

Mid-America Chapter News

AMERICAN MEDICAL WRITERS ASSOCIATION
MID-AMERICA CHAPTER

APRIL 2009

Welcome

By Donna Coffman, MD

Spring time usually means news about the upcoming Mid-America chapter conference, but things are a little different this year. Please see the President's Letter for an update on plans.

On a seasonal note, the cute little yellow fluffy chicks that sometimes show up in Easter celebrations are fun to hold, but wash your hands afterwards. Like all chickens, they can carry salmonella! As for the chocolate, dark chocolate contains flavanols that may exert vascular protection through antioxidant properties and increased nitric oxide bioavailability! Dark chocolate might even help reduce insulin resistance! [Grassi et al, Am J Clin Nutr 2005;81(3):611]

Table of Contents

President's Letter	Page 1
AMWA Chapter News	Page 2
AMWA/STC news	Page 2
Member News	Page 3
News Summaries from the FDA	Page 4

President's Letter

by Joanne McAndrews, PhD

Dear AMWA Mid-America chapter members,

I have some news about our 2009 chapter conference. Traditionally we rotate our chapter conference location between Kansas City, MO and St. Louis, MO. In light of the fact that many companies have cut or frozen their travel budgets, we will not have a conference with workshops. Instead, we will gather for networking, dinner, and a presentation by a local computer consultant on May 14th. Bill Anderson will speak about the power of social networks such as LinkedIn, Twitter, etc. An Evite has been sent to St. Louis area members. If you don't live in St. Louis, but would like to attend, please let me know and I will add you to the Evite.

If any members in Kansas City or other areas are interested in organizing a similar event in their cities this spring, please contact me.

In other news, David Gattermeir, our chapter secretary, attended the spring AMWA Board of Directors meeting recently as our chapter delegate. He will summarize the main items of interest and these will appear in a future issue of our chapter newsletter.

Hope you can get away from your computer and enjoy the warmer spring weather!

Regards,

Joanne M. McAndrews, PhD

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Upcoming STC/AMWA Freelancers Luncheons:

For those who like to plan ahead, here is a list of upcoming STC/AMWA freelancers luncheons in St. Louis. Later on in the year we will need volunteers to lead our September and November 2009 luncheons.

Tues May 19, 2009 at 11:30 AM

Presenter: Betsy Frick

Topic: Effective interviews with subject matter experts.

Location: Schneithorsts Restaurant & Bar (1600 S Lindbergh Blvd, St. Louis, MO 63131; Phone 314-993-4100)

July 2009

Presenter: Dana Delibovi

Topic: Creating a Portfolio

Date and Location: TBD

Joanne McAndrews will provide news and further updates in the June newsletter. In the meantime, feel free to email her with questions about meetings, times, and topics (jmmcandrews@earthlink.net).

St. Louis Area AMWA-STC Freelancers Luncheons

St. Louis area AMWA and Society for Technical Communication (STC) freelancers continue to meet six times a year for lunch and interesting discussion topics. This group is coordinated by Lisa Balbes, an STC member, and Joanne McAndrews.

Officer Elections

Officer elections are usually held during the annual chapter conference. This year, we are holding electronic submissions for candidates and electronic voting. Please contact Dave Gattermier (DGattermeir@KVPH.com) by May 1st if you wish to be on the ballot for an officer position for the Mid-America chapter.

If no new nominations are offered, the current officers have agreed to continue in their roles through 2010.

Member News: Magdalena's Notebook

News from academia: We're still here! Our campus (Missouri State) was preoccupied this year with the possibility of drastic budgetary crises. However, threatened 15-25% cutbacks have been forestalled by an agreement to keep tuition at the same rate in exchange for a level of funding equal to last year's. It looks like I'll be teaching my health writing class again next fall, although it will be a substantially different version.

My first run at teaching ENG 570: Writing in the Health Professions was a qualified failure. As I mentioned in my last report, sometimes you have to start before you're ready. But I wouldn't recommend this as a regular practice.

There were 20 students enrolled, primarily senior technical writing majors, and I thoroughly enjoyed working with them. One was a former nurse, another, a former nursing student. We did what I had planned: analyses of health-related Web sites, patient information handouts, individual research papers, and a collaborative project in which they designed a marketing campaign for the campus Health and Wellness program. They did some excellent work; in many cases I was impressed with their projects. So far, so good, and when it was over, my assessment of the course (content and delivery) was a "B." The students, however, weren't as generous.

