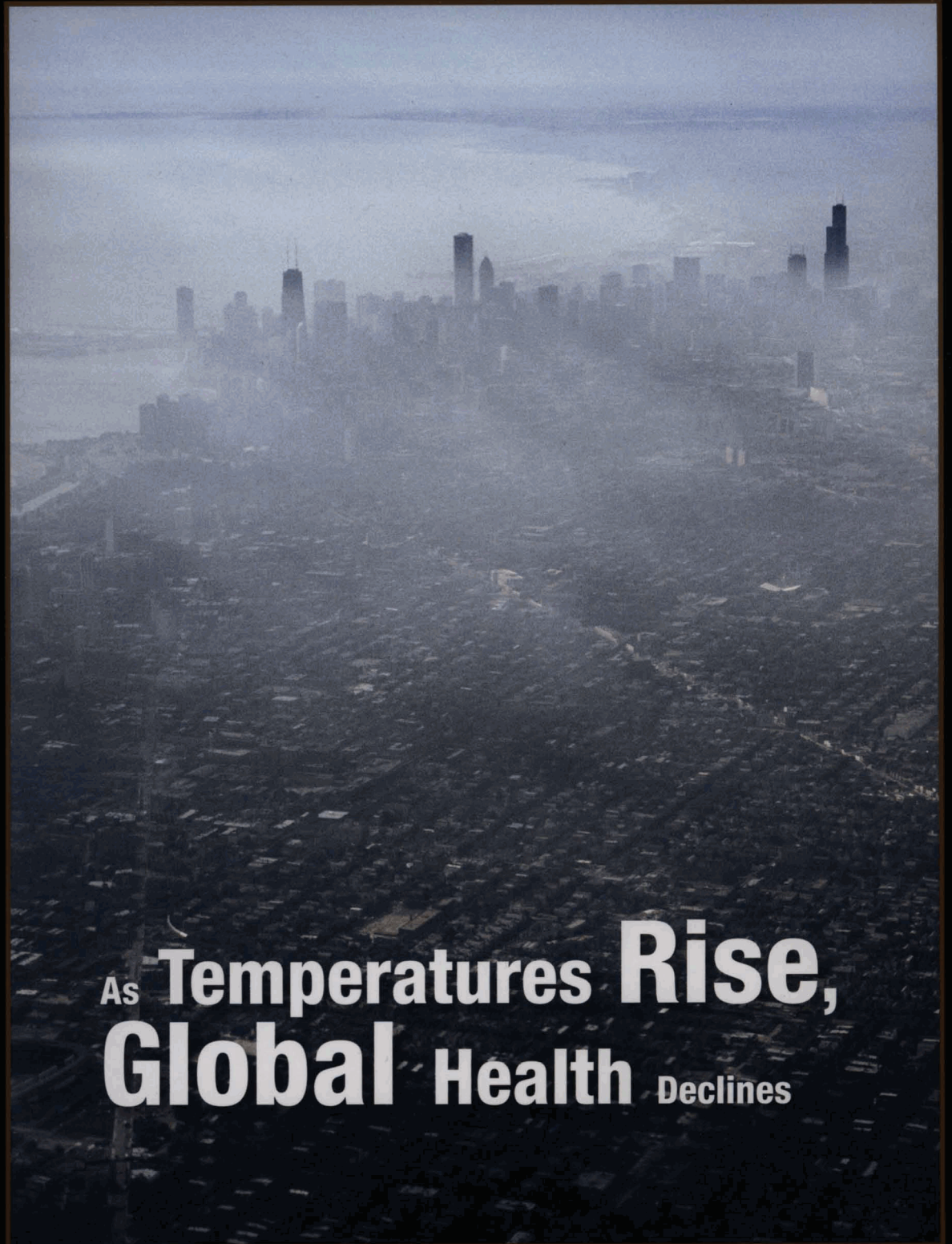


QUARTERLY

For Students, Faculty, Alumni and Friends of University of Wisconsin School of Medicine and Public Health



