While an intense national debate on health care reform legislation continues to rage through this political season, it is clear that the most effective health care reform will take place at the local level. This will be accomplished through collaboration among health systems, physicians, employers and payers. Texas Health Resources will continue to move forward with our transformational strategy of inspiring change in how people think about their health. That is the only way we can improve the health of our people and bend the cost curve of health care away from its upward trajectory.

Working together with physicians across North Texas, we at Texas Health are focusing on the science of behavior change to improve health and overall well-being.

Personal health behaviors are 50 percent of what influences health, but we spend only 4 percent of our health care dollars to change behaviors.

Scientific studies have shown that people who attempt to make lifestyle changes on their own usually fail. But if they have a partner or a strong support system, their odds of success skyrocket. Texas Health is helping physicians tilt the odds in a positive direction.

Texas Health recently entered into an agreement with Healthways, Inc. to apply their science-based methods and tools to improve the health of the people in North Texas communities.

The Gallup-Healthways Well-Being Index® is one of the measures being used by forward-thinking employers and communities to evaluate their environment as a first step in making improvements to foster better health and well-being.

Personal health behaviors are 50 percent of what influences health, but we spend only 4 percent of our health care dollars to change behaviors.

The Index considers six areas of well-being that include people's perceptions of their:

- Life evaluation
- Emotional health
- Physical health
- Healthy behaviors
- Work environment
- Basic access to food, shelter, healthcare and a safe, satisfying place to live

Research in other parts of the country has shown that for every 1 percent rise in the Well-Being Index, health care costs drop 2 percent and hospitalizations go down 1 percent.

Communities where people share common elements of healthy diet, healthy lifestyle and positive outlook tend to have higher overall well-being that can be measured.

This approach is even more powerful when a trusted physician recommends the tools and resources. A physician-directed, individualized care plan designed to help the person stay well is coupled with pro-active support resources that are proven to increase success rates.

We now have tools and methods that enable physicians to predict who among their patient populations will be high-risk or high-cost in the future.
Changing How We Think About Our Health, cont. from pg 1

Access to this type of information can assist the physician in deploying interventions for better health and outcomes across the physician’s patient population.

As Texas Health transforms from a hospital system to a health system, the hospital will continue to be the most prominent and visible manifestation of the work we do every day. But other pieces of the continuum of care will grow in importance, including primary care, wellness, prevention, and post-acute services such as rehabilitation and home health care.

Texas Health Research & Education Institute is playing a key role as the system focuses on helping North Texans improve their well-being.

Our ultimate goal is to keep people healthy so that they do not need to be in the hospital. For those who do need acute care, we will improve the delivery of care in all aspects.

The changes we must make will not happen overnight. But if physicians, community leaders, health systems and employers work together, we can begin to drive meaningful, lasting changes that will improve the health and well-being of the people in the communities we serve.

ALZHEIMER’S ASSOCIATION INTERNATIONAL CONFERENCE

IEEM Researchers Present in Canada, cont. from pg 3

White matter is the superhighway of brain tissue. It transmits messages between different regions of gray matter, the neuron-laden portion of the brain where functions such as seeing, hearing, speaking, memory and emotions take place. Without properly functioning white matter, gray matter isn’t able to work.

“We know that brain structure and some aspects of cognitive function deteriorate with aging, but we haven’t been able to find exactly what the contributing factors and mechanisms are,” said Dr. Tseng, lead author of the research abstract and recipient of the 2012 Alzheimer’s Association Travel Fellowship Award.

Using advanced magnetic resonance imaging (MRI) and diffusion tensor imaging (DTI) techniques, the Dallas scientists are currently measuring brain structure and connectivity of 36 mild cognitive impairment (MCI) patients (averaging 67 years old) who had undergone a one-year aerobic exercise intervention. The results are compared with 36 MCI patients who received placebo intervention and 30 sedentary people of similar age and education level.

