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FORENSICS EXERCISE

ECU STUDENT KRISTIAN WILLIAMS takes a piece of tape to fingerprint a door handle at an abandoned house in Greenville for a forensics class Wednesday. The school is offering the class as well as a minor in forensics for the first time. About 20 students participated in the exercise.
The complex in Durham would gain an eight-story addition and more room for surgery and clients, at cost of $70.5 million.

BY JEAN P. FISHER
STAFF WRITER

DURHAM — Duke University Hospital is planning a $70.5 million expansion that will add operating rooms, expand patient and family waiting areas and let Duke continue to increase the number of surgeries it performs.

The project would include an eight-story, 77,650-square-foot addition behind Duke North — the main hospital building — and a complete renovation of the main building’s third floor.

The expansion, which would take place over the next six years if approved by hospital regulators, would be the most significant overhaul to Duke North since it opened in 1980. Duke Hospital recently completed a $30 million expansion that doubled the size of its emergency department.

“The way we provide health care has changed,” said Kevin Sowers, Duke Hospital’s chief operating officer.

When Duke North opened 25 years ago, most surgical patients spent the night before their operation at the hospital. While they were being operated on, family members waited in the patient’s room.

Today, most people having elective surgery report to the hospital the day of their procedure and aren’t assigned a room until after surgery. Family and friends have to wait in areas that were never designed to handle a lot of people, which affords little comfort or privacy, Sowers said patients often complain about that.

Family accommodations are particularly important for patients at Duke, which attracts thousands of patients from all over the state each year. About 82 percent of Duke’s surgery patients last year were North Carolina residents, according to information filed with Duke’s project application.

Duke County accounted for about 19 percent.

The Duke North expansion, which Duke would pay for entirely with accumulated reserves, also would upgrade the operating rooms. Modern operating rooms must be big enough to accommodate a range of technology, such as imaging equipment or surgical robots. At about 400 square feet on average, Duke’s are too small, Sowers said.

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The proposed expansion, which Duke submitted this month for the state’s approval, would include operating rooms as large as 650 square feet.

Duke also plans to convert four other rooms now used for lower-risk procedures into operating rooms. That would increase the number of surgical rooms in Duke North to 35.

The project also would expand the patient recovery area from 51 bays to 70.

Duke needs the additional capacity, Sowers said.

The hospital’s operating rooms are running at about 93 percent capacity. By 2009, when the number of surgeries performed at Duke is projected to reach 22,351 a year, the hospital will hit its limit, Sowers said.

Without more operating rooms, Duke could find it difficult to meet rising demand for surgery, and could lose revenue to rival hospitals. Patients all over the state could find it much more difficult to get into Duke for surgery.

If state regulators approve the Duke North expansion, construction on the addition would begin by late 2006.

Once that was completed, Duke would move hospital support services and physician offices out of Duke North and renovate the vacated space into larger operating rooms, recovery areas and waiting areas. Duke’s schedule calls for the renovation and expansion to be done by late 2011.

Duke is also planning ahead in case more expansions are needed. In January, the hospital will move its helicopter landing pad to the roof of Duke North.

That will free the area where the pad is now, near the hospital emergency room, to allow even more room to grow.
Shootings, drug cases drive safety concerns at ASU

By The Associated Press

BOONE — Safety concerns are growing at Appalachian State University following the second drug-related shooting death of a student in 13 months and the mountain campus’s reputation for easy access to illegal substances, school officials say.

The Nov. 8 killing of Stephen Harrington, 19, of Raleigh, in an apparent drug deal gone bad heightened the questions. Court documents say Harrington was involved in a cocaine deal with his accused killers.

The slaying followed the slaying of Joseph “Joey” McClure, 22, in October 2004. McClure, a senior from Pfafftown, was shot in the head by someone trying to make a “substantial purchase” of marijuana from him, court documents said.

“The safety concerns have hit a whole new level,” said Cindy Wallace, the university’s interim vice chancellor for student development.

Wallace plans to meet Monday with the dean of students, ASU’s head of judicial affairs, the county sheriff and the Boone and campus police chiefs.

“The six of us are sitting down and going ‘What on earth is going on here?’” she said.

Some point to the school’s reputation as a campus coping with a drug problem.

Freshman Mitchell Askew, said a student from the Atlanta area once told him that he chose to attend ASU because of its reputation for easy availability of marijuana.

“It’s kind of that hippie thing,” said Askew, 18, of Murphy. “There’s a lot of weed up here, but a lot of people don’t consider that a drug. As far as hard drugs, I don’t see that.”

On-campus arrests for drug use at Appalachian State are in line with those reported at much larger state universities. ASU — with total enrollment of about 14,600 — reported 10 on-campus arrests for drug violations in 2004. North Carolina State University — with about 30,000 students — had 10 and UNC-Chapel Hill — attended by about 27,000 — had eight.

In its required crime reports to the Department of Education, ASU reported more judicial referrals on drug-related offenses than any other school in the 16-campus University of North Carolina system in 2002, 2003 and 2004.

University data show ASU’s judicial system handled 142 drug-related offenses in 2004 — more than any other school in the UNC system. About one in 100 students at Appalachian State were involved in drug incidents.

The University of North Carolina at Greensboro, which has about 15,300 students is the same size as ASU, reported 20 such incidents, or one for every 718 students.

Experts warn that the differences between campuses could be attributed to different policies or how the universities handle the self-reporting.

“Here at Appalachian we have a pretty strict policy that if a police officer is called to a location on campus and drugs or drug paraphernalia is involved, every student in that room is going to be referred to a judicial-affairs officer,” ASU police chief Gunther Doerr said.