

AMY M. AVERY, M.A.Ed.

Healthcare Writer & Marketing Communications Consultant

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Amy@AveryWrites.com

Research Triangle Park area of N.C.

- *well-researched*
- *accurate*
- *on-time*
- *within budget*

Writing Services	• Feature & Trade Articles	• Brochures, Ads	• Web Pages
	• White Papers & Ghostwriting	• Newsletters, E-news	• Media Releases

My research. My experience. Your results.

As an award-winning freelance writer and marketing communications practitioner, I bring to every project strong research, a marketing focus, and a hands-on understanding of project management. I and a select team of copywriters support clients in over a dozen states with **one-time projects and on-going copywriting**.

With **over 20 years' experience in healthcare**--working within hospitals and systems--I understand that **completing a project on-time and within budget** is not a luxury; it's a necessity. And good work does not happen by accident. Planning and research are keys for both the simplest article and for the most complex marketing plan.

If you need a nationally recognized **healthcare marketer** and **strong writers** who pledge **dedication** to your projects, **put me on your team**.

Providing targeted copy for:

Hospital Systems, Foundations

Physician Groups

Professional organizations

Brightwater Biotechnology Park

BlueCross & BlueShield

Baylor Health System

BayCare Health System

Geisinger Health System

The Cleveland Clinic

Sentara Health System

Humana

Securitec Healthcare Publishers

CapMed, Div. of Bio-Imaging

Eastern Connecticut Health System

Prevent Child Abuse, Connecticut

CorpCare Occupational Health

A.I. duPont/Nemours

FirstHealth of the Carolinas

MeadWestvaco Pharma Packaging

Journal of Healthcare Information Management

North Carolina Magazine

Pharmaceutical Manufacturing &

Packing Sourcer magazine, London

Regional and National recognition

• *Writing awards:*

Silver Quill for feature writing &

Silver Quill for editorial writing, from International Association of Business Communicators;

Gold Award and

Best in Division Award from a Research Triangle Park-based (N.C.) professional communications group.

• National speaker, **Society for Healthcare Strategy & Market Development**, Chicago, IL

• **National recognition** from the **Public Relations Society of America** for healthcare marketing.

• **Published** in trade, business, professional, state and regional publications, plus in hundreds of corporate publications

To reach your target markets in the health, medical and pharma industries, tap into my 20+ years' experience as an industry insider.

Education

Master of arts degree in education, focusing on adult communication and communication theory
Additional master's level study in marketing and healthcare management

Bachelor of arts degree in English, with a minor in communications, *cum laude*

Industry-related courses, workshops, webinars.

Professional Memberships & Involvement

Amer. College of Healthcare Execs., Research Triangle Park-area
Society for Healthcare Strategy & Market Development

Association of Healthcare Journalists

International Association of Business Communicators

American Marketing Association

Public Relations Society of America Health Academy

Independent Communicator's Alliance

Call for a customized portfolio today, or check out my writing samples:

www.AveryWrites.com

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I have completed writing and other communications projects for . . .

American Hospital Association's Society for Healthcare Strategy and Market Development (national)
American Marketing Association: Triangle (N.C.) Chapter
BayCare Health System, Florida
Baylor University Medical Center, Texas
Betsy Johnson Regional Hospital & Foundation
Biotechnology Park of Harnett County, N.C.
Blue Cross & Blue Shield
Central Carolina Community College
The Cleveland Clinic
Connecticut Comm. to Prevent Child Abuse
CorpCare Occupational Health Center
Divurgent Healthcare Consulting
The Duke Endowment
Geisinger Health System & Foundation, Penn.
Harnett County (N.C.) government
Hill Physician Group, California
Image Marketing Group, Inc., N.C.
IABC: Connecticut & N.C. Chapters
Life Enrichment Ctr., Cleveland Regional
Manchester Memorial Hosp. & Foundation, Conn.
MeadWestvaco Pharma (international)
North Carolina Magazine
Ochsner Medical Center, New Orleans
Pharmaceutical Manufacturing & Packing Sourcing magazine, London/Europe
Physician groups: cardiology, OB/GYN, family practice, etc.
Sonosolutions (mobile ultrasound)
Talecris Pharmaceuticals (international)
United Way, local chapters
UNC-Chapel Hill School of Medicine
Wax Communications Custom Publishers, national
The Women's Center of the Eastern Connecticut Health System

Unsolicited comments about my work:

Excellent. Well written and well researched. A very practical article and a valuable piece for our journal.

-- *Reviewer for a national healthcare publication, for a ghost-written journal-length article*

This is one of the best-written case studies I've ever read. Well done.

-- *Marketing V.P., healthcare B2B*

Wow! You did such a great job! Thanks for making me sound so amazing. No wonder they hire professional writers for these things!

--*consumer interview subject for a branding campaign*

I just wanted to call to say 'job well done.' You took a complicated topic and made it easy to understand.

--*Ophthalmologist interviewed for a feature*

I am glad we have you to support our efforts. We just can't do it all ourselves, and I appreciate your help.

--*From a client's boss, for on-going contract work*

YES!!! This is what I was envisioning. Excellent job!

--*From a new client concerning a new publication*

The client was very pleased. I can't tell you how happy we are. Thank you for all your hard work!!!!

--*From a national agency representative*

Amy, these are WONDERFUL stories. You're a great addition to our magazine team. . . Hope you'll be interested in an assignment for the next issue.

--*Health System Magazine Editor*

Someone asked who was doing our marcom [marketing communications], and I hesitated to tell him--I don't want you to get too busy and forget me! But I did, and I told him you are a bargain, worth every dime.

--*Government Agency Director*

Copy by Amy@AveryWrites.com

**The Duke Endowment/Foundation
UNC-Chapel Hill School of Medicine
Annual Report Feature (excerpt)**

In church sanctuaries throughout the country every week, parents stand alongside their children, singing hymns. It's routine, maybe even mundane for many.