“Long-term aerobic exercise has definitive, measureable impact on brain health,” added Benjamin Levine, M.D., director of the IEEM and professor of medicine and cardiology at UT Southwestern Medical Center.

Under the leadership of Dr. Levine, IEEM was founded in 1992 as a joint program between Texas Health Presbyterian Hospital Dallas and UT Southwestern Medical Center.
What's good for your heart is also good for your brain - keep moving.

The numbers are daunting. By midcentury, in the United States alone, care for people with Alzheimer’s disease and dementia will cost more than $1 trillion.

The soaring costs of Alzheimer’s and dementia care, the escalating number of people living with the disease, and the challenges encountered by affected families all demand a meaningful, aggressive and ambitious effort to solve this problem.

In Dallas, researchers at the Institute for Exercise and Environmental Medicine (IEEM) at Texas Health Presbyterian Hospital Dallas, a joint research program with UT Southwestern Medical Center, are shedding light on how exercise helps the brain to be more resistant to the effects of aging.

The IEEM is among the few research centers in the world that fosters the fusion of basic science and clinical medicine in a program designed to study human physiology.

Rong Zhang, Ph.D., director of IEEM’s Cerebrovascular Function Laboratory, and his research fellows Benjamin Tseng, Ph.D., and Jie Liu, M.D., Ph.D., presented their research findings at the 2012 Alzheimer’s Association International Conference (AAIC) in July in Vancouver, Canada.
In today’s fast-paced environment of area hospital emergency departments, medical scribes have quickly become a valuable member of the health care team. At Texas Health Presbyterian Hospital Dallas, medical scribes shadow and work closely with several emergency department physicians on the hospital’s medical staff. The scribes document medical records in real time, as the physicians interact with the patients. Using scribes often increases clinical efficiency, accuracy of charting, and allows physicians to spend more time with patients.

The scribes at Texas Health Dallas are documentation specialists trained by Fort Worth-based PhysAssist Scribes, Inc., the first professional scribe program in the United States.

“Our scribes are typically pre-medical or pre-P.A. (physician assistant) students who are garnering clinical experience for their applications to medical school or P.A. school, and many times matriculate into these programs after one-to-two years of working as a scribe,” explained Justin Richardson, PhysAssist Scribes, Inc., regional manager.

While scribes receive invaluable clinical experience with direct physician and health care staff interaction, Texas Health Research & Education Institute offers medical scribes additional opportunities to receive hands-on experience with a scribe suture lab held in Texas Health’s Minimally Invasive Technology Center (MITC) at Texas Health Dallas.

MITC includes a completely contained laboratory facility used for training and research purposes. The facility includes a six-station skills lab and a sterile procedure suite for research activities.

Last spring approximately 25 scribes, along with five physician mentors/faculty and two PhysAssist employees, a suture representative and two physician assistant students participated in a suture lab held in the MITC, organized by Romano Sprueil, M.D.

“We were fortunate about three years ago when we first started thinking about this, that we realized MITC offered this facility for training and could provide for all our needs at a reasonable cost,” said Dr. Sprueil. “It’s a great opportunity to mentor our scribes and reward them for all the hard work they do for us. During the lab we teach them basic suturing techniques, basic wound closures, dermabonding, some stitching – the various types of suturing techniques. Basically we just let them practice and have fun.”

Although these opportunities are not part of their training to become a scribe, it speaks to the relationships formed with the physicians. Each year, Dr. Sprueil and others invest their personal time in further educating scribes who will become future medical professionals.

Does it make a difference? These medical scribes couldn’t be more appreciative.

“This will definitely give me a head-start on medical school. I’m really excited,” said Kim Chou.

“I’m having so much fun. It’s actually nice to see the practicality of it…what the physicians do in the field when we are scribes, said Daniel Jackson. “I’m going to Texas A&M. I’ve always thought about going into pediatric surgery. Any type of exposure you can get at any moment helps you. This lab is actually hands-on, which is not a lot of what we get to do normally.”