VOLUME 9
NUMBER 3
SUMMER 2007



As **Temperatures Rise,**
Global Health Declines

QUARTERLY

The Magazine for Students, Faculty, Alumni
and Friends of University of Wisconsin
School of Medicine and Public Health

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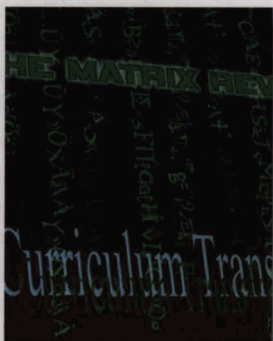
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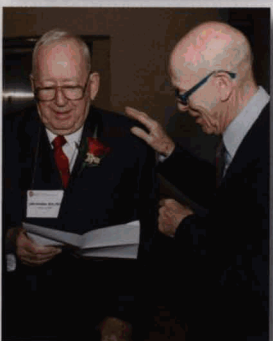
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On the Cover: An aerial view shows a smoggy Chicago in July 1995, when the worst heat wave in U.S. history was responsible for the deaths of 730 people. Photo by Gary Braasch.



Robert Golden, MD
Dean, UW School of Medicine
and Public Health
Vice Chancellor for Medical Affairs,
UW-Madison

There is a bumper sticker you have probably seen that urges the reader to "Think globally and act locally." Several stories in this issue of the *Quarterly* relate to this important theme.

The cover story describing the work of Jonathan Patz shows how faculty members at the UW School of Medicine and Public

Health are thinking and acting globally, nationally, on a statewide level and locally. Patz examines the way ecological issues such as global warming and deforestation affect public health. He and SMPH colleagues are also exploring how urban design impacts human health. Patz' agenda includes educating others to carry on in the trans-disciplinary approach that is needed to address these complex issues. Jonathan makes ecology and health a central part of his life.

Dedicated faculty such as Professor Patz greatly facilitate our push to develop and expand our educational as well as research programs that deal with global health. This topic has become a major component of our school's transformation into an integrated school of medicine and public health. The rising profile of our Center for Global Health under the leadership of Cynthia Haq epitomizes this new emphasis. From the perspective of environment and health, we are indeed one global village, despite the artificial lines that are placed on maps.

The article on Medical Education Day highlights

the best practices SMPH faculty and staff are using to produce students who perform strongly on many metrics. Our curriculum is evolving in multiple ways to help us produce a new generation of physicians trained in traditional medicine as well as public health and preventive medicine. The latest improvements include creating a new MD/MPH program and teaching cultural competence in many different ways. Our students eventually will practice locally, nationally and internationally. Some of them will do work that will have worldwide impact. We rely heavily on Medical Education Day and other similar activities to teach the teachers so that they can teach the students.

In addition to the primary implications of the ubiquitous bumper sticker, it also suggests that we should think and act in a socially conscious way. Arguably, that should be the goal of all citizens of the world, but it is especially relevant to those of us who enjoy the privilege of practicing medicine. Under the rubric of the bumper sticker, we are encouraged to think and act in socially responsible ways, regardless

of whether it's in Asia or Dane County.

The program held in the spring called "Cover the Uninsured" was all about thinking locally and acting broadly. I was so proud that our first-year students organized this ideas forum featuring evidence-based, well-informed debate and discussion, rather than blind advocacy for a position without considering ramifications or alternatives. It was a project that was clearly designed to lead to action, which the students have vowed to do.

This is really the best way to address complex issues such as health disparities. Our students are leading the way in showing us that thoughtful consideration of data and thoughtful debate coupled with thoughtful action is what we all should be doing. We must think and then act—locally, nationally and globally.

Greetings, medical alumni! It's hard to believe another academic year has passed. We've just experienced a very successful spring semester filled with many events and activities for alumni and students.

