In the aftermath of Hurricane Katrina and the evacuation for Hurricane Rita, communities across West Texas were called on to assist evacuees who were affected by these devastating storms.

In Amarillo:
TTUHSC School of Medicine doctors helped to staff the medical clinic at the Amarillo Civic Center-based shelter. The Department of Pediatrics provided most of the medical care for children, and the School of Pharmacy set up an on-site pharmacy. Amarillo received approximately 200 Katrina evacuees.

In El Paso:
TTUHSC doctors provided medical care to evacuees and the TTUHSC Ophthalmology Clinic provided checkups and lenses to those who lost their glasses in the evacuation.

In Lubbock:
Lubbock received approximately 500 people from Katrina, who were cared for in local shelters for 12 days. A couple of weeks later, some 900 people with special needs came to Lubbock for care and shelter. In addition, nursing home residents from the affected region found temporary homes in nursing facilities, even in small towns like Hale Center.

In both efforts, Texas Tech University Health Sciences Center worked with the local Health Department, the City of Lubbock, Covenant Health System, the Community Health Center of Lubbock, and Walgreen’s to provide for the health care needs of the evacuees.

“It was a massive logistical effort to set up a triage center and primary health care clinic that could handle the rapid influx of hundreds of people with special health care needs,” says Suzanne Wills-Sirmons, administrator of the TTUHSC Department of Family Medicine.

All of the Katrina victims, most of whom had spent days exposed to contaminated water and without medications, received medical care, where physicians assessed their health status and worked with them to get their medications restarted. For many, this was a challenge because of the patient’s inability to give complete information about their medication needs and the unavailability of patient records.

“Rita evacuees arrived prior to the storm’s landfall, so we had more complete information about each person’s health care needs,” adds Wills-Sirmons. “Many of the people that Lubbock took in were people from assisted living facilities, and people who had complex diseases like cancer and renal failure, who needed...
A Word from Texas Tech

By Patti Patterson, MD, MPH
Vice President of Rural and Community Health

Childhood Obesity: What’s a parent to do?

The rate of childhood obesity for children ages 6-11 years has more than tripled in the past three decades in the United States. While there are numerous factors that may be contributing to this epidemic, it always comes down to the fact that obesity occurs when more calories are taken in than are used.

There are numerous factors in our society, which are contributing to this epidemic, including ready availability of high-calorie, low-nutrition fast foods and the fact that children are spending more time in front of screens. Research studies have shown a clear link between the amount of time children spend watching television and obesity rates. Use of computers, video games, along with television viewing often occupies a large percentage of children’s leisure time; thus influencing their levels of physical activity. National data show that children that watch four or more hours of television per day have higher weights for height (body mass index) and body fatness than children who watched fewer than two hours per day. Having a television in a child’s bedroom is also a strong predictor of being overweight even among preschool aged children.

There are several different ways that excessive television viewing can contribute to obesity in children. First, it can take the place of more activities which require more physical exertion. Second, children tend to eat high-calorie foods while they watch television and thirdly, children are exposed to numerous commercials advertising high-calorie foods.

A big step in prevention of obesity in your child may be turning off the TV. The American Academy of Pediatrics recommends that parents limit children’s total media time to no more than one or two hours of quality programming per day. They also recommend removing televisions from children’s bedrooms.

Taking steps now to improve your child’s health will yield a lifetime of healthful habits.

HealthMATCH connects communities and providers

Finding a physician to meet the needs of your community can be like finding a needle in a haystack. Just ask Wally Boyd, the administrator for Ochiltree General Hospital in Perryton, Texas. He had tried several times to recruit a family practice physician who also wanted to provide OB/Gyn services.

Perryton has two doctors that deliver babies, but one has wanted to slow down so that he could spend more time with his own children as they were going through school.

Perryton has the only hospital in the northeast corner of the Texas Panhandle that offers baby delivery. The hospital, with its 8-bassinet nursery and two delivery suites, has almost 200 baby deliveries each year. Without that facility, residents from that region have to drive at least 55 miles to the next nearest hospital in Texas that delivers babies.

