

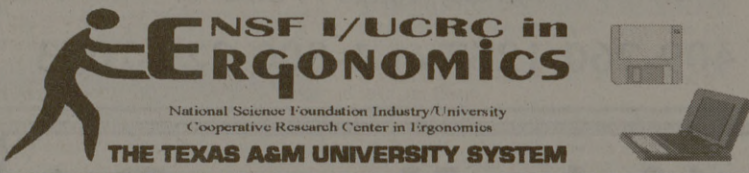
Laptop Users Needed

The National Science Foundation's Center in Ergonomics located in the Safety Engineering Program at TAMU is conducting a research project about laptop computer users. We need volunteers from the laptop user population to answer a questionnaire and/or to participate in environmental mock-up scenarios. In addition for your participation you will receive summary results and descriptive statistics regarding the mobile computer workforce.

Our research projects involve a study of the mobile computing workforce, that is, those individuals who use laptop computers on a regular basis as part of their normal job duties. Surveys were developed to acquire information on 1) the basic laptop user population characteristics, 2) laptop, software and peripherals usage patterns and 3) the "non-traditional" working force environments in which laptops are used, such as airplanes, automobiles, hotel rooms, etc. A general health survey follows for those who have experienced some pain or discomfort recently.

The survey is available on the Internet (<http://trinity.tamu.edu/~ergocent/>), IBM-format diskettes or paper copy. If you would like the survey on disk or paper copy or wish to participate in the environmental mock-up scenarios please contact Kevin McSweeney or Steve Hudock at 862-2649 or by e-mail at mobile_computing@trinity.tamu.edu

Your cooperation is very much appreciated.
Gig 'em, Ags



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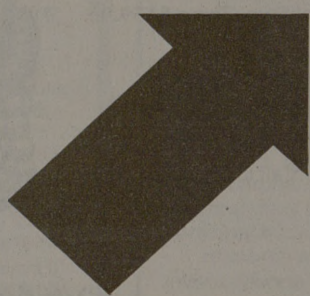
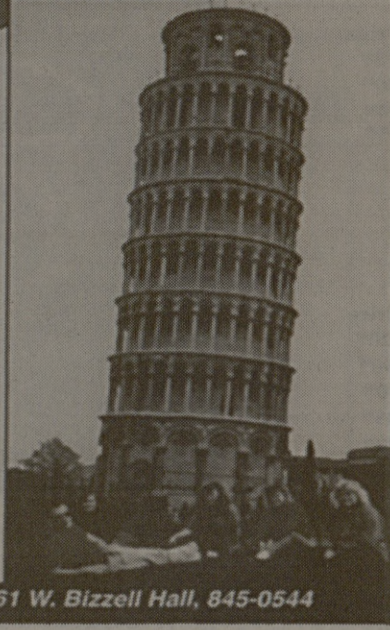
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THE PRINCETON REVIEW

Bad apple may mean buying new barrels

After *E. coli* breakout government may require pasteurization of apple

WASHINGTON (AP) — Alarmed by another *E. coli* bacteria outbreak that killed a child and sickened dozens of others in Western states, the government is considering forcing all apple juices to be pasteurized.

Also under debate are measures such as chemically washing fresh produce or forcing manufacturers to adopt programs that prove foods stay pure from harvest to the dinner table.

The deliberations come after at least 49 people, mostly children, were sickened from *E. coli* in trendy, unpasteurized fruit juices. One child died Friday in Denver.

Once thought to be a threat only in undercooked meat, the virulent *E. coli* O157 strain now has surfaced repeatedly in apple cider and even in lettuce.

Health experts weren't alarmed until two weeks ago when Odwalla Inc., based in Half Moon Bay, Calif., recalled its gourmet juices that contained tainted apple juice. That outbreak showed that even large companies known for quality are vulnerable.

"The number of outbreaks are significant in the past year," said John Vanderveen of the Food and Drug Administration. But "there's no doubt this is a different problem this time."

Just hours after the recall began, he called a special meeting to warn apple juice makers "to ratchet up their quality control" while the government decides the next step.

Vanderveen is advising parents of young children and people with weak immune systems, who are most at risk from foodborne illnesses, to buy only pasteurized juices. Unpasteurized ones, a minority on the market, must be sold cold, so shoppers should check the label when buying any chilled juice, he added.

Many people say unpasteurized juices taste better. But pasteurization, a heating process, kills *E. coli*, while simply washing fruit with water does not.