During Alumni Weekend, we recognized many award recipients, celebrated five class reunions and honored the Class of 1957. At their banquet, members of the class provided insight and advice for our current students. Perhaps we can all benefit from their advice, some of which is noted on page 37.

It was heartwarming to see so many alumni come together to reminisce and enjoy the weekend. Student leaders were very involved and did a wonderful job of introducing alumni to our impressive Health Sciences Learning Center.

The Class of 2007 enjoyed a spectacular graduation day. It began with a recognition ceremony at the Memorial Union Theater and ended with a grand celebration at the Monona Terrace Convention Center for over 900 guests. The event was co-sponsored by the school and the alumni association.

You will enjoy the article and photos on pages 14-19.

Now we look to fall with great anticipation and enthusiasm. The WMAA staff is busy planning many events, which include the following.

Fall Reunions

Plans are under way for 1967, 1977, 1982, 1992, 1997 and 2002 class reunions. Class representatives for these classes have made the decision to celebrate in the fall in conjunction with Homecoming. The date for the reunions will be October 26 and 27. Your class reps will soon send details.

Resident Event

The WMAA's new strategic plan emphasizes our goal to connect with the University of Wisconsin Hospital and Clinics (UWHC) resident population. In our effort to do so, we are planning a tailgate party for residents on October 20, prior to the UW versus Northern Illinois football game. I look forward to building strong relationships with the house staff at UWHC.

Homecoming Weekend

The WMAA will host its annual tailgate the morning of October 27 at Union South before the UW versus Indiana game. Tickets for medical alumni will be available through the WMAA office. Priority will be given to members of the Middleton Society, the WMAA and class reunion attendees.

Centennial Celebration

The SMPH will celebrate its centennial throughout the 2007-08 academic year, beginning with Homecoming Weekend. In conjunction with UW Health Public Affairs and UW Foundation, we are planning several opportunities during the year to celebrate the SMPH's rich history and many accomplishments. Stay tuned for more!

As always, please feel free to contact me with your ideas, issues and even concerns. You can reach me via e-mail at kspeters@wisc.edu, by phone at (608) 263-4913 or through the mail at Karen S. Peterson, Assistant Dean for Alumni/External Relations and Director, Wisconsin Medical Alumni Association, 750 Highland Avenue,



Karen Peterson
*Executive Director, Wisconsin Medical Alumni Association
Assistant Dean
Alumni/External Relations*

Madison, WI 53705. I look forward to hearing from you!

Visit <http://www.med.wisc.edu/alumni> to keep up to date on all WMAA events and happenings. From here you can update your records, join our association, nominate your colleagues or classmates for awards and sign up for events.

ECOLOGY AND PUBLIC HEALTH

GLOBAL
ENVIRONMENTAL
CRISES YIELD
DANGEROUS NEW
HEALTH CHALLENGES



On his way to work on the UW-Madison campus, Jonathan Patz says biking represents a triple win. It reduces local air pollution, does not produce greenhouse gases and keeps people fit. Photo by Bob Rashid.

by Bob Rashid

Jonathan Patz, MD, MPH, sits in his sparsely decorated office in the WARF building on the UW-Madison campus, talking about the threefold benefits of riding a bicycle. Outside, on a perfectly beautiful summer afternoon, it is easy to imagine pedaling happily down a bike trail. But bicycling is more than recreation in Patz's world.

An associate professor in the University of Wisconsin School of Medicine and Public Health (SMPH) Department of Population Health Sciences, Patz speaks eloquently, with passion gained over a 15-year career of studying public health on a global scale. Biking promotes physical fitness, he explains, reduces local air pollution and does not produce carbon dioxide, the most abundant of the emitted greenhouse gases. Because transportation causes about one-third of the gases that form the source of global warming, Patz calls the bike a "triple win."

