Copy by Amy@AveryWrites.com

B2B Health Tech to CROs, international Digital Case Study

Writer responsibilities---

➔Research and 3 client interviews:

- Executive VP, global operational excellence and innovation, US
- Senior manager, data management, South Africa
- Head of marketing, US

➔ Reviews: SMEs, product manager, legal team

➔ Pre- and post-production quality and brand reviews

Executive Brief

Transformation

From their first week of training with IBM Clinical Development (ICD), MMS staff gained confidence in the team's support and in the easy-to-use technology. Today, MMS has the trust of more of their clients—and is winning more work.

Business challenge

To strengthen their position in a highly competitive market, MMS Holdings (MMS) searched extensively for options to complicated, expensive databases. They needed a trusted partner and economical pricing.

Business challenge: The story

Safety and efficacy. Accuracy and expense.

For any client, efficiently gathering, exchanging and categorizing patient data are all critical to the goal: reaching patients with safe treatments that can improve or even save lives. These data and technology challenges are the focus of MMS Holdings, a clinical research organization (CRO). Their work with small- to mid-sized sponsors is important to bringing treatments to market for conditions that can benefit from orphan drugs and for rare diseases of adults and children.

Five years ago, one of the major challenges MMS leaders embraced was the complexities involved in automating patient data, which daily impacted the work of their global team of 800. "Very cumbersome and time consuming" is how the leadership describes past electronic data capture (EDC) software. It can also be very costly.

Unknown then, obviously, was that a worldwide pandemic would dramatically add to the complexity for the patients, researchers and clinicians doing this important work.

Transformation story

Trust and confidence in the data

The team of specialists at MMS understood their clients' challenges related to electronic data capture. For over 20 years, they've lived it. With their knowledge of the industry and with their clients' goals in mind, MMS engaged IBM Clinical Development, or ICD.

The MMS team dove into IBM's weeklong training to quickly maximize the out-of-the-box features of ICD. And as they began adopting its functionalities, IBM and MMS teams aligned closely to ensure ICD accounted for the nuances of each clinical trial.

"The ICD team was very responsive, very willing to hear our feedback," says Liles Van Huyssteen, senior manager, data management, MMS, in South Africa. "Partnering with ICD, we were able to continuously improve both the technology and the services [we offered our clients]. We worked together to meet our clients' needs."

Further, since ICD uses IBM's cloud-based technology, teams following tight timelines could access the data worldwide—in near real-time.

"This means we're able to address issues and avoid problems proactively, to keep the studies on the timeline," Van Huyssteen says.

(continued....)

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The results story

Gains for patients, clinicians and the CRO

As part of their culture of learning and innovation, the MMS team began to explore new ways to use ICD to support their sponsors' clinical trials, as with one customer interested in modules for randomization and drug shipment.

"That was entirely new territory for us with this sponsor, and they helped the customer do everything they wanted to do, and a little bit more," says Van Huyssteen. "Together, we were able to save them a lot of money."

This performance and value, in turn, led quickly to repeat business, to two more studies using the new modules.

"It's rewarding to be able to serve them with new functionalities, to give them what they need and want," says Jean Gayari, Executive VP, global operational excellence and innovation. "Even with our new clients, we do one study with them very successfully, and the next year, we might get five more, because they like what they see."

Looking ahead, in the era of COVID-19, MMS leaders say they're positioned well for growing trends. "With ICD, we're a solution for clients as they move to doing more decentralized trials, for example," Gayari says. "We have the track record now, and we have the tools to help them."

Take the next step

To learn more about the IBM solutions featured in this story, please contact your IBM representative or IBM Business Partner, or visit the following websites:

- Links to resources

Client call-outs for publication

"Some sponsors needed a very basic database; others need a lot of functionality. With ICD, we're able to stay competitive and offer what they need, and sometimes more."

— Senior manager, data management, MMS Holdings (South Africa)

"Some EDC products make studies very costly to the sponsors. ICD comes with a reasonable price. So we are able to stay competitive and win proposals."

—Executive VP, global operational excellence and innovation, MMS Holdings (Michigan, USA)

"We started using ICD 'out of the box', then learned how to use their additional modules and functionalities. Over time, that has really helped us strengthen our value to our sponsors."

— Senior Manager, Data Management, MMS Holdings (South Africa)

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B2B Case Study: Health Tech & Cardiac Cath

I worked with 8 internal and client SMEs to complete this 1,300-word piece: interviews, research, outline draft, writing, copy review, post-design proofing

Your data is valuable. Put it to work.

If you're simply collecting and storing data, that's no longer enough. Here's what moving to the right information system did for one cath lab and the people they serve.

What would benefit patients in your cath lab right now: Entering their test results into the EMR and double-checking them for accuracy? Or giving those patients your analysis of the next steps that they should take in their care?

Of course, both are important. But access to the data is a critical bridge between them.

One Midwest health system found that implementing a cardiovascular information system (CVIS) allowed them to capture data in ways that gave their staff and bottom line a boost. They were able to unlock data they had been collecting for years and shift their focus more toward analyzing data and treating their patients.

Challenge

For clinicians and staff in a typical cardiovascular department, the pace of the workday varies greatly. It can range from emergent, exciting and life-saving care to tedious transcription, data entry and oversight of detailed reports. During treatments, staff spend time entering patient data manually. Post-treatment, they spend more with transcription, review and sign-offs.

Individually, these processes can slow down patient care, introduce error in data entry, and delay submission to specialists and to registries. Together, they can compromise overall productivity and, potentially, care.