For parents like David and Shell Keim, however, hearing all six children sing with them was not something they even imagined to hope for. Their fourth child, Micah, is hearing impaired.

"Probably one of the toughest things someone can tell you is that there's something wrong with your child," said David Keim, of Cary, N.C. . . .

The Keims dove immediately into research, and what they learned added urgency. Speech and language delays can permanently limit learning, especially in young children.

"Early intervention is a one-way track," said Craig Buchman, M.D., professor of otolaryngology at the University of North Carolina School of Medicine in Chapel Hill and Medical Director of a unique early intervention program. "If a child doesn't get help early on, the brain gets trained in a way so that it can no longer use sound signals." . . .

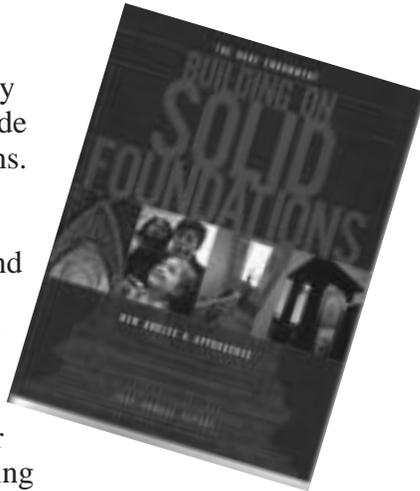
Learning to hear is hard work

A team of professionals who specialize in hearing and speech for the deaf embraced Micah and his family. Staff provided focused, intense therapy to help him first with hearing aids and later with a cochlear implant, a permanent device that electronically translates sound into digital information that the brain can understand.

"It's hard work to interpret sounds heard through 'electronic hearing,'" said Carolyn Brown, Program Coordinator for the Carolina Children's Communicative Disorders Program (CCCPD), an affiliate of CASTLE.

CASTLE's on-site educator, three speech-language pathologists, a teacher for the deaf, and assistant teacher all help preschoolers understand the meaning of sounds they've never before heard, and to speak in ways past generations could not.

"Deaf kids can talk," Brown said. "When we blend the new technology with advanced teaching interventions, it really does happen." . . .



Teachers become students

North Carolina is on the cutting edge of speech-language programs, and CASTLE and its affiliate CCCPD, both part of the UNC School of Medicine, support professionals across the state.

"We have a two-fold approach," Brown explained. "We provide services directly to children who are deaf and hard of hearing and also provide professional training to those working in the schools."

Said one 24-year veteran teacher, "What CASTLE has done for me is raise the bar for what my students can accomplish through listening. When I left the Center [after training], I had really gained customized skills that I could take back to my schools and my students." . . .

New sounds, this time for the family

From Micah's initial evaluation, to finding support and information, to his learning to listen and then to speak, the Keims give credit to CASTLE for bringing great changes to their lives.

Even for an untrained observer, the impact is clear.

Micah, now 7, busies himself with a drawing, but stops to delight in the click, click, click, click of the spring-loaded button on an ink pen. His speech, too, comes more and more easily.

"I'm going to be a pediatrician," he told an observer, nimbly and clearly pronouncing the complex name of the profession.

Watching his son, happy and drawing intently, Keim said, "I don't know what we would have done without the people there.

"It's hard to find . . .," he started slowly, then hesitated to find the right words.

"A CASTLE," Micah finished for him, never looking up from his drawing.

Micah's practice at preschool has given him a confidence that anyone can hear, and about a month after he began using the cochlear implant, it was his family's turn to hear something new. During church services with the entire family, they were caught by one of the most exciting sounds ever to resonate through the sanctuary.

"Micah was singing along," his father said. "I don't think I've ever heard a more beautiful sound."

**Top Award Winner:
Silver Quill for feature writing**
International Association of Business
Communicators, Southern Region

Copy by Amy@AveryWrites.com

Web site, approx. 200 Web pages

B2Consumer: www.geisinger.org/services/jwch/index.html

and B2kids: www.geisinger.org/services/jwch/for_kids/index.html

[Landing page:]

Every child is special.

For the full range of your child's care—from before birth and up to adulthood—we offer an extraordinary devotion to children. And an extraordinary range of expert medical care.

Our physicians bring expertise in over 40 children's specialties and subspecialties. Our staff devote their time and training to advancements in care for the most fragile of infants and for the toughest of teens. And from bright decorations to child-sized equipment, we've designed our hospital around your child's needs.

Medical expertise. Advanced treatments. Extraordinary dedication. We bring all this into your community and throughout central and northeastern Pennsylvania.

Welcome to The Children's Hospital.

[Sample specialty page:]

Nephrology

Enjoy childhood fun and carefree sleepovers.

Kidney stones and bedwetting need not be a part of your child's daily life. We work with pediatricians and other specialists across Pennsylvania to help children put those experiences in the past. Our goal, like yours, is to help your child to replace the real discomforts of kidney conditions with pleasant times—with simple joys like a carefree sleepover with friends.

Leading your child's team is a pediatric nephrologist. This is a physician focused on children with conditions of the kidneys and urinary system. We work with hundreds of children every year to get kidney disorders under control.

From bedwetting to care before or after a kidney transplant, our entire staff offers expertise in evaluation and treatment of a range of disorders. >more



[Sample child-focused Web page:]

Just for Kids!

When you're in the hospital, we do everything with you — a kid — in mind. Every person you see is here to help you get better. We make sure that you have everything you need. We even have some things you don't need, just because they're fun!

If you're under age 12 or so, explore this website. Like our children's hospital, it's made just for you.

