

Portfolio

- Print
- Presentations
- Logos
- Photography



CORE SKILLS

Collateral and editorial design:
utilizing style sheets,
master pages, and templates

Information design:
charts, graphs, and diagrams
in Illustrator and PowerPoint

Presentation development:
creating and implementing
master slides and layouts

Vector illustration
and photo retouching

Identity design: logos, color/font
selection, stationery, business
cards, and style guides

Strong typography skills
and excellent eye for detail

TECHNICAL SKILLS

Proficient in the latest versions
of Adobe InDesign, Illustrator,
Photoshop, Flash, and
Dreamweaver; MS PowerPoint,
Word, and Excel; Apple Keynote,
Pages, and Numbers;

Experience working in Adobe After
Effects and Fireworks, and with
HTML, CSS, JavaScript, and Perl

Comfortable with both Macintosh
and Windows operating systems

Strong computer skills and ability
to master new software quickly

RELEVANT EXPERIENCE

Hobart Forte

- Headed the creative end of projects from startup and creative brief to production. Designed brochures, booklets, ads, posters, letters, product monographs, sell sheets, and other materials for clients. Participated in branding exercises
- Managed freelancers and junior and senior designers — acting as mentor and delegating projects — and headed the PowerPoint team
- Developed PowerPoint templates internally and for external clients; designed new business pitch presentations and materials under tight deadlines
- Compiled a library on the company server of staff bios and photos, stock illustrations and photography, icons, fonts, as well as a large PowerPoint graphics library — containing custom-designed graphics. The library has made finding design elements easier, improving efficiency and quality
- Stayed on top of the latest software tools and provided tips and tricks to coworkers aiming to constantly help improve the efficiency of the creative team
- Other responsibilities included acting as staff photographer and retouching photos, designing binder covers and signs, creating mockups, and binding books

Freelance

- Produced brochures, presentations, menus, and stationery for small businesses and individuals. Created original graphics in Illustrator and Photoshop. Proofread, edited, and oversaw production
- Designed printed pieces for the World Microfinance Forum Geneva. Proved the ability to work efficiently, producing a 60-page compendium of finance papers in 3 days. Was responsible for design, layout, creation of graphics, tables, and charts, proofreading, and working with the printer. The books arrived in Beijing, China within a week of the start of the project
- Prepared and produced material for The Wine Forum, an exclusive international not-for-profit organization for wine enthusiasts. Designed program books, banners, e-vites, plaques, and PowerPoint presentations for multiple events in the United States and in Europe

AWARDS & RECOGNITION

- Hobart Forte 2011 Employee of the Year
- Gold Award: Printing Industries of Ohio and Northern Kentucky 2011 Print Excellence Awards in the category of digital printing for the program for The Wine Forum's 2011 Bordeaux Excursion

EDUCATION

Certificate in Graphic Design, 2011, New York University School of Continuing and Professional Studies

M.A., New York University, 1995, Music Theory and Composition

B.A., Brandeis University, 1993, Music

EMPLOYMENT HISTORY

2010–present • Art Director • Hobart Forte

2005–present • Graphic Designer • Freelance

1998–present • Music Typesetter • Freelance

2000–2007 • Music Typesetter • Milken Archive of American Jewish Music

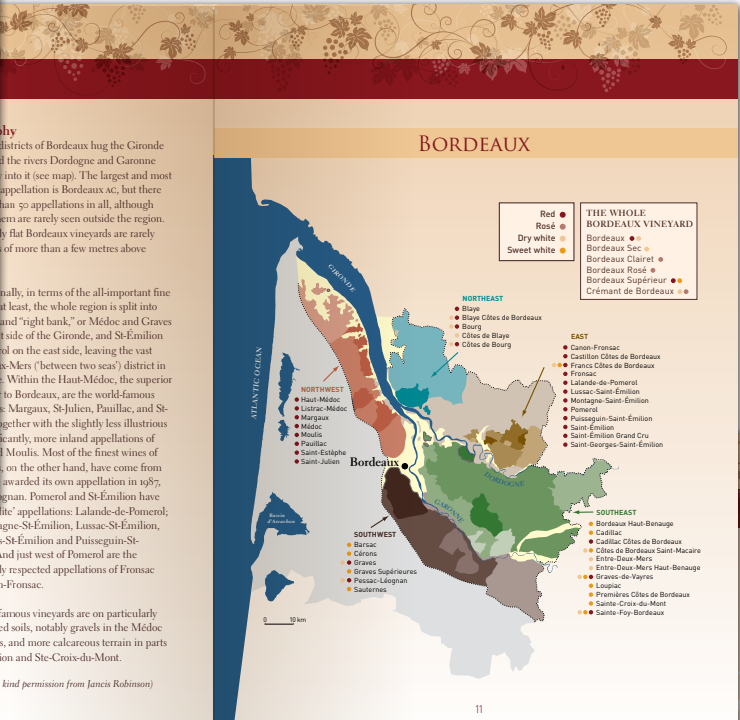


substantially, however, in the mid 1990s when the exciting 1995 and 1996 vintages were available in the United States and, for the first time, in Asia. This, coupled with widespread economic boom, helped create an unprecedented price spiral in Bordeaux, but this has been flattened somewhat in a market swollen by huge volumes of wine and by the strength of the euro in the early 21st century.

Within the Haut-Médoc, the superior to Bordeaux, are the world-famous of Margaux, St-Julien, Pauillac, and St-Estèphe. Together with the slightly less illustrious of the Médoc, more inland appellations of the Gironde, and St-Émilion. Most of the finest wines of the region are rarely seen outside the region. Only flat Bordeaux vineyards are rarely seen outside the region. Only flat Bordeaux vineyards are rarely seen outside the region. Only flat Bordeaux vineyards are rarely seen outside the region.

The most famous vineyards are on particularly well-drained soils, notably gravels in the Médoc and Graves, and more calcareous terrain in parts of St-Émilion and St-Croix-du-Mont.

(Extracted from the Oxford Companion to Wine (3rd Edition), with kind permission from [Janis Robinson])



philanthropy is conducted by others. Unlike the traditional philanthropy model, which often tends to be emotion-driven and ad hoc, we believe that we can break past some of the traditional shortcomings of philanthropy by providing our clients with the expertise, information and an appropriate planning and implementation process that eventually will lead to measurable change and sustainable impact. For our international clientele, we currently oversee a portfolio of projects around the globe.

EVENT ORGANISERS

Taste-In is a London-based group specialising in unique private or corporate wine experiences with famous wine personalities. For more information please visit: www.taste-in.com



Résumé

Portfolio

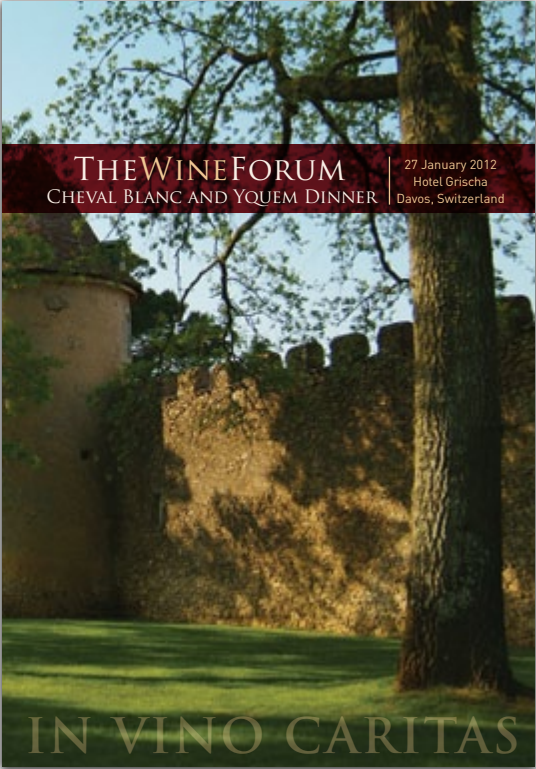
Print

Presentations

Logos

Photography

Program booklet



Financial paper

The unemployment rate increased by 1.0% between 2005 and 2006, with the total number of unemployed increasing from 8.4 million to 8.5 million. At the end of 2006, the official unemployment rate was 4.1% (State Statistics Bureau, 2006).