...The high-level goal for any new health technology for this health system had implications for their clinicians and patients. They wanted confidence that important health data would land seamlessly where it's needed most: with the patient's electronic health record (EHR or EMR), other specialists, data registries and medical coders. ...

The Transformation

Leadership looked outward for help. ... Hospital administrative, IT and clinical leaders evaluated the value that IBM Watson Health's Merge-branded solutions offered in the health information and informatics space. ...

The consultants' recommendations focused on how two IBM Watson Health solutions, Merge Cardio™ and Merge Hemo™, could improve:

- Quality of patient care
- Reporting
- Professional performance
- Medical billing

...For the cardiologist, a key benefit of using the Merge solutions was being able to view all the information they needed on a single screen after one log-in. ... This meant that physicians no longer needed to switch between screens or conduct time-consuming searches to get important information.

... Together, these solutions helped the health system achieve its cost and staff-related goals, as evidenced by key data points. For example, the system saved labor costs for a range of staff—from physicians to echo techs, registered nurses, coders and transcriptionists.

Using Merge Hemo and Merge Cardio, the team saw reductions in data entry and transcription delays. Other benefits that helped the health system meet or exceed its goals included:

Improved workflows

- Read and sign reports remotely
- Avoid duplicate and manual entry of data

Improved speed, accuracy of data entry

- Eliminated manual data entry and manual export
- Eliminated printing and scanning into the EHR

Increased cost savings

- Enabled minimal involvement of IT staff
- Reduced medical materiel waste
- Eliminated third-party service contracts

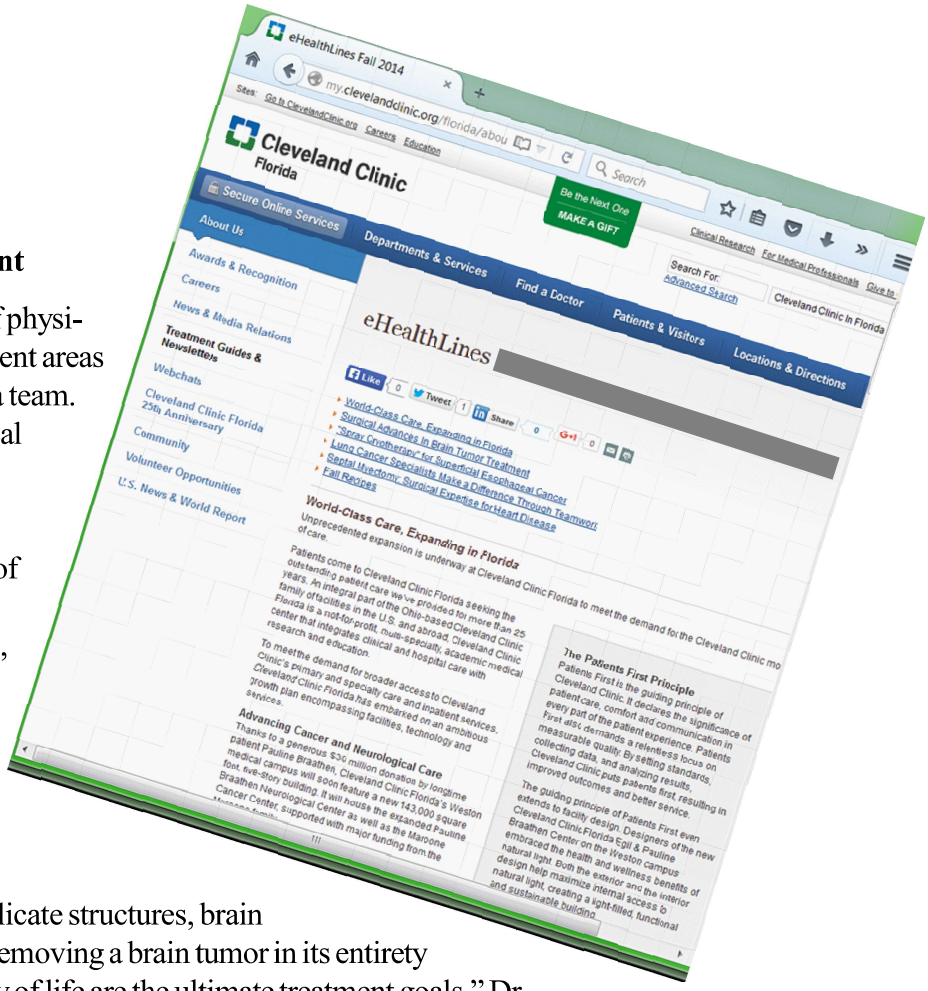
Looking forward

For this health system, analysis of the Merge-branded solutions verified impressive savings of time and cost.

Next, leadership can use their structured and unstructured data in new ways to improve care and organizational efficiencies. ...

So, your team wants to balance the need for better data with the goal of better healthcare? **Leaders today are focusing on this future-state, where manual tasks are not a time-consuming part of each day. Instead, the work can focus on consultations with colleagues and conversations with patients. With experienced consultants, innovative tools and data insights, it's possible.**

Copy by Amy@AveryWrites.com
Cleveland Clinic "eHealthLines"
a quarterly e-newsletter;
target: "highly educated" audience



Surgical Advances in Brain Tumor Treatment

Treating brain tumors effectively takes a team of physicians who have a high level of expertise in different areas of medicine. Cleveland Clinic Florida has such a team. Highly skilled neurosurgeons offering new surgical techniques are able to remove brain tumors that physicians elsewhere have deemed inoperable.