Check out the boxes below for more information about your room, visitors, meals, and more. You can even watch a video about a boy who came here for an operation. >more



News & Observer,
The (Raleigh, NC)
Author: Amy M. Avery

Column: Point of View
“Healing rural medicine”

Winner of 3 Writing Awards:
Silver Quill Top Honors, International
Assoc. of Business Communicators
Best in Division for P.R. Writing and
First Place for Opinion Pieces from
Raleigh (N.C. USA) Public Relations Society

Article Text:

ANGIER — Picture this: your spouse flips his 1960's Shelby 427 Cobra sports car three times, hits three trees, plows through a yard and sheers off a fire hydrant, plus both the brick and concrete well-covers in front of a brick house. The car lands upright; he walks away.

After emergency care, doctors conclude that hand surgery should be scheduled within a week.

A hand surgeon schedules operating room space at an impressive facility dedicated solely to outpatient surgery. Staff prep the patient immediately upon arrival; surgery takes less than an hour; and you drive back home, arriving in time to get prescriptions filled at the locally owned pharmacy. Sounds convenient.

Unfortunately, the emergency care and surgery occurred at sites 60 miles apart. My husband was the patient. He is also a resident of a rare rural county that boasts not one but two community hospitals. Even so, the care he needed was an hour away.

Harnett County's EMS and hospital staff did their jobs well to care for my husband, but my county has not been able to attract the specialists that would have enabled us — and hundreds of others with different needs — to stay closer to home for medical services. Instead, on May 23 we left our county three hours before surgery, negotiated traffic and unfamiliar roads to arrive at a surprisingly beautiful, efficient day-surgery hospital. We returned home, after another hour's drive, barely in time to get prescriptions filled locally.

I realize that 15 rural counties in North Carolina don't even have one hospital, so I guess I should be grateful for two in Harnett, a county of less than 100,000 people. Even Cary has only 114 in-patient beds for its 100,000 citizens; Harnett County has 170.

I know too that the two hospitals here, Betsy Johnson Regional and Good Hope, have independently brought us great board-certified doctors and have tried hard to attract various specialists. But it's a tough sell to get hand surgeons, or even dermatologists, to consider practicing here.

Like many rural areas, we cannot achieve the same level of attraction, the services, the economies of scale, the buying power or the negotiating position that we could have if we had more resources, or if our two

hospitals were to work together. If you've heard anything about Harnett and health care, you know that hasn't happened.

As it is now, not only do our hospitals compete with each other, but our two small, rural facilities compete with formidable health care systems, each with multiple hospitals. Specialists and their expertise go north and south of us, bypassing both hospitals in favor of seamless systems that offer a broad variety of services.

I am thankful for the medical services that area health care systems offer. But, like those in Wake, we here in Harnett deserve real choices. Today, hand therapy visits will require that my family's time and our money continue to flow outside the county.

But also today, somewhat miraculously, the dream of greater medical services here has a legitimate chance to become reality.

County leaders have made significant progress toward creating collaborations that will attract new physicians and open new doors for new services and new patients. Even a day-surgery hospital, like the one in North Raleigh that my husband used, could be just the start of a dream realized.

Harnett has the opportunity to advance our medical services to a point where patients and physicians 60 miles away will choose our hospital(s) for care. We can create a nonprofit system in which the money spent on health care comes here and stays, allowing us to add new services and bring back those we have already lost.

To create this system, we must embrace the best, cut away the worst and create a better whole.

Anyone who hears of our “Harnett's nest” of health care knows that we've already had a wild ride of late. So it might take a miracle for a true health care system to emerge once this ride slows down. But consider this: you roll a convertible three times, plow through a fire hydrant and hundreds of pounds of brick and concrete, and walk away with your life.

Miracles do happen. We each can have a part in it. We all deserve it. Support it.

(Amy M. Avery has worked in health care public relations, marketing and communications for 15 years. She is the former public relations manager at Betsy Johnson Regional Hospital in Dunn.)

Copy by Amy@AveryWrites.com

Public Relations Management Plan Excerpt from PRSA award entry:

1. Situational Audit: Trends Near and Far

In addition to national trends showing growth in women's health product lines, Manchester Memorial Hospital's own research substantiated the relevance of these trends to our market area and identified the needs and expectations of our target audiences. . . . Further, a competitor 10 miles away had begun promoting their version of a women's center.

Based on this research and input from an Advisory Group of 18 women, the Center took shape: located within the hospital, which is central to our market base, it offers a myriad of health care services by and for women (mammograms, PAP smears, physical examinations, counseling, etc.)

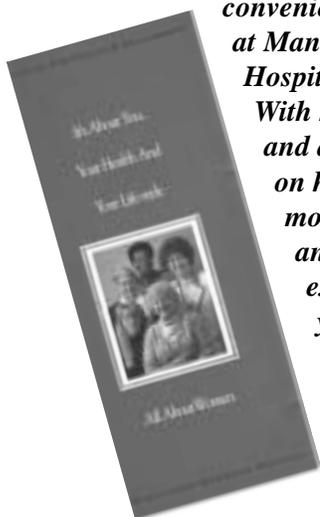
2. P.R. Objectives: Seeing is believing

The role of Public Relations became to communicate two main messages about this product: the concept that it offers a convenient, centralized option for health care services and that the V.I.P. membership would be worth the one-time \$10 fee.

Provider-to-consumer Introductory Brochure (excerpt)

The concept of All About Women is simple: you asked for a central location for your health and educational needs. We've made sure you get it conveniently and comfortably at Manchester Memorial Hospital.

With regular office hours and a nurse practitioner on hand to answer your most intimate questions and provide examinations, we hope you will find that the All About Women center helps you to develop and maintain a healthy life-style.



Visits to the center became our main strategy for introducing this new concept. . . .

