's looks at all internal customers as partners to be engaged, walls are broken down and competing priorities eliminated to focus on the end result, which is to bring research discoveries to patients as safely and quickly as possible.

With this goal in mind, Research CPI has launched improvement projects that can affect positive change in study start-up lead times and research support services. Rapid Process Improvement Workshops (RPIWs) have recently addressed patient wait time in the Pediatric Clinical Research Center (PCRC), and lead times for Institutional Review Board (IRB) applications and for contracts intake in OSR.



Left to right: Rebecca O'Connor, registered nurse and Whitney Carlaw, registered nurse. Rebecca and Whitney sketch out the i board concept.

During the first week of February, a RPIW sponsored by **Bonnie Ramsey**, MD with **Pam Joy**, RN, MN, PNP as the process owner, brought together PCRC nurses and staff with representative research study team members to improve the family experience in the PCRC. This five day workshop was the culmination of many weeks of preparation that included observing the current process, collecting data and preparing for projects that might be identified and then undertaken by the team during the week.

It was discovered during the assessment and planning phases that several things contributed to unpredictable and highly variable wait times for PCRC patients and families. The workshop team was tasked with envisioning a better process, defining what needed to be done and completing improvement projects during the week of the event.

Workshop team members who were new to the CPI process were surprised to learn some facts about RPIWs. One team member commented, "I didn't think we would actually be doing the work this week." Another noted, "I thought we would need to get

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## DEPARTMENT HIGHLIGHT

### Continuous Performance Improvement in Action: Focus on the Customer [Continued from Page 4](#)

permission to make these changes.” Team members with input from other stakeholders, including a research participant family member, successfully reduced patient wait times by 75% by day five of the workshop. Work to audit and ensure that gains are sustained is ongoing.

Some of the projects completed during the week included:

- Developing an i board (a white board to contain all of the information required to guide flow in the unit throughout the day)
- Defining and documenting the role of a “resource nurse” who with the help of the newly developed i board, will manage the work flow on the unit
- Revising the set-up process including expanding the cubby system from six to 20 slots with a visual management system tied to the i board
- Consolidating chart locations from six to one
- Establishing a service standard for patient wait times
- Developing implementation, communication and auditing plans to ensure the work is sustained

RPIW sponsor, Bonnie Ramsey expressed her gratitude to the team and said, “I’m amazed at how much work you’ve accomplished this week. This is a great start in applying CPI principles in the PCRC.”

The IRB document review process is the focus of the first of two RPIWs to be facilitated by Research CPI in March. **James Hendricks**, PhD is the sponsor and **Laurie Bolton**, JD the process owner for this event. This RPIW is focused on reducing both the variation and the number of steps in the application review process which is ultimately aimed at reducing IRB application turnaround time. The event is also focused on how to implement certain recommendations of the Special Committee on Research Operations ([see January 2010 edition of Interaction for article on Special Committee](#)) to improve the overall turnaround time of an IRB full-review application.

Later in the month, another cross-functional RPIW team will work to improve the intake process for OSR Contracts. Scope is limited to Clinical Trial Agreements



Left to right: Whitney Carlaw, registered nurse and Janna Stults, clinical research associate. Whitney and Janna discuss the new process map.

as they currently consume approximately one third of the department resources; however, the intent is to replicate the improvements to other types of contracts. **Jayme Ribaud**, Contracts supervisor and process owner describes the current intake process as unnecessarily time consuming. Jayme and **John Streck**, the sponsor of this event, stress the importance of reducing the lead time for contracts and consider the intake phase a great place to begin this work as it is outside of negotiations and therefore completely within the institute’s control.

To find out more, consider attending or watching the live feed of the monthly CPI Final Report Outs broadcast on CHILD. The PCRC and IRB teams will be presenting their work on March 12 and the Contracts team on April 16. The [link to the live feed](#) can be found towards the bottom of the Web page containing the CPI Calendar.

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## DEPARTMENT HIGHLIGHT

### *Behind the Scenes: RIT Service Desk*

How often has your computer not done what you wanted? How much time did it take you to fix the issue? Research Information Technology (RIT) works to reduce both the number of issues and the time it takes to fix computer problems. Over the next few issues, Interaction will discuss how each area of RIT does this with this month spotlighting the Service Desk.

The Service Desk is the first line of contact for computer issues and requests. Service Desk technicians review and address all work orders and pages that are received. On average there are over 50 open work orders to be addressed each day by three Service Desk technicians. Some of these work orders are easily resolved:

- Install Adobe Photoshop
- Map a network drive
- Help decrypt a Guardian Edge file
- Show staff how to use conference room equipment

And some of these work orders are more complex:

- Recover data from a failing hard drive
- Research software and devices to be used for a proposed grant
- Configure a computer to work with a lab device
- Replace failed or outdated computers

In addition to the general work orders, the Service Desk also receives work orders from other RIT personnel and Hospital Information Services. These work orders can include maintenance, security issues and

software configuration requests. Examples include: prepping new computers for future installs, ensuring loaner laptops are ready for checkout, remediating computers identified that are missing critical software updates or causing suspicious network traffic, and developing new applications or implementing off-the-shelf applications.