On the filing cabinet next to his blue and white bike helmet, a matted photograph shows a smiling Patz standing with nine other men in winter jackets (including SMPH colleagues Patrick Remington, MD '81, MPH, of the Department of

Population Health Sciences, and Jon Wolff, MD, of the Departments of Pediatrics and Medical Genetics).

The photo was taken earlier this year when the American Birkebeiner cross-country ski race in northern Wisconsin was almost canceled due to lack of snow. Patz uses the example, although lightheartedly, to make a point: Global warming could mean canceled Birkies, which means way less incentive to stay fit during Wisconsin winters.

Patz uses exercise to stay fit year-round and, as a former family physician, has always been focused on preventive medicine. Even during his residencies, he worked on environmental exposures because they were the most preventable. He soon discovered that working at the population level allowed him to exert much greater impact.

"The further you can go upstream along the causal chain of disease, the more people you can prevent from getting sick," Patz says. "That's why I love being in public health."

Patz, who holds a joint appointment in the UW Nelson Institute for Environmental Studies, gives talks around the world on climate change and the health problems it is causing. In

almost every presentation, he focuses on prevention so that people understand the role each country—and individual—can play in reducing global warming. The message is particularly relevant to American audiences, because the United States, with only 5 percent of the world's population, emits about 25 percent of the world's greenhouse gases, more than any other country over the past 50 years.

"Considering that most developing nations are burdened by major infectious diseases and famine, which are highly dependent on climate, these countries are most vulnerable to the global warming that we in the industrialized world are causing," Patz says. "It's a huge ethical problem. One could make the argument that our energy policy is indirectly exporting diseases to other parts of the world."

Patz and colleagues from the World Health Organization made the case most convincingly in the November 2005 issue of the journal *Nature* when they compared the worldwide differences in health vulnerabilities due to global warming. The synthesis review paper, which was the cover story and for which Patz served as lead author, stated that climatic changes since the mid-1970s

"It's a huge ethical problem. One could make the argument that our energy policy is indirectly exporting diseases to other parts of the world."

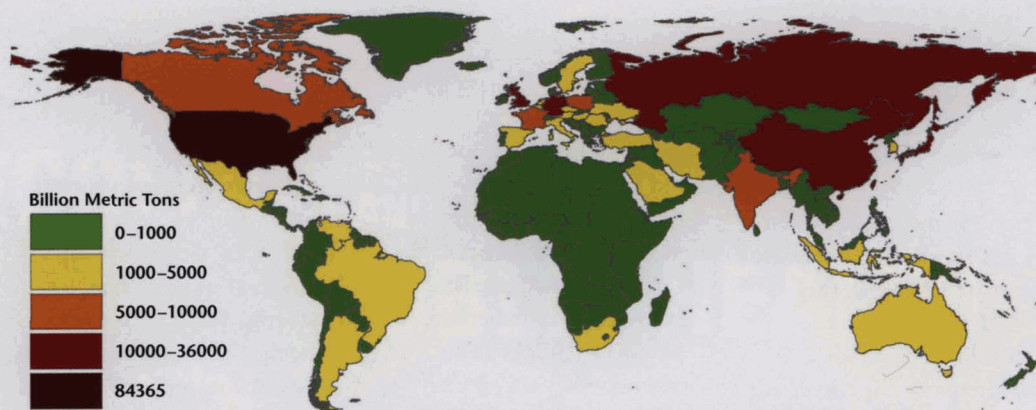
could already be causing over 160,000 deaths per year. These deaths were attributed to an increase in diarrhea, malaria and malnutrition in countries that have some of the lowest per capita emissions of greenhouse gases.

More recently, Patz and his collaborators published findings that link deforestation in the Peruvian Amazon with malaria. They discovered that the drastic change in mosquito habitat actually favored the most dangerous mosquito species, the *Anopheles darlingi*, whose biting rate was 278 times higher in deforested areas than in forested areas. Research indicates that other infectious diseases show similarly alarming connections: for example, urbanization and dengue fever or agricultural

development and Japanese encephalitis.