“While many rural communities have had to discontinue obstetric care, we’ve felt that it is very important to our service to Perryton and the area to continue to provide that care. If mothers receive prenatal care, then you are less likely to have problems when the baby is born,” says Boyd.

After unsuccessful recruiting attempts, Boyd heard about an event hosted by the Panhandle Area Health Education Center (AHEC) at the Texas Tech University Health Sciences Center campus in Amarillo. The event, called HealthMATCH, offered rural communities the opportunity to meet primary care medical residents who are interested in rural practice.

At HealthMATCH-Amarillo in January 2005, Boyd met Dr. Jenny McGaughy, a family practice resident who was seeking a practice opportunity that allowed her to practice OB/Gyn.

The community presentation piqued her interest, and after several conversations and visits to the community, the doctor had found her place. McGaughy is now completing a fellowship in Obstetrics, with an emphasis in high-risk and operative Obstetrics, to better prepare for rural practice. She will begin working in Perryton in September 2006.

“Without HealthMATCH, I would still be looking for a physician,” says Boyd. “I found a quality physician who understands rural practice, and I can offer her a practice opportunity that is much broader in scope than anything an urban area offers.”

“I’ve always wanted to be a small-town doctor,” says McGaughy, who grew up in Boyd, Texas, the daughter of a rural family physician. “Actually, I probably should have run from it; I can remember that there were times when my dad was rarely home. But there is a continuity to rural practice—taking care of people and their children and their parents. You can be very involved in the community, caring for families and watching them grow. That was exactly what I wanted.”

The community of Eastland, Texas, is also seeking two physicians—both family practice, with one including OB in his or her practice. Community and hospital representatives are currently in conversation with a resident physician they met at the HealthMATCH event held in Odessa in September.

“We recruited a doctor at HealthFIND, the state rural recruiting event, three years ago,” says Dana McKelvain, RN, from Eastland Memorial Hospital. “We had to wait two years while he completed his training, but he was the right person for our community. It’s been a great fit. Events like HealthMATCH and HealthFIND are excellent opportunities for communities to interact with professionals seeking rural practice.”

HealthMATCH is an event, hosted annually on each campus of the Texas Tech University Health Sciences Center. The next event is scheduled for November 2 on the Lubbock campus. For more information, call Jessica Patton with the AHEC of the Plains at (806) 291-0101.
The Texas Tech University Health Sciences Center Office of Rural and Community Health has awarded the Rural Health Education Scholarship to 17 new recipients for academic year 2005-2006, bringing the number of Rural Scholars for this year to 60.

This year’s new recipients are:

<table>
<thead>
<tr>
<th>Student</th>
<th>Major</th>
<th>Home Community</th>
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</thead>
<tbody>
<tr>
<td>Tracy Allen</td>
<td>nursing</td>
<td>Liberty</td>
</tr>
<tr>
<td>Tanya Bailey</td>
<td>pharmacy</td>
<td>Del Rio</td>
</tr>
<tr>
<td>Kathleen Caskey</td>
<td>physician assistant</td>
<td>Cuero</td>
</tr>
<tr>
<td>Jessica Caswell</td>
<td>pre-medicine</td>
<td>Cotton Center</td>
</tr>
<tr>
<td>Shaunda Eady</td>
<td>speech-language pathology</td>
<td>Plains</td>
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<tr>
<td>Brenda Fields</td>
<td>audiology</td>
<td>Pampa</td>
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<tr>
<td>Brant Guthrie</td>
<td>pre-pharmacy</td>
<td>Post</td>
</tr>
<tr>
<td>Jenna Hensley</td>
<td>pharmacy</td>
<td>Santa Anna</td>
</tr>
<tr>
<td>Sarah Kidd</td>
<td>pre-physical therapy</td>
<td>Midlothian</td>
</tr>
<tr>
<td>Michele Lord</td>
<td>pharmacy</td>
<td>Fredericksburg</td>
</tr>
<tr>
<td>Jennifer Montoya</td>
<td>pharmacy</td>
<td>Granbury</td>
</tr>
<tr>
<td>Karen Nunez-Wallace</td>
<td>medicine</td>
<td>Houston</td>
</tr>
<tr>
<td>Alexia Rendon</td>
<td>pharmacy</td>
<td>Lubbock</td>
</tr>
<tr>
<td>Chelsea Slayton</td>
<td>nursing</td>
<td>Coleman</td>
</tr>
<tr>
<td>Katherine Toon</td>
<td>pre-occupational therapy</td>
<td>Granbury</td>
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<tr>
<td>Rebecca Warren</td>
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<td>Floydada</td>
</tr>
<tr>
<td>Morgan Wright</td>
<td>pre-physical therapy</td>
<td>Graham</td>
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In addition, three of the undergraduate Rural Health Education Scholars have been accepted to the Health Sciences Center and have begun their professional training. These students include:

<table>
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<tbody>
<tr>
<td>Lisa Edwards</td>
<td>physical therapy</td>
<td>Sudan</td>
</tr>
<tr>
<td>Julie Schandua</td>
<td>physical therapy</td>
<td>Fredericksburg</td>
</tr>
<tr>
<td>Amy Tippy, BSN</td>
<td>physician assistant</td>
<td>Welch</td>
</tr>
</tbody>
</table>

The Rural Health Education Scholarship is available to undergraduate students at Texas Tech University and students at Texas Tech University Health Sciences Center. Priority is given to students from rural Texas communities.

Scholarship recipients are required to complete community service hours each semester, as well as participate in rural-focused activities, including a 40-hour rural rotation. The purpose for these activities is to help foster students’ development as rural health professionals.

The Office provides approximately $150,000 annually in scholarship funds to students who are completing health professions education and who demonstrate a commitment to returning to a rural community to practice.

For more information about the Rural Health Education Scholarship, go to www.ttuhsc.edu/ruralhealth.

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**Focus On**

**Community Health**

Santa Anna, Texas, is a small community with approximately 1,000 people. Even with a small population, the community continues to make the most of its health care resources, including hosting health professions students for part of their training.

Located in Coleman County, Santa Anna’s economy is primarily driven by ranching and hunting. Santa Anna has generally always had some sort of local health care service off and on—even a hospital, although it closed many years ago.

When Peggy Hensley opened her nurse practitioner-owned clinic in 1994, the town had been without local health care access for a while. Hensley has sustained health care service in the community since that time. She had worked for several years as a nurse in the Emergency Room and Intensive Care units in Newport News, VA, Brunswick, ME, and Brownwood, TX, before she and her husband moved back to Santa Anna, her husband’s hometown, in 1988. After returning, she decided to pursue her master’s degree as a family nurse practitioner at University of Texas at Arlington—and then proceeded to open her own clinic, providing much needed access to care.

This summer, Hensley has expanded her role as a health care provider to include serving as a preceptor with the Big Country Area Health Education Center for health professions students seeking rural-based clinic rotations. Her first student, Ann Manners, attends the Patty Hanks School of Nursing in Abilene, where she is completing a master’s degree in the Family Nurse Practitioner program, after a dozen years working as a nurse in an ICU in San Antonio and Abilene. Manners says that she has enjoyed her experience in Santa Anna, which has been her first taste of rural life. “The community has such a closeness that I’ve never experienced before,” she says. “I really have appreciated the time that I can spend with each patient, the time spent teaching—the fact that patients can just walk into the clinic when they need to.”

Manners adds that she has also learned a lot from the experience. “There has been a lot of diversity in the types of patients and health care needs that she has seen in the rural clinic, compared to specialty-focused care in an urban setting. I’m thinking about a career in a rural community.”
Telemedicine in Neighboring New Mexico Enhances Rural Access to Care

While the Texas Tech telemedicine program is one of the leaders in the country, the neighboring State of New Mexico also boasts one of the top programs.

The University of New Mexico Health Sciences Center began their TeleHealth program ten years ago with a state allocation from the legislature to develop a strategic plan for implementing telehealth to help meet the state’s health and education needs. Like West Texas, much of New Mexico is rural and communities face limitations in health care access.

In fact, UNM Health Sciences Center came to Texas Tech to learn how telemedicine was utilized in West Texas and take back with them features that

Hurricane Relief Efforts continued from page 1

continuous advanced treatment.”