Regardless of the difficulty of a work order or by whom it is submitted, the technicians address them as they are received by the work order management system called Track-It!®. Track-It!® is the system that collects work orders submitted at <http://rithelp>. Track-It!® helps RIT technicians manage work orders and their priorities, and it helps you get information about the work orders you've submitted. When you log on to <http://rithelp>, you can submit new work orders and see the status and make changes to existing work orders. The information you provide

in your work order helps technicians know if your issue can be resolved at the Service Desk, or if it should be assigned to a different team.

While there can be approximately 50 open work orders addressed to the Service Desk alone, an additional 50 work orders can be in queue for other teams within RIT. Each team uses Track-It!® data to produce metrics on performance and efficiency.

Just as there are “no stupid questions”, RIT believes there are no stupid work orders. A work order could be a question about how to create a new folder on your desktop, a request for a new application server to be installed or just a general IT-related query. The Service Desk is here to ensure your requests get answered and resolved, so your computer works the way you want.

Please stay tuned for future articles in the *Behind the Scenes* series of RIT. **Iron**

### Seventh Annual Fellows' Research Day

**Date:** Friday, April 30, 2010

**Time:** 8 a.m. to 3 p.m.

**Location:** Building 1, Soundgarden Conference Room

Fellows' Research Day will highlight the wide range of exciting research being conducted by fellows throughout Seattle Children's and the University of Washington pediatric training programs. There will be oral and poster presentations by fellows, leading off with a keynote presentation by **Gabriel G. Haddad, MD**, Professor of Pediatrics and Neuroscience, Chairman, Department of Pediatrics, University of California, San Diego, Physician-in-Chief, Rady Children's Hospital – San Diego.

For registration information and questions, contact [Sharon Whitson](#), (206) 987-5870.

## RESEARCH BITS

### Let Your Voice Be Heard: Participate in Staff Focus Groups

If you were given an opportunity to change one thing about your work experience at the research institute what would it be?

The time to share your thoughts is now. In the past, the Research Staff Development Committee (RSDC) has solicited staff opinions and issues through various methods including suggestion boxes and staff forums. Though the RSDC has gathered useful information this way, they feel that they can do a better job of understanding the challenges and issues facing staff in order to advocate on your behalf.

With this in mind, the RSDC created an IMPACT plan with the goal of enhancing their ability to improve communication and serve as direct representatives of research staff. This can best be accomplished by giving individuals in each center the opportunity to share their thoughts with RSDC representatives in small focus groups.

Recently a survey was sent to research staff to identify those interested in participating in these focus groups. A RSDC member will be contacting those who expressed interest to schedule the focus groups over the next two months. Even though you may not have initially expressed interest, all research staff are invited to participate and welcome to attend one of their center specific focus groups.

Please note that focus group participants, and all of the information gathered, will remain anonymous. To ensure confidentiality, supervisors, managers, directors and principal investigators will not participate in the focus groups. After conducting all of the focus groups, the RSDC will compile the information gathered and present findings to center directors and research administration. Research leaders will either follow up with staff directly, possibly in the form of a panel discussion, or through the RSDC.

Please be on the lookout for more information about upcoming focus groups and participate in those held for your center and let your voice be heard. [Irn](#)

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## Global Report on Preterm Birth and Stillbirth

A new report issued Feb. 22, 2010 identifies the enormous global impact of preterm birth and stillbirth — and what can be done to decrease it. Globally, an estimated 13 million babies are born preterm each year. Newborn deaths now account for more than 42% of mortality in children under the age of five, a rise from 37% in the year 2000. Additionally, an estimated 3.2 million are stillborn each year, and many of these losses are linked to maternal deaths.

The report, led by the Global Alliance to Prevent Prematurity and Stillbirth (GAPPS), and supported by the Bill & Melinda Gates Foundation and Seattle Children's, is a collaborative effort undertaken by an interdisciplinary team of maternal, newborn and child health experts from around the globe. Read a summary or the full report on the [GAPPS Web site](#).



## RESEARCH BITS

### NIH-Funded Clinical Trials: A Change to ClinicalTrials.gov Registration Requirements

For the past few years, there has been a federal requirement to register clinical trials on an online federal registry called [ClinicalTrials.gov](http://ClinicalTrials.gov). The purpose of the registry is to increase transparency and knowledge about clinical trials.