“I think it’s very amazing. I know I’ve seen procedures done. It’s a whole different aspect doing it yourself,” said Stephanie Walls. “I want to be a P.A. P.A.’s working in the ER setting do a lot of suturing.”
CME Activity Broadens Discussion on Diabetes

Texas Health Presbyterian Hospital Dallas hosted a CME activity for primary care physicians focused on diabetes on Sept. 12. Because of the broad relevance of the topic—diabetes care—the live program was captured and made into an enduring activity, available to a national audience of providers of diabetes care throughout the year.

Addressing Clinical Inertia in the Initiation and Management of Insulin Therapy: Quality Improvement Strategies for Primary Care, includes education and decision support tools that address important strategies for achieving early and intensive management through individualized care, avoiding adverse events, improving onset and bioavailability, improving access, and reducing nonadherence.

EXPERTS SHARE NEW STRATEGIES TO IMPROVE PATIENT CARE

Individual glycemic target tool can be downloaded at www.TexasHealth.org/InsulinTherapy

For online activity, go to: www.TexasHealth.org/InsulinTherapy

**PROGRAM OBJECTIVES**

- Evaluate changes in provider interventions in diabetes management
- Evaluate determinants of insulin initiation and intensification
- Promote individualized treatment plans in T2DM
- Apply current evidence when using pharmacologic treatment in patients with T2DM
- Explain the benefits and limitations of currently available agents
- Implement new pharmacologic strategies to reach HbA1C goals
- Identify barriers and implement strategies for overcoming those barriers to provide optimal care and improve patient outcomes

**Accreditation - Physicians**

The Texas Health Research & Education Institute designates this live activity for a maximum of 2 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
Texas Medical Research Collaborative Awards Grants for 2012 Totaling $600,000

The Texas Medical Research Collaborative (TxMRC), the research partnership among The University of Texas at Arlington, The University of Texas at Dallas, Texas Instruments, Texas Health Research & Education Institute and the University of North Texas Health Science Center, awarded more than $600,000 in a third round of grants to Dallas-Fort Worth area researchers in critical health care fields.

The six awards from Texas Medical Research Collaborative carry about $100,000 each and aim to propel research in the areas of brain imaging, gas detection through sensors and auditory devices that may reduce the risk of falling.

TxMRC provides annual grants that are intended to jumpstart research that can solve real-world medical problems and develop new technologies in a relatively short time frame. Grant recipients work with representatives of the consortium’s academic, industry and health care partners to develop pilot programs aimed at attracting sustained funding from external sources, such as federal, state or private agencies.

TxMRC was founded in 2009 as a collaborative research partnership and clinical work on the projects generally takes place at Texas Health hospitals and other facilities. TxMRC has distributed more than $2 million in grant funding. The collaborative will solicit proposals for 2013 grant funding in January 2013.

“Our collaborative gives researchers a boost in their work to solve real-world medical problems in a relatively short timeframe,” said Marsha Barnhart, Texas Health Research & Education’s director of research development.

TMAC, a UT Arlington affiliate formerly known as the Texas Manufacturing Assistance Center, manages the TxMRC partnership. TMAC provides businesses with the tools to be successful.

The annual grants are awarded to research teams that have identified technologies that can solve real-world problems in a relatively short time frame. Grant recipients work with representatives of the consortium’s academic, industry and health care partners to develop pilot programs aimed at attracting sustained funding from external sources, such as federal, state or private agencies.