If the FDA mandates pasteurization, the rule could apply both to the upscale, all-natural juices sold in supermarkets and perhaps even the ones cider farmers sell at tiny roadside stands.

Although the government is looking first at apple products, they're not the only threat. *Salmonella* has poisoned Americans who ate alfalfa sprouts, cantaloupes, watermelon and unpasteurized orange juice. Guatemalan raspberries are the prime suspect in last summer's outbreak of the parasite cyclospora.

At least four U.S. outbreaks of *E. coli* O157, a particularly dangerous strain discovered in 1982, were linked to raw lettuce in the past year. Last month, it sickened 10 people who drank apple cider in Connecticut.

While bacterial outbreaks are increasing, so is Americans' consumption of all-natural foods — an industry growing about 25 percent a year.

Houston surgeon returns from Russia

Yeltsin making rapid recovery

HOUSTON (AP) — Russian President Boris Yeltsin appears to be making a speedy recovery from quintuple bypass surgery and is expected to be back at the Kremlin by the end of the year, renowned heart surgeon Michael DeBakey said Monday.

"This is a very rapid recovery considering the extent of the operation and the extent of his heart condition," DeBakey said at a Houston news conference a day after returning from Russia.

"His heart is now functioning very well," DeBakey said. "This is what I had hoped to occur and predicted would take place."

Just days after the seven-hour quintuple bypass operation, Yeltsin already was showing remarkable progress, said DeBakey, who lead a team of Baylor College of Medicine specialists that consulted on Yeltsin's surgery.

DeBakey described the Russian leader as a "highly motivated" patient who pledged to follow a rehabilitation regimen that involves a low-fat diet and gradual exercise. It does not bar the intake of alcohol.

"He can have (an) occasional drink of wine or a small amount of alcohol," DeBakey said.

The surgeon described Yeltsin as a "social" drinker. "As far as I can tell... he's not an alcoholic."

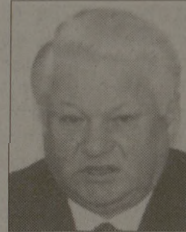
DeBakey said the operation's success can be partially attributed to doctors' patience.

Had the surgery been performed soon after Yeltsin's heart attack last summer, his chances for survival would not have been as favorable, the heart surgery pioneer said.

"I would say that certainly at that time his chances of recovering from an operation were not good," DeBakey said.

Yeltsin's heart was functioning at just 20 percent normal in August. It rose to around 30 percent in September, when DeBakey first examined him, and to 40 percent the day before the Nov. 5 surgery.

Now, after five bypass grafts, Yeltsin's heart is "better than 50 percent" DeBakey said.



Yeltsin

Door of opportunity open through keyhole bypass

New surgery technique show positive results

NEW ORLEANS (AP) — Coronary bypass patients recover faster, have lower hospital bills and suffer much less pain if doctors fix their hearts through a tiny slit in the chest instead of splitting open the rib cage, the standard approach for the past 30 years, a study found.

Surgeons have been experimenting with the new approach, called keyhole surgery, for about two years. On Monday, they released the first head-to-head comparisons with the traditional operation, which is performed on more than 400,000 Americans annually.

So far, doctors are using it on patients with single blockages, which make up only about 5 percent of all bypass patients. But the field is moving so quickly that experts expect more complicated operations will be done this way within a year or two.

"This is just the beginning," said Dr. Renee S. Hartz of Illinois Masonic Medical Center in Chicago.

In a presentation at the annual scientific meeting of the American Heart Association, Dr. James A. Magovern of Allegheny University of Health Sciences in Pittsburgh compared 48 patients who got keyhole surgery and 55 who underwent the usual operation.

"It's fair to say patients get better at least twice as fast with this pro-

cedure," Magovern said. Instead of the typical three months of recovery, many people feel completely normal within two weeks.

Among the differences: —40 percent of the surgery patients needed transfusions, compared with 60 percent of keyhole patients.

Standard surgery patients needed seven days in the hospital, compared with 3 1/2 for keyhole patients.

Keyhole patients' hospital were 40 percent lower. Another study by Dr. J. Fonger of Johns Hopkins University found that keyhole surgery cost \$10,000, compared with \$17,000 for the standard operation.

Bypass surgery is done reroute blood around blocked arteries.

Typically, doctors make a long cut in the chest, saw the breastbone and then apart the rib cage with a saw tractor, exposing the heart. The heart is stopped with machines, and a machine pumps blood while doctors sew in new pieces of artery.

The wide chest opening recovery slow. Patients often plain of pain even when laugh or cough.

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