Up to now, the National Institutes of Health (NIH) has been performing the registration for the trials that it funds. NIH has recently decided that it will no longer perform this service for researchers. Instead, researchers will now be responsible for the ClinicalTrials.gov registration. Additionally, NIH has started to ask researchers with ongoing NIH-funded clinical trials to transfer the registration "ownership" from NIH to the researchers themselves.

If an NIH-institute holds the IND (Investigational New Drug Application) or the IDE (Investigational Device Exemption), that institute, as the sponsor, will continue to be the responsible party for ensuring trial registration unless this obligation has been delegated

to the principal investigator. If anyone other than NIH holds the IND/IDE, the IND/IDE holder is the responsible party for registration.

If you have been contacted by the NIH-institute/program funding your trial to transfer registration ownership, please forward the notice to [Clint Vickers](mailto:Clint.Vickers@seattlechildrens.org), (206) 884-7864 for Seattle Children's funded studies and to [Arna Elezovic](mailto:Arna.Elezovic@seattlechildrens.org) (206) 543-0639 for University of Washington funded studies. If you have not been contacted by NIH, but you believe that you may now be the responsible party, contact your grant's NIH program officer for clarification.

For additional information on ClinicalTrials.gov, please refer to Seattle Children's Research Institute's [Clinical Research Support Office's \(CRSO\) Web page on registration of clinical trials](http://ClinicalTrials.gov). If you have additional questions, please contact [Clint Vickers](mailto:Clint.Vickers@seattlechildrens.org), ClinicalTrials.gov administrator, CRSO.

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### Seattle Children's Research Institute Hosts Research Billing Systems Workshop

This past January, Seattle Children's Research Institute's Clinical Research Support Office (CRSO) hosted an in-depth, three day hands-on workshop for organizations on Seattle Children's Clinical Research Integrated Billing System (CRIBS). Representatives from five organizations attended including Cincinnati Children's Hospital Medical Center, Baylor Research Institute, University of Washington and Carillion Clinic.

During the workshop, staff from the research institute and the hospital presented institute overall processes, and systems for research billing compliance including a live demonstration of EBSS, the software developed by the institute's RIT which integrates research billing data between Epic, StudyManager and Lawson.

#### Comments from attendees included:

*"It gives me a better understanding of where we are in our processes and what needs to be further done."*

*"Very well done - so glad I could have been part of it."*

*"This workshop was very helpful and has given our finance team the confidence we need to move forward with our organizational changes."*

## Research Champions

**Dr. Leslie Lytle at the Research Champions Kick-Off event on Feb. 11, 2010. She spoke to community members about ways to understand and prevent childhood obesity.**

**The Research Champions program was first introduced to readers in the January 2010 edition of Interaction. More about the kick-off event and program to come. Please stay tuned.**



## CONFERENCES & EVENTS

### Statistics for Clinical & Laboratory Research Lecture Series

This lecture series is directed towards clinical and laboratory researchers with prior exposure to statistical concepts who wish to refresh and expand their current knowledge. The objectives of this lecture series are to:

1. Review the basic statistical concepts needed to design, analyze and present research studies effectively;
2. Highlight the statistical issues and concepts for the most common research questions; and
3. Provide the tools necessary for getting started with the Stata statistical software package.

#### Instructors

**Nicole Mayer Hamblett**, PhD, research assistant professor, Pediatrics

**Sonya Heltsh**, PhD, senior biostatistician, Cystic Fibrosis Therapeutics Development Network Coordinating Center

**Jim Lymp**, PhD, senior biostatistician, Cystic Fibrosis Therapeutics Development Network Coordinating Center

**Kristy Seidel**, MS, director of the Office of Biostatistical Services, Seattle Children's Research Institute

#### Registration

Please register for each lecture or the series by e-mailing [Pamela Hoang](#).

#### Audience

Fellows, Residents, Clinical and Basic Scientists, Faculty and Staff

#### Date, Time and Location

##### **Lecture 1: *From Descriptive Statistics to Inference: An Overview of Key Statistical Concepts***

**Date:** Thursday, April 15, 2010

**Time:** 9 to 10:30 a.m.

**Location:** Building 1, Soundgarden Conference Room

##### **Lecture 2: *Can't We All Agree? Validation and Reproducibility in Clinical and Laboratory Research***

**Date:** Thursday, April 22, 2010

**Time:** 9 to 10:30 a.m.

**Location:** Met Park West, 5<sup>th</sup> Floor, Rooms 589/591

##### **Lecture 3: *Statistical Hot Topics in Laboratory and Clinical Research***

**Date:** Thursday, April 29, 2010

**Time:** 9 to 10:30 a.m.

**Location:** Building 1, Soundgarden Conference Room

##### **Lecture 4: *Everything you Need to Know to Get Started with the Stata Software Package***

**Date:** Thursday May 6, 2010

**Time:** 9 to 10:30 a.m.

**Location:** Building 1, Soundgarden Conference Room

### Conference Presenters

Each month or as needed, Interaction will include a list of faculty and staff presenting at conferences in the near future. If you or someone you know will be presenting at a conference in the next few months, please contact [Interaction](#). Information is solicited on a volunteer basis. Here is one staff member presenting at the 2010 Pediatric Academic Societies (PAS) Conference.