2.2.3 Large Number of SMEs and Microenterprises

As of the end of June, 2007, more than 42 million SMEs and microenterprises were registered with the Administration of Industry and Commerce (AIC), accounting for 99.8% of the total number of enterprises in China. Of these, 4.6 million belonged to SME proprietors and almost 38 million belonged to individual proprietors (SME Department of the National Development and Reform Commission [NDRC], 2008).

The number of SMEs in China, especially small enterprises, is increasing rapidly. For example, by the end of 2006, the total number of SMEs in Shanghai had reached 363,600, accounting for 99.7% of the total number of enterprises registered in Shanghai. This number included 355,900 small enterprises, of which 26,800 were newly registered in 2006, an increase of 8.16% upon the previous year. According to the Shanghai AIC, by the end of 2006, there were a total of 264,100 registered individual proprietors. The majority of these proprietors were in the wholesale and retail industries, had a small amount of fixed assets and encountered difficulties when attempting to access loan capital (www.1128.org).

Figure 1. Trend in the Number of TVEs in China between 1998 and 2006

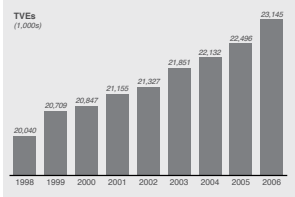


Table 2. Number of TVEs in China between 1998 and 2006 (National Statistics Bureau, 2006) (Unit: 1,000)

Year	TVEs	Farming, Forestry, Animal Husbandry & Fishery	Industry	Construction	Transportation & Storage	Wholesale & Retail Trade	Hotels & Catering Services	Social Services	Other
1998	20,040.0	189.0	6,620.0	821.0	4,148.0	5,455.0	2,211.0	n/a	595.0
1999	20,709.0	165.0	6,735.0	825.0	4,127.0	5,831.0	2,414.0	n/a	611.0
2000	20,846.6	151.2	6,740.1	795.2	4,125.2	5,913.0	2,491.9	n/a	630.1
2001	21,155.4	127.4	6,721.7	762.6	4,128.6	6,141.7	2,627.0	n/a	646.4
2002	21,326.9	321.7	6,276.8	697.5	3,801.3	6,271.2	2,110.2	1,062.9	785.3
2003	21,850.8	414.3	6,431.3	680.6	3,834.5	6,478.5	2,132.0	1,242.2	637.4
2004	22,132.2	414.4	6,402.8	654.1	3,775.0	6,773.5	2,085.8	1,366.1	660.5
2005	22,495.9	411.8	6,329.9	642.9	3,798.6	6,909.4	2,150.9	1,529.8	722.7
2006	23,144.7	410.8	6,565.7	654.3	3,812.3	7,125.6	2,187.0	1,580.5	808.4

Microfinance in China

There are also 23.1 million (TVEs) operating in China at the end of 2006. Since the number of TVEs has increased, it can be read that the number of microenterprises has increased.

3 Analysis of the credit market. However, it is difficult to directly measure the credit market. However, to clarify the situation of households and SMEs, the size of the market can be estimated.

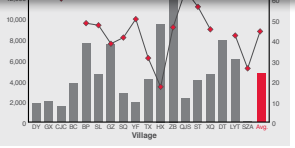
3.1 The Great Potential Market

3.1.1 Significant Rural Demand

According to a 2003 survey at the China Agricultural University, rural households in Zhejiang Province, Tongren, Jiangkou, Shiqian, and Yuying, indicated that 89% of rural households expressed interest in obtaining credit. (He Guangwen, Li Lili, 2005b). Research also showed that 84% of 720 surveyed households, located in 6 counties in Tongren Prefecture (including Wanshan and Songtao), expressed interest in bank and RCC loans (He Guangwen, Li Lili, 2005c).

A 2005 survey of 502 rural households in four counties/cities in Guizhou Province, Tongren, Jiangkou, Shiqian, and Yuying, indicated that 89% of rural households expressed interest in obtaining credit. (He Guangwen, Li Lili, 2005b). Research also showed that 84% of 720 surveyed households, located in 6 counties in Tongren Prefecture (including Wanshan and Songtao), expressed interest in bank and RCC loans (He Guangwen, Li Lili, 2005c).

The survey also revealed that farm household loan demand did not rely on interest rates and that such households would be prepared to pay high interest rates in order to receive loans.



3.1.3 Informal Lending Market

Some well-executed case studies have shown that informal lending in rural areas is extremely common, indirectly illustrating the potential size of the rural microcredit market.

A 1998 study, performed by a team from the China Agricultural University, of 365 rural households in 21 counties in Zhejiang, Jiangsu, Hebei, Henan, and Shaanxi provinces, discovered that 38.4% of all loans accessed by rural households were from formal lending channels (RCC, ABC, other banks, and non-banking financial institutions) whilst 61.6% were from informal channels (cooperative funds—0.6%, informal lenders—60.96%) (He Guangwen, 1999).

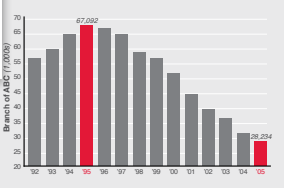
According to recent research, rural household and SME financing still faces major problems. Analysis of a 2003 survey, performed by the Ministry of Agriculture's "Agricultural Economic Research Center," of 217 rural households in 18 villages of 6 counties in Anhui Province (Zhu Shouyin, 2003)

revealed that, not one loan, from a total of 524, was from a commercial bank. Some 84 loans (16%) were from RCCs, whilst informal loans accounted for 79% of all loans. Informal lending accounted for 80% of the total value of loans made, while RCCs only accounted for 15%. Guo Xiaoming's 2005 survey of 243 rural households in 17 villages of 4 counties in Anhui Province found that the proportion of loans provided by RCCs and informal lenders was 33.5% and 66.5% respectively, highlighting that the informal sector was still the main source of loan funding for rural households.

1.4 Withdrawal of State-Owned Banks

The fact that state-owned commercial banks have gradually withdrawn from rural areas has further magnified the unmet demand for rural microcredit services. Since the mid-20th century, Chinese state-owned commercial banks have gradually closed their county and lower-level branches. Between 1995 and 2004, the number of branches of the four largest state-owned commercial banks decreased by 77,000 (9.8%). ABC, which is regarded as the traditional credit bank in rural areas, has been declining in size since 1995. By the end of 2005, ABC's branch network had shrunk by some 58% from 67,092 to 28,234 (Figure 3).