3. Results of program launch

We were thrilled that our free on-site programs were sell-outs and that we received 1,100 VIP membership applications within two months of campaign launch. . . .

4. Measuring the success of marketing

To measure success, we turned to projected expectations of staffing needs based on the previous year's research. The Nurse Practitioner position became full-time by month five, 18 months earlier than expected. Likewise, secretarial and mammography staffing increased about 1/4 of an FTE about 18 months earlier than projected.

Anecdotes

Women 20 miles outside our market attended the programs and asked if they could join and use the Center's health services. . . . Some of these women drive by three hospitals to reach us.

Hospital staff, including physicians, also joined.

About Our Staff

The All About Women staff includes a medical director, nurse practitioner, registered dietitians, registered radiology & mammography technologists, mental health professionals, exercise physiologists, massage therapists, and health educators.

About Our Services

To complement both your personal doctor's care and your own busy schedule, All About Women offers you a variety of health and educational services:

- Breast Examinations & Mammography, accredited by the American College of Radiology
- Routine Gynecological Exams
- Pap Smears
- Contraceptive Counseling
- PMS Counseling
- Menopause Counseling
- Personal Cholesterol & Blood Pressure Screenings
- Fitness Counseling

National Award Winner:
Public Relations Society of America
Certificate of Merit
for Healthcare P.R. Management
PRSA MacEachern Awards

Copy by Amy@AveryWrites.com (ghostwritten)
Pharma Trade Journal, London (2,100 words, *excerpt*)
Topic: Child-Resistant Drug Packaging in Europe

A staggering 110,000 children are injured by poisonings each year in the 52-country European Region (1). In almost all poisonings involving medications, the packaging itself could offer children protection (2). . . .

Decades of experience in some European countries and the U.S. demonstrate that child-resistant (CR) packaging can make these products safer for children worldwide. For example, since the onset of strict U.S. packaging laws in 1974, an estimated 460 deaths of children under age 5 have been avoided due to CR packaging of oral prescription drugs (4). . . .

European children have been at risk, as well. In 2002, noting that 180 children aged 1 to 4 years old were hospitalised yearly because of iron overdose, the Health Minister of the United Kingdom called for and implemented new safeguards for packaging of iron as well as aspirin and paracetamol. In the Netherlands, CR packaging, including blister packs, led to a reduction in poison-related hospitalisations for children five years old and under (7). . . .

More drugs in the home, more potential for harm

Historically in Europe and the U.S., most drug poisonings occur in the home. All drugs are a risk, but pediatric medications are an obvious starting point for CR packaging.

First, they can present an “attractive nuisance.” Chewable medicines and others with colourings, flavors, sweeteners and other taste-masking agents are attractive to children.

Second, pediatric medications are entering the marketplace—and homes—at an explosive rate. Manufacturers performed more studies on pediatric medications during one recent five-year period than in the prior 30 years combined (9). . . .

Adult strength equals child danger

. . . By one estimate, 80 percent of the drugs prescribed for children are “off label,” and have not been tested or approved for children (12). With these medications, the line between “therapeutic” and “overdose” is not defined, and so their presence in the home makes CR packaging even more important. . . .

Resistance to child-resistance

The sheer number of languages and governments that must agree on broad European CR packaging

guidelines has to date stymied child-safety advocates pushing for international standards. And some manufacturers themselves have resisted CR packaging,

for several reasons. They say, correctly, that consumers with strength and dexterity problems simply cannot open some CR packaging. . . . One U.S. study showed that over a third of children poisoned by the prescription drugs had ingested the medications of their grandparents (13). As recently as 2003, 25 percent (3,766) of the calls to U.S. poison centers about beta-blockers involved children under age 6 (14).

Drug manufacturers in Europe, benefiting from such U.S. experiences, have proposed international packaging standards that include detailed requirements for testing by diverse populations, including children and senior citizens. . . . Effective CR packaging could simply involve “cognitive barriers,” such as requiring an unusual fold or action that a child cannot accomplish but that an adult can. . . .

Learning from experience

European manufacturers do not have to reinvent the proverbial wheel, or the blister pack, in order to embrace the medical, social, financial and marketing benefits of CR packaging for their diverse European markets. . . .

“Child-safe, senior friendly” has become a mantra of U.S. pharmaceutical packagers. They offer options that they believe would be well received by both the pharmaceutical manufacturers and consumers in Europe. For example, wallet packaging is available as a portable, senior-friendly package with a high child-safety rating. Like other packaging platforms that marry the unit-dose inner card to the outer package, this packaging not only keeps important drug information close at hand, but also provides excellent pharmaceutical marketing and branding opportunities.

Bottom-line decisions

Child-resistant packaging is about the bottom line, but that bottom line is not necessarily a formula of hard and fast expense and profit figures. . . .

There are clear challenges ahead for the industry in addressing public safety concerns. But for those rising to meet those challenges—working with the right partners and without regulatory pressure—the rewards for all are likely to be better, safer and more profitable medicines.



Copy by Amy@AveryWrites.com

Direct Mail Brochure, “Age of Miracles” *(excerpt)*
Audience: Potential Financial Donors

For your family, friends and neighbors, you can make this an age of miracles.

For the newborn infant who arrived weeks too early.
For the school child enjoying sports despite his asthma.

For the baby-sitter on the phone with The Poison Control Center.

For the father in rehabilitation therapy after knee replacement surgery.

For the woman learning to manage newly-diagnosed diabetes.

For the grandparent who remains close to family at our impressive skilled nursing center.

And even for the family physician learning the latest procedures to care for you and your neighbors.

For all of these, and for many more, you can make this an age of miracles.

Give to the Fund Development Council of Southeastern Medical Center.

[Inside panels, body copy:]

Every giver counts

Wealth is not the key to philanthropy. The key is a kind and generous heart.

