President’s Page

As I flew up to Alexandria, VA, for our November 2013 Council meeting, I reread parts of our “Meeting Book” reports and numerous attachments. I also glanced through the airline periodical and read something that rang true about our Association.

“You are the average of the five people you spend the most time with.” That quote was followed by “Surround yourself with people who are doing interesting things, who are thinking interesting thoughts, who challenge you to be better, and who come from a diverse set of backgrounds and experiences.”

As we attend the Aerospace Medical Association’s 85th Annual Scientific Meeting in San Diego this month, I hope you agree that last statement describes part of the value of our meeting. It represents important face-to-face encounters with like-minded yet diverse individuals.

Please take the opportunity to provide feedback on your vision for our organization to your representatives (elected, selected, or appointed) on our Council. They are named on a page in your March journal which also contains the abstracts for the annual meeting. It is through these discussions and our occasional surveys where we get suggestions, ideas, etc. which really are listened to and read. Indeed, some events at the upcoming meeting are the result of comments I read in a previous survey.

I offer a last thanks to the very busy and productive Executive Committee, our Standing Committees and Constituents who have worked to produce many presentations in San Diego as well as supporting initiatives from our Council, Executive Committee, and myself. Great job! Walt Galanty and his team at AIM once again have provided essential support for our meeting to ensure its success and efficiency.

With the following description of the Space Medicine Association (SMA), we’ve seen 11 months of Constituent Organization’s write-ups which I hope helped you to decide which ones to join if you haven’t already done so. Scott Parazynski, M.D., President of the Space Medicine Association (SMA) and Mark Campbell, M.D. provided this final Aerospace Medical Association Constituent description. It seems appropriate to end these write-ups with the SMA since they represent people engaged in some truly far-reaching endeavors.

The Space Medicine Association of the Aerospace Medical Association has deep roots in the origins of the space race, and our current organization boasts a vibrant 210 engaged members involved in a wide variety of NASA, international and commercial human spaceflight programs. These members range from active flight surgeons with NASA and international partner agencies, scientific researchers involved in human physiology studies on Earth and aboard the International Space Station, physician astronauts and students with an interest in the broad field of space medicine. The Space Medicine Association now is the sponsor of three annual scholarships, three annual awards, and several space medicine panels at each annual meeting.

Following World War II, continued V-2 rocket research in the U.S. led many scientists to discuss the feasibility of human space travel. Gen. Harry Armstrong, USAF, MC, organized a symposium at Randolph AFB on November 12, 1948, entitled “Aeromedical Problems of Space Flight” that featured presentations by Hubertus Strughold, M.D., and an astrophysicist, Dr. Heinz Haber. Most professionals were highly skeptical of the subject and the presenters were considered as eccentrics for many years. This was followed up by a symposium on May 3, 1950, called the “Biological Aspects of Manned Space Flight” at the University of Chicago. Because of substantial interest, the presentations were collected and published as a book, “Space Medicine”, edited by John Marbarger, Ph.D., who became our second President.

Following its publication, a small group of members of the Aero Medical Association (AMA) decided to explore the possibilities of establishing a professional organization dedicated to space medicine. After much debate in the AMA Executive Committee the first constituent organization of the AMA was approved and the first meeting of the Space Medicine Branch was held on May 17, 1951. There were twenty founding members at this first meeting and Dr. Paul Campbell was elected as our first President.

The organization grew steadily and after the October 1957 launch of Sputnik, interest in space medicine exploded, resulting in an immediate expansion of membership, meeting attendance, presentations at the plenary sessions, and articles in the Aero Medical Association’s journal. In 1964, 1965, and 1966, Dr. Charles Berry chaired heavily attended sessions covering medical care during the Gemini Program at the Aerospace Medical Association’s annual meeting. Under Dr. Berry’s leadership as the President of the organization in 1964, the organization continued to grow and receive international recognition. Enthusiasm for space medicine and the Space Medicine Branch continued at a high level for over 15 years, but leveled off as did the U.S. space program in the 1970’s. However, membership and meeting attendance has never declined due to the continuation of the space program with the Shuttle missions, the biomedical research being carried on with the International Space Station, and now the evolution of commercial human spaceflight.