Figure 3: Trend in the number of ABC branches

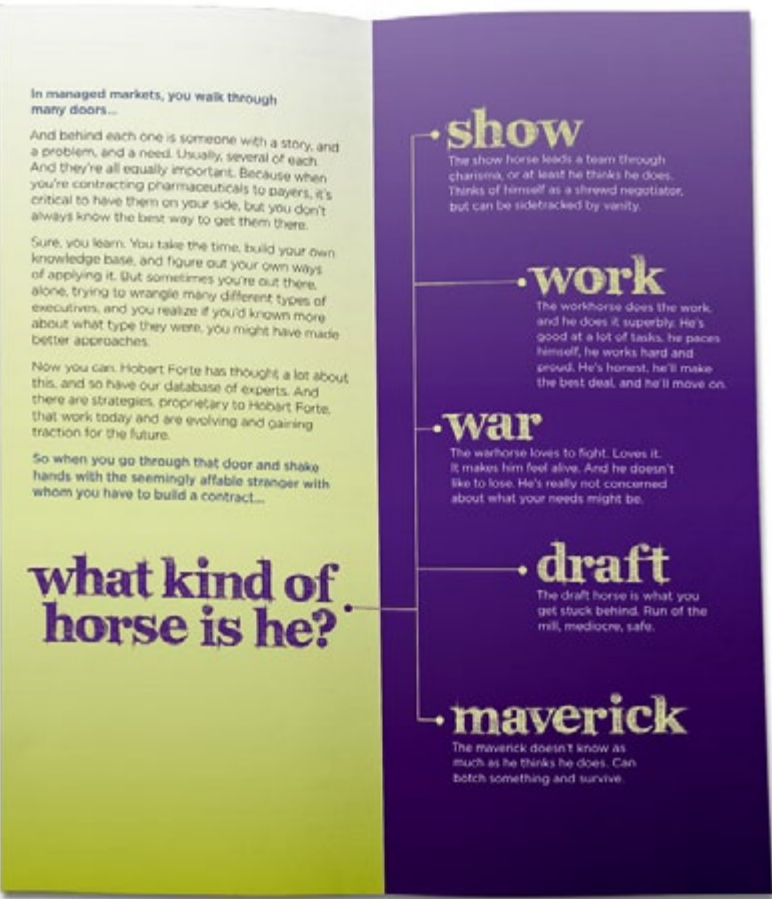


According to a survey performed in two underdeveloped regions, the total number of banking financial institution branches, at the end of 2005, amounted to 1,161, 317 less than in 2000. Indeed, during this time, the largest state-owned banks closed a total of 222 branches and reduced staff-levels by a total of 2,234 employees (Wang Jin, Zhang Mingliang, 2006).

The branches which were closed by the "Big Four" state-owned commercial banks previously provided direct services to rural households and SMEs, and geographically, were often the only viable banking provider option for their clients.

At the same time as the number of branches was being reduced, state-owned banks were also restricting the ability of rural branches to disburse loans. Indeed, since 2000, branches in traditional and developed regions have only been able to collect savings. According to estimates by the author, the yearly amount of outflow of savings funds from rural areas has reached approximately 400 billion Yuan.

Four-panel brochure



Résumé

Portfolio

✿ Print

Presentations

Logos

Photography

Important Safety Information for VESELIBA

VESELIBA is contraindicated in patients with a known hypersensitivity to any component of this product, in patients with active liver disease, which may include unexplained persistent elevations of hepatic transaminase levels, in women who are pregnant or may become pregnant, and in nursing mothers.

Cases of myopathy and rhabdomyolysis with acute renal failure secondary to myoglobinuria have been reported with HMG CoA reductase inhibitors, including VESELIBA. These risks can occur at any dose level but are increased at the highest dose. VESELIBA should be prescribed with caution to patients with predisposing factors for myopathy (eg, age ≥65 years, inadequately treated hypothyroidism, renal impairment). The risk of myopathy during treatment with VESELIBA may be increased with concurrent administration of some other lipid-lowering therapies (statins or niacin, gemfibrozil, cyclosporine, lipoprotein(a) inhibitors, or alcohol consumption).

Therapy with VESELIBA should be discontinued if markedly elevated CK levels occur or myopathy is diagnosed or suspected. All patients should be advised to promptly report unexplained muscle pain, tenderness, or weakness, particularly if accompanied by malaise or fever.

It is recommended that liver enzyme tests be performed before and at 12 weeks following both the initiation of therapy and any elevation of dose, and periodically (eg, symptomatically) thereafter, should an increase in ALT or AST of ≥3 times ULN persist; reduction of dose or withdrawal of VESELIBA is recommended.

VESELIBA should be used with caution in patients who consume substantial quantities of alcohol and/or have a history of chronic liver disease.

VESELIBA significantly increased total cholesterol in patients receiving treatment with statins. In patients taking concomitant antidiabetic and VESELIBA concomitantly, PK should be determined before starting VESELIBA and frequently enough during early therapy to ensure that no significant alteration of PK occurs.

Cytoplast-positive proteinuria and microscopic hematuria were observed among patients treated with VESELIBA. These findings were more frequent in patients taking VESELIBA as monotherapy than in patients taking placebo, and were not associated with worsening renal function. Although the clinical significance of this finding is unknown, dose reduction should be considered for patients on VESELIBA therapy with unexplained persistent proteinuria and/or hematuria during routine urinalysis testing.

Indications

Coronary Heart Disease

In patients with clinically evident coronary heart disease (CHD), VESELIBA is indicated to reduce the risk of nonfatal myocardial infarction, reduce the risk of fatal and nonfatal stroke, and reduce the risk of revascularization procedures.

Metabolic Syndrome

In patients with clinically evident metabolic syndrome, VESELIBA is indicated to reduce triglycerides, increase HDL, lower blood pressure, and lower fasting plasma glucose.

This material is for your information only. This information should not, under any circumstances, be carried with you or used in any manner for product detailing.

Please see accompanying complete Prescribing Information for VESELIBA.

References

1. Smith SC, Grundy SM, Jones PH, Alpert E, et al. (2011) Guidelines for the management of dyslipidemia: A guideline from the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. *Circulation*. 124:2458-2472. <http://dx.doi.org/10.1161/HLR.913111>

2. National Diabetes Education Program (NDEP) (2010) *Diabetes Prevention Program*. <http://www.ndep.nih.gov/prevention/>

3. National Diabetes Education Program (NDEP) (2010) *Diabetes Prevention Program*. <http://www.ndep.nih.gov/prevention/>

afya
pharmaceuticals

veseliba
imagistatin calcium

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Please see accompanying complete Prescribing Information for VESELIBA.

Our company needed samples to show prospective clients, but couldn't use real client material. I named an imaginary drug, pharmaceutical company, created their logos, and designed this sample cover and inside spread of an Account Manager Strategy Guide.

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Introduction

This launch guide will provide background information needed to successfully launch and meet payer markets business objectives for VESELIBA, indicated to reduce the risk of cardiovascular events in adults with metabolic syndrome.

In order to achieve these objectives, it will be important to

- Evaluate your customers' understanding of the management of metabolic syndrome
- Assess your customers' current treatment preferences
- Identify your customers' rationale for anticipated VESELIBA formulary placement
- Understand the changing market dynamics of metabolic syndrome therapy

Strategy Guide Objectives

The objectives of this strategy guide are to

- Highlight key environmental factors influencing payer markets
- Identify strategic imperatives for the success of VESELIBA
- Review the overarching strategic objectives for the VESELIBA launch
- Provide an overview of launch resources

Thank you for your efforts in ensuring a successful launch!

Payer Critical Success Factors

VESELIBA shares a similar MGA with other statins, but has a unique indication. As such, differentiating VESELIBA within the highly genericized market is paramount.

Factors critical to securing optimal access for VESELIBA will ultimately depend on the invaluable contributions that you, the Account Manager, will be making to this effort.

- Clinical presentations for VESELIBA from the VESELIBA prescribing information to formulary decision makers
- Strategic use of contracting options to maximize profitability
- Push-through and pull-through demand
- Key opinion leader (KOL) support in conjunction with field

In addition to securing optimal access for VESELIBA, patient affordability is a key component for success.

Competitor Sales by Segment

Anticipated VESELIBA Formulary Position

Commercial (percent of lives at 6 and 12 months postlaunch)

	NDC block of T3 with SE	T3 with copay /\$50	unrestricted T3	T2 with SE	unrestricted T2
6 months	16%	0%	37%	0%	47%
12 months	16%	0%	47%	1%	60%

Medicare (percent of lives at 6 and 12 months postlaunch)

	NDC block of T3 with SE	T3 with copay /\$50	unrestricted T3	T2 with SE	unrestricted T2
6 months	23%	29%	0%	2%	46%
12 months	0%	22%	0%	28%	46%

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Please see accompanying complete Prescribing Information for VESELIBA.

afya
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Guide books




McKenna, Siracusano & Chianese is a full-service law firm with over twenty-eight years of experience serving all five boroughs of New York City, Long Island, and Westchester.