In most universities, courses (and by extension, those who teach them) are evaluated by their students at the end of the semester. You may remember completing evaluations in the form of scan sheets or questionnaires. These evaluations are used in determining merit increases (although at our institution, there's a limit to how much they are weighted when determining a person's final "score"). They are used by department heads in the process of annual reviews. They are anonymous—we have to leave the room while the students complete them. We're not allowed to see them until after the final grades are handed in.

While many academics, for various reasons, despise this system, the data collected can be quite useful. My students told me that they didn't like the textbook I chose; they didn't feel the course was sufficiently content-rich with regard to medical writing; they didn't like the lecture format; they thought that a 3-hour class once a week was the wrong schedule (me, too). There were other things they were dissatisfied with as well. (Writing majors don't mind articulating their opinions.) The bright spot overall was the collaborative project, for which I asked them to use Google Sites as a communication tool. It was easy and fun to use, and kept everyone on track with minimal effort.

Well, all right. I only wish I'd had a little warning so that the push back didn't push me over. The experience was the academic equivalent of spending enormous time and effort to write a play, only to have it panned by the critics. Time to revise, although I can't replace the leading lady...

My overall impression is that, especially in a tight job market, these students expected to get a set of skills that would make them more employable - something like learning how to write help menus with RoboHelp or using DreamWeaver to construct cascading style sheets. It's relatively simple to change the text (I'm going to use AMWA's two volume collection of essays) and dispense with assignments that most students didn't like (out goes Groopman's What Doctors Think). Clarifying the focus of the course is more difficult.

Our tech writing students are already good communicators; in most cases, though, they have very little training in (and in some, patience for) science and mathematics. A one semester class cannot address this deficit. What skills, then, can I add to their repertoire? More work with medical databases, certainly, and thus more exposure to medical research articles. More experience with some of the medical writing genres: I'm considering asking them to design a poster based on a published article. I'll continue to talk about health literacy issues. And health marketing—we may once again design a campaign for the university's health and wellness program (although none of my students' excellent designs have yet

been implemented, unfortunately). Another possibility I'm checking out is creating information handouts or other materials for a local hospice.

Enough about my "process" (as they like to say in Composition Theory). Would that I could make this column more interesting with heart warming stories of students who thought they couldn't, but then, with stern but warm encouragement from their doughty old professor, found that they could... But it didn't happen like that.

The students were sharp, they worked hard, and they came up with some attractive and well-written documents. I'm sure next year's batch will be similar. I think if I can get their expectations in line with what I can offer them, my class will be more satisfying for all of us.

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Wacky WORD Tricks

If you are like me and work from home, it is sometimes hard to remember the date! For a shortcut for dating documents without looking up the date, hit 'Alt+Shift+D' and the date will magically appear in your document!

Do you have a list of words that you've decided to capitalize? Place the cursor in the word and hit 'Shift+F3'. If you continue to hit 'Shift+F3' you will cycle through an initial capital, all capitals, and a return to the original form.

IF YOU KNOW A TIME-SAVING TRICK WITH WORD TO SHARE OR HAVE A QUESTION ABOUT WORD, PLEASE EMAIL THE NEWSLETTER CHAIR, DONNA COFFMAN, AT DONRCOFFMAN@EARTHLINK.NET.

Select FDA News:

Much of the Private-Sector Consumer Medication Information is Not Consistently Useful.

December 16, 2008 : The FDA has released a study that has found that consumer medical information provided with new prescriptions by retail pharmacies does not provide consistently understandable, easy-to-read information about the risks and use of the medication. For more information, see <http://www.fda.gov/bbs/topics/NEWS/2008/NEW01926.html>.

FDA Approves Vasovist Injection

December 24, 2008 : The FDA has approved the use of Vasovist Injection (gadofosveset trisodium) as an imaging agent in patients undergoing magnetic resonance angiography (MRA). This is the first contrast imaging agent approved for use in MRA. The primary safety risks are allergic reaction and nephrogenic systemic fibrosis. For more information, see <http://www.fda.gov/bbs/topics/NEWS/2008/NEW01934.html>.

The Genetic Basis of Adverse Drug Events

February 10, 2009 : The FDA and the International Serious Adverse Events Consortium have released the first data on the genetic basis of adverse drug events. The data reported are on genetic links associated with serious skin reactions, such as Stevens-Johnson syndrome, associated with drugs. For more information, see <http://www.fda.gov/bbs/topics/NEWS/2009/NEW01956.html>.

Next Issue: Member Profiles
 News on the Mid-America chapter meeting in St. Louis
 AMWA/STC news
 Member News
 News on the upcoming AMWA National Conference