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Campus Update

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*Boston University*



**Boston University Medical Campus**

# Campus UPDATE

March 1991 Vol. 3 No. 3

## Native Latvian finds niche at the SPH

The road to Boston, let alone to Boston University School of Public Health (SPH), was a tumultuous and challenging one for SPH administrator Dzidra Knecht. The native-born Latvian survived the subjugation of her homeland to Soviet communism under Stalin in 1940, and the horrors of the German Nazi invasion during World War II. She overcame the strain of immigration to a new land, the United States, in 1950, and has lived as far north as Buffalo, N.Y., and as far west as New Mexico. Now, seated self-assuredly behind her desk in a sunny office on the fourth floor of the SPH, she is testimony to the strength of the human spirit. Knecht emanates a serene strength and warmth. A broad smile plays across her face.

Knecht becomes animated when she talks

**Knecht**

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**Dzidra Knecht, assistant director for administration at the SPH, said she loves the School's stimulating environment.**

## Medical Center safety manuals aim to educate all employees

An intensive collaborative effort during the last year has led to the completion of two Medical Center safety manuals that are intended to promote the highest level of safety for all members of the Medical Center community.

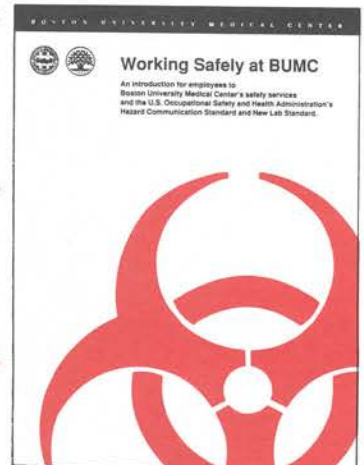
The "Working Safely at BUMC" manual, which will be distributed to all employees in the upcoming months, explains who is responsible for the Medical Center's safety operations and procedures. It also contains important information on the U.S. Occupational Safety and Health Administration (OSHA) Hazard Communication Standard and the OSHA New Lab Standard.

A second manual, entitled the "Boston University Medical Center Safety Manual," explains the New Lab Standard, and reviews the procedures for handling hazardous materials by presenting detailed information on safety procedures that employees and students

should follow when working in laboratories. This comprehensive manual is now being distributed to the chemical hygiene officers of each laboratory.

*The "Working Safely at BUMC" manual explains who is responsible for the Medical Center's safety operations and procedures.*

The Medical Center's three-pronged safety-education program is designed to target all members of the Medical Center community. Upon hire, employees are introduced to the Medical Center's safety program, operations and procedures during their employee-orientation program. Employees who work in laboratories get



additional, specific training that relates to the chemicals used in their laboratories. This training is given by a chemical hygiene officer assigned to a particular

**Safety manuals**  
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## Employees offered office-procedure, professional-development workshops

The Office of Personnel in March will offer the fourth series in a set of Procedural and Professional Development Workshops for Boston University Medical Campus employees. The workshops are designed to familiarize interested employees with the policies and procedures of administrative offices and services, such as the Offices of International Students and Scholars, Personnel, Payroll, Purchasing, and Grant and Contract Accounting.

In addition to the procedural workshops, there will be professional-development workshops on telephone and

interpersonal communications skills and on how to make presentation slides on a Macintosh computer. Another workshop will review employee benefits offered through Boston University. A brochure describing the workshops has been mailed to all Medical Campus employees, along with registration forms. All Procedural and Professional Development Workshops are offered free of charge to employees. For more information, contact Office of Personnel Employee Relations Representative Jim Chalmers, at 638-4610 (x4610). □

## A bird's-eye view of the Medical Center complex May 1939



This photograph, taken in May 1939, indicates the major construction changes that have been made in the area including and surrounding the Medical Campus during the last five decades. The campus is pictured in the bottom left of the picture, while the Fort Point Channel, seen on the right side and paralleling Albany Street, is now filled-in land on which Lot A and Lot C are located. These parking lots, as well as part of Boston City Hospital's adjacent land, will undergo still further change, as Boston University and the University Hospital prepare to construct a proposed new Medical Center office, research and parking facility on the land. This 1939 photograph hangs in the reception area of the Dean's Office, just outside Dean Aram V. Chobanian's office.

photo: Aerial Photos International, Inc.

## Safety manuals detail Medical Center policies

**Safety manuals**  
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laboratory. A third level of instruction is given to chemical hygiene officers, who receive extensive training by the Safety Office to carry out the lab safety program.