In addition to physician care and pharmacy services that were provided to evacuees, students from the TTUHSC School of Nursing provided round-the-clock staffing to provide care to the Katrina victims while they were housed in the shelter. Students from the Covenant School of Nursing and South Plains College Nursing Program staffed the health clinic for the Rita relief effort.

“The volunteer efforts by TTUHSC and West Texas communities for both Katrina and Rita were extraordinary,” says Patti Patterson, vice president of Rural and Community Health at TTUHSC. “The community really came together to care for our neighbors.”

In the aftermath of the storm and relief efforts, approximately 270 Hurricane Katrina survivors have decided to make Lubbock their home. Most Rita evacuees have already returned to their home communities.

For more information about Texas Tech’s role in providing aid, go to www.texastech.edu/katrina/.
Updates to HOT Jobs Enhances Resource for High School and College Students

High school health science technology teachers and guidance counselors will soon have a new health careers tool to use with students interested in health careers. The newly updated HOT Jobs: A Cool Guide to Health Careers in Texas will be available in October.

The 130-page publication promotes health careers, providing information on job outlook, salary, years of education required, work environment and opportunities for advancement in each profession.

“The purpose for the HOT Jobs book is to give young people the tools they need for making career decisions,” says Melissa Hare, practice entry and support coordinatory with the Brazos AHEC. “Often, students don’t know all the options that exist in health careers. The HOT Jobs book gives them information on over 80 different career opportunities.”

In addition to the book, HOT Jobs offers an updated interactive website, www.texashotjobs.org, where users can take a career interest inventory to see what health careers may be a good fit for them, as well as search for careers based on their own goals for educational attainment, interests and salary. The website also allows the user to look for colleges based on the degree programs offered and their geographic location.

“The HOT Jobs book and website are an excellent resource for high school teachers, guidance counselors—and even high school and college students—to learn more about health careers and what the requirements are to pursue specific careers,” says Renee Tonquest, HSTE Curriculum Coordinator, University of North Texas. “It’s important for young people to understand that there are many options, with education requirements ranging from one year to eleven years, depending on the profession.”

The third edition of HOT Jobs has built on the information available in the previous two versions to expand the product’s usefulness as a career research tool. The HOT Jobs offering is the result of a year-long process of research, editing, and concept development by a state-wide workgroup of educators and health careers promotion professionals.

Organizations that support HOT Jobs development include
- West Texas Area Health Education Center Program
- East Texas Area Health Education Center Program
- Texas Tech University Health Sciences Center Office of Border Health
- Texas State Office of Rural Community Affairs
- Texas Higher Education Coordinating Board
- Center for South Texas Programs
- Texas Education Agency

The books are primarily distributed for use in high schools across the state. For more information, contact your local Area Health Education Center (AHEC).
Three hospitals achieved the Texas Nurse-Friendly Hospital designation from the Texas Nurses Association in September, following a vigorous review process into the hospital’s performance along the program’s twelve nurse-friendly criteria. The hospitals are Woodland Heights Medical Center, Lufkin; Harris Methodist Erath County Hospital, Stephenville; and Memorial Hermann Fort Bend Hospital, Missouri City.

The Texas Nurse Friendly Program for Rural/Small Hospitals is designed to enhance patient care and the retention of nurses. “The purpose of the Nurse-Friendly process and designation is to improve the quality of health care and the health care workplace for rural communities,” says Mary Wainwright, deputy director of the East Texas AHEC and Nurse-Friendly project director.

There are 30 rural/small hospitals (with fewer than 100 beds) across the state participating in this program, which is supported by a five-year, $1.2 million grant from the U.S. Health Resources and Services Administration grant. Client hospitals are participating in the no-cost consultation provided by the grant program and are at varying stages of the implementation process.

Four of the participating hospitals are located in West Texas: Covenant Hospital Levelland, Golden Plains Community Hospital (Borger), Iraan General Hospital, and Moore County Hospital District (Dumas).