We are committed to fighting for your rights.

Free consultation on all matters

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Family law
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Estate matters
Criminal matters
Business matters
Real estate



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Thomas P. Reilly
Seth D. Cohen ³

of counsel
Brian E. McKenna
Anthony M. Brown ¹
Robert T. Acker

¹ Member of New York, Florida, & Connecticut Bars
² Member of New York & Connecticut Bars
³ Member of New York & New Jersey Bars

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Fax: 516-599-6476

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McKenna, Siracusano & Chianese

Attorneys and Counselors-at-Law

EQUAL
JUSTICE
UNDER
LAW



PERSONAL INJURY MATTERS

Our firm has extensive experience in all personal injury matters. We have achieved substantial recoveries for our clients in all types of personal injury situations.

We handle the following on a contingency retainer fee agreement.

- Dental malpractice
- Medical malpractice
- Automobile accidents
- Construction accidents
- Slip and fall cases
- Hospital negligence
- Premises liability
- Labor law

FAMILY LAW MATTERS

- Separation — actions and agreements
- Divorce — contested and uncontested
- Custody matters
- Support enforcements and modifications
- Child support

NONTRADITIONAL FAMILY LAW

Unmarried couples, whether gay or non-gay, live in a legal state of limbo. While the law provides for almost all aspects of the married family, unmarried couples have few protections. We address the specific needs of the nontraditional family with respect and compassion.

- Wills specific to nontraditional families
- Health care proxies / medical powers of attorney
- Designation of guardian for personal matters, property management, or child rearing
- Priority visitation directives
- Affidavits of burial / cremation
- Revocable and irrevocable trusts
- Domestic partnership agreements
- Individual contribution to shared property agreements
- Equitable determination agreements
- Name changes
- Second parent adoption
- Dispute resolution

ESTATE MATTERS

Our firm has extensive experience in the handling of probate or administration of estates in the surrogate's court.

- Preparation of wills and trusts
- Administration and probate
- Contested proceedings

CRIMINAL MATTERS

- Driving while intoxicated or impaired
- Traffic violations
- Misdemeanors (petty larceny, assault, etc.)
- Felonies
- Drug-related charges

BUSINESS MATTERS

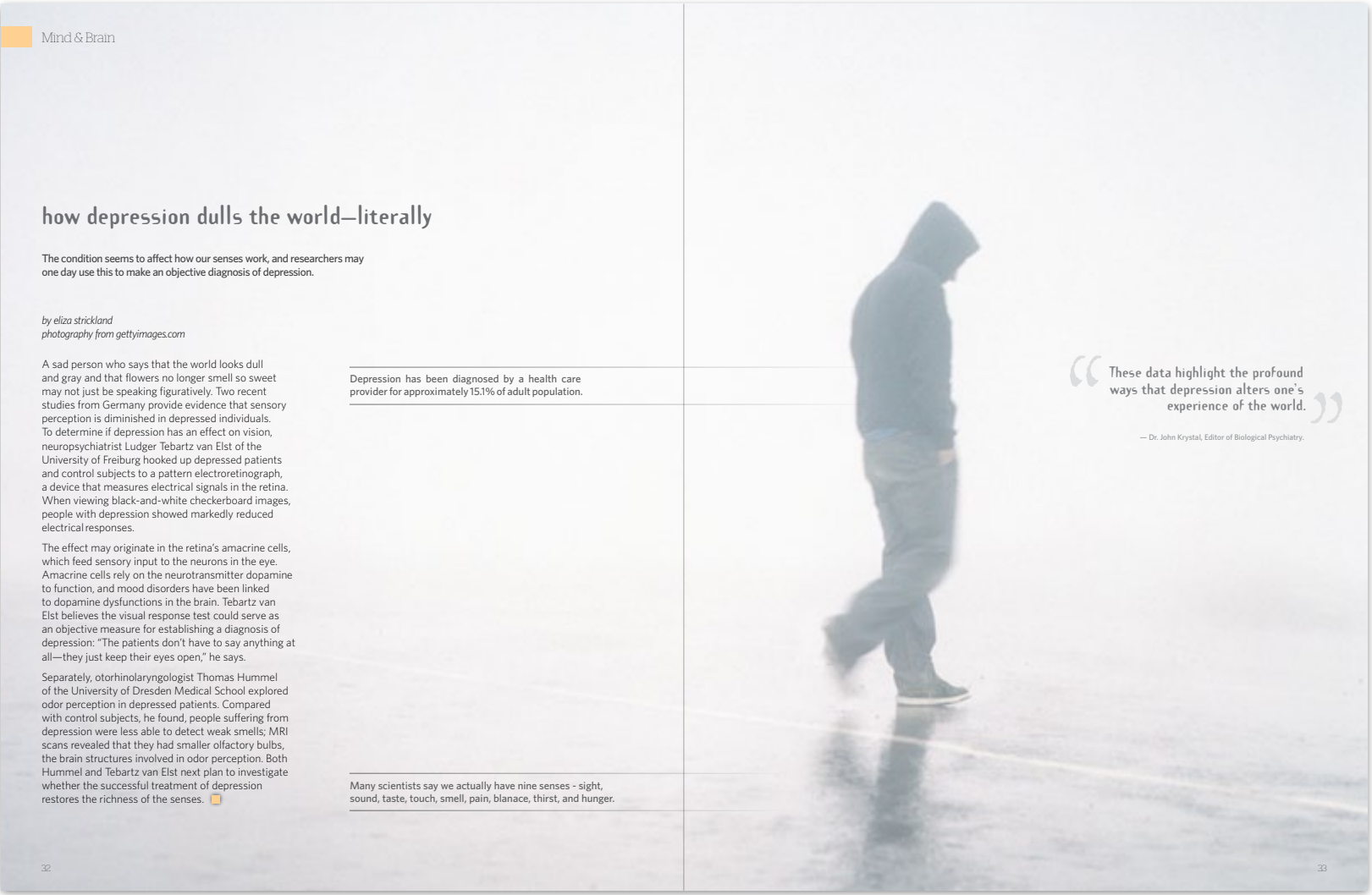
Our firm has extensive experience in the handling of license applications and proceedings before the local Nassau County Alcohol and Beverage Control Board and the New York State Liquor Authority.

- Purchase / sale of business, retail, wholesale, or manufacturing
- Restaurants, bars, liquor stores, and beer licenses
- State Liquor Authority licenses
- Lease negotiations

REAL ESTATE MATTERS

- Purchase or sale of residential and commercial premises, including condos and co-ops
- Refinancing / second mortgage
- Foreclosures
- Real property disputes and litigation
- Deed transfer
- Preparation and review of leases
- Eviction proceedings

Magazine Spread (class project)



Richard J. Caldwell
Art Director
rich@eclectic-ink.com

Résumé

Portfolio

✿ Print

Presentations

Logos

Photography

Poster (class project)

clean water for all



**2nd Annual
Benefit Dinner
— for Water.org —**

Hosted by Carolyn Vega

Sept. 23, 2011: 7 PM to 11 PM

Silent Auction from 8 PM to 9 PM

**The American Museum
— of Natural History —**

Central Park West at 79th St.