"So many diseases are changing their mode of transmission because we're changing the landscape," he says. "We're looking at the interface between public health and ecology. Not only how disruption of the earth's climate affects health, but also how disturbing ecosystems can impact on a variety of different infectious diseases and other health outcomes."

Such problems may seem far away, adds Patz, but they are not. "We live in a global world," he says, "and if climate change or deforestation can fuel epidemics in remote developing countries, international trade and



The map above shows the distribution of carbon dioxide emissions by country in 2000. Source: Carbon Dioxide Information Analysis Center, Oak Ridge National Laboratory, U.S. Department of Energy. Map produced by Holly Gibbs, UW Center for Sustainability and Global Environment (SAGE) graduate student.

transport can bring these diseases to our doorstep."

In July 1995, the U.S. experienced its worst heat wave in history—in Chicago alone 730 people died. Eight years later, an unprecedented heat wave scorched Europe,

driving temperatures to 104 degrees Fahrenheit and killing an estimated 45,000 people.

The Intergovernmental Panel on Climate Change (IPCC), an arm of the United Nations Environmental Program and the World Meteorological Organization, in which Patz

has been involved, predicted more heat waves for the future.

Although heat waves claim more lives per year than floods, tornadoes and hurricanes combined, global climate change affects our health in other less

An Ideal Place to Address a Complex Issue

Precisely because climate change and its relationship to public health is such a vast issue that ripples across the globe in various ways, the problem may be best addressed at places such as UW-Madison. The university's many world-class schools of differing disciplines offer Jonathan Patz, MD, MPH, the perfect platform for working on solutions. The situation has grown to be so complex that it is essential for people from myriad fields to work together, he says, and for students and future leaders to study across disciplines.

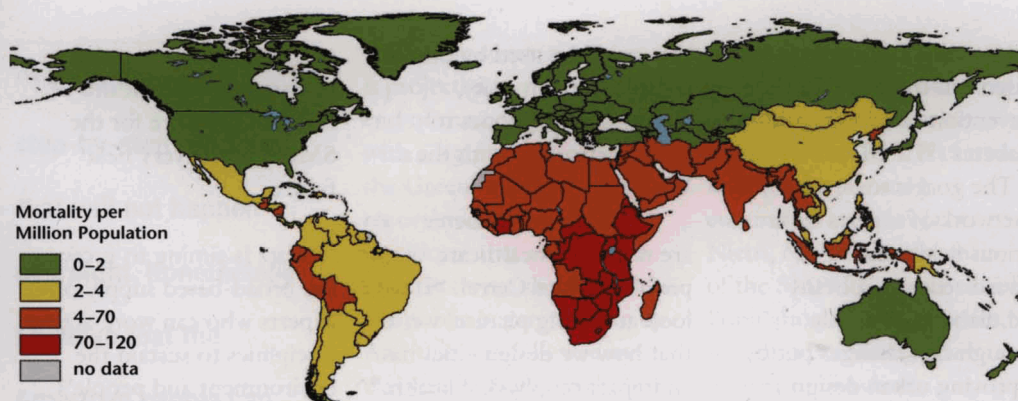
Patz directs a university-wide initiative called Global Environmental Health and is an associate professor

in both the Nelson Institute for Environmental Studies and the Department of Population Health Sciences in the School of Medicine and Public Health (SMPH). He serves on the steering committees of the SMPH's vibrant new Center for Global Health and its Master of Public Health program, which is promoting interdisciplinary approaches by offering dual degree options for students from across campus. He is a member of the UW Center for Sustainability and the Global Environment (SAGE).

In October 2006, Patz chaired a conference held at UW-Madison that bridged the fields of public health, veterinary medicine and ecology

(including natural and human ecology). "EcoHealth ONE" attracted 400 scientists from 30 countries. Five UW-Madison deans also participated in this "transdisciplinary" venue. SMPH dean Robert Golden, MD, opened the conference with Patz and Gilles Bousquet, PhD, dean of International Studies at UW.