Through the process, hospitals collect data to measure their performance in the twelve criteria, which includes

1. Control of Nursing Practice
2. Safety of the Work Environment
3. Systems Exist to Address Patient Care Concerns
4. Nurse Orientation
5. Chief Nursing Officer
6. Professional Development
7. Competitive Wages
8. Nurse Recognition
9. Balanced Lifestyle
10. Zero Tolerance Policy for Nurse Abuse
11. Middle Management Accountability
12. Quality Initiatives

Nurse satisfaction, nurse vacancy rates, and nurse retention/turnover rates are evaluated. In addition, quality of care indicators are measured, including nursing care hours; skill mix; and the prevalence of pressure ulcers, patient falls, pneumonia (hospital acquired) and urinary tract infection.

“We are very close to completing our application for designation,” says Melody Henderson, chief operating officer at Golden Plains Community Hospital. “We were already working on a performance excellence program and found that the Nurse Friendly program focused our efforts on factors that really could improve our nurse recruitment and retention.

“The thing that has been impacted the most by this process is the relationships between the nurses and physicians. It has really enhanced joint appreciation for each other.”

She adds that the process is time consuming, but that the results are worth it.

While the opportunity to participate in the initial grant program has passed, hospitals can seek Nurse-Friendly designation independently through the Texas Nurses Association. The Area Health Education Center (AHEC) programs for East Texas, South Texas, and West Texas are available to provide guidance and assistance to small/rural hospitals wanting to go through the process.

Project partners include West Texas AHEC of Texas Tech Health Science Center, South Texas AHEC of the University of Texas Health Science Center San Antonio, East Texas AHEC of the University of Texas Medical Branch and the Texas Nurses Association.

For more information about Texas Nurse-Friendly designation, go to www.texasnurses.org.
The Concho Valley Partnership for Development of the Health Care Workforce, operating under a $419,163 Wagner Peyser 7(b) grant provided by Texas Workforce Commission funds, has been hard at work trying to address the health care professional shortage in the 13 counties of the Concho Valley.

Through its evaluation of the region’s health care labor market, completed in early 2003, the Partnership identified that there was a need to fill 200 nursing positions annually over the next three to five years. “These open positions are the result of nurses aging out and retirements; lagging entry-level numbers; turnover; more nurses working less than 32 hours a week, and the lack of women entering the once traditional occupation” says Mary Kay Kuss, director of Planning and Resource Development. “In addition, local labor market projections indicate a 31.8% growth rate for RN positions in the Concho Valley through the year 2010, and a 9.1% growth rate for LVN positions during the same time period.”

With this information in hand, the Partnership recognized the need for and developed a comprehensive strategy to address the shortage by helping area nursing education programs expand their capacity and providing financial aid for students seeking entry into nursing education.

With the help of the Partnership, Howard College was able to increase its nursing student enrollment by ten positions and Angelo State University was able to expand its program by X student positions—which has enhanced the accessibility of education and training programs throughout the Concho Valley. In addition, 137 nursing students in RN, LVN, CNA, and re-entry programs have received scholarship or other financial assistance for their education.

The Partnership also provided 147 students the opportunity to participate in summer job shadowing experiences within the health care industry.

Other outcomes of the Partnership efforts include:

• Increasing the number of individuals entering nursing professions,
• Increasing services to industry sector employers, and
• Increasing awareness of nursing professionals’ positive contributions to the health care industry and the community.

Johnny Griffin, executive director of Concho Valley Workforce Development Board, is pleased the Board was able to secure these funds for the Partnership to make this concentrated effort possible. “We face no greater challenge than to secure an adequate health care work force both now and in the future,” he believes.

“The Partnership has brought together many of the key education, health care industry, and community business leaders in a way that maximizes the contributions of each to address the health care work force issue. No one sector of the partnership could have accomplished this capacity building alone,” adds Jim Fitch, director of the Permian Basin Area Health Education Center.

The Partnership, which began in January 2002, now has 23 member organizations.

Members of the Partnership include Angelo State University, Baptist Memorials Center, Concho Valley Workforce Development Board, Hospice of San Angelo, Howard College, La Esperanza Clinic, MHMR of the Concho Valley, River Crest Hospital, San Angelo Chamber of Commerce, San Angelo Community Medical Center, San Angelo Independent School District, San Angelo State School, SCCI Hospital of San Angelo, Shannon Health System, Education Service Center – Region XV, West Texas Rehabilitation Center, Hill Country Memorial Hospital, Kimble Hospital, Heart of Texas Memorial Hospital, Reagan Hospital District, Lillian M. Hudspeth Memorial Hospital, Schleicher Country Medical Center, Concho County Hospital, and Permian Basin Area Health Education Center.
It’s Allergy Season!