The 2012 TxMRC award winners:

- **George Alexandrakis**, UT Arlington bioengineering assistant professor, for “A Near Infrared Brain Imaging System for the Continuous Bedside Monitoring of Intracranial Pressure Buildup in Patients with Traumatic Brain Injury.”
- **Heather Beardsley**, TMAC research associate, for “Sleep Related SUID Monitoring System based on CO2 Sensor Technology.”
- **Nicoleta Bugnariu**, associate professor at the University of North Texas Health Science Center and physical therapist/neuroscientist, for “Good Hearing, Steady Feet: Development of Auditory Devices that Improve Hearing and Decrease the Risk of Falls.”
- **Hanli Liu**, UT Arlington bioengineering professor, for “Implementation, Validation, and Translation of a Hyper-spectral Imaging Device for Fast Skin Cancer Diagnosis.”
- **Issa M. S. Panahi**, UT Dallas associate professor of electrical engineering, for “Computerized Infusion and Monitoring System for Fetal Blood Transfusion.”
- **Yuan Bo Peng**, UT Arlington associate professor of psychology, for “Development of a Wireless Implantable Closed-Loop Device for Major Depressive Disorder.”

For more information contact Marsha Barnhart, 682-236-6750 or MarshaBarnhart@TexasHealth.org. The administrative agent for TMAC is Frank Groenteman. He can be reached at 817-307-0614 or frank.groenteman@tmac.org.

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THRE GIVES BACK TO THE COMMUNITY

Texas Health Research & Education employees used Community Time Off hours to work at Allen Community Outreach. THRE employees supported Texas Health’s goals to perform 1,500 hours of community service to celebrate the system’s 15th anniversary.
Virtual Learning Tool Offers Insight on Women and Depression

As a primary care physician do you routinely assess suicide risk in your patients diagnosed with depression throughout their course of treatment? Do you typically supplement your depressed patient’s treatment process by prescribing lifestyle changes, such as the integration of physical activity?

Meet Lissette Arnott©, a CME-certified case-based branched learning game provided by Texas Health Research & Education Institute to improve outcomes for women with depression in the primary care setting. The interactive and immersive 3D virtual learning environment provides concise information on depression management and helps health care providers sharpen decision-making and critical-thinking skills to apply to their patients immediately.

Introduced a year ago, the game follows a patient from diagnosis to remission, with decision trees and scenario-based branching logic. The program is designed to help improve health care providers’ ability to recognize, diagnose and treat major depressive disorders, and think about gender differences in presentation.

Branch out today into this dynamic, online simulated world

Thinking outside traditional continuing medical education (CME) practices, this tool is free and aimed at all primary care physicians, physician assistants, nurse practitioners and psychiatrists. Eligible providers can receive CME credit for completion of the program.

PLA: the game
Virtual Learning Tool Offers Insight on Women and Depression

Your CME Transcript “One-Stop Shop”

Texas Health Research & Education Institute is committed to helping physicians and their teams deliver high-quality health care to patients through continuing medical education.

To help physicians easily access all their CME credits, including those obtained outside Texas Health, Texas Health Research & Education now offers a consolidated online transcript of total CME activity.

Physicians can input data for outside CME credits into the online CME Tracker. It will be combined with data automatically entered for completion of CME offered through Texas Health Research & Education. Physicians can then pull their consolidated transcript for state and specialty boards, hospital credentialing and other needs.

Questions about CME accounts may be directed to 1-866-295-3269.

Visit www.mddinwomen.com to play the game
The Ritz-Carlton Dallas was the setting for the Leadership Council Spring 2012 event. Standing tall in Dallas’ vibrant uptown arts district, the luxurious hotel’s setting combined with perfect, spring weather set the tone for an enjoyable, comfortable and informative evening with some of the area’s key business leaders.

With a warm welcome, the evening’s host, Jay Bruner, senior regional director of development, Texas Health Presbyterian Foundation, expressed his gratitude to the loyal supporters of medical research and education. New Leadership Council members were acknowledged with a round of applause.

“It’s always a privilege to have macro views from the top,” said Bruner. “Tonight I have the rare privilege to introduce the one person who has held the position of CEO at Texas Health Resources since its inception 15 years ago. It’s an honor to welcome Doug Hawthorne.”