Today, the Space Medicine Association continues to focus on our express purpose of advancing the science and art of space medicine and the biological sciences, with special emphasis on the problems facing humans in the space environment. The Space Medicine Association accomplishes these goals by: stimulating investigation and study; disseminating pertinent knowledge and information; and establishing and maintaining cooperation between the biological and other sciences concerned with space medicine.

For further information, visit our website: http://www.spacemedicineassociation.org
Fraser Selected as New Federal Air Surgeon; Berry Named Deputy Federal Air Surgeon

James Fraser, M.D., M.P.H., has been selected as the new Federal Air Surgeon at the Federal Aviation Administration (FAA), Office of Aerospace Medicine, in Washington, DC. He has been serving as Deputy Federal Air Surgeon since 2006 and succeeds Fred Tilton, who retired in January. A native of Oklahoma, Dr. Fraser earned a B.A. in 1972 and a M.P.H. in 1973, and then entered the U.S. Navy Health Professions Scholarship Program. After graduating from the University of Oklahoma College of Medicine in 1977, he completed an internship in Family Practice at the Naval Regional Medical Center in Charleston, SC. Dr. Fraser served in a variety of positions in the Navy before completing training as a Naval Flight Surgeon in Pensacola, FL, and serving a residency in Aerospace Medicine at the Naval Aerospace Medical Institute in Pensacola. Following that, he became Senior Medical Officer aboard the USS Theodore Roosevelt (CVN 71) in 1991. He then became Force Medical Officer for the Commander, Naval Air Force Atlantic Fleet, in 1993. In 1997, he assumed the duties of Command Surgeon, Naval Safety Center, in Norfolk, VA. He joined the FAA in 2004 as Manager of the Medical Specialties Division, Office of Aerospace Medicine after retiring from the Navy.

Dr. Fraser is board certified by the American Board of Family Practice and in Aerospace Medicine by the American Board of Preventive Medicine. His awards include two Legion of Merit awards, two Meritorious Service Medals, a Navy Commendation Medal, and a Joint Meritorious Unit of Commendation. He is a Fellow of the Aerospace Medical Association (AsMA) and the American Academy of Family Practice. Within AsMA, he has served on the Aerospace Safety and Scientific Program Committees. He is also a Past President and Emeritus Member of the Society of U.S. Naval Flight Surgeons.

Michael Berry, M.D., M.S., has been named the new Deputy Federal Air Surgeon. Born in San Francisco, CA, he received his M.D. degree from the University of Texas Southwestern Medical School in Dallas in 1971. After a general surgery internship in the United States Air Force at Wilford Hall USAF Medical Center, Lackland AFB, TX, he took the primary course in aerospace medicine at the USAF School of Aerospace Medicine, Brooks AFB, TX. He then spent 4 years as a fighter squadron flight surgeon in Madrid, Spain, and England.

After a year as a flight surgeon at RAF Lakenheath, UK, in 1976, he entered his residency in Aerospace Medicine at Ohio State University in Columbus, OH, and received his Master’s Degree in Preventive Medicine in 1977. In 1978, he was certified by the American Board of Preventive Medicine in Aerospace Medicine. Following his residency, he became the Chief of the Flight Medicine Clinic at the NASA Johnson Space Center in Houston, TX. On leaving NASA, he entered into private practice of aerospace medicine with Preventive & Aerospace Medicine Consultants in Houston, TX. He has been a Senior Aviation Medical Examiner for the FAA since 1979 and is also an Aviation Medical Examiner for Transport Canada. In 2006, Dr. Berry accepted a Senior Executive position with the Federal Aviation Administration in Washington, D.C. where he was the Manager of the Medical Specialties Division at FAA Headquarters.