"With our surgical techniques and the expertise of our physicians, there really are few 'inoperable' brain tumors anymore," says Badih Adada, MD, a neurosurgeon with Cleveland Clinic Florida. "And technology has evolved so much that our patients can expect great outcomes following brain surgery."

Delicate Precision

Because of their location and their relation to delicate structures, brain tumors can be extremely challenging to treat. "Removing a brain tumor in its entirety and preserving the patient's functions and quality of life are the ultimate treatment goals," Dr. Adada says. Physicians at Cleveland Clinic Florida use a combination of surgery, radiation therapy and chemotherapy to reach this goal.

"Until 10 to 15 years ago, brain surgery could result in neurological deficits like poor motor function, cognitive function and speech," says Richard Roski, MD, Cleveland Clinic Florida neurosurgeon. "But with the development of microsurgery, imaging tools and other techniques, those types of results are extremely rare."

New Techniques to Target Tumors

In removing a tumor, Cleveland Clinic Florida neurosurgeons rely on their vascular expertise to preserve the intricate blood vessels and nerves of the brain. And their experience in "skull base surgery"—which involves surgery using highly advanced tools, cameras and training to operate through the nasal passages to reach the brain—gives them options to effectively remove tumors without causing dramatic scarring and requiring a long recovery.

"Our ability to navigate inside the skull and brain has been another of the big breakthroughs to make tumor removal safer," Dr. Roski says. For example, before surgery, neurosurgeons at Cleveland Clinic Florida use advanced, navigation software and imaging to clearly locate the tumor and plan a safe path to reach it. During surgery, they use ultrasound images to ensure they remain on the right path.

"Our physicians bring a combination of experience and expertise in brain surgery that is unique to our region of the country," Dr. Adada says. "What that means for our patients is that, though having a brain tumor is a stressful diagnosis, we can offer them hope that our treatment will be successful and that we expect results to be superb."

Other stories in this issue:

"Spray Cryotherapy" for superficial esophageal cancer

Lung cancer specialists make a difference through teamwork

Copy by Amy@AveryWrites.com
Physician-to-Physician
e-newsletter (and print newsletter)
UNC Health System

My services for this project:

- start-up consulations, including options for tone/style, graphic design, target audiences, publication schedule, etc.
- editorial schedule
- interviews with subject matter experts
- writing
- client review
- design
- e-distribution oversight
- print options and distribution

Graphic shown here is of the print version.

Copy by Amy@AveryWrites.com
Explaining complex medical information
Newsletter for an international pharma company

Excerpts from a 3,600 word magazine article

How TB employees help improve lives, save lives across the world

Do you know which of our products soldiers deliver using parachutes? How about which one is important to missionary families overseas? How many of our products let people go to school or work when they could not otherwise?

This article answers those questions. It will also give you lots of answers when your friends and family ask, "What do you make at TB?"

To clot or not to clot? We have the answers…

Hematology *is the study of blood disorders. We make two products to help people with these disorders. One helps blood clot properly. The other prevents clots that are harmful.*

Drug 1: Some people with hemophilia rely on this product every single day
Hemophilia A is a condition that causes people's blood not to clot properly. So they bleed for longer than other people. They often bleed inside their bodies because of a bruise, as well as from a scratch on the skin, for example. They must plan carefully before having surgery, going to the dentist or even clipping their fingernails. (*Explanation of Factor VIII*).

How does it work: "It puts Factor VIII back into their blood," he said, "so blood will clot normally." It is made from human plasma.

How our medicine is special: About 20-30 percent of people who have Hemophilia A develop antibodies sometime during their lifetime. Some of them can no longer take other types of hemophilia medication while antibodies are in their blood. But often times, they can still take our product. Because of the special way we produce it, the body does not attack it.

"So it's really important that this therapy is here for these patients," he said.

Who needs this drug? About 1 in 10,000 children and adults worldwide have Hemophilia A. It is passed down from some parents to their children....

Growing needs: Over time, more people are developing antibodies to the other types of hemophilia medicine. So TB expects more patients in the U.S. to need it.

Drug 2: The *only* treatment the FDA approves for certain blood clot conditions.

For a small number of people, surgery or pregnancy can cause life-threatening blood clots to an arm or leg, and in the lungs, for example. These people do not have certain proteins in their blood to prevent the clots. It's a condition passed down through families that is called "hereditary antithrombin deficiency."

How do we help: Drug 2 puts the blood-clotting agent, antithrombin, back in the blood. Our product is the only FDA-approved treatment for the condition.

Who needs our help: About 2,000 to 5,000 people have this condition. .....

Our challenges: "One of our biggest challenges is that not many physicians are aware of hereditary antithrombin deficiency," he said. "So they're also not aware of this drug."

Our strengths: TB began an awareness campaign last year to reach physicians .....

Coming up: TB is exploring how patients with other conditions might benefit from the drug. ....

Drug 3: "An immune system in a bottle"
When it works properly, the body's immune system helps keep people well. For those whose immune system isn't working correctly, they get sick so often that they cannot have normal lives.

Drug helps many of these people to get back to normal activities and improve their quality of life.

"This drug is an amazing, life-altering therapy – essentially an immune system in a bottle," said TB's Director, U.S. Product Management. "Many patients who use it are really loyal to us. We should be proud of that."

Who needs our help: ……

How it helps: ….

[Sidebar:]

IGIV: Making sense of the alphabet

IG: In medical terms, the disease-fighting parts of the blood are called immune globulins, or "IG." In people with normal blood, immune globulins are made in the blood plasma. (By the way, immune globulins are also called "antibodies.")

IV: Patients get our drug, which is a liquid, into their veins through a tube and needle. This way of getting medication is called "intravenous," or through an "IV."