**Conference:** Pediatric Academic Societies (PAS)

**Dates:** May 1 - 4, 2010

**Location:** Vancouver, British Columbia, Canada

**Presenter:** Libby Brockman

**Title of Presentation:** *Social Networking Web Sites: A New Venue for Interacting With At-Risk Teens?*

**Format:** Platform session - Public Health and Prevention I: Innovative Interventions & Approaches

**Co-authors/mentors:** Dr. **Megan Moreno** (former fellow at Seattle Children's Hospital, currently at the University of Wisconsin-Madison) and Dr. **Dimitri Christakis**, center director for the Center for Child Health, Behavior and Development

## CONFERENCES & EVENTS

### Fourth International Conference on Primate Genomics: Systems Biology & Translational Research

**Date:** April 13 - 16, 2010

**Location:** Seattle, WA (venues include Seattle Art Museum and Seattle Aquarium)

**Hosted By:** The Washington National Primate Research Center

Conference sessions include:

- Genomes and Technologies
- Primate Genomics and Human Disease
- Primate Genomics and AIDS
- Systems Biology
- Neuroscience and Translational Research

There will be highlighted talks from **Alan Aderem**, PhD, Institute for Systems Biology; **Lawrence Corey**, MD, Fred Hutchinson Cancer Research Center and the University of Washington; **Michael Katze**, PhD, University of Washington and the Washington National Primate Research Center; and **Rafick Sékaly**, PhD, University of Montreal Hospital Research Center.

This conference targets faculty and staff interested in animal models of human disease, systems biology, translational research and evolutionary genomics. For more information about the conference including the program, schedule and how to register, please visit: <http://www.seattleprimategenomics.com/>. Registration ends April 11, 2010.

For questions, please contact [Tim Rose](#), PhD.

### Changes to ResearchNews

"ResearchNews" is an e-mail alias that was created to send news and announcements to research audiences associated with Seattle Children's Research Institute. Notices from ResearchNews are distributed to all staff and employees of the institute, all associated staff at our partner organizations and to those who subscribe to "ResearchNews."

Starting in March 2010, ResearchNews notices will be compiled into a brief weekly edition, the "ResearchNews Weekly," with urgent notices (those requiring less than a week turnaround) sent on an "as needed" basis. This new consolidated e-mail is easy to scan, in plain text for readability on PDAs, and will direct staff and researchers who want more information to relevant SharePoint sites, pages on CHILD or to the Seattle Children's Web site. The Weekly will include the following sections: Research Announcements, What's Happening at Research This Week, Research Center News, Research Policy Changes, Research Administration News, Funding Opportunities and This Week's Factoid (an interesting fact about conducting research at Seattle Children's Research Institute).

Submissions to the ResearchNews Weekly will be accepted until noon on Wednesdays for the following week and should be sent to [researchnews@seattlechildrens.org](mailto:researchnews@seattlechildrens.org). The Weekly will be sent out every Thursday. If you have questions or comments, please e-mail [Betsy Greer](#), research marketing manager.

## MONTHLY FEATURES

### Welcome to Research at Seattle Children's

Interaction would like to extend a warm welcome to all who have recently become permanent members of the research family.

**Center for Child Health, Behavior and Development**  
**Mon Myaing**, Scientist

**Center for Childhood Infections & Prematurity Research**  
**Tatiana Alabyeva**, Research Associate - Bench

**Center for Clinical and Translational Research**  
**Heidi Drucker**, Reiki Practitioner  
**Polina Frolov**, Research Technician  
**Vanessa Quinones**, Reiki Practitioner

**Center for Immunity and Immunotherapies**  
**Andre Durudas**, Research Lab Project Coordinator

**Center for Tissue and Cell Sciences**  
**Elizabeth Stanley**, Student Helper

**The Project Management Office (PMO)**  
**David Lobdell**, Project Associate

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### Promotions

**Center for Childhood Infections & Prematurity Research**  
**Kelli Kraft**, promoted from Research Associate I to Research Technician II

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### Policy Updates

Each month, Interaction keeps readers up to date on policies that were posted on CHILD for peer review. Here is the policy that was posted for peer review in the month of February. Please visit the [research policies Web page on CHILD](#) to view all past peer-reviewed policies, their accompanying responses and final versions.

[RTO-103 Biological Materials Transport Policy](#)

## Editorial Board

### Interaction Editorial Office

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