Dr. Berry is a Past President and Fellow of the Aerospace Medical Association, and a Fellow of the American College of Preventive Medicine. He is also past Vice-President of the Civil Aviation Medical Association, and a Past President of the International Academy of Aviation and Space Medicine. He is the recipient of numerous national awards, including the Air Force’s National Defense Service Medal (1971); the Special Award for outstanding contributions to the Approach and Landing Test Program (1978); AsMA’s Julian E. Ward Memorial Award (1979), the Physician’s Recognition Award of the American Medical Association (1979 and 1982); NASA Special Achievement Award (1980); the First Shuttle Flight Achievement Award (1981), and AsMA’s John A. Tamiase Award (2004). He was also a member Board Member and Trustee of the American College of Preventive Medicine and served as the Vice-Chair for Aerospace Medicine. He is a member of the Space Medicine Association, the American College of Preventive Medicine, the Society of U.S. Air Force Flight Surgeons, and the Wilderness Medical Society.

AsMA Associate Fellows Elected


In Memoriam

George R. Anderson, Col.(Ret.), USAF
By George Kenneth Anderson, M.D., M.P.H.

Retired Air Force Colonel George Raymond Anderson passed away quietly and comfortably in his home in Austin, TX, on the morning of March 28, 2014. He lived a transformational life that was characteristic of his generation. He was a Michigan farm boy who lived through the Great Depression in a family with no financial resources. World War II changed everything. He had enlisted in the Michigan National Guard before the war and had field artillery training. As a result of the wartime military education pipeline, he ended up at Yale University and eventually received his M.D. from Yale’s Medical School. He entered the Air Force Medical Corps just after it was formed in 1949. He was one of the first officers to pursue the Air Force’s Residency in Aviation Medicine and earned his M.P.H. at Harvard University. He was one of the first candidates to be examined and certified by the American Board of Preventive Medicine in Aviation Medicine.

The Anderson family lived in a variety of interesting environments. We were at Offutt AFB, NE, when General Curtis LeMay was CINC SAC, during which time my father served as SAC’s Chief of Aerospace Medicine. We moved on to Izmir, Turkey, where he commanded the Air Force’s Epidemiology Laboratory. From this operational background, he moved to USAFSC at Brooks AFB, TX. He eventually supervised the RAM program and later served as Chief of the Education Division. He retired from the Air Force in 1974 and went on to serve another phase of professional life in the Texas State Health Department.

My father was a hard working man with an impressive record of personal and professional achievement. He was firm in his established principles. While a junior officer I vividly remember a Medical Corps General Officer describing my father as the man with whom he would least like to have an argument. Few sons have more closely followed...
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AME class 2 6–14 September 2014
Basic course 24 - waiting list -
AME class 1 29 November –
Advanced course 24 7 December 2014

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Future AsMA Annual Scientific Meetings

May 10-14, 2015
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April 24-28, 2016
Harrah’s Resort, Atlantic City, NJ

April 29 - May 4, 2017
Sheraton Denver Downtown Hotel, Denver, CO

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AsMA Members Shine at Event Held at U.S. Capitol Visitor’s Center: NSBRI Exhibits Scientific, Technical, and Career Development Achievements

by Pam Day

On March 5, 2014, the National Space Biomedical Research Institute (NSBRI) held a forum to showcase the research and projects conducted by some of its many partners. The event, held at the U.S. Capitol Visitor’s Center, was introduced by AsMA member Dr. Jeffrey Sutton, who is CEO, President, and Institute Director of NSBRI. NASA administrator Gen. Charles Bolden, Jr., (who incidentally delivered the 2013 Bauer lecture at AsMA’s annual scientific meeting) was on hand as well.

The event showcased research projects that were developed for the space program but have real world applications. The health effects on long-duration space missions have led researchers to investigate ways of mitigating problems such as bone loss, muscle atrophy, cerebral edema and intraocular pressure. These issues affect astronauts in space, but they also affect those here on Earth. Elderly and bed-ridden patients experience bone loss and muscle atrophy, brain injury patients and stroke victims experience cerebral pressure problems, about 10% of the population experiences kidney stones, and who hasn’t broken a bone sometime in their life? A summary of some of the exhibits follows.