Hawthorne oversees the 25-hospital health care system and is recognized as one of the nation’s top health care executives. He currently serves as the chair of the Health Leadership Council Executive Task Force on the Uninsured as well as a member of the American Hospital Association’s President’s Forum. He sees the big picture and is passionate about changes in health care.

As Hawthorne thanked the Leadership Council for their support, he quickly addressed issues the country is facing in health care.

“Where are we as a nation going with health care?” asked Hawthorne. “Texas Health has been an advocate for health care reform in this country for many years. While patients have access, many have no means to pay for the services they need. There are 60 million people in this country who are not insured or under-insured. There are many gaps in coverage and we need a safety net. There is no turning back on health care reform.”

Hawthorne noted that Texas Health is transforming from a hospital system to a health care system. This change includes a transformation of how providers deliver care. Keeping patients healthy will be as important as caring for the sick and providing a continuum of care is the new focus. Hawthorne asked guests to envision Texas Health as a long dining table.

At the center of the table is the acute-care hospital. To the left of the hospital are prevention, wellness, education and primary care helping keep people out of the hospital. To the right is care provided in post-acute settings including hospice, rehabilitation and nursing homes.

“People must look horizontally when it comes to moving them through the system – from birth to death. We will integrate those pieces clinically and operationally,” said Hawthorne. “These are transformational times and Texas Health will be transcending traditional care and building a continuum of relationships with physicians, home care, nurses, and other organizations such as UNT Health Science Center, UT Southwestern Medical Center and Methodist Health System. We are forming new relationships. We are well-positioned to lead. Our mission is to improve the health of the communities we serve.”

One of the first relationships formed to advance the mission of Texas Health was with UT Southwestern and the evening’s keynote speaker, Tony Babb, Ph.D.

During the past 20 years, Dr. Babb has served as associate professor of internal medicine at UT Southwestern Medical Center. He holds the prestigious Effie and Wofford Cain Foundation Chair in Cardiopulmonary Research. Dr. Babb helped form the relationship between UT Southwestern and Texas Health Presbyterian Hospital Dallas, where he is director of the Cardiopulmonary Laboratory at the Institute for Exercise and Environmental Medicine (IEEM).

“Tony and his team at IEEM came to us through their affiliation with UT Southwestern. They were the first stake in the ground and I’m happy to say we have a full cooperative agreement with UT Southwestern today,” said Hawthorne. “His presentation speaks to where we’re going with health care, and keeping ourselves well and healthy.”

**Keynote speaker Tony G. Babb, Ph.D.**

A recipient of the prestigious National Institutes of Health (NIH) Service Award, Dr. Babb is internationally recognized for his research in lung function and fitness.

The focus of Dr. Babb’s research has been in lung function with aging, obesity and lung disease. This has lead to advances in our understanding of the control and limitations of breathing during exercise in healthy younger and older men and women and in patient populations.
His work has improved IEEM’s ability to assess breathing limitations in patients with lung dysfunction and patients with unexplained shortness of breath during exercise and/or exercise intolerance.

He is a member of several organizations, including a fellow with the American College of Sports Medicine, and member of the American Physiological Society and the American Thoracic Society.

Dr. Babb received his undergraduate degree in biology from Western Kentucky University, his M.S. in exercise physiology from the University of Illinois, and his Ph.D., in exercise physiology, from Pennsylvania State University, followed by a fellowship in the thoracic diseases research at the Mayo Clinic. Prior to joining UT Southwestern, Dr. Babb was assistant professor, pulmonary section, Department of Medicine at Baylor College of Medicine in Houston.

**National health crisis**

The effects and costs of obesity – diabetes, heart disease, high blood pressure – have created a national health crisis.

“We hear about all the negative effects of weight gain related to our orthopedic problems and diabetes, but don’t hear about the lungs and how weight gain affects our lungs and our breathing,” said Dr. Babb. “How prevalent is shortness of breath in obesity?”

