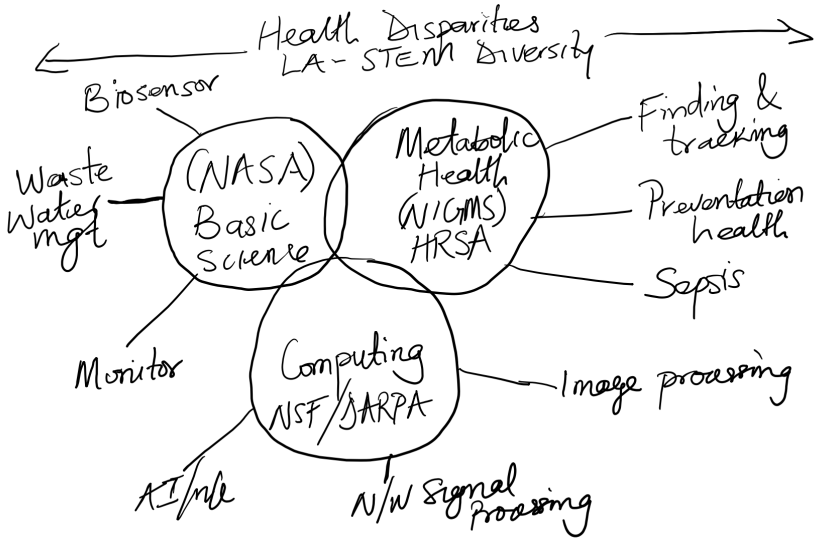
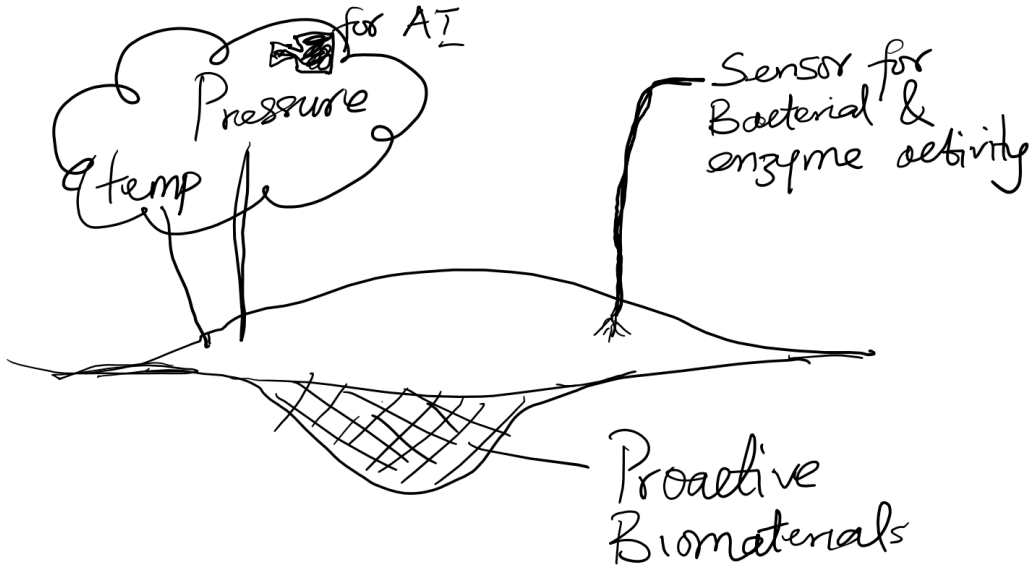
• It was discovered that Dr. Nestorova, Dr. Radadia, and Dr. Chowriappa all work on NASA projects
• Dr. Moore's interest involves Biomaterials that are biodegradable and the development of chronic wound treatment and some of these can be coupled with 3D printing. She also stated that they must consider climate change, water management, and foster inclusion.
• Dr. Vincent mentioned the need to diversify by organizing campus conferences and meetings.
• Dr. Moore stated that NIH wants clinical applications, but they can also explore other areas in NIH, such as cancer research, etc
• Dr. Nestorova brought up the idea of engineering education and Dr. Moore said it should be noted that all NSF grants must have some education aspect. However, she continued that the focus should be on NASA CANS and getting collaborators, and it will be stronger if includes state collaborators.
• Dr. Nestrova suggested SUNO-HBSU, and they work on biosensors.
• Dr. Moore also suggested using biosensors for water management, and quality filters. Dr. Vincent compared Ruston to Jackson and said that Ruston would soon reach Jackson's stage, therefore, there is a need to find a way to monitor.
• Dr. Chowriappa was writing all points on the whiteboard
• Dr. Radadia asks Dr. Nestorova about her work which she talked about the real-time PCR and said she hoped to get more collaboration apart from the NASA CANS. Dr. Moore said that NASA CANS will have different pI and that one will need collaboration from medical school.
• Dr. Moore talked about health diseases associated with metabolic syndromes such as obesity and ways of dealing with this such as collection and tracking, education and prevention, and stated some majors related collaborations such as education, nutrition, etc. She continued that it is a huge interest to veterans in terms of metabolic syndrome.



Feasibility Study

• The group discussed the importance and implication of the three main points generated
• Dr. Moore and Dr. Maldonado discuss how each point can go with each other such as water management for metabolic health. She also explained how she uses hydrogel as a cushion with inherent antibacterial properties in the treatment of chronic wounds without the use of a drug where a biosensor can be fabricated to notice the wound. Dr. Maldonado suggested that the biosensor can have different colors indicating different things.
• Dr. Moore also explained how wound patients visit the clinic to clean and repackage wounds. However, the wound can be stopped at stages I and II before waiting till stage IV, after which bone damage might set in. Therefore, Dr. Maldonado asked Dr. Nestorova if she could stop that using her technology, and she and Dr. Moore attested to it. Dr. Moore said they can partner with LSUHC-Shreveport and also get samples there.
• Dr. Nestorova suggested having a substrate-labeled enzyme that can indicate the type of enzyme generated from the wound.
• Dr. Moore talked about how about 85% of patients that visit wound/pediatrics clinics are associated with foot ulcers and fabrication of the above will help.



Final Design

Notes by Femi Alakija