The development of the safety manuals involved input from members of the Medical Campus, the University Hospital and the Charles River Campus. They addressed the policies, procedures and standards related to laboratory safety, as well as to other potentially hazardous situations.

Members of the Medical Center community who wish to make suggestions or comments about the Safety Office's programs are encouraged to contact John Clemons, director of the Medical Center Safety Office, at 638-8832 (x8832). The success of these safety programs depends upon the ability of employees and students of the Medical Center to carry out the policies, procedures and safety standards noted in the two safety manuals. As BUMC Director Richard H. Egdahl, M.D., stated, ensuring safety at the Medical Center is a responsibility shared by all of us. Putting these safety standards into practice will help to ensure that the safety of employees, students, patients and visitors is maintained. □



## School's Naval Blood Laboratory contributes to blood stockpiling effort in Persian Gulf War

The School of Medicine's Naval Blood Research Laboratory is working closely with the U.S. Armed Services to help stockpile blood for treating casualties in the Persian Gulf War.

The NBRL, which developed the technology to freeze red blood cells and revolutionized blood banking for the military, is sending frozen red cells to the Persian Gulf to supplement the supply of liquid red cells. The frozen blood will be used by medical personnel on hospital ships, and at sites in Saudi Arabia, the U.S. and Europe. The NBRL also has been teaching active duty and reserve personnel the procedures necessary to thaw and wash the red blood cells prior to transfusion.

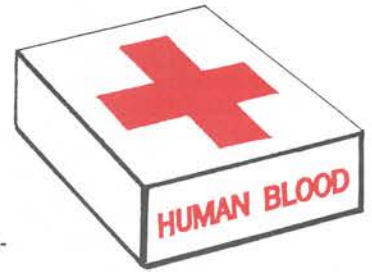
The current freeze-preservation procedure was developed in 1980 by NBRL Director C. Robert Valeri, M.D., a professor of medicine at BUSM and a retired captain in the United

States Navy. The freeze-preservation procedure extends the shelf life of blood from a matter of days up to 21 years.

Worth noting here is the recent death of Charles P. "Bud" Emerson, M.D., who, as principal investigator at the NBRL, discovered a technique for improving the storage of blood. Dr. Emerson was also the former chief of Hematology at the University Hospital.

The University Hospital participates in the NBRL's work by drawing blood for research studies to extend the shelf life of previously frozen red blood cells.

The NBRL also is helping the military preserve approximately half of its blood supply, rather than discarding it after 35 days when it is no longer usable. The military is sending type O blood back to the NBRL just prior to the end of its shelf life. Researchers there use another technique they developed to rejuvenate the



blood. They add a mixture of pyruvate, inosine, phosphate and adenine to the old blood, which restores the blood to the potency of week-old blood. This blood then is frozen and stored until needed.

The NBRL is involved in the military's plans to stockpile over 200,000 units of type O frozen red blood cells. The process, which began last year, will take several years to complete. To date, approximately 40,000 units have been frozen and stored at a variety of locations. □

## I.Q.s are limited in ability to predict future success

Medical Center employees who have children may be interested in a BUSM professor's assessment that I.Q. tests should not be relied upon too heavily in evaluating a child's potential to succeed in life.

"I.Q. tests are limited in their ability to predict a child's future success, and should not be used to label children or to create expectations," said Donald S. Gair, M.D., a BUSM professor and the chairman of the Department of Child Psychiatry and Child Development.

An I.Q., or intelligence quotient, is a score that is intended to indicate a child's intelligence. It is determined by dividing the child's mental age (determined by the I.Q. test) by his chronological age and then multiplying that factor by 100. I.Q. tests, developed

in France a century ago, were originally intended to diagnose mental retardation. Today, their primary use is as a diagnostic tool for learning disabilities.

***I.Q. tests should not be used to label children or to create expectations'***

An I.Q. score may give some indication of basic intelligence or the presence of a learning disability, but it does not measure many factors that contribute to a successful life, Gair said.

"Intelligence tests cannot determine certain relative forms of intelligence, such as common sense, 'street smarts,' confidence, a disciplined work ethic and the desire to learn—all attributes that contribute to a

child's chances for success," he said.

In addition, Gair said, intelligence tests are often culturally biased, so that any score is only valid when compared to the scores of those people who have similar education, mental stimulation and socioeconomic environments.