AsMA member Dr. Jon Clark, who mentored students for the Red Bull Stratos Project, said that all of the experiments and monitoring were done by students and residents. Where else can space medicine students get such practical, hands-on experience in designing and implementing experiments and research projects regarding humans in hazardous environments? He, along with other AsMA members Drs. Alex Garbinio and Sharmi Watkins, were on hand to talk about the historic free fall from space of Felix Baumgartner from 127,852 ft above the Earth (24 mi), breaking the previous world record of 102,800 ft held by Joe Kittinger for over 50 years. While there may be those who wish to go higher, the inherent dangers are exponentially greater. The main focus for these NSBRI researchers from Baylor College of Medicine, UTMB Galveston, and Harvard concern developing technologies and methodologies to address high altitude physiology, thermal protection, emergency medical planning, among other aspects of egress and survivability from high altitudes.

Medical Technologies of the Future: Scanning confocal acoustic navigation (SCAN) is an ultrasound-based technology capable of both diagnosis and treatment of bone; it can determine bone density, structure, and fractures. When used in combinations with a built-in, highly targeted low-intensity pulsed ultrasound, it is capable of accelerating bone formation thereby helping prevent bone loss as well as heal fractures in astronauts. It obviously has real world applications for the elderly on Earth. Preventing fractures will reduce healthcare costs and improve health outcomes.

Ultrasound technology was also the subject of “Novel Ultrasound Capabilities for Space and Earth” and “Advances in Kidney Stone Treatment” which focused on the use of ultrasound to visualize and move kidney stones within the kidney to facilitate natural clearing and avoid surgery. In space, a kidney stone could be life-threatening and astronauts are at higher risk due to loss of bone mineral density. Other novel ultrasound applications include blood-less surgery and tumor ablation. These two exhibits from the University of Washington hold great promise not only for astronauts, but for those suffering from kidney stones here on Earth.

“Medical Technologies for Astronauts and Neuro-Critical Care Patients” led by AsMA member Eric Bershad, M.D., of Baylor College of Medicine, explores a non-invasive and quantitative method to determine intracranial pressure (ICP) in space and on Earth that can prevent serious irreversible damage to the brain. The study stems from the discovery that astronauts serving on long-duration spaceflights are developing visual alterations and retinal pathologies that on Earth are associated with ICP. High ICP is often a problem for head trauma and stroke victims. The innovative ultrasound interrogation of the artery dedicated blood to the eye can determine ICP—the transcranial Doppler was developed in Lithuania and is being clinically validated with Baylor College of Medicine. Reduced gravity causes a fluid shift towards the head, causing the “puffy face” we often see when the astronauts are shown on TV. This may contribute to the visual changes described.

NSBRI researchers use a tilt table to simulate the fluid shift and demonstrate ICP. NSBRI represented the United States in the landmark Mars 500 project, a simulation of a mission to Mars by an international crew. Because adaptation to spaceflight is extremely variable and individualized, a personalized approach to predicting and mitigating risks is necessary. AsMA member David Dinges, Ph.D., from the University of Pennsylvania, and his team presented their findings on adaptation to spaceflight and personalized medicine. They demonstrated that there are major differences in how individuals respond to circadian misalignment and confinement for long periods and they were able to describe for the first time the hibernation tendency in humans. Ultimately they would like to develop individualized approaches to identify and predict susceptibility to the stresses of spaceflight in order to provide countermeasures.

Without the normal cues of sunrise and sunset, an astronaut’s circadian “clock” becomes impaired in space, leading to sleep disturbances and fatigue. Shift workers in factories, transportation and healthcare experience similar problems. NSBRI has developed tools to assess alertness and fitness for duty using a simple reaction time test. With a SMARTCAP smartphone app called SleepFit that can sensitively detect fatigue. A modified version was recently used in a National Highway Safety Board study in truck drivers. So the technology developed for astronauts is helping improve highway safety here on Earth.

In addition to these research projects, NSBRI is also involved in sustaining the science, technology, engineering and mathematics work-
force and in mentoring young professionals so that young scientists can participate in the scientific community of space biomedical researchers, and develop collaborations across institutions. They help transition their students and fellows into full-time employment in government, academia and industry.