At Southeastern Medical Center, every gift, large or small, builds upon the next. Each brings miracle-making and life-changing healthcare to people of every age.

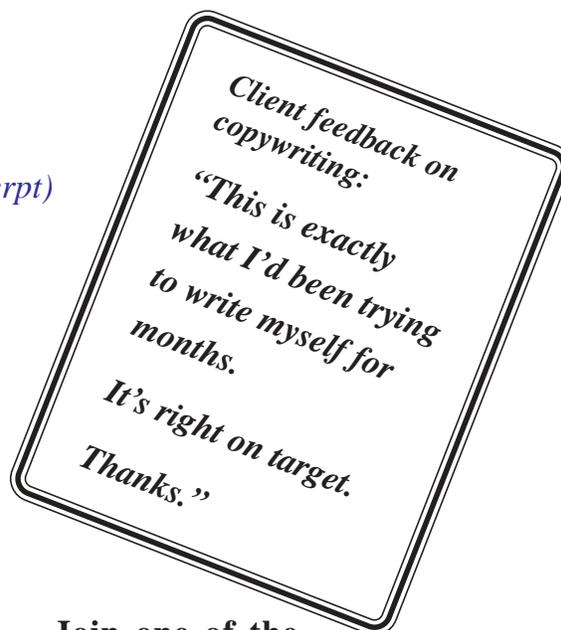
And so, every giver counts.

Participate in the miracle.

Generations depend on both the long-standing and the latest healthcare services at Southeastern Medical Center. Join your community in a commitment to ensure that the highest levels of care will continue.

Our financial donors give cash gifts, and some pledge over time. They also give through trusts, wills, insurance policies, and other financial planning methods.

As an individual, as part of a group, or as a business, you can ensure that medical miracles are part of every age, every stage of life in and around our county.



Join one of the giving clubs for Southeastern Medical Center.

...[giving levels described] ...

The Ella Fitzsimmons Heritage Society reflects some of the highest levels of dedication to the services of Southeastern Medical Center.

Following the example of hospital founder Ella Fitzsimmons, members of this Society gift funds through a variety of financial planning vehicles, including:

- wills
- life insurance
- real estate, and
- estate planning, including charitable gift annuities and charitable remainder trusts

Such gifts can offer both significant tax benefits to the giver as well as significant growth potential for the Fund. Ella Fitzsimmon's own gift, established in her will in 1918, created the original 18-bed hospital on Haynes Street downtown.

This inspiring gift has grown miraculously to our present award-winning 157-bed hospital, outpatient facilities and long-term care center—which are in turn networked with a regional 17-hospital system.

Your gift, like that of Ella Fitzsimmons, can have a far-reaching impact on this and future generations. . . .

Many commonplace medical treatments were called “miracles” a generation ago. And a generation hence will marvel at new “miracles” as well.

Be a part of that exciting tradition with your gift to benefit Southeastern Medical Center.

Contribute today and help bring forth the next age of miracles.

Copy by Amy@AveryWrites.com

Monthly Small-Business (or Small-Department) Column North Carolina Magazine

Q: *I've just started a three-person practice. I don't have a lot of money for marketing, but I also know that I have to do something to get the word out. Can you help?*

A. Yours is a great question, both for new and for longstanding businesses that want to remain strong on their customers' radar. Customize your marketing plan using the questions below. Your answers are the key to making good investments with your marketing dollars.

First, who is your customer, or your "target market"? Be as specific as possible, and prioritize who gets your attention first.

I worked recently with a workers compensation lawyer in Sanford who had two targets: the general public and physicians. We worked out two different plans and timelines to reach them, because their needs and interests are obviously different.

Why does your market need you? This is the crux of your marketing efforts, and the answer will form the basis for all of your promotions. Are you best on service, price, convenience, expertise, or something else? Find out where your "bests" overlap your market's needs. That will be the "word" you want to get out.

"Every company in the medical equipment industry carries the same products," said Joey Tart, President of Family Medical Supply based in the Harnett Co. city of Dunn. "But our people and the level of service they provide make the difference for us."

Where is your market? Where should your customers find you when they need you—in local advertisements, in national or international publications, at trade shows, on an internet website, or in their mailbox? Admittedly, some markets are hard to reach effectively; but be open to opportunities.

"The only time our customers see us is when we are on a job site or going to one," said Kitty Hoyle, president of 15-employee Wellington Hamrick Concrete in Cleveland Co.

She transformed that challenge into a strength, and painted a new company logo on the entire fleet of trucks. This splash of promotion rejuvenated the presence of the 43-year-old company.

"When people saw the new logo, they started calling," she said.

How much should I spend? As retailer John Wanamaker quipped over a century ago, "Half of my advertising is a waste of money. I just don't know which half." For the small business owner, it's not really that bad.

The marketing budget—and yes, it does need its own line item—can range from 1 to 10 percent of gross sales, according to the Small Business Administration. Create a plan to grow it over time.

Keep it coming. When ad reps tell you that a one-time ad will not be as effective as a long-term advertising campaign, they are not just trying to make a bigger commission. They are right. The nature of the marketing beast is that businesses need to market regularly, or customers will forget you. So create a long-range marketing plan with this fact and your budget in mind.

To keep costs low, mix it up. For example, place an ad in a targeted or special edition newspaper or journal for several weeks or months. At regular intervals, send newspapers, radio and trade publications a variety of news releases about your company's new products, services, expansions, and even new employees. (That's free advertising, by the way, except for the expense to write and send it.) Speak to a trade or civic group once or twice a year. Send a post card or other mailing to targeted prospect lists once or twice a year.