The drug is therefore called an "IGIV" therapy.

IGIV therapies replace what people's blood is missing.

Copy by Amy@AveryWrites.com
Employee Handbook for an international company

The company, TB, is an international firm that makes rare, complex healthcare therapeutics.

Objective: To create a user-friendly and engaging print and electronic reference tool for all employees, highlighting the important features and benefits of employment with TB. It should welcome and inspire, and it should create an affinity for TB. Remind employees: We put employees first.
Challenge: Creating a shared document for two divisions of TB, with some of the information geared to each specific audience.
Details: 136 sections, each with multiple pages, with topics ranging from employee orientation to compensation, self-care, workplace violence, and much more. This should also become a manager's reference tool.
Distribution: Every employee and new-hire will receive a copy and must certify receipt.

Sample sections:

Section 1.5.
(Diversity/Inclusion)

We value diversity.
We recruit and hire talented, committed employees from a variety of backgrounds and with a variety of experiences. With an environment of diversity and inclusion, we want every employee to have an equal opportunity to achieve their full potential. This not only benefits you, it benefits your coworkers and TB.

"Diversity" includes differences such as ethnicity, race, gender, age and physical appearance and abilities. It also includes characteristics such as thinking styles, religion and beliefs, sexual orientation, education, nationality and life experiences.

We welcome both the differences and the talents you bring to TB.

Section 155.
Business Ethics

Make the right choices
We expect and require employees to follow all laws, company policies and standards—even when no one else is around!

Making the right choices might be difficult due to any number of situations. But you have a number of resources available to you: our Corporate Compliance & Ethics program, our Code of Business Conduct and our Organizational Values and Ethical Principles. These can help guide your decisions.

Each of us should avoid even the *appearance* of wrong doing at all times, and we should conduct our business in compliance with applicable law. Employees are expected to be proactive, raising concerns about ethical issues, and to report any conduct believed to be a violation to your manager, Human Resources, The Law Department, The Ombudsman or Confidential Disclosure Line. The company will not tolerate any retaliation against you for reporting what you reasonably believe to be a violation of any law or regulation.
…..

Intellectual Property
All inventions made during the time you work at TB are the property of TB. You'll sign a statement that says you understand that you understand this and that you must tell us about (disclose) all of your inventions for a one-year period following the end of your employment.

Section 32.
Grow with TB!

Learn about Professional Growth and Advancement
We've created several opportunities to encourage to you to grow and improve as a TB employee. From career ladders to job transfers, take advantage of these ways you can advance with us.

Your Supervisor
Perhaps most important is open communication between you and your supervisor or other managers. We'll let you know our expectations for your job and discuss your performance, goals, achievements and career growth opportunities. We encourage you to speak with your manager or a member of Human Resources about these topics, too.

Career Ladders
TB likes to promote from within. So whenever possible, we've created "Career Ladders" to show you how and where you can gain more experience or expertise in your job. Career ladders list various levels of a job within a "job family." To advance up the ladder, you might take on new tasks or learn additional skills. Take advantage of these career ladders, and discuss them with your manager.

Job Postings

Every job at TB has an official position description. If you're interested in an open job, check out the position description to see if you qualify.

Want to apply for a new position?

Follow these 2 easy steps: .....

Copy by Amy@AveryWrites.com
Marketing newsletter story: Pharma

Beta-C* drug treatment: new aerosol version under study

Today, patients who rely on our drugs for a lung condition called BDC* Deficiency, or Beta-C, get the drug through an intravenous (IV) injection. We're now preparing for a clinical trial for an aerosolized version of the drug—one which patients could inhale.

If approved, it will be the only aerosolized treatment of its kind for BDC Deficiency. Many patients have shown great interest in this form of therapy.

"Patients could administer an aerosolized drug themselves at home, instead of having to rely on a home healthcare nurse to give the IV," said Joseph Kane, Ph.D., Deputy Director, Project Management Office. "This could make it more convenient for them."

The aerosolized version of the drug, called Beta-C Aerosol, would be inhaled directly into the lungs of patients with BDC Deficiency, a condition that causes lung damage.

Our goals

Our goal with this new product is to improve our existing Beta-C MP product in two ways:

- Add an additional purification step
- Offer patients the option of inhaling the drug, vs. receiving it via IV injections.

We've completed a pilot study with 77 patients in three European countries. During this study, we determined that Computed Tomography (CT) scans can be used to measure the lung density of patients. Therefore, we'll use CT scans for the upcoming Beta-C Aerosol trials. (People with BDC Deficiency can develop emphysema, which destroys lung tissue in ways that can be detected by CT scans.)

Next steps

Late last year, the Beta-C Aerosol drug received orphan drug status in Europe. We will file this year with the U.S. FDA for the same designation. Clinical trials are scheduled to begin late this year in the U.S., the United Kingdom and Germany.

"Results from our pre-clinical studies, as well as from our product and process development program, are positive," Kane said. "Everything to date offers a promising outlook for this next generation of Beta-C."

If all goes as expected, our Beta-B Aerosol product will provide a valuable and welcome therapy for our patients.

**pseudonym for a rare disorder and/or related drug therapy*

Copy by Amy@AveryWrites.com

Marketing support for CRO, B2Researcher
One of about 20 in a series for international distribution

HIV/AIDS
Partner with XYZ. We're Experts in Enhancing Clinical Study Performance in Latin America

Strategic Global Support: With more local resources in Latin America than any other CRO, XYZ develops and implements effective, efficient execution strategies, using our proven feasibility and global drug development services.
Operational & Regulatory Experience: Our network of investigators specializes in multiple areas of HIV/AIDS, and we can help you manage the regulatory, operational, and cultural complexities of each clinical trial in Latin America.
Rapid Execution: Our experienced clinical team in Latin America can help you to maximize timelines and minimize challenges associated with large global trials.