Gair also believes that it can be psychologically damaging for a child or an adolescent to be told his or her I.Q. score. "To some children, for instance, a score that is lower than expected—even a good score—can damage their self-esteem," he said. "By the same token, those who score high may feel excessive pressure to measure up to the score and to other people's expectations." □

## Employee Profile

### Knecht

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about her work at the SPH, saying she's found great satisfaction in the stimulating intellectual environment. It is a place "where words are made," she said, noting the stark contrast between creating ideas and producing voice scramblers, as a company for which she once worked did. She also speaks of the SPH's familylike atmosphere, and expresses gratitude for the kindness of SPH faculty and the physicians at the University Hospital who saved her Latvian cousin's badly burned foot when she visited Knecht last summer. (See story below.)

Knecht came to the SPH in 1982, after working for 10 years on the Charles River Campus, five years as the administrator at the African Studies Center, and five years as the executive officer for the College of Liberal Arts. "B.U. has been a wonderful place to work," she said. "I have worked very hard within the University, and it's been so fulfilling."

She is particularly fond of her current role at SPH, where she is the assistant director for administration. "It's sort of like being an air traffic controller," she said. "There are a lot of stacked planes, and I have to get the one down that's having an emergency. Every day that I plan is different."

"One thing that's marvelous about this school is that it's never static," she added. "There's always something new that someone has in mind. I end up being the sounding board—I always am aware of what's going on." She cites the SPH's new miwifery/M.P.H. program for registered nurses—the only such program, other than Yale University's, in New England, she pointed out—and the conflict-resolution seminar recently held by SPH Adjunct Professor Leonard J. Marcus, Ph.D.

Little about Knecht's personal life appears to have been static, either. Her youth was marred by the tides of political forces that continue to rock the Baltic states. In 1940, the Soviets

rolled into Latvia, Estonia and Lithuania, suppressing what had been democratic republics since their independence in 1918. Her brother, who was a university student, was deported to Siberia, never to be seen again by his family. The family was told years later by someone that he was believed to have died on the march north.

*'One thing that's marvelous about this school is that it's never static,' she said.*

In 1942, when the Nazis invaded the Baltic countries, Knecht and her four sisters and mother were amongst the hundreds of thousands of people taken from their homes to work in Nazi slave-labor camps in Germany; her mother would never again see her husband, who was left behind. Following World War II, Knecht and her mother and sisters were placed in refugee "displaced-persons" camp in Germany before they were able to im-

migrate to Buffalo, N.Y., in 1950.

Knecht doesn't relate this story with self-pity. "It's a story all of us [Latvians] share," she said. "It's not unique. It does give some understanding, perhaps, of why we have such an incredible desire to fight for [Latvian] independence [from the Soviets]," however. "Some people misinterpret this as super-nationalism, when it's just a desire to retain a culture and a language," she said.

And fight for this freedom she does. Knecht is one of thousands of American Latvians who participates in demonstrations and writes members of Congress, urging the U.S. government to pressure the Soviet government to release the Baltic states from its grip. In early January, she participated in an overnight vigil at Fanueil Hall to show objection to the killings that occurred in Lithuania in December when Soviet troops fired on independence fighters. □

## Visiting Latvian cousin witnesses America at its best

Benita Kokaine, the Latvian cousin of School of Public Health (SPH) administrator Dzidra Knecht, made her first trip to the United States last summer, taking advantage of the freedom of travel for Latvians under Soviet glasnost, and her success—after a two-year wait—in obtaining a seat on an Aeroflot flight to Washington, D.C. Kokaine planned to travel with her cousin, the assistant director for administration at SPH, through the midwest, visiting relatives she hadn't seen

in 45 years. But once in America, she had to scratch her plans. When Kokaine, who speaks no English, disembarked from the plane, she could barely walk, due to a bad burn she'd sustained on her foot in Latvia. Instead of seeing much of America, she saw some of the best of America, in terms of the compassion and high-quality, highly accessible medical care she received from faculty at SPH and physicians at the University Hospital (UH).

Knecht called her boss,

SPH Director Norman Scotch, Ph.D., from Washington as soon as she saw her cousin's foot. He put her in touch immediately with physicians in Washington, D.C., who determined that her cousin's burn needed sophisticated medical treatment and that she should not make the trip to the midwest. Knecht drove her cousin to Boston, where she was admitted to the University Hospital and treated "with great kindness, skill and generosity," according to Knecht.

"That's the thing about America," Knecht said. "Those doctors in Washington and at the University Hospital didn't even know me. The people in Boston—the SPH and UH doctors and nurses—were incredible; Benita was in the hospital for 10 days recovering from surgery, including skin grafts to cover the burned area. They saved her foot." □