*********

The National Space Biomedical Research Institute (NSBRI) is a non-profit scientific organization that is supported by and partners with NASA. It was formed in 1997. While maintaining its independence from NASA it is in the unique position to be able to fund research fellows, partner with universities, and publicize the remarkable inventions and research that are made possible by our space program and our tax dollars at work for the good of not only those venturing into space, but more importantly for those of us who remain on terra firma. They have more than 180 scientists working at 60 U.S. institutions investigating different aspects of how spaceflight affects human health and then using that knowledge to advance medical devices and research on Earth.

Their Advisory Council and Board of Directors are comprised of top experts in academic, non-profit, and private sector biomedical research and engineering, aerospace medicine, technology and business. The NSBRI User Panel involves current and former NASA astronauts, flight surgeons, and flight directors who can provide critical insight in guiding the research projects because of their unique spaceflight experiences.

The Consortium Members are: Baylor College of Medicine, Brookhaven National Laboratory, Harvard Medical School, Johns Hopkins University, MIT, Mount Sinai School of Medicine, Rice University, Texas A&M, University of Arkansas for Medical Sciences, University of Pennsylvania Health System, and University of Washington.

NSBRI has a Consolidated Research Facility (CRF) located in the Biosciences Research Collaborative at Rice University. It is the headquarters for NSBRI and site of Baylor’s Center for Space Medicine. The 16,400 square foot facility has configurable laboratories and meeting rooms that serve as a resource for visiting scientists and NSBRI investigators.

In addition to their research projects, NSBRI partners with private industry to commercialize the biomedical discoveries made for space and bring them into patient care on Earth. They also partner with NASA and leading academic institutions nationally and internationally to provide career development and outreach opportunities for students and teachers, as well as providing funding for mentorships, fellowships, resident and junior faculty research, and other career development opportunities.

For more information on NSBRI and its partners, please visit www.nsbri.org.

Ed Note: There is a great article in Current Biotechnology (2013; 2) by Dorit Donoviel and Jeffrey Sutton. “Biomedical Advances for Spaceflight Improve Healthcare on Earth.” I think every U.S. citizen should read this article for a better understanding of just how far we have come (and how far we can go) with medical technology because of the space program.

ANDERSON, from p. 592.

their father’s professional footsteps. Among other things, we were both RAMs, both supervised the RAM program, both served 30-year military careers, and both enjoyed flying as private pilots. We were professionally aligned as Fellows of the Aerospace Medical Association and the American College of Preventive Medicine. We both served on ACPM’s Board of Regents. Words cannot possibly cover the value of his lifelong leadership. My father will be dearly missed and warmly remembered.

News of Members

Roger Landry, M.D., M.P.H., released a book entitled “Live Long, Die Short: A Guide to Authentic Health and Successful Aging” in mid-January. The book is published by Greenleaf Press. Dr. Landry is an Emeritus Member of the Aerospace Medical Association (AsMA), a former President of AsMA (1999), and a Fellow of AsMA. He trained at Tufts University School of Medicine and Harvard University School of Public Health. He is retired from the U.S. Air Force, where he was a flight surgeon for over 22 years and one of his charges included Chuck Yeager. During his career in the Air Force, he was the first Director of Aerospace Medicine at the Armstrong Laboratory and later Chief of Aerospace Medicine, Consultant Division, in the Office of the U.S. Air Force Surgeon General in Washington, DC. He is also a past recipient of the George E. Schafer Award for career accomplishment in the field of aerospace medicine.

New Members

Aybey, Mehmet Deniz, Dr., Istanbul, Turkey
Bird, Christopher T., Lt. Col., USAF, Tyndall AFB, FL
Bridge, Laura Dr., Beavercreek, OH
Caflett, Steven E, M.D., Palm Desert, CA