Network. To paraphrase the late Tip O'Neill, all marketing is local. Chambers of commerce, local and national boards, professional organizations and trade shows provide valuable "face time" with prospects. Maintaining memberships is okay, but thoughtful sponsorships can create relationships. Veneer Technologies in coastal Cartaret County actually inspires their target markets to get involved with them in advance of industry trade shows. A cash contest for use of woodworking veneers gets distributors, sales staff and end users talking about the company for months. Winning entries are unveiled at the show.

"Even competitors are complimenting us on our unbiased promotion of the industry," said Veneer Technologies' Jane Wharton.

Follow up. A survey by the Small Business Association found that 88 percent of people at a trade show never received follow-up contacts from vendors, who were there to network! . . .

Steady as you go. . . .Over time you'll build a base of loyal customers who provide the best marketing of all: word-of-mouth advertising.



Copy by Amy@AveryWrites.com

Daily e-newsletter

Audience: employees of Blue
Cross Blue Shield

The Challenge:

*Communicate policy without
relaying a “slap on the
hand” tone*

**If your computer
sometimes seems
sluggish, it’s probably not
because of the heat**

If you’re sending or receiving e-mails with personal pictures, audio and video attachments, you might be contributing to company-wide computer system outages and slowdowns. That affects you and everyone else. Read more to find out about new company procedures that will keep things running smoothly.

What do you do when you receive an e-mail with attachments of pictures of your friend’s adorable baby or a copy of a new music release from your favorite singer? Do you immediately forward it on to 10 of your closest friends? These types of files take up a significant portion of the Company’s e-mail storage capacity. By sending them, you’re clogging the Company’s Groupwise e-mail system and might be keeping coworkers from doing their jobs efficiently.

To address the problem, a new procedure will alert employees and their managers when this bandwidth overuse problem occurs. We’re now sending notices to any employees (and their managers) who log excessive personal use of the company e-mail system.

Why is excessive personal e-mail a problem?

When you forward personal e-mail to a number of people, a copy of that message has to be stored in several places on our computer network. This lessens the ability of the entire network to serve BCBSNC employees and members, especially when large attachments such as photographs, video or music clips are involved. These messages can also cause Groupwise to run slowly and crash.

Both the Code of Conduct ([Responsible Use of BCBSNC Assets](#)) and Human Resource’s (HR’s) [Electronic Communications Policy](#) state that Company assets must be used for valid corporate

purposes only, with the exception of occasional and reasonable personal e-mail and Internet usage.

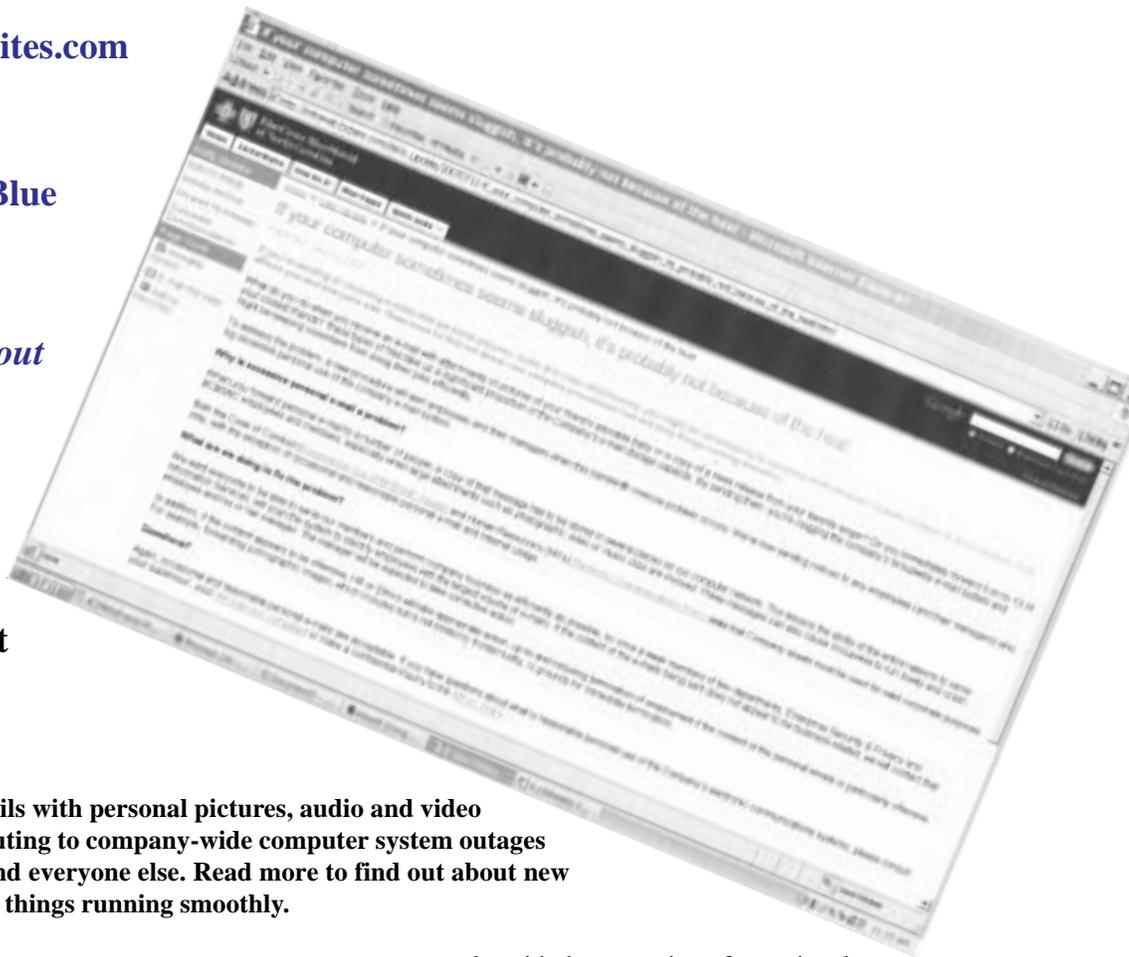
What are we doing to fix the problem?