When breathing is more challenged people are less likely to exercise, which in turn, causes more obesity. It’s a vicious cycle. Because diet and exercise is how obesity is treated, exercise is important in the prevention of obesity, maintaining weight and taking off weight.

Is shortness of breath related to lack of physical conditioning or does obesity create changes in the lungs? Working with his research team at IEEM, Dr. Babb examined the different areas that affect breathing.

Armed with the latest in technology and equipment, Dr. Babb studies included men and women with different levels of obesity and fitness. The studies were performed in the cardiopulmonary exercise laboratory at IEEM in Dallas. This lab has the unique ability to measure how much air the lungs can move in and out, as well as how much blood the heart can pump, during exercise.

Magnetic resonance imaging (MRIs) revealed breathing limitations for breathing in and out. These images revealed changes in the respiratory mechanics of mild-to-extreme obesity in men and women. These physiological changes cause shortness of breath on exertion. It does not appear to be due to cardiovascular deconditioning as one might assume.

Dr. Babb’s obesity intervention research was also supported by an NIH grant. It included a 12-week study to help participants lose 20 pounds using diet and resistive exercise. Within that 12-week period the body composition of patients changed and the thinner person began emerging.

“By just losing 20 pounds, our patients improved remarkably and were significantly better at doing their exercise,” explained Dr. Babb. “We learned you don’t have to lose 100 pounds to improve lung function. Just get started and start losing weight, stop gaining the weight and you can improve lung function.”
Leadership Council Event at the Ritz-Carlton Dallas

1. Bobby Hampton, Lisa Hampton, Susan Kelly, George Kelly
2. Jennie Rhodes, Thomas Rhodes, Jenny Moore, Scott Christianson
3. George Pearson, Donna Halstead, Fred Halstead
4. Jill Urbanski, Jeff Urbanski, Ron Baranski, Lisa Baranksi
5. Kelly Beck, Donna Marbut, Jim Luttrell
6. Morgan Minton, Alana Minton, Joe Haley, Alicia Haley
7. Lee LaCroix, Alice Scoma, Charles Scoma
8. Wade Graf, Jason Fortune, Nick Richardson
Leadership Council Event at the Ritz-Carlton Dallas

1. John Ward, Jenny Evans, Jeff Stouffer, Gayle Stouffer, Julie Walker
2. Barney Rosson, Carolyn Rosson, Gaylene Wallace, Mickey Wallace, Cathy Henry, Peter Henry
4. Doug Hawthorne, Christopher McGuire, Jay McAuley, David Tesmer
5. Thomas Rhodes, Jennie Rhodes, MJ Beneke, Ronald Blumoff
7. Cary Clayborn, Jennifer Morton, Helen Vo, Courtney Carroll, Brad Carroll
8. Ron Vance, Jeanine Vance, Michele Robbins, Chris Robbins
Welcome

New Leadership Council Members

Christopher Chavez
Chairman, President and CEO
TriVascular, Inc.

Christopher G. Chavez was appointed chairman, CEO and president of TriVascular, Inc. in April. Based in Santa Rosa, Calif., TriVascular’s initial product offerings are novel endovascular grafts focused on significantly advancing endovascular aortic repair (EVAR). Chavez joined TriVascular with more than 30 years of experience in the medical device industry, including leadership positions at St. Jude Medical, Advanced Neuromodulation Systems and Johnson & Johnson. He has served as chairman of the Medical Device Manufacturers Association, chairman of the Dallas/Fort Worth Health Industry Council and as a board member of Advanced Medical Optics. Chavez holds a bachelor’s degree in accounting from New Mexico State University and a master’s of business administration from Harvard Business School.

Paul Christopher
President
Uptown Popcorn

Paul Christopher is president of Uptown Popcorn, a gourmet popcorn store that features clever and delicious popcorn flavors. A successful entrepreneur, Christopher started with a single store in North Texas and has grown the business to operating three Texas locations and serving numerous national customers online. Christopher has worked in the gourmet popcorn industry since graduating from Baylor University in Waco, Texas, with a bachelor’s degree in business administration.