More than 50 million Americans suffer from allergic diseases, according to the National Institutes of Health.

The runny nose, itchy eyes, pressure and even headache that comes when you come into contact with an irritant, or allergen, that sets you down the road to misery. And words like dust mites, mold, ragweed, and pollen send you running for cover.

How do you know if what you have is a common cold or sinusitis, which is an infection or inflammation of the sinuses? You generally can’t tell until the cold remedies, which you’ve taken for several days, aren’t working and you decide that it must be more than a cold.

Sinuses are hollow air spaces in the human body. If a person talks about their sinuses, they are generally referring to one or more of four pairs of air spaces (cavities) that have an opening into the nose. Anything that causes swelling in the nose, like an infection or allergic reaction, can affect the sinuses.

If you struggle with airborne allergies there are several things that you can do to minimize your exposure.

For dust mites, which are microscopic creatures that live on bedding, upholstered furniture and carpet, and feed on flakes of skin:

- Use a dehumidifier or air conditioner to maintain humidity in your home at 50% or below.
- Encase your mattress and pillows in dustproof covers and wash all bedding and blankets once a week in hot water.
- If possible, replace carpets in bedrooms with hard floors and remove upholstered furniture.
- Use a damp mop or rag to get rid of dust. For allergies to grasses, ragweed, and other pollens:
  - Keep grass cut short—and have someone else mow the lawn if possible. If you mow the lawn yourself, wear a mask.
  - Avoid being outdoors between 5-10 am.
  - Keep windows in your home or car closed.
  - Dry clothes in an automatic clothes dryer.

These preventive measures were taken from the National Institute of Environmental Health Sciences. For more information, visit their website at http://www.niehs.nih.gov/airborne/prevent/prevent.html.

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Location</th>
<th>Contact Information</th>
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</thead>
<tbody>
<tr>
<td>Aug 9, 16, 23</td>
<td>Weapons of Mass Destruction (for EMS)</td>
<td>Cisco, TX (9); Abilene, TX (16, 23)</td>
<td>Contact: Mike Nall, (325) 972-0432</td>
</tr>
<tr>
<td>Aug 12, 19, 26</td>
<td>Rapid Interpretation of EKG</td>
<td>Muleshoe, TX (Participants can attend 1 or all 3 days)</td>
<td>Contact: Jessica Patton, (806) 291-0101</td>
</tr>
<tr>
<td>Aug 12</td>
<td>Stress Management</td>
<td>San Angelo, TX</td>
<td>Contact: Pam Garrett, (432) 685-8306</td>
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<td>Aug 15</td>
<td>Geriatric Assessment</td>
<td>Abilene, TX</td>
<td>Contact: Mike Nall, (325) 972-0432</td>
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<td>Aug 19</td>
<td>Cardiac Dysrhythmias</td>
<td>Dumas, TX</td>
<td>Contact: Jean Haynes, (806) 212-6180</td>
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<tr>
<td>Aug 26</td>
<td>Bioterrorism</td>
<td>San Angelo, TX</td>
<td>Contact: Pam Garrett, (432) 685-8306</td>
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<td>Aug 30-31</td>
<td>Trauma Nurse Core Curriculum</td>
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<td>Contact: Jessica Patton, (806) 291-0101</td>
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<td>Sept 8</td>
<td>HealthMATCH Midland-Odessa</td>
<td>Midland-Odessa, TX</td>
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<td>Sept 16</td>
<td>Supervisor Workshop 1</td>
<td>San Angelo, TX</td>
<td>Contact: Pam Garrett, (432) 685-8306</td>
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<td>Sept 17</td>
<td>Statewide HealthFIND</td>
<td>Austin, TX</td>
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<td>Cancer Update Conference</td>
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<td>Critical Thinking Skills</td>
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<td>Oct 6-7</td>
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