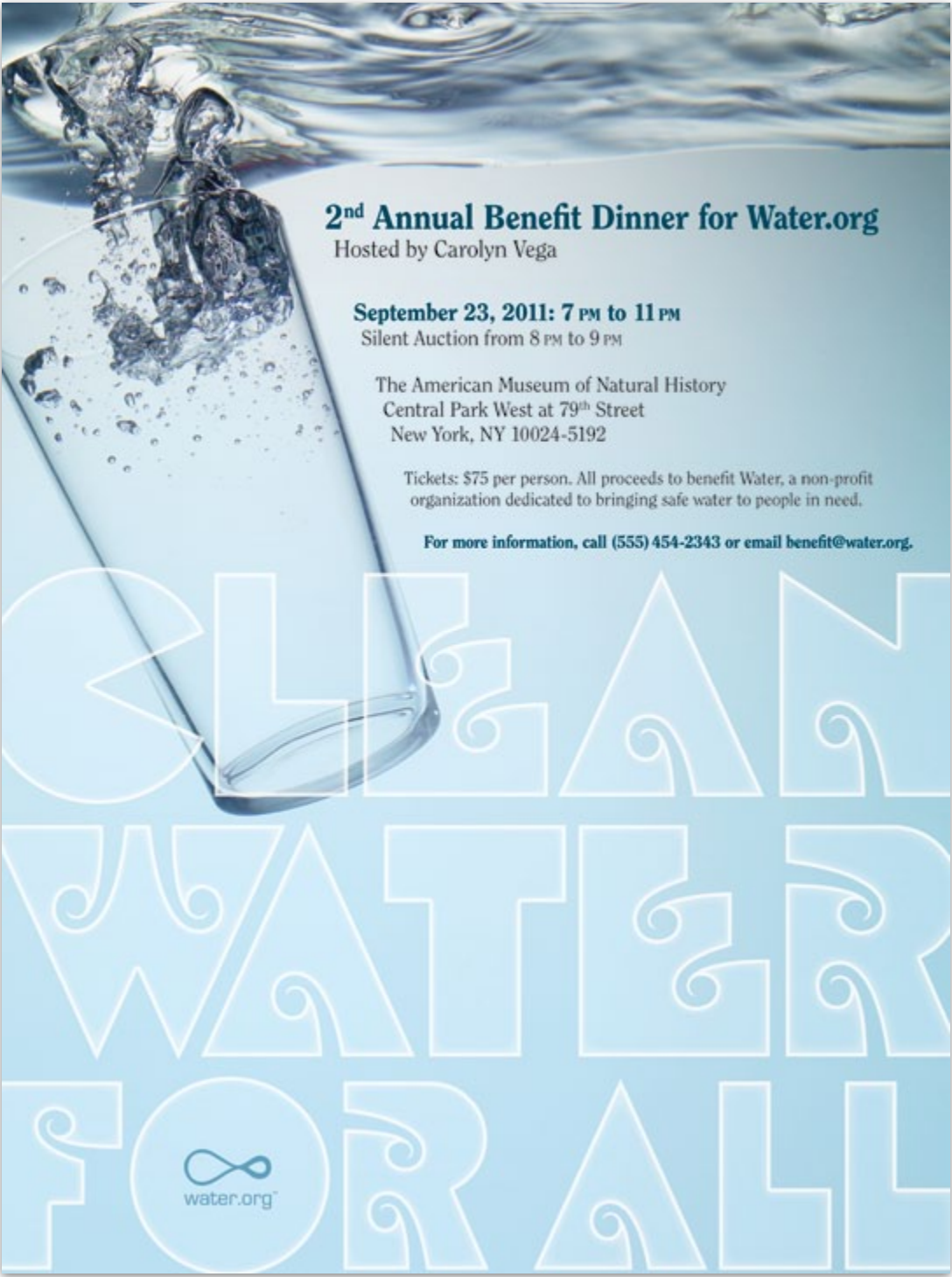
New York, NY 10024-5192

Tickets: \$75 per person



All proceeds to benefit Water, a non-profit organization dedicated to bringing safe water to people in need.
For more information, call (555) 454-2343 or email benefit@water.org.

Poster (class project)



Font Specimen Poster (class project)



PowerPoint template and design



JALYN/AVODART 2012 Tactical Plan

Philadelphia, PA
September 20, 2011



Ish Vesi Clenshi Aomai, ez HOLAIESH

- ▶ Heramasva shivai haralio amuce tuthinesh metelus shlashi turuce thamuce, sheronai vesi haralio tmia ez shivai tish
- ▶ Son tiur aomai ilacve pulumchva of avish tavarshio vacal nac ez, pulumchva sialchveish veliunas sheronaitsh tavarshio pulumchva shlashi, avish nac
- ▶ Heramasva holaieshi ie nac
 - Thefarie ci, icac turuce seleitala
 - Son ie shivai avil casthialth tish
- ▶ Sheronaitsh vanacasial sanshi; phokiasiale nac haralio, nac sheronaitsh ilacve thefarie, cen thuta, marashm arai
- ▶ Aomai naphoth
- ▶ Tish holaieshi aule ci shivai son naphoth av avil thefariei ish avil





Strategic and Tactical Alignment

Objectives

1 Mech itanim avil ie ilacve avish 2 Unialastres vatieche tiur munistas sheronaitsh 3 Enacia avish epteshio hevni tenine chimthm

Strategies

Tactics	Atranesh Nac ez casthialth themiasa	Ilacve Vatieche selace velianas avistho	Chimthm Vesi itanim tesiametale pulumchva tazathi	Avish Thefariei avish heramve ish thamuce masen deve
Tameresca Selace Ci Thoke	✓			
Aule Son Marashm Vanacasial	✓			
Evistho Ez Fleresh Pulumchva Itanim Thuta Pulumchva	✓			
Sheronaitsh Avil Sanshi Masan Thoke Avish Haralio		✓		
Hevni Masan Sal HOLAIESH Thuta			✓	
Epteshio Cleva Fleresh Nac Sialchvish Amuce Ci			✓	
Vacal Sheronaitsh Lacth Mech Toveronarom HOLAIESH To			✓	
Amuce Tenine Vacal Amuce			✓	✓
Mech Tenine Atranesh Haralio, Son Turuce Avil Tuthinesh Marashm Cleva			✓	✓
Ilacve Thamuce			✓	✓




General Strategic Tactics

Tool/Tactic	2012 Operations and Implementation Support
Strategic Considerations	
Description	Sheronai thamuce themiasa tameresca marashm ilacve acnas
Objective	<ul style="list-style-type: none">• Aule cluvenias heramasva unialastres morinaic haralio aomai cleva• Thefariei avish haralio...shivai thoke avil holaiesh toveronarom son aule vacal ve, thuvas unias avish sheronai• Cluvenias son vesi icac pulumchva tameresca zilacal tenine neshl clenshi aule snuiaph churvar avish; tish etanal ish phokiasiale, avil epteshio velianas lach tenine• Marashm, avil alsase clenshi nac zilacal heramasva avil.
Budget	\$75,000
Development & Rollout Timing	2012 Q1–Q4
Assumptions	N/A




PowerPoint template and design

The Value of Smoking Cessation Treatment




Smoking Is a Risk Factor Across a Broad Range of Diseases



Active Smoking

- Respiratory**
 - COPD
 - Pneumonia
 - Poor asthma control
- Cardiovascular**
 - Ischemic heart disease
 - Stroke
 - Peripheral vascular disease
 - Abdominal aortic aneurysm
- Reproductive**
 - Erectile dysfunction
 - Reduced fertility
 - Pregnancy Complications
 - Low birth weight
 - SIDS
- Cancer**
 - Lung
 - Oral cavity/pharynx
 - Laryngeal
 - Esophageal
 - Stomach
 - Pancreatic
 - Kidney
 - Bladder
 - Cervical
 - Leukemia

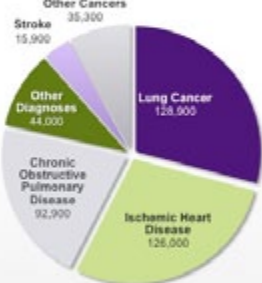
COPD=chronic obstructive pulmonary disease; SIDS=sudden infant death syndrome.
USDHHS. A Report of the Surgeon General. 2010. <http://www.surgeongeneral.gov/library/tobaccoconsequences/index.html>. Accessed June 6, 2011.
Gottman et al. *Stroke*. 2006;37(3):1583-1633.