Cooper, Christopher, LCDCR, USN, Anacortes, WA
Dawood Alaziz, Mustafa Dhater, M.B., B.S., Fairborn, OH
Dawson, Kenneth G., Dr., D.Av.Med., Solihull, United Kingdom
Ferguson, John D., Dr., Dubai, United Arab Emirates
Haddad, Philip A., M.D., Shreveport, LA
Ijomah, Nicholas, M.B., Ch.B., Cheltenham, United Kingdom
Ivy, Colin M., LTJG, USN, San Diego, CA
Katkhoda, Gopal, Jackson Heights, NY
Le, Thuy Lacy, Dr., Manhattan Beach, CA
Mylabathula, Preetesh Leo, Kettering, OH
Rodgers, Randall T., M.A., Caseville, IL
Smith, Daniel T., M.D., Luke AFB, AZ
Thakkar, Jay H., M.B., B.S., Glen Cove, NY
VanValkenburg, Kevin R., Lt. Col., USAF, Dayton, OH
Wagner Porter, Kristopher M. G., Maj., USAF, FS, Altus AFB, OK
Welsby, James M., Clemson, SC
Westrund, Maurice, M.D., Gothenburg, Sweden
Wolf, Sky J., Capt., USAF, Silver Spring, MD

INDEX TO ADVERTISERS

Aerospace Medical Association

Classified Ads ..........................593
Corporate Members ...............Cover IV
Foundation ..........................ii
Information for Authors ..........Cover III
Membership Application ...........iii
European School of Aviation Medicine ..........................593

Check out AsMA’s Award-Winning Website! www.asma.org

Meetings Calendar

May 20-22, 2014: ICAO Loss of Control In-Flight (LOCI) Symposium; Montreal, Quebec, Canada. For more information, please see www.icao.int/meetings/loci.

May 28-30, 2014: XXVII National Congress of the Italian Association of Aerospace Medicine; Siracusa, Italy. The national AIMA meeting is designed for flight surgeons, Aviation Medical Examiners (AME), flight nurses, and human factor experts working in aerospace medicine. For more information, please visit www.aimas.it.


June 18-21, 2014: Undersea & Hyperbaric Medical Society Annual Scientific Meeting; Hyatt Regency, St. Louis, MO. For more information, please see http://membership.uhms.org/event/ASM14.


November 3-5, 2014: 52nd Annual SAFE Symposium; Caribe Royale Hotel & Convention Center, Orlando, FL. Please see the Call for Papers - deadline for abstract submission is July 25, 2014. For more information, please visit http://www.safesociety.com/index.cfm?page=symposium-overview.
**NEWS OF CORPORATE MEMBERS**

**ALPA Expands Known Crewmember Program**

The Air Line Pilots Association, Int'l. (ALPA), recently announced the expansion of the Known Crewmember (KCM) program to include Jacksonville International Airport (JAX); Austin-Bergstrom International Airport (AUS) joined the program in late February. KCM is a risk-based security screening program that enables Transportation Security Administration (TSA) security officers to positively identify the presence and employment status of crewmembers. Known Crewmember makes airport checkpoint screening more efficient for all who depend on air transportation by removing airline pilots from passenger screening lines. Testing of risk-based screening for flight crews began in 2008 and was approved by the TSA for expansion in 2009. As a result of successful partnerships with Airlines for America (A4A) and the TSA, KCM has evolved into a robust nationwide program, serving over 13 million transits to date. AUS and JAX join KCM as the program’s 36th and 37th airport locations, respectively. ALPA’s goal is for all U.S. airlines to join the program and for it to be available nationwide.


**NIOSH Presents Hearing Loss Prevention Awards**

The National Institute for Occupational Safety and Health (NIOSH), in partnership with the National Hearing Conservation Association (NHCA), recently announced the winners of the 2014 Safe-in-Sound Excellence in Hearing Loss Prevention Awards™. The awards honor organizations that have demonstrated commitment and results in the prevention of noise-induced hearing loss in the work environment and beyond, and were presented at the 38th Annual NHCA Hearing Conservation Conference in March. Each year participants gather and disseminate real world examples from organizations that have demonstrated noise control, developed and adopted innovative strategies to prevent hearing loss, and created initiatives to raise awareness and provide the public with tools needed to promote hearing health to all.

This year’s recipient of the 2014 Safe-in-Sound Award for Excellence is Northrop Grumman Systems Sector, from Linthicum, MD. The Grumman Systems Corporation, Electronic Systems Sector, in Linthicum, MD. The award for innovation goes to Benjamin Kanters, founder of “HearTomorrow,” and an Associate Professor at Columbia College Chicago where he teaches “Studies in Hearing,” addressing hearing physiology, disorders, and conservation. To view the award recipient presentations, please visit http://www.safesound.us/winners.html.

