

SCI|TECH

THE BATTALION

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HDTV complications prevent widespread use

High definition programming lacking standards, set to be universal by 2007

By Jonathan Daugbjerg
THE BATTALION

Warren Sapp is a force to contend with on the football field, but for those watching the NFL playoffs this weekend on high definition television (HDTV), Sapp may become a force to contend with right in their living rooms.

Those who actually get to experience this phenomenon, however, are few and far between.

As HDTV becomes more widespread, networks are broadcasting programs — including the NFL Playoffs — in the crystal clarity of high definition television.

Yet, after 15 years of planning and development, the Federal Communications Commission (FCC) and the television industry are still struggling to deliver widespread digital television to the American public. HDTV's vivid color and lifelike images are superior to the analog-based televisions viewed today, but HDTV costs, formats, and availability are barriers among television broadcasters, the FCC, and television manufacturing firms.

The FCC issued a mandate on Aug. 8, 2002, requiring that the vast majority of television sets sold in the United States be equipped with digital tuners by 2007. The requirements are set to take effect in stages, affecting larger model televisions first.

The FCC estimates an increased cost of \$250 per television set to add the tuners, and claims that the impact to consumers would be minimal due to the continually decreasing price of electronic equipment.

The Consumer Electronics Association (CEA), which represents television manufacturers, says the \$250 tuner price lays a multi-billion dollar "tax" on consumers and will either ask the FCC to reconsider its position, or will fight the ruling in court. The CEA claims that the largest obstacle facing HDTV is the lack of a broadcast standard for cable and satellite providers, and believes digital tuners should be optional because a large number of people subscribe to those services.

The FCC has criticized networks for not rolling out a larger number of programs in HDTV format. Major television and cable networks such as ABC, NBC, CBS and Discovery have responded by increasing their digital offerings, but the formats in which digital programs are broadcast are often erratic and unreliable.

Some networks choose to broadcast their digital programming in a standard 4:3 aspect ratio, which conflicts with the 16:9 widescreen format of a large number of new digital television sets. A standard-aspect ratio program will not fill up a widescreen television, and could cause permanent damage after extended usage. These new sets will be difficult to use if there is no standard format for broadcasting high definition television programming.

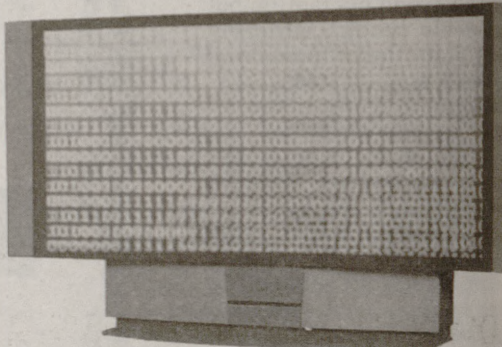
Transitioning to digital broadcasting has been a major challenge for individual television stations as well. With conversion costs that can approach \$3 million, many stations — especially those in middle and smaller markets — can't afford to purchase the equipment needed for digital television broadcasting.

Even major network affiliates in smaller markets are feeling the pinch, as some stations make no more than a few hundred thousand dollars per year in profits. As a stopgap measure, the FCC gave small market stations some relief last November by allowing the installation of low-power digital transmitters. This temporary solution, however, still leaves many viewers with no HDTV service in the near future.

With so many conflicts surrounding HDTV, questions are raised as to whether the United States will miss the July 2003 date for completion of the analog to digital transition set by the FCC mandate. A March 10, 2003 Consumer Electronics Association summit will continue talks between the FCC and industry leaders concerning plans for HDTV standards.

MANDATE ISSUED AUGUST 2002 requires television sets sold in the United States to be equipped with a digital tuner by the following dates:

- LARGE SCREEN (36 INCH OR LARGER) **JULY 2003**
 - MEDIUM SCREEN (25 INCH - 35 INCH) **JULY 2003**
 - SMALL SCREEN (13 INCH - 24 INCH) **JULY 2003**
- VCR S AND DVD PLAYERS



SOURCE: THE NEW YORK TIMES
TRAVIS SWENSON AND RUBEN DELUNA • THE BATTALION

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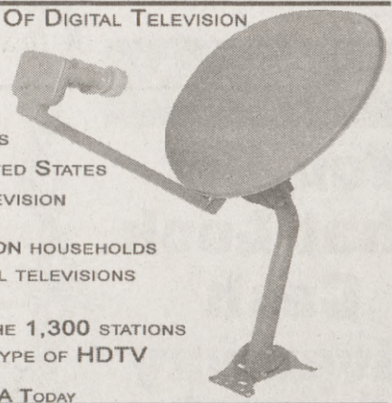
THE STATE OF DIGITAL TELEVISION

105 MILLION HOUSEHOLDS IN THE UNITED STATES HAVE A TELEVISION

4.8 MILLION HOUSEHOLDS HAVE DIGITAL TELEVISIONS

HALF OF THE 1,300 STATIONS USE SOME TYPE OF HDTV

SOURCE: USA TODAY



Misplaced surgical clamps, sponges show up inside patients

By Jeff Donn
THE ASSOCIATED PRESS

Surgical teams accidentally leave clamps, sponges and other tools inside about 1,500 patients nationwide each year, according to the biggest study of the problem yet.

