

SHEA Newsletter

Edited by Robert A. Weinstein, MD

*The
Society
of Hospital
Epidemiologists
of America*

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Councilor **Peter N.R. Heseltine, MD**, Los Angeles, California

SHEA Board Meeting

The SHEA board met on October 23, 1988. Timothy Townsend, MD, secretary, reported that 59 new members have joined SHEA since January 1, 1988, bringing our membership to approximately 500. He also reported the recent election results: C. Glen Mayhall, MD, vice-president; Bruce Hamory, MD, treasurer; and Jeffrey Band, MD and Dennis Schaberg, MD, councillors.

John Burke, MD, treasurer, reported that our income, primarily \$23,000 in dues, has exceeded our expenses and that the Society financial balance is \$57,000. He noted that our net worth has been stable for the past two to three years, despite a marked decrease in pharmaceutical company support.

Richard Garibaldi, MD, president, reflected on the accomplishments of 1988, which include an increase in membership; the SHEA/CDC training course (see November *Newsletter*) for fellows and new chairs of infection control committees (which despite being held in August in Atlanta was well attended and quite oversubscribed); plans for a second annual SHEA/CDC course which will be co-directed by Allen Kaiser, MD and Donald Goldmann, MD and will immediately precede the CDC's April 1989 Epidemic Intelligence Service Conference; the formal association of SHEA with the journal, *Infection Con-*

trol and Hospital Epidemiology; and an outreach to infectious disease fellows that included the training course and specific mailings to encourage fellows to become associate members of SHEA.

Dr. Garibaldi stated that plans were well underway for the March 1989 SHEA national conference, "New Challenges and Controversies" (see November *Newsletter* and the program in the center of this issue). SHEA members are urged to submit abstracts for the poster sessions of this meeting.

Dr. Garibaldi further noted that the Severity of Illness Working Group published its findings in the journal (see July issue) and that the SHEA/APIC task force is currently reviewing

the issue of the HIV-infected health care worker (see below).

Finally, Dr. Garibaldi reviewed the deliberations of the SHEA presidents' strategic planning session (see summary below).

Strategic Long-Term Planning

In early October, Dr. Garibaldi convened a meeting of past SHEA presidents and the president-elect to formulate long-term plans.

The group agreed to make the SHEA/CDC training course (see above) an annual event. This offering will be directed by a subcommittee of the Educational Activities Committee.

Please send me an application form and information about membership in The Society of Hospital Epidemiologists of America (SHEA). (Eligibility for membership requires a doctoral degree and either activity in hospital epidemiology or current participation in a training program in this field.)

My address is:
(Please print) _____

Mail this request to Timothy R. Townsend, MD, SHEA Secretary, Brady 119, Johns Hopkins Hospital, 600 N. Wolfe St., Baltimore, MD 21205.

SHEA members wishing to participate in planning or presenting this course should contact committee chairman, Donald Goldmann, MD. The group also noted that the Educational Activities Committee was anxious to help cosponsor regional educational conferences and that interested SHEA members should contact Dr. Goldmann.

The presidents' group reviewed the plans for the March 1989 SHEA/IC&HE national meeting and discussed the importance of broad membership participation and of encouraging SHEA members to submit abstracts for the poster sessions.

The group stressed that our liaison activities with a variety of other organizations need strengthening. Walter Hierholzer, Jr., MD, president-elect, will be recharging the liaisons and requesting that they make periodic formal reports to the membership through the *Newsletter*.

The group also thought that position papers on topics important to SHEA members need to be developed. The first will discuss the issue of the HIV-infected health care worker (see below).

Baltimore

Baltimore? March? It will be outstanding! SHEA and IC&HE are co-sponsoring a conference entitled, "Hospital Epidemiology: New Challenges and Controversies." It is SHEA's first venture into the national meeting scene and should be a terrific

offering. The presenters and discussants include many of our members and well-known experts on topics to be discussed (not mutually exclusive). However, in order for us to have a successful meeting, we need your help. We need you to come, attend the sessions, and join the discussion: you may consider presenting a poster if you want to participate more actively. An abstract form for the poster session appears on p. 528 of the journal. For additional registration information, please write to: Hospital Epidemiology: New Challenges and Controversies, 6900 Grove Road, Thorofare, New Jersey 08086-9447.

AIDS Task Force Position Paper

The SHEA/APIC AIDS Task Force has met three times this year. In addition, a working group met with the American Hospital Association (AHA) last month to discuss the problem of HIV-infected health care workers and is preparing a position paper on this issue. SHEA members who have developed hospital policies and procedures regarding HIV-infected health care workers or who have specific views that they would like to convey to the working group are exhorted to submit these to the current task force cochair, Timothy Townsend, MD, as soon as possible. (After January 1, the SHEA cochair of this task force will be Peter N.R. Heseltine, MD).

Liaison Report— Association for Practitioners in Infection Control (APIC)

Elizabeth Bolyard, 1988 APIC president, reported that APIC now has about 7,900 members. Among current APIC activities are a study of the reliability of surveillance data; a survey on the reuse of disposables, with the aim of producing guidelines; and the joint AIDS task force, which is surveying APIC members about use of universal precautions.

Ms. Bolyard said that an APIC draft guideline on disinfection will appear in the *American Journal of Infection Control* in December. She hoped that SHEA members would review this draft and provide comments.

Ms. Bolyard noted that approximately 20% of APIC members are certified infection control practitioners but that only 200 have participated in the recent recertification examination. She suggested that hospitals consider reimbursing infection control clinicians for the expense of the recertification examination.

Brief items of interest for the SHEA Newsletter may be sent to Robert A. Weinstein, MD, SHEA Newsletter Editor, Division of Infectious Diseases, Michael Reese Hospital, Lake Shore Drive at 31st St., Chicago, IL 60616. Copy must be typed, double-spaced, and may not exceed five pages.