—For more information on this, please see http://www.cdc.gov/niosh/updates/apd-03-13-14.html.

**Piedmont Honored with Quality Achievement Award**

Piedmont Fayette Hospital has received the Get With The Guidelines®-Stroke Silver-Plus Quality Achievement Award for implementing specific quality improvement measures outlined by the American Heart Association/American Stroke Association for the treatment of stroke patients. Piedmont Fayette earned the award by meeting specific quality achievement measures for the rapid diagnosis and treatment of stroke patients at a set level for a designated period. These measures include aggressive use of medications and risk-reduction therapies aimed at reducing death and disability from stroke. Studies have shown hospitals that consistently follow Get With The Guidelines quality improvement measures can reduce patients’ length of stays and 30-day readmission rates.


**ETC Awarded UAE Air Force Contract**

One of Environmental Tectonics Corporation’s (ETC’s) divisions, Aircrew Training Systems, recently announced the signing of a contract with the United Arab Emirates Air Force (UAEEAF) for the procurement of its state-of-the-art Pilot Selection System (PSS). The PSS will help the UAEEAF to select the most qualified pilot candidates to continue on to flight training school and will be installed at Khalifa bin Zayed Air College in Al Ain, UAE, next spring. ETC’s PSS is an integrated testing program used to determine whether candidates have the required aptitude for becoming a pilot. It evaluates potential aircrнев by using extensive cognitive and psychomotor testing. ETC has been supplying the UAE Airmen PSS for training equipment for nearly three decades since it first commissioned their Aerospace Medical Training Center in Abu Dhabi in 1986.


**HeartSine Employee Appointed to RQA Committee**

HeartSine’s Good Laboratory Practice/Good Clinical Practice Specialist, has been appointed to the medical devices committee of the Research Quality Association (RQA). The RQA, an association for professionals working in research in pharmaceuticals, agrochemicals, chemicals and medical devices, drives quality and integrity in scientific research and development by developing and promoting quality standards in scientific research and development, facilitating knowledge sharing and transfer, and liaising with regulatory agencies in the development and interpretation of regulations and guidance. The Medical Devices Committee of the RQA seeks to support the association’s strategy, to provide a forum for discussion and clarification of medical device issues, to assist the association to play an active role in any consultative process related to medical device matters, and to promote effective liaison and provide informed opinion to regulatory bodies on medical device matters. The Good Laboratory Practice/Good Clinical Practice Specialist ensures the company complies with the requirements of the Good Laboratory Practice and Good Clinical Practice regulations when conducting pre-clinical or clinical studies.


**Mayo Clinic Screening Tool Shows Unprecedented Screening Rates**

Mayo Clinic recently announced the results of a clinical trial of Cologuard, a noninvasive sDNA test for the early detection of colorectal precancer and cancer co-developed by Mayo Clinic and Exact Sciences, showed unprecedented rates of precancer and cancer detection similar to those reported for colonoscopy. The Cologuard test is based on a stool sample that is analyzed for DNA signatures of precancer or cancer. The clinical trial, called the DeeP-C study, included 10,000 patients and was designed to determine how well Cologuard detects precancer and cancer. The study also compared Cologuard to the fecal immunochemical test for occult blood (FIT). The study was conducted at 90 medical centers throughout the United States and Canada. The results were published in the March 20 issue of the New England Journal of Medicine (NEJM). In the study, all patients received Cologuard, FIT, and colonoscopy. Colonoscopy was the reference method. Findings reported in the study included: sensitivity of Cologuard for cancer was 92% overall, and 94% for the earliest and most curable cancer stages; sensitivity was 69% for precancerous polyps at greatest risk to progress to cancer; and Cologuard detected significantly more cancers and significantly more precancerous polyps than did FIT.

—To read more, please see http://newsnetwork.mayoclinic.org/blogtag/news-release/.

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For info on becoming a Corporate Member, call Gloria Carter at (703)739-2240, ext. 106, gcarter@asma.org; or Dr. Yvette DeBois underserave@surbest.net

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