The mistakes largely result not from surgeon fatigue, but from the stress arising from emergencies or

complications discovered on the operating table, the researchers reported.

It also happens more often to fat patients, simply because there is more room inside them to lose equipment, according to the study.

Both the researchers and several other experts agreed that the number of such mistakes is small compared with the roughly 28 million operations a year in the United States. "But no one in any role would say it's acceptable,"

said Dr. Donald Berwick, president of the Boston-based nonprofit Institute for Healthcare Improvement.

The study, done by researchers at Brigham and Women's Hospital and Harvard School of Public Health, both in Boston, was published in Thursday's New England Journal of Medicine.

The researchers checked insurance records from about 800,000 operations in Massachusetts for 16 years ending in 2001. They counted 61 forgotten

pieces of surgical equipment in 54 patients. From that, they calculated a national estimate of 1,500 cases yearly. A total of \$3 million was paid out in the Massachusetts surgical cases, mostly in settlements.

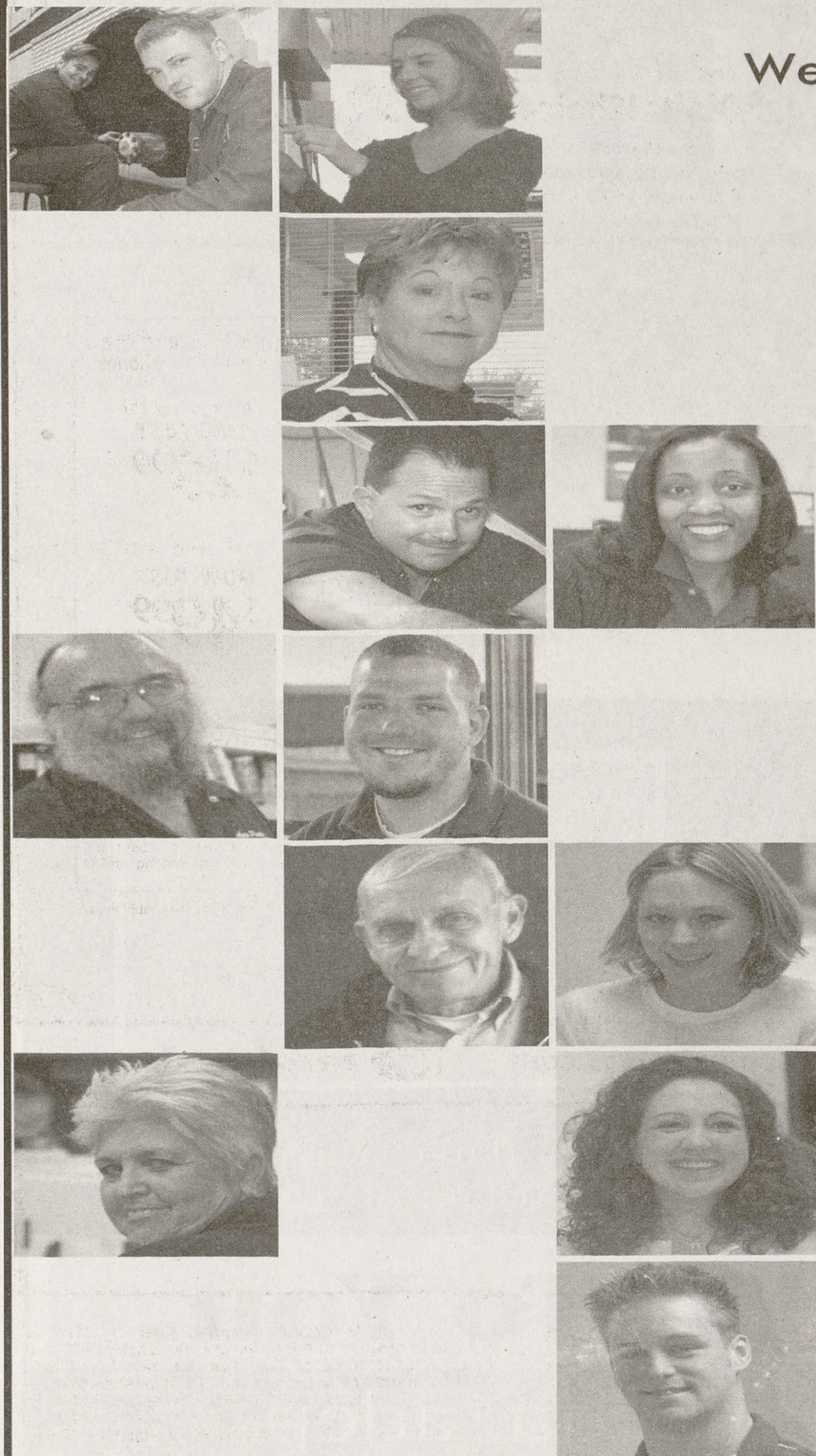
Two-thirds of the mistakes happened even though the equipment was counted before and after the procedure, in keeping with the standard medical practice.

Most lost objects were sponges, but

also included were metal clamps and electrodes. In two cases, 11-inch retractors were forgotten inside patients. In another operation, four sponges were left inside someone.

Most patients needed additional surgery to remove the object, but sometimes it came out by itself or in a doctor's office. For other cases, patients were not even aware of the object, which turned up in later surgery for other problems.

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