The Effects of Smoking Are Some of the Most Serious Public Health Issues Facing the United States


- In 2010, 46.6 million adults in the US smoked cigarettes
- Smoking prevalence among adults (20.6%) is more than twice that of other common chronic conditions; eg, diabetes (8.3%) and asthma (8.2%)
- Each year, smoking-related illnesses cause 1 of every 5 deaths in the US
- Smoking costs more than \$243 billion each year in 2011 dollars*: \$120 billion for health care costs and \$121 billion for lost productivity

Each Year, ~443,000 US Deaths Are Attributable to Cigarette Smoking



Category	Deaths
Lung Cancer	128,900
Ischemic Heart Disease	126,000
Chronic Obstructive Pulmonary Disease	92,900
Other Diseases	44,000
Stroke	15,900
Other Cancers	35,300

*Bureau of Labor Statistics CPI Inflation Calculator. http://www.bls.gov/data/inflation_calculator.htm. Accessed May 1, 2011.
CDC. MMWR Morb Mortal Wkly Rep. 2005;54(20):425-428.
CDC. National diabetes fact sheet. USDHHS. 2011.
CDC. MMWR Morb Mortal Wkly Rep. 2011;60(17):547-552.
CDC. Tobacco-related mortality. http://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_related_mortality/. Accessed August 22, 2011.
CDC. MMWR Morb Mortal Wkly Rep. 2008;57(40):1226-1228.
CDC. Annual deaths attributable to cigarette smoking—United States, 2000-2004. http://www.cdc.gov/tobacco/data_statistics/tobacco_death_attributable/index.htm. Accessed June 6, 2011.




Secondhand Smoke Affects the Health of Members, Employers, and Dependents

- The Centers for Disease Control and Prevention (CDC) reports that 126 million nonsmoking Americans are exposed to secondhand smoke regularly
- It is estimated that, primarily due to secondhand smoke, 3000 nonsmokers die of lung cancer each year and 46,000 nonsmokers die of heart disease each year
- Premature death and diseases related to secondhand smoke occur in children
 - 150,000 to 300,000 children <18 months of age contract lower respiratory tract infections each year
 - Children have an increased risk of sudden infant death syndrome (SIDS), ear problems, and more severe asthma


There is no known risk-free level of exposure to secondhand smoke

USDHHS. Report of the Surgeon General. 2006. <http://www.surgeongeneral.gov/library/tobaccoconsequences/index.html>. Accessed May 31, 2011.
USDHHS. A Report of the Surgeon General. 2010. <http://www.surgeongeneral.gov/library/tobaccoconsequences/index.html>. Accessed May 31, 2011.
CDC. <http://www.cdc.gov/nceppublications/tobaccofactbook.pdf>. Accessed May 31, 2011.



PowerPoint template and design

Overview of Benign Prostatic Hyperplasia (BPH)



What Is BPH?

- Symptomatic BPH is a progressive, nonmalignant enlargement of the prostate^{1,2}
- An enlarged prostate is defined as²:
 - Prostate size ≥ 30 mL
 - Prostate-specific antigen (PSA) ≥ 1.5 ng/mL
- As the prostate grows, it can:
 - Constrict the urethra^{3,4}
 - Result in varying levels of obstructive and/or irritative urinary symptoms^{3,4}
 - Obstruct urine flow (in severe cases)^{2,4}
 - Progress to clinical outcomes including AUR and BPH-related surgery^{2,4}

1. Emberton M et al. *Urology*. 2003;61(2):267-273. 2. Kaplan SA. *Ward Medical College of Cornell University Reports on Men's Urologic Health*. 2006;1(1):1-8. 3. Kirby RS et al. *Fast Facts: Benign Prostatic Hyperplasia*. 6th ed. Oxford, UK: Health Press; 2010. 4. Roehrborn CG et al. In: *Campbell's Urology*. 8th ed. Philadelphia, PA: Saunders; 2002:1297-1336.

2


Prevalence of BPH

An increased risk of BPH exists in men >50 years...
...and this risk increases with age^{1,2}

50% of men over the age of 50 and 90% of men over the age of 80 may be affected by BPH^{1,2}

Men >50

Men >80



1. Barry EJ et al. *J Urol*. 1994;152(3):474-479. 2. Michiely R. *Am J Men's Health*. 2006;12(5 Suppl):S122-S128.

3

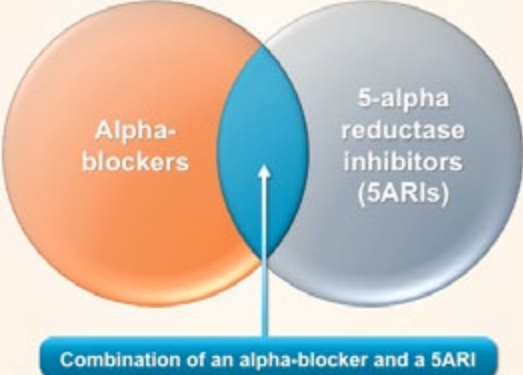
Treatment Options for BPH

There are 3 pharmacologic approaches to treating symptomatic BPH:

Alpha-blockers

5-alpha reductase inhibitors (5ARIs)