"Climate change and habitat destruction are likely two of the most serious environmental public health challenges we've ever faced," Patz says. "They cannot be solved by people in one or two disciplines. Truly integrated education and research are needed—and there is no better place for that than here at UW-Madison."



The map above shows estimates of regional distributions of climate-sensitive deaths due to diarrhea, malaria and malnutrition in 2000. Source: World Health Organization and The Hadley Centre. Map produced by Sarah Olson, UW population health sciences and SAGE graduate student.

direct ways as well. Higher temperatures lead to greater levels of ozone smog, which pollutes the air. Warmer air evaporates from the soil more quickly, resulting in droughts. Warmer air also holds more moisture, so rainfall is more severe, making floods more likely. More floods mean a greater likelihood of drinking water contamination. And as sea levels rise and

water temperatures warm, hurricanes increase in force.

Patz and colleagues are studying such health effects of climate change here in Wisconsin with funding from a U.S. Environmental Protection Agency grant. The research project brings together climatologists and public health officials from the university and the Wisconsin Department of Health and Family Services (DHFS) to look at

heat-related illness as well as rainfall-runoff and water contamination across the state and in Chicago.

"Preliminary analysis is showing that the number of severe heat waves will substantially increase in the Great Lakes region over the next 40 years," says Patz, the principal investigator on the project.

One of the most serious assaults on public health—and one that, ironically,

holds the most promise for help—comes from the urban landscape. Oceans of black asphalt and dark rooftops absorb heat and create "heat islands" in summer, driving temperatures 7 to 8 degrees warmer in urban cores. With an increase in heat waves due to global warming, a synergistic effect will produce even more heat waves over these sprawling surfaces, Patz suggests.

Urban design also often prevents people from walking or biking, even when they want to, because cities are designed to accommodate the automobile. Patz, who received his master of public health degree at Johns Hopkins Bloomberg School of Public Health and completed a residency there, tried biking to work in Baltimore.

"I quickly realized that it was far more dangerous for my health to be on a bike

Key Leadership Roles

Patz has taken on key national and international leadership roles in the field of environmental public health. For example, he is:

- President of the International Association for Ecology and Health
- Past Co-chair, Health Expert Panel of the U.S. National Assessment on Climate Change
- Lead author, United Nations Intergovernmental Panel on Climate Change (IPCC)
- Convening lead author, World Bank and U.N. Millennium Ecosystem Assessment
- Co-editor of the journal *EcoHealth*
- Co-editor of the textbook *Ecosystem Change and Public Health: A Global Perspective*
- An Aldo Leopold Leadership fellow
- Member of the Board of Scientific Counselors, Center for Disease Control's National Center for Environmental Health/Agency for Toxic Substances and Disease Registry

“Designing healthier neighborhoods that promote exercise can do more to improve health than an army of skilled clinicians.”

in Baltimore than to drive and miss that opportunity for exercise,” Patz says. “In Madison, thank goodness I don’t have this problem.”

Patz and others are taking a serious look at urban design and are employing a new integrated approach to creating a healthier environment. Aaron Carrel, MD, SMPH associate professor of pediatrics, initiated one such effort. Carrel studies exercise in

children and heads the group Wisconsin Initiative for the Prevention of Obesity and Diabetes (WiPOD).

The goal is to develop a network of experts from various fields who work toward reducing obesity and diabetes, not only through diet changes but by improving urban design as well. To this end, scientists from the UW departments of pediatrics, population health sciences, nutritional sciences, urban and regional planning, the Center for Transportation and the Nelson Institute for Environmental Studies are collaborating to achieve a sustainable solution to the obesity epidemic. By looking at the “built environment,” they hope to find ways to promote physical activity through urban design.

The center would be a resource within UW-Madison

that could be used by others outside the university, Carrel says. He hopes to work particularly with the Wisconsin DHFS.