We want everyone to be able to serve our members and perform company business as efficiently as possible, so once a week members of two departments, Enterprise Security & Privacy and Information Services, will scan the system to identify employees with the largest volume of e-mails. If the content of the e-mails being sent does not appear to be business-related, we will contact that employee and his or her manager. The manager will be expected to take corrective action.

In addition, if the content appears to be offensive, HR or Ethics will take appropriate action, up to and including termination of employment if the content of the personal emails is particularly offensive.

Questions?

Again, occasional and reasonable personal e-mails are acceptable. If you have questions about what is reasonable personal use of the Company’s electronic communications systems, please consult your supervisor, your [HR business consultant](#) or make a confidential inquiry to the [Ethics Team](#).



Copy by Amy@AveryWrites.com

Hospital-sponsored Physician Practice Direct Mail post card

**We care about what
you care about: your child.**

The physicians and staff at **Powat Trail Pediatrics** are devoted to this community and to your family. Whether you have a child on the way, children in grade school, or one heading into high school, our pediatricians would like to become your partners in keeping your family healthy.

Mary Lindsay Franks, MD

Powat Trail Pediatrics

Board-Certified Fellow: Pediatrics

Medical School: Harvard Medical School,
Boston, Mass.

Pediatrics Residency: Boston Children's
Hospital

***"Powat Trail is my home, and it's a
privilege to partner with my community
to keep children healthy."***

While at Harvard Medical School, Dr. Mary Franks discovered that children's health would become the heart of her work.

"In pediatrics, a lot of our focus is on preventive medicine," she says. "And it's exciting to work with the family to impact the health—and the life—of a child."

Dr. Franks has maintained that focus through Harvard Medical School, her pediatrics residency at Boston Children's Hospital, and over 10 years as a physician in Powat Trail. Her focus continues with Powat Trail Pediatrics, the first practice in the area devoted solely to children.

As she and her husband raise their family here, Dr. Franks sees first-hand the importance of developing a long-term relationship with a physician.

"Knowing a child through all phases of growth helps a physician to address concerns before they become problems," she says.

"Here at Powat Trail Pediatrics, we really get a chance to know the whole family. That's a treat for me, and a privilege."



Sankit Puri, MD

Powat Trail Pediatrics

Board-Eligible: Pediatrics

Medical School: University of Alabama School
of Medicine

Residency: Sacred Heart Children's Hospital/
University of Florida, Pensacola

***"We don't want our kids waiting if they are
suffering, whether with allergies or fever or
anything else."***

A compassion for children who are sick and a personal dedication to keeping them well are what inspire Dr. Sankit Puri to practice medicine at Powat Trail Pediatrics.

"I watch every child here in the same way I would watch my own child," she says.

Dr. Puri's dedication to children led her to earn a medical degree from the University of Alabama and choose a residency at Sacred Heart Children's Hospital in Florida. It also led her here.

"Our practice encourages regular appointments to make sure children are developing as they should," she says. "If a child develops a problem, we want to start as early as possible on a treatment plan that works for them." Related, staff make sure children get same-day appointments when they are sick.

"No matter how big or small, your baby is my baby. I don't see any reason for a child to suffer if we know how to treat the problem," Dr. Puri says.

Powat Trail Pediatrics is part of Medical HealthCare System. In addition to our staff's expertise in pediatrics, our patients can also rely on the resources of the system's pediatric specialists in 10 areas, ranging from cardiology to oncology.

Dr. Franks and Dr. Puri are accepting new patients. Call them to schedule a "Get to know you" visit and learn how they can help you keep your child in the best of health.

Copy by Amy@AveryWrites.com

Webpages: “Sioux City Stories of 5-star care”
Patient Vignettes for Health System Service Lines

**Siouxland’s best,
meet one of
Siouxland’s best**

Penny Fee, 64, used to run two to three miles each day—on concrete. It was no real surprise to her, then, that her joints suffered mightily for the wear.

Web-based series: patient vignettes promoting service lines:

- orthopedic surgery: knee (excerpt shown here)
- orthopedic surgery: hip
- vascular surgery
- cardiovascular: bypass surgery
- cardiovascular: emergency balloon angioplasty

“I had two bad knees for a long time,” she said. “I kept putting off knee replacement surgery; but eventually, just standing became difficult. And I need to stand a lot,” she says with a laugh.

But she’s not joking. Once named Siouxland Woman of the Year, Penny heads out on any given day either to teach a college class, run a board meeting or take her spot as volunteer at the museum or library. Along the way, she gathers up organic foods for her catering business, checks in with the non-profit she founded or delivers a rescued pet to his new home.

“Joint problems can take part of your life away,” says Steven Meyer, M.D., a board-certified orthopedic surgeon on the medical staff at Mercy Medical Center-Sioux City. “Penny is a very, very active lady, and her knees were obviously compromising her lifestyle.”

Penny needed two total knee replacements. Her own research and advice from her physician-husband Paul Fee, M.D., led her to one of the top joint replacement surgery facilities in the nation: the Total Joint Care Center of Mercy Medical. . . .

Considering the awards HealthGrades has pinned on Mercy staff over the years, it’s clear how hundreds of patients benefit from life-changing treatment right at home. If it weren’t for Mercy and its staff, patients like Penny would need to travel over 200 miles to Duluth or 380 miles to Minneapolis to get the same high quality care.



“At Mercy, it’s all about relationships, relationships between staff, doctors and patients,” says Dr. Meyer. “I know, for example, that Mercy will have the equipment I need and that everyone works collaboratively from the first time a patient walks through the door until he or she leaves. Our patients know they can trust us implicitly. It’s a great place to practice medicine.”