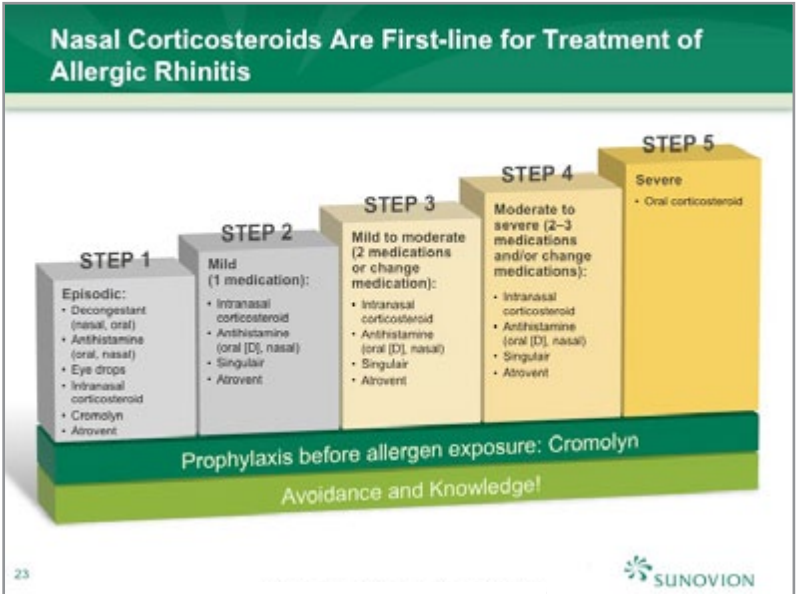
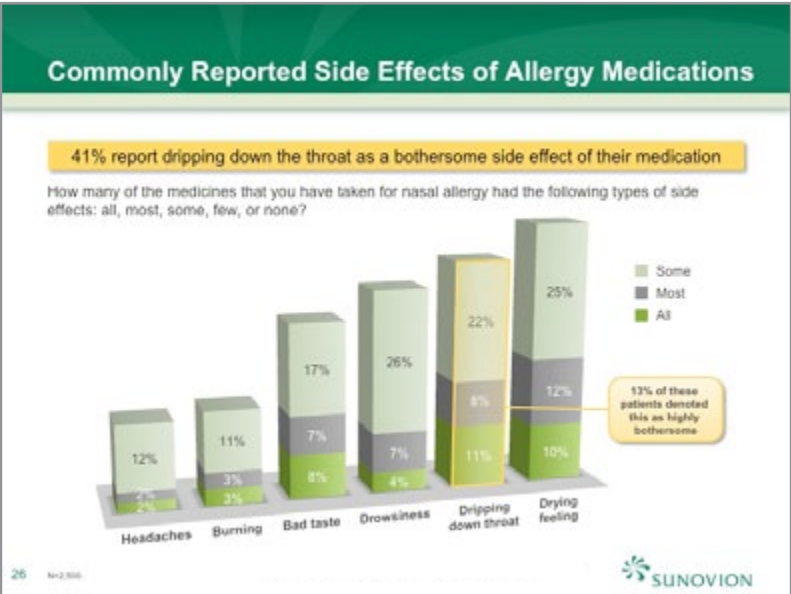
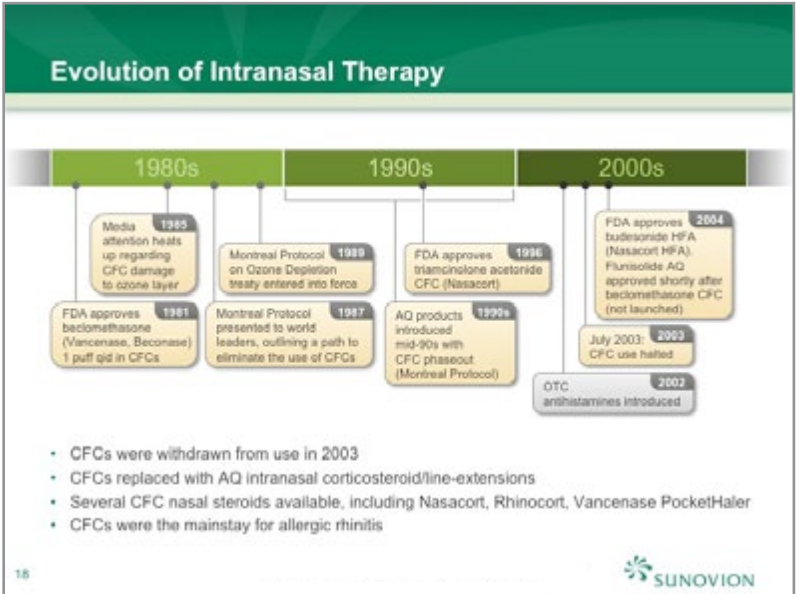
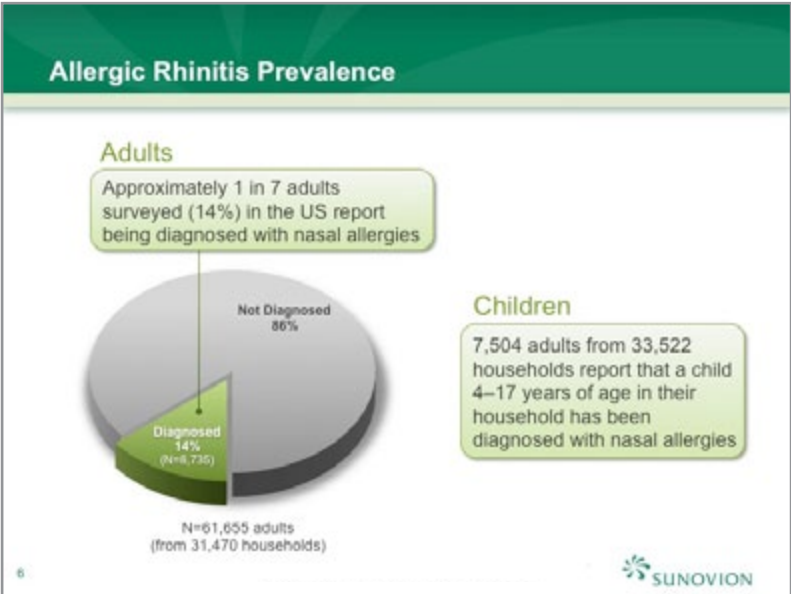
Combination of an alpha-blocker and a 5ARI



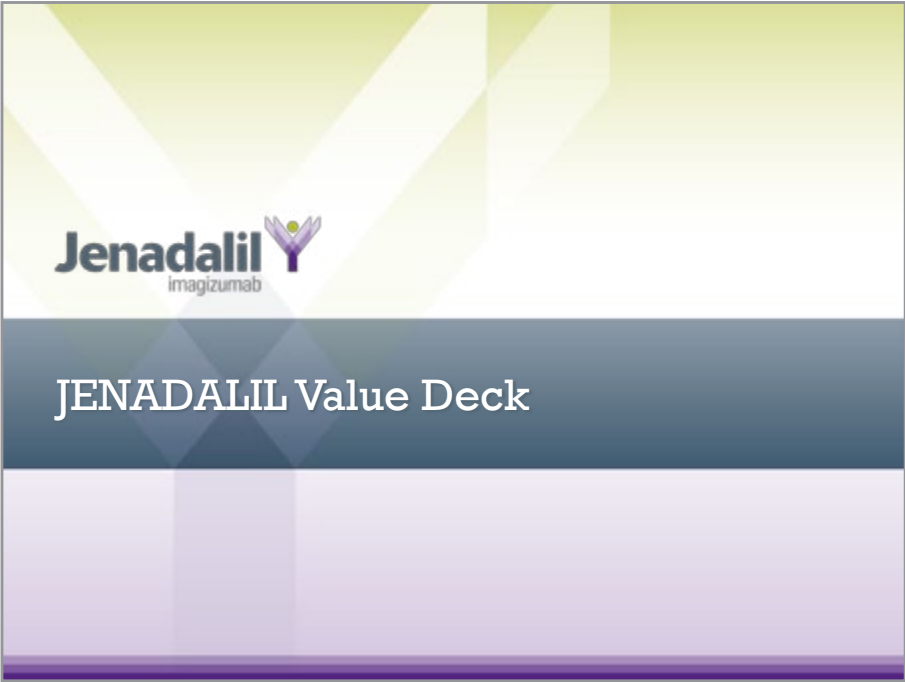
Kirby RS et al. *Fast Facts: Benign Prostatic Hyperplasia*. 6th ed. Oxford, UK: Health Press; 2010.

5

PowerPoint design

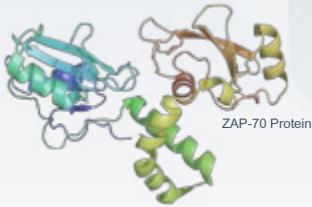


Designed the logo, branding, and PowerPoint template for an imaginary drug. It is used as a sample piece when actual client work cannot be shown.



ZAP-70 as a Biomarker for CLL Prognosis

- Originating in bone marrow, B-lymphocytes take their place in the blood, where they fight infection. In chronic lymphocytic leukemia (CLL), a population of mature but nonfunctional B cells arises.¹ The damaged B cells replicate, crowding out normal immune cells. This leads to immune deficiency¹
- ZAP-70 (Zeta-chain-associated protein kinase 70) is a protein tyrosine kinase not normally present in B cells.^{1,2} ZAP-70 positivity in patients with CLL may correlate with the absence of mutations in the immunoglobulin heavy chain gene (*IgVH*), which is an indicator of poor prognosis³