“Obesity and diabetes are not just a healthcare problem,” says Carrel. “If we look at the big picture, we see that how we design cities has an impact on physical health.”

Patz stresses that interdisciplinary programs like WiPOD are essential to improvements in public health. “We need to augment medical expertise with innovative public health strategies. In the case of WiPOD, urban and transportation planning aimed at designing healthier neighborhoods that promote exercise can do more to improve health than an army of skilled clinicians.”

WiPOD serves as just one example of what Patz hopes

will be a much expanded, integrated public health research presence for the SMPH in the very near future.

Patz is aiming to grow the broad-based supply of experts who can work across disciplines to sustain the environment and people’s good health. One way is through a new \$3 million Integrative Graduate Education and Research Traineeship (IGERT) grant from the National Science Foundation. The grant supports doctoral fellowships for select students across schools and departments to learn to use various scientific and humanistic approaches to understand and address global environmental issues. An affiliated 12-credit certificate program is open to a larger number of students.

For more information

To read more about environmental health research under way at the UW Center for Sustainability and the Global Environment (SAGE), go to <http://www.sage.wisc.edu/pages/health.html>.

Patz heads the new Integrated Graduate Education and Research Traineeship (IGERT) program that sponsors doctoral fellowships to examine global environmental

issues. A 12-credit Certificate in Humans and the Global Environment (CHANGE) is available to graduate students across campus. Go to <http://www.sage.wisc.edu/igert/>.

The homepage for the International Association for Ecology and Health, and its flagship journal, *EcoHealth*, is at <http://www.ecohealth.net>.

Patz has created an educational Web site for middle school teachers and students covering a full range of global environmental health issues. The site, at <http://www.ecohealth101.org>, includes in-depth content and graphics, lesson plans, a glossary and an updated news page.

"This will be a step-by-step process that will not happen overnight. Nonetheless I believe that the American people can be persuaded to change their behaviors—for their own benefit and for the benefit of future generations."

"With IGERT we can begin turning out graduates who can work on interdisciplinary teams and who can take leadership in solving the health and societal changes posed by environmental change," says Patz, who is director and principal investigator for the training program.

When Patz began assessing the risks of climate change—and solutions to the problem—he admits it was an uphill battle.

"There was a time when the U.S. administration put its head in the sand and pretty much denied climate change," he says. "But attitudes began to change after the 2004 Arctic Climate Impact Assessment, which showed that at least

half of the summer sea ice is projected to melt by the end of this century, along with a significant portion of the Greenland ice sheet. The report's findings were so significant that even climate scientists were shocked—and the public began to wake up. And that was followed by this year's IPCC concluding with 90 percent confidence that humans are causing global warming."

Now, Patz, like Al Gore—who has phoned him for advice—is hopeful. "I'm amazed at how rapidly public awareness and political will to do something about climate change have turned around in a period of less than three years," he says.

Patz makes it clear that work can be done on the individual, municipal and national levels. The U.S. Mayors Climate Protection Agreement, for example, which was signed by more than 500 mayors, including Madison mayor Dave Cieslewicz, commits cities to meet or surpass the Kyoto Protocol targets in their communities. This movement started in Seattle on the day the Kyoto Protocol took effect and was a direct response to the administration's refusal to participate.

Madison is also working to become the first city with a bona fide winter to be awarded "platinum" status from the League of

American Bicyclists. Already at the "gold" level, Madison is nothing if not bicycle friendly. Madison's Platinum Biking City planning committee includes Javier Nieto, MD, PhD, the chair of the SMPH Department of Population Health Sciences, who also is a strong proponent of bicycling.

In talking about the "Triple-Win Biking Project" that is sponsored by the Center for Sustainability and the Global Environment (SAGE), of which he is a member, Patz points out that 40 percent of all trips by car in the U.S. are less than two miles—and thus easily bike-able.