This attitude of collaboration leads to successes like Penny’s.

“I got along great, and the things I do are now so much more pleasant,” she says.

Penny says she’s been faithful in keeping up with her Rehabilitation Program while resuming her full schedule of community activities, plus attending two book clubs, singing in the choir and gardening.

She’s also happy to fill her home again with the sweet, warm aromas from “marathon baking” sessions, which require several trips between her kitchen and the basement pantry.

“Before, my knees just slowed me down too much. Now, I don’t even think about it,” she says. “I now have my life back.”

*When a small medical device company in Texas was ready to begin a large post-approval trial of its high-tech heart valve, it turned to Tiempo's Clinical Research Software. * Cost savings were only one of the company's goals.*

The Opportunity: Better product, fewer medications

Vascular Technologies (VT),* based in Austin, knew it had a great product with its new prosthetic valve.

"We'd spent over a decade on this technology, and the valve was already at the top of its class in valve performance," said John Crisp, Executive Vice President for Regulatory Affairs. "Patients were seeing important quality of life benefits that merited additional study, and we were ready for the next phase: post-approval research to explore these benefits."

With FDA approval, the valve would be the only mechanical heart valve available in the U.S. for low-dose anticoagulation therapy.

"We had to find the right partners to work with us," John says. "We needed a web-based product that met all of our needs for data capture and study management."

VT gained FDA approval to begin the trial, and medical researchers in dozens of prestigious medical centers across the U.S. were in place to begin.

Small company, high stakes

The randomized control clinical trial of the VT Prosthetic Heart Valve involves up to 1,200 patients across 40 different medical centers nationwide. Compared to other medical device trials, theirs is a large study. Stakes were high in finding an experienced company with the software to manage, track and report on all facets of the study.

Some software providers proposed charging five figures per month to provide what VT needed. With healthcare IT costs coming down in many other areas—for storage in particular—these high costs did not make sense to the decision-makers at VT. John kept looking.

"At that time, the issue of upfront costs was also especially important," John says. "As a small medical device company, we needed a partner who could work with us."

After researching five vendors, they chose Tiempo's clinical research software platform.

"From a total cost perspective, we were able to offer significant savings," says Tiempo's David Jones. "Even considering the role of their internal team, savings approached 50 to 60 percent."

"Not only was the cost reasonable, they were willing to offer flexibility on payment terms," John said. "Trials are expensive, and they understood our needs."

Solutions: Robust software, responsive service

As the VT team put the software to work, their choice of Tiempo was confirmed.

"John knows the regulatory environment," David says. "He knew exactly what functionality he needed in a software product to track and report progress on the VT heart valve."

Since beginning the trial, site investigators have offered their own evaluations of the software. They say data entry is simple, the web-based platform is convenient, and the paperless system has huge advantages. Investigators also told VT officials that the "serious adverse event" notification is particularly helpful.

"The software deployed quickly, and the investigator sites love it," John said. "Several investigators have actually volunteered to tell us how well Tiempo functions to manage the studies. The fact that they haven't been contacting us with problems attests to that fact, too."

Streamlined processes, valuable reports, cost savings

By choosing the right partner, VT and their investigator teams are now concentrating on patient outcomes and evaluating clinical benefits, not on paperwork and documentation. Tiempo has streamlined those tasks.

And due to VT's dedication to their product, patients who need prosthetic heart valves are many steps closer to eliminating a lifelong need for higher doses of anticoagulation medication.

Officials expect that the cost savings realized by relying on the Tiempo software can be invested into further product development.

VT has also turned to Tiempo products and services to support its patient safety registry.

More information

To see how the team at Tiempo can support you with your next important post-approval or investigator-initiated clinical trial, contact us.

[Contact information]

*A pseudonym

Copy by Amy@AveryWrites.com

Feature for Baylor University Medical Center, Texas

Audience: lay public with post-graduate education

Topic: Overview of DNA Research

Abstract:

Imagine a future when the family physician can focus solely on a patient's susceptibility to diseases, instead of on existing symptoms of a medical condition.

Genetic research is creating such a future. Both practical and promising research is emerging from virtually every twist and turn of the DNA helix. Discoveries are quickly advancing our understanding of the relationships between human genetics and disease.

“We’re experiencing a paradigm shift in the way medicine is being practiced,” says Geoffrey S. Ginsburg, M.D., Ph.D., director of the Center for Genomic Medicine at the Duke University School of Medicine in Durham, N.C. “There’s a real

opportunity to learn early in our lives about our genetic risks and to proactively plan to avoid illnesses. As a researcher, that’s what gets me up in the morning.”

[3,000-word story]

Copy by Amy@AveryWrites.com

National Healthcare Trade Journal Article

(ghostwritten)

Topic: Home Telemonitoring

Abstract:

Home monitoring technology is a somewhat rare example of highly effective healthcare Information Technology (IT) that patients “get.” This contrasts greatly with the life-saving but confusing technology they encounter in traditional healthcare settings. Clinical and IT professionals throughout the U.S. and in Europe demonstrate that patients learn quickly to understand and grow to value telemonitoring as a tool to take charge of their health.

Healthcare providers involved with home telemonitoring programs report significant direct and indirect benefits for all stakeholders, as well as a number of lessons learned when working with:

- patients
- clinical and medical staff
- healthcare administrators and board members
- third party payers

Despite decades of successes, health telemonitoring technologies are still relatively untapped. However, new and advanced technologies are cued up for the marketplace, and demographic and regulatory shifts are already pushing stakeholders towards a new frontier in telemonitoring.

Based on their own experiences and an extensive literature review, the authors conclude: the new frontier of home telemedicine is here. Where are you?

[3,400-word story]