XYZ understands the nuances of working with health systems and regulators in each Latin American country. Our clinical teams are experienced in supporting investigational therapies for HIV/AIDS in patients ranging from children to adults. By partnering with us, you will have access to a knowledgeable, experienced investigator network and clinical teams who can ensure rapid start-ups and strong patient retention rates—so you can get your therapies to market quickly and safely.

Quick Overview: XYZ, HIV and Latin America
With more than 1.7 million people in Latin American with HIV today, investigators and health authorities are motivated to increase the availability of therapies and to improve their clinical outcomes.

- Based on nearly 15 years of experience with HIV clinical trials in Latin America, XYZ has earned a reputation locally and internationally for investigators' training and delivery of high quality data.
- Our average site activation timeline for Latin American trials ranges from two to eight months.
- XYZ works closely with key, local opinion leaders, many of whom have vast experience in HIV clinical trials.
- Our monthly enrollment rate is high, at 2 patients per site on average, compared to 0.45 patients in North America and 0.35 in Europe.

XYZ's HIV/AIDS Network in Latin America:

- Our investigators specialize across multiple areas of HIV/AIDS.
- More than 275 investigators are based in 12 countries in Latin America.
- Our HIV specialists are based in private practices, research institutions, site management organizations (SMOs) and academic sites.

XYZ's Patient Experience in Latin America
Average number of patients per site:

- Treated adults: 332 monthly (up to 4,200)
- Naïve adults: 94 monthly (up to 1,400)
- Treated adolescents: 12 monthly (up to 130)
- Naïve adolescents: 5 monthly (up to 100)
- Treated pediatric patients: 17 monthly (up to 200)
- Naïve pediatric patients: 3 monthly (up to 60)

The XYZ Clinical Team in Latin America:
The Latin American team brings you extensive experience with HIV trials:

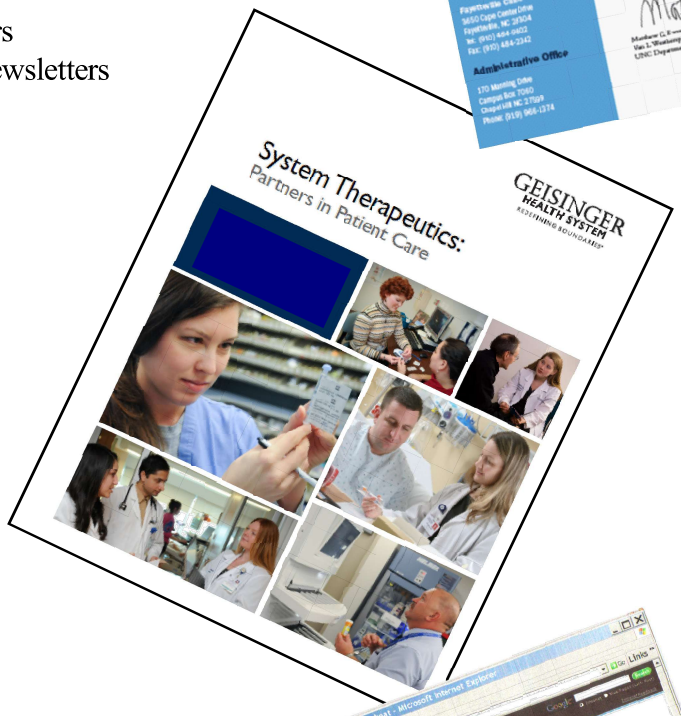
- **Directors of Clinical Management**: 64% of total staff has extensive HIV—experience, averaging 2.8 years.
- **Clinical Team Managers**: 60% of total staff has HIV experience, averaging 2.2 years.
- **Clinical Research Associates**: XYZ's 80 CRAs have more than 2 years' experience with HIV trials.
- XYZ's **project experience** includes over 1,600 trial sites in Latin America and 30 Phase I-IV HIV studies for pediatric patients and adults.

Copy by Amy@AveryWrites.com
B2Clinician, B2Staff, B2Donors

I offer decades of experience in internal communications for the diverse stakeholders in the healthcare industry for organizations like Cleveland Clinic, UNC-Chapel Hill School of Medicine, Blue Cross Blue Shield N.C., Talacris Pharmaceuticals, and more

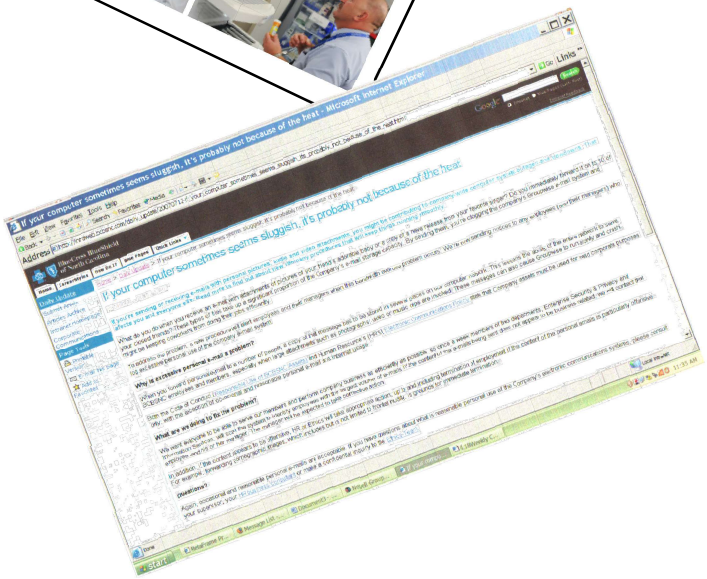
Media:

- Daily e-news
- Weekly print and e-newsletters
- Monthly and quarterly print newsletters
- Posters
- Classes and scripts
- Powerpoints



Internal Stakeholders:

- Employees
- Physicians
- Researchers and Partners
- Volunteers
- Financial Donors
- Boards of Directors



Messaging:

- Administration-to-stakeholders
- Physician-to-physician
- Employee-to-employee
- Crisis communications
- Human Resources support

Copy by Amy@AveryWrites.com
Patient Education Booklet: Health-literate plain language

Quick Facts
about Your Lung Cancer Care

Thank you for choosing Regional Health Cancer Center for your care. You have either been diagnosed with lung cancer or have test results or symptoms that show you might have lung cancer.

Our staff is here to help guide you and your family through your tests, any cancer diagnosis, treatment and recovery.

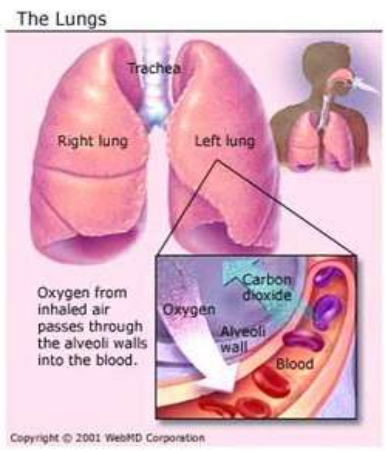
These pages offer a summary of information to help you understand basic information about:

- lung cancer
- terms we use, including: work-up, staging and different types of treatment; carcinoma; tumor; etc.
- resources at Cone Health, including phone numbers and addresses
- other organizations that can help you and your loved ones during your treatment

You might also receive more detailed information from Cone Health about your treatment. But this information is a summary, a place to start.

About your lungs and breathing

Your lungs are a pair of large organs in your chest that are part of the respiratory (breathing) system. Air flows into your body starting at your nose and mouth. It then passes through the trachea (windpipe), then through two branches of the trachea (the bronchus), and finally to the lungs.



As you breathe in, your lungs expand, and your body gets the oxygen you need. As you breathe out, your body gets rid of the carbon dioxide. With healthy lungs, this breathing cycle happens easily.

How does cancer begin?

Cells are the basic building blocks of all things. Normal cells in the body grow and divide to form new cells. When normal cells get old or damaged, they die off. This process helps repair and maintain healthy tissue.

In cancer, this normal cell death and growth does not happen. Cancer cells do not know when to die, so the old and damaged cells can create new, but damaged cells that do not work correctly.

Some definitions

Tumors are masses, or a build-up of cells that do not work correctly. Not all tumors are cancer. Tumors can be either:

- **benign** (*bee NINE*), which means they do not spread to other parts of the body, but they can grow in size
- **malignant** *(mah LIGG nant)*, which means they can or do spread to other parts of the body.

Carcinoma *(CAR sin OH mah)* means cancer.

Thoracic oncology refers to cancer in the chest (called the thorax), including the lungs.

Cancer work-ups

A "work-up" is a test or exam to help your team understand the type of cancer you have, whether it is benign or malignant, and other information that will guide them to find the best treatment. These work-ups can also tell your team how well your treatment is working.

CT, PET and MRI scans are painless. For each, you will lie flat on a special table. The equipment will move around you.

CT scan (or "CAT" scan) takes a series of detailed pictures of your chest, abdomen, pelvis, brain and other parts of your body. Using this information, your team looks for and measures any tumors.

PET scans find tumors by using a small amount of radioactive dye, which we will inject into a vein (blood vessel). ....

Copy by AmyMAvery@outlook.com
Education Classes for national organization
Audience: General Public

For over five years, a national organization (Humana) relied on me to write dozens of classes for their members using HEDIS and STARS measures: SME interviews, research, outlines, writing and fact-checks. Materials were then distributed nationally to professional trainers.

Scope of work:

- **Full Scripts for 1- and 3-hour classes**
- **PowerPoint slide copy, in health literate, plain language**
- **Handouts**

Assignment for each included:

Interview subject matter experts.

Perform secondary research to support/confirm points and provide background material for trainer.

Write engaging, interactive lesson plans.

Write clear, compelling copy for PowerPoint slides.

Incorporate games, videos that are in the public domain, and other adult-learning tools and techniques.

Document resources for members to later access for independent learning.

Consumer and Trainer Comments:

"Class content, particularly for the recent class I taught, were on target with what the members wanted."

"Videos [which came from the public domain and so were free] were great content-wise."

"Members loved using the handouts."

"Each class discussed the latest, cutting-edge research, which members loved hearing about."

"Members liked the short activities (true-false quizzes, ranking exercise)."