Scott Freeman
Vice President and General Manager
EaglePicher Medical Power, LLC

Scott Freeman is vice president and general manager of Medical Power for EaglePicher Medical Power, LLC, a leader in designing and manufacturing batteries, battery management systems and energetic devices for the defense, aerospace, medical and commercial industries. Freeman received a bachelor’s degree in petroleum engineering from the University of Texas at Austin. He is a member of the Texas Health Industry Council, serves as an advisor for the North Texas Entrepreneurs Panel, and enjoys tennis and golf. He and his wife have four children and one grandchild.

Julie Glass
Senior Vice President
Frost Bank

Julie Glass is a senior vice president at Frost Bank, a Texas bank offering a full range of commercial and consumer banking products, investment and brokerage services, insurance products and investment banking needs to customers throughout Texas. Glass received a bachelor’s degree from the University of Missouri in Columbia, Mo., and earned a master’s in business administration from the University of Texas at Austin. Glass is a member of the Texas Bankers Association and has served in several leadership positions at Aledo United Methodist Church. Glass and her husband have two children, and she enjoys family time, travelling, church activities, horseback riding and movies.
**WELCOME**

**New Leadership Council Members**

**ASHOK KUMAR (A.K.) MAGO**
Chairman & CEO
Mago & Associates, Inc.

A.K. Mago is the chairman and CEO of Mago & Associates, Inc., a business and investment consulting company. Mago earned a master’s in business administration from the University of Texas at Dallas. He has served as a leader in a number of community organizations, including serving on the board of the Dallas Regional Chamber, Salvation Army Advisory Board of Dallas County, Dallas County Community College District Foundation and the Southern Methodist University Asian Studies Advisory Board. Mago is founding chairman of the Greater Dallas Indo-American Chamber and chairman emeritus of the Greater Dallas Asian American Chamber. Mago and his wife have two children, and he enjoys travel and connecting people.

**FRANK MARSHALL**
President and COO
MedSynergies, Inc.

Frank Marshall is president and COO of MedSynergies, Inc., a company which partners with health care organizations and physicians to align their operations by providing revenue cycle management, practice management, consulting services, business process analysis and software integration solutions. Marshall earned a bachelor’s degree in economics from the University of Texas at Austin and a master’s degree in business administration from St. Mary’s Graduate School of Business in San Antonio. Marshall and his wife have three children, and he enjoys golf, boating and attending his children’s activities.

**PETER SNELL**
Executive Sales Vice President
Cardinal Health

Peter Snell is executive sales vice president for Cardinal Health, an industry leader in helping pharmacies, hospitals and ambulatory care sites focus on patient care while reducing costs, improving efficiency and quality, and increasing profitability. Snell received a bachelor’s degree in business from William Jewell College in Liberty, Mo. He has been an advisor for the International Commission and 25 Project, and a supporter of the Dallas Life Foundation. Snell and his wife have two children, and he enjoys Brazilian Jiu Jitsu, tennis, golf and jeep adventuring.

**CAROL TRAYLOR**
Partner
Cantey Hanger LLP

Carol Traylor is a partner with Cantey Hanger LLP, a full-service law firm representing clients in a wide variety of businesses. Traylor received a bachelor’s degree in nursing from Mary Hardin-Baylor in Belton, Texas, and a J.D. from Baylor University School of Law in Waco, Texas. She is a member of the American Board of Trial Advocates Fort Worth Chapter and a fellow with the American College of Trial Lawyers, and has served with Habitat for Humanity and the Tarrant County Medical Legal Liaison Committee. Traylor and her husband enjoy sailing, water skiing and snow skiing.