"Many tons of carbon dioxide emissions as well as local air pollution could be eliminated, not to mention pounds lost, if people biked or walked for these short trips," Patz says.

But since not everybody is able to bicycle, Patz emphasizes that biking should be part of a "multi-modal" transportation system as our nation strives to make its cities more health-promoting and environmentally sustainable.

"This will be a step-by-step process that will not happen overnight," he says. "Nonetheless, I believe that the American people can be persuaded to change their behaviors—for their own benefit and for the benefit of future generations."

Q

Doing His Part

Jonathan Patz saves energy and reduces emissions in the following ways:

- Bikes or walks to work
- Uses a bike trailer for hauling up to six bags of groceries
- Purchases bright LED bike lights for all his incoming graduate students
- Buys food grown locally as much as possible
- Has installed solar-thermal hot water and solar electric panels on the roof of his house
- Uses insulating blinds on windows and lowers the thermostat in winter
- Has put mini fluorescent light bulbs or LEDs in almost all of the light fixtures in his home
- Drives a 2001 hybrid car (one of the first purchased in the state)
- Tries to avoid flying to meetings by using teleconferencing (but admits he needs to work harder on this)

"All of these things, with the exception of the solar electric, are not that expensive, and there is absolutely no compromise in lifestyle," Patz says. "As far as the biking part, I'm truly lucky to live in Madison. My hope is that we can become a model city, for both fitness and environmental sustainability."

Medical Education Day

Features SMPH Experts

by Kris Whitman

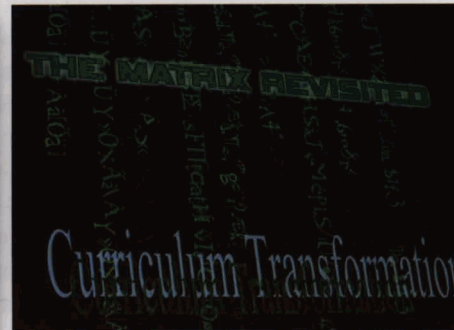
Envisioning a new twist for this year's annual University of Wisconsin School of Medicine and Public Health (SMPH) Medical Education Day, Susan Skochelak, MD, MPH, senior associate dean for academic affairs, encouraged the planning team to restructure the event to incorporate a fresh perspective. Rather than featuring guest speakers from other medical schools and holding the April event off-site as in past years, Skochelak and the academic affairs team set forth to highlight the best practices of the SMPH through presentations by the school's faculty and staff in the well-appointed meeting facilities at the Health Sciences Learning Center (HSLC).

"We're about to embark upon an exciting curriculum transformation," explains Skochelak. "Our goal is to maintain the best of what we have and build in new directions, which led us to this year's theme: 'Building on Best Practices: Transforming Medical Education.' Our faculty and staff showcased their teaching techniques that have been recognized with high marks on student evaluations, as well as new ways of teaching that others may want to adopt. Ideally, we would like to see all of our courses and clerkships receive the same high quality ratings as our best courses."

Other highlights included the presentation of the 2006 Dean's Teaching Awards, an update on new degree programs, an overview of SMPH medical student outcomes, and a progress report on the school's new initiatives.



Shobhina Chheda (left) and Christie Seibert enjoyed an entertaining talk, "Curriculum Transformation: The Matrix Revisited," by David Mann. Using a Matrix slide, he described data and factors influencing the work of the SMPH curriculum transformation task force.



New Degree Programs

The SMPH has recently:

- received approval to enroll students in a combined MD/MPH degree beginning this fall
- implemented a doctor of physical therapy degree
- initiated planning for its physician assistant bachelor's degree to become a master's degree, and to create master's and doctoral degrees in clinical investigation
- begun evaluating whether administration of the UW Graduate School's master's degree in genetics counseling should move to the SMPH and
- taken steps to phase out the Medical Scholars Program and replace it with a new program (details to be announced in a future *Quarterly*).

Medical Student