Copy by Amy@AveryWrites.com
Complete rewriting of website, including process for SME reviews, design
Cancer service line, sample pages:

1. Chest and Lung Cancer Expertise & Experience

At South Nassau Communities Hospital, if you need chest surgery for cancer or other conditions of the thorax (chest), our experts can often avoid the need for traditional surgery. Our cardiothoracic surgeons are experienced in using advanced tools that offer the precision of a computer plus advantages such as a shorter hospital stay and shorter recovery. We also use video-assisted equipment with similar advantages.
Some procedures we offer include:

- Lobectomy, removal of a lobe of the lung
- Wedge resection, removal of part of the lung
- Thoracotomy (pleurotomy), or surgery involving the chest wall
- Video-assisted thoracic surgery (VATS)
- Surgery for cancer

Cancer in the chest area: Thoracic Oncology Program
Focused on the treatment of chest cancer, the skilled surgical team at South Nassau Communities Hospital has unparalleled expertise in:

- Lung cancer
- Esophageal cancer
- Mediastinal tumors, or growths in the chest, including those in the heart, related blood vessels, breathing tube (trachea) and esophagus
- Tumors of the thymus gland (thymoma)
- Tumors of the chest wall

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2. Gynecological Cancer Experts

Cancer diagnosis and treatment is a strong focus of the women's care specialists at South Nassau Communities Hospital. Our staff includes a range of dedicated physicians and surgeons with board certification in obstetrics and gynecology. These include one of the area's finest gynecologic surgeons, based at Valley Stream Cancer Center, who is among a limited number of physicians in the region who are board-certified in the sub-specialty of gynecologic oncology, or cancer of women's reproductive system.

Our comprehensive services include state-of-the-art diagnostic tests and therapies. Our team works closely with a range of cancer experts to offer advanced radiation, chemotherapy and surgery. Whenever possible, we use "laparoscopic" techniques that require only small incisions, and results in faster recovery. Our surgeons are also highly experienced in using computer-guided (or robotic) techniques that give us greater precision than possible by the human hand alone.

In all that we do, our primary goals are to quickly and efficiently evaluate each patient's needs so we can create the best treatment plan as soon as possible.

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3. The Center For Prostate Health

For men with conditions related to the prostate gland, the Center for Prostate Health offers experts who are experienced in the latest diagnosis and treatment options. We're located in the Gertrude and Louis Feil Cancer Center at Valley Stream. So you can get the advanced care you need right here in your community—near work, family and friends.

Our team includes physicians who specialize in urology, oncology (cancer), radiology and radiation oncology. We offer compassionate, expert care and can often schedule appointments quickly. Along with a team of technicians, technologists and other clinical experts, we work with each patient to identify all treatment options. Further, we focus on both care and quality, and our staff has ensured our facility is accredited by the American College of Radiology.
Treatment expertise
Not all hospitals offer every treatment option, but South Nassau offers a full range of care using the latest advances in techniques and equipment. Learn more.
Contact us: South Nassau's Center for Prostate Health (need address and one phone #)

Learn more

- Prostate cancer treatment options at South Nassau Communities Hospital
- Learn more about prostate cancer
- Our experienced team of board-certified physicians and staff
- Diagnosis and treatment for cancer
- National certifications for care and quality
- Support and education for patients and their loved ones.
- Overview of cancer care at South Nassau
- Prostate Cancer Support Group
- Gertrude and Louis Feil Cancer Center at Valley Stream

Copy by Amy@AveryWrites.com

Media Release: Health/Medical Government Trial

Appeared via Business Wire: GEN--Genetic Engineering & Biotechnology News

CapMed Joins with IBM and Leading Community Pharmacies to Provide Patients with Medication History

In a matter of weeks, a select number of people in the United States will begin experiencing healthcare of the future, a future expected to be shared by people nationwide by the end of the year. In a pilot program beginning December 1, 75 people in North Carolina and New York state will quite literally have in their hands the power to carry their personal medical information from physician to pharmacist to insurer to home, via software and hardware products developed by CapMed, a division of Bio-Imaging Technologies, Inc. (NASDAQ/MNS: BITI).

This project is part of the Nationwide Health Information Network (NHIN) initiative to empower healthcare consumers with easy access to information important to their health and wellness. CapMed has partnered with IBM to facilitate the Consumer Empowerment Use Case, which calls for providing patients with the ability to register with the internet-based network and to download their medication history into a customized Personal Health Record, or PHR.

"It's often difficult to get important medical documents quickly from one part of a hospital to another, much less from one provider to another," said Wendy Angst, General Manager of CapMed. "We've been offering solutions to this problem to leading healthcare institutions for 10 years, and are excited to partner with IBM to offer the latest generation of our product for this project."

Patients in this initial project will be volunteers from the Fishkill/Taconic region of New York and from the Research Triangle Park-area and Rockingham County, both in N.C.

This project will be a first-ever implementation in which a patient can electronically, via the internet, receive their prescription history directly from participating pharmacies. Participating patients can download medication history data directly into their CapMed PHR from SureScripts, the nation's largest provider of electronic prescribing services.

According to IBM, CapMed was chosen for this project because of its leadership in standards-based data exchange, coupled with PHR expertise garnered from a 10-year history of providing personal health records for over 600,000 people nationwide.

"IBM has a long history of selecting highly qualified partners that add significant value in our programs, said Ginny Wagner, Certified Executive Project Manager at IBM. "CapMed has demonstrated leadership with supporting the import and export of standards-based data . . . ."

"Electronic Personal Health Records have the power to transform the healthcare system, saving the valuable time of physicians and other providers, and helping patients manage their health," Angst said. "When patients cannot easily share up-to-date medical histories, it can lead to costly repetition of examinations and testing. At worst, it can lead to delayed diagnoses and even death."

For this project, CapMed will be using a combination of the HealthKey and Online Personal Health Records to enable patients to manage medications, as well as medical conditions, test results, physician and emergency contact information and related data.