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For more information about Texas Health Research & Education Institute’s Leadership Council, contact Jay Bruner, senior regional director of development, Texas Health Presbyterian Foundation, 214-597-6370, JayBruner@TexasHealth.org.
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LEADERSHIP COUNCIL PROFILE:
Brad Lummis, President
LAMCO Capital, LLC, Lummis Asset Management, LP

The Leadership Council is pleased to profile long-time supporter and friend Brad Lummis.

Birthplace/childhood: I was born and raised in Houston, Texas.
I have three brothers. I attended school in Houston until high school. I went to a boarding school in Virginia for high school before returning to Texas for college. I graduated from SMU with a BBA, followed by an MBA from UT-Austin. I am a Certified Public Accountant.

Family and hobbies: I have been married for 33 years to my greatest blessing in life, Gaylord. We have three children and one grandchild.
I have little spare time. What time I can find, I prefer to spend outdoors, golfing, hunting or fishing. Tennis was a life-long passion until a wrist injury sidelined me. I also enjoy reading and traveling.

What drew you to your field? I was a business major at SMU. Accounting and finance were interesting but investing really piqued my interest, perhaps because it involved both disciplines. I was also fortunate enough to have had a professor at SMU who made investing interesting.

In the investment world, you can measure your success or failure every day. There is no hiding. You are either adding value or you are not.

Best business decision you’ve ever made? Starting my own business.

What are your success strategies: Work hard, persevere and stay disciplined. Make it all about your clients.

Proudest moment: Having children and seeing them grow into responsible adults.

Historical role model: Paul Volcker - the most influential central banker of our time. He built an independent central bank, that served neither the Democrats nor Republicans, but Americans. He ended runaway inflation in the 1980’s. Unlike most politicians, he has never been swayed by Wall Street’s influence.

Best mentor and why: My father is my best mentor. He is quiet and the consummate gentleman. He never tells me what to do but offers advice when asked or when it is obvious I need it.

What advice would you give a high school student today? Expose yourself to as much as you can, as soon as you can. You can learn more out of the classroom than you can in the classroom.

What are your top passions? My family and my work. My wife would disagree with the order.

What words describe you best? We see ourselves as we hope others see us. Our view of ourselves is often unrealistic. I’ll leave the descriptions to others.

Favorite foods/restaurant: St. Emilion, a small French neighborhood bistro in Fort Worth. I know the owner. I also know half the customers whenever we eat there. Their service has always been personable. The food is consistently good and their wine recommendations are “spot on.”

What makes Texas Health Research & Education Institute special to you? The education and the opportunities to meet others.

What would you like Texas Health Research & Education to accomplish in the next five years? To focus on services so desperately needed, but sorely lacking in our communities. A great example is the SANE (sexual assault nurse examiner) training initiative at Texas Health Dallas.

What are some of the more interesting health care environments you’ve worked in or visited? None come to mind. Sadly, most health care environments are sterile and unwelcoming.

I encourage Texas Health Resources to continue to focus on making the whole health care experience more personable and less institutionalized. As a testament to Texas Health, my more recent experiences at a Texas Health ER were as pleasant as they could have been. We were treated with respect and the employees were caring and professional.

How is health care changing and how can Texas Health Research & Education affect that change? Health care is changing rapidly, and we do not know the ultimate consequences of these changes. We will have to plan as we go and be flexible. We should not try to be all things to all people but focus our education on those areas we can leverage and that will make the biggest difference for our staff and ultimately our patients.
A healthy regard for women.

Advanced Women’s Care

Texas Health Resources appreciates that when it comes to health and health care, women are quite different from men. We understand women can have their own unique symptoms, as well as reactions to treatment and responses to medicine. So we tailor our comprehensive care – from heart disease and cancer to hormones and orthopedics – to meet the specific needs of women. And our commitment to women’s well-being goes beyond care to education of women’s health issues. That’s why we’ve teamed with the American Heart Association on its “Go Red for Women” initiative, which raises awareness of heart disease in women, and teaches women their particular risks. Care with a healthy respect for women. It’s how we’re making health care human again.

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