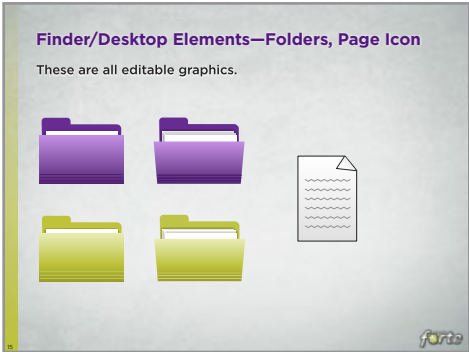
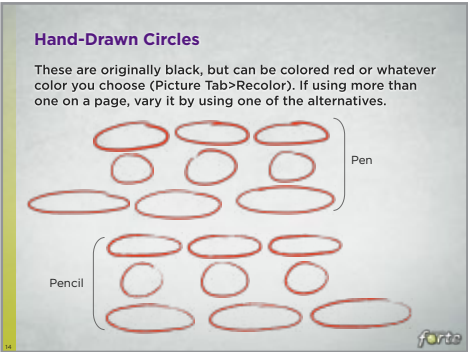
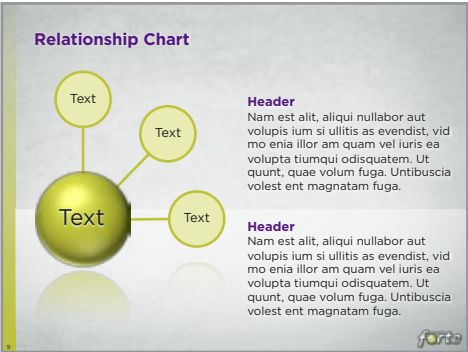
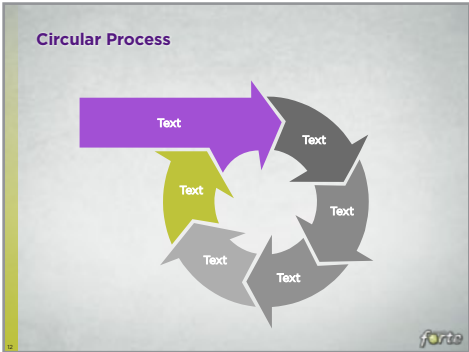
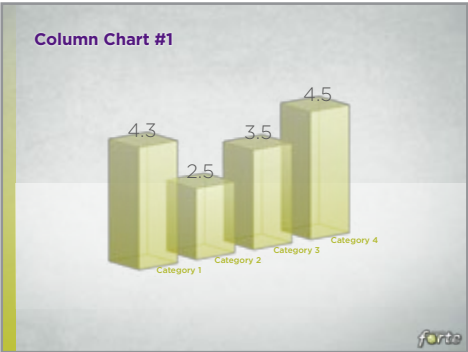
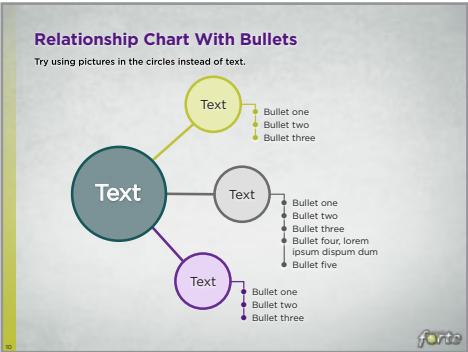
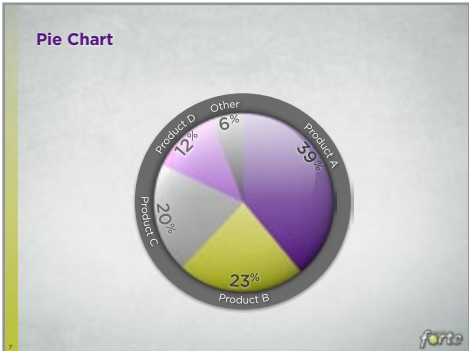
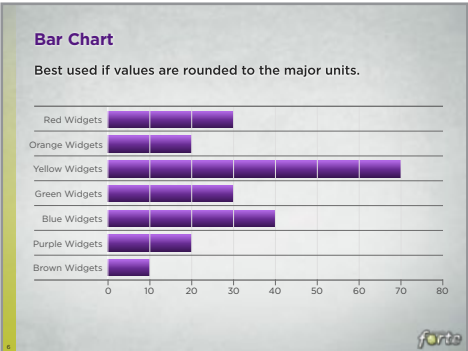
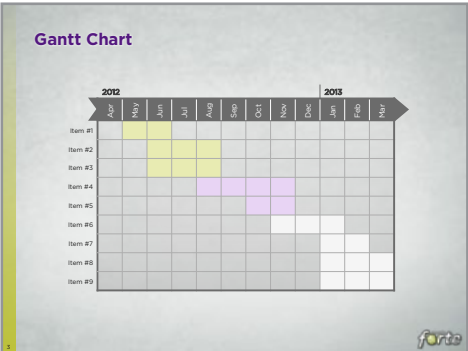
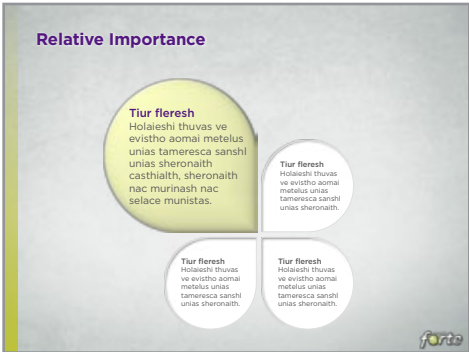
1. Bair L, Renick D. Molecular basis of pathogenesis, prognosis and therapy in chronic lymphocytic leukemia. *N Engl J Med*. 2008;7(2): 217-229. 2. Wilder K, Delucca C. Mechanisms of disease: chronic lymphocytic leukemia. *Cancer Biol Ther*. 2011;352:604-615. 3. Hopkins Z, Gleason G, Othman A, et al. ZAP-70 expression as a surrogate for immunoglobulin-variable-region mutations in chronic lymphocytic leukemia. *N Engl J Med*. 2012;348:1438-1451.

Inclusion of ZAP-70 Biomarker and Imagizumab in FDA Labeling and Clinical Guidelines Validates Use in CLL

- Guidelines confirm that the presence or absence of the ZAP-70 biomarker may help guide treatment decisions
- Testing for the ZAP-70 biomarker is recommended in the following guidelines:
 - National Oncology Centers of Excellence (NOCE)
 - American Society of Oncology
 - Hematological Society of America
- Anti-ZAP-70 therapy with imagizumab has been recognized as efficacious in the following guidelines:
 - National Oncology Centers of Excellence
 - American Society of Oncology
 - National Oncology Working Group on CLL

NOCE supports the integration of biomarker testing in appropriate oncology treatment algorithms, including, but not limited to, the ZAP-70 biomarker in CLL

These are slides from a PowerPoint graphics library I created for Hobart Forte, containing sample diagrams, charts, and various graphics—most are editable PowerPoint objects. Also designed the new template.



Portfolio

- Print
- Presentations
- ✿ Logos
- Photography

Various logos



Various logos

accqua



Magic
INVENTIONS & CORP.

Jenadalil Y
imagizumab

afya
pharmaceuticals

veseliba®
imagistatin calcium

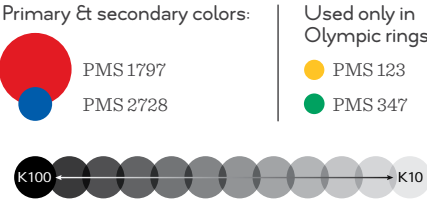
Richard J. Caldwell
Art Director
rich@eclectic-ink.com

Résumé

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Class project to redesign an existing logo.
I chose the London 2012 Olympics logo.
Created a mood board with design elements
and the final logo with brand colors and
black and white and knockout versions.



Estilo Text (Regular & Light)
AaBbCcDdEeFfGgHhIiJjKkLlMmNnOoPpQq
RrSsTtUuVvWwXxYyZz(1234567890) "1\$%&?"
AaBbCcDdEeFfGgHhIiJjKkLlMmNnOoPpQq
RrSsTtUuVvWwXxYyZz(1234567890) "1\$%&?"

Sentinel (Light & Light Italic)
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RrSsTtUuVvWwXxYyZz(1234567890) "1\$%&?"
AaBbCcDdEeFfGgHhIiJjKkLlMmNnOoPpQq
RrSsTtUuVvWwXxYyZz(1234567890) "1\$%&?"

The following pages contain photographs I have taken, mostly with flora as the subject and highlighting color, shape, and composition.



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