"An underlying theme for the NHIN initiative is that empowered and informed consumers will be better able to manage their own healthcare," Angst said. "So we've designed a product that has been proven to be easy to use, to encourage widespread adoption within this initial trial, and ultimately to support widespread adoption and usage of health management tools."

Components of CapMed's system, which was designed specifically for the NHIN initiative, includes an internet-based software application for use on home computers as well as a USB-port key-fob that patients carry with them. As a leader in developing standards by which such information can be shared among diverse stakeholders—from clinicians to family members to payers and even schools or employers—CapMed's product gives the patient full control to authorize who has access to what information.

"The patient's active role in this initiative is key, so we have used our experience to make the software compatible not only with software used by the clinician or other providers, but also with a variety of home medical devices, such as blood glucose monitors," Angst said.

Copy by Amy@AveryWrites.com
Health System and Health Tech PowerPoint slide deck and notes for National Professional Conference: ACHE

Physicians and the Electronic Health Record
What if we build it,
and
they don't come?

HIMSS Annual Conference:
Transforming Healthcare through I.T.

Learning Objectives
or
Why are you here today?

- *Identify common barriers to implementing an electronic medical record (EMR)*
- *Identify specific barriers to physician adoption*
- *Learn how to avoid catastrophic failure*

Sentara
Healthcare:
An Overview

The EMR Today

- *Environmental Variables*
- *Organizational Variables*

8 Steps to Change Management
1. Create a sense of urgency.
2. Form a powerful guiding coalition.
3. Create a vision.
4. Communicate the vision.
5. Empower others to act.
6. Create short-term wins.
7. Consolidate improvements.
8. Institutionalize what works.

What is eCare? Sentara eCare Health Network

- *Technology*
  EPIC Systems Electronic Medical Record (EMR)
  Document Scanning & Management
  Medication Barcodes & Scanner
  Device Integration
- ***Processes***
  Planned redesign of 18 major processes
  Finding new ones that need improvement!

(design by client)

What is the business case?
Total Cost of Ownership & Benefits

Common Barriers To Adoption
(And how to get over them)

Develop a focused approach to:
1st: Implement
2nd: Stabilize
3rd: Optimize

Change Management is key

- *It's NOT about the Technology*
- *Attitude Not Aptitude*
- *Transparency*
- *Control / Influence*
- *Strong Communication*
- *Circles of Influence*
- *Be Patient*
- *Embrace the Skeptics / Manage the Disruptive*
- *There is no Perfection*

WII FM
(What's In It For Me?)

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."

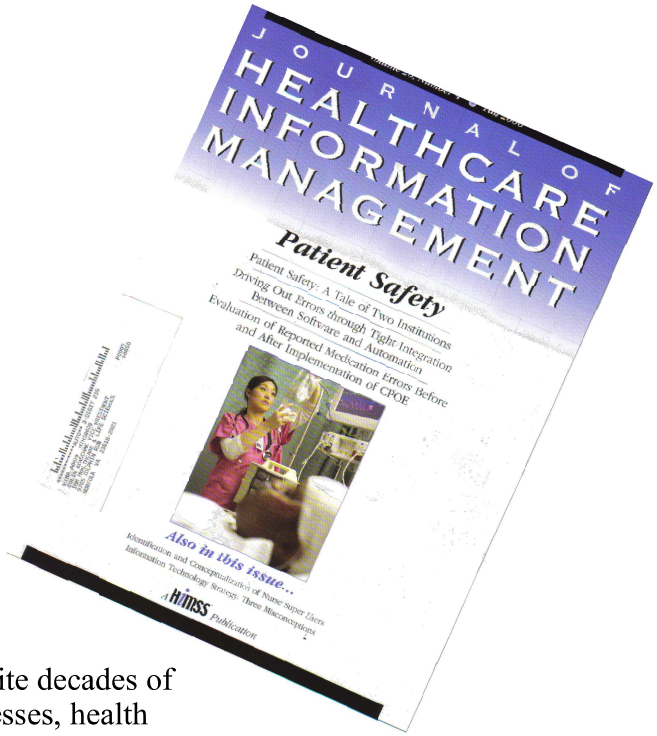
[3,000-word story]

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]

Copy by Amy@AveryWrites.com

Patient Education Piece: Lymphedema
6-8th grade reading level

Give lymphedema the treatment

If you've ever had cancer—even if it was decades ago—you might be at risk for fluid build-up and swelling of the lymph tissues. This condition is called lymphedema.

Swelling occurs most often in the arm or leg affected by cancer treatment, but it can also develop in other parts of the body.

Research studies show little success in treating lymphedema (pronounced LIM-fuh-DEE-muh) with either medications or surgery. But these studies do agree on two key points:

> First, the most effective treatment is to prevent swelling.
>
> Second, the more *you* know, the better chance you have to reduce and even prevent lymphedema.

Prevent fluid build-up

Lymph fluid flows throughout the body through lymph vessels. Cancer and cancer treatment can restrict this flow and are the most common causes of lymphedema in the U.S., according to the National Lymphedema Network.

When fluid builds up, it can cause mildly to extremely painful swelling. And once lymph tissues are stretched in this way, they swell more easily at other times.

So prevention is the best treatment for lymphedema:

- Wear loose-fitting clothes and accessories.
- Exercise regularly.
- Maintain a healthy diet and weight.
- Treat cuts and scrapes carefully.
- Prevent muscle strain.
- Elevate swollen areas immediately.

Many people work with therapists trained in treating lymphedema. Others use customized "compression" garments to help prevent swelling.

Learn as much as possible to help you enjoy the most active lifestyle you can.

Copy by Amy@AveryWrites.com
Case Study: B2B *(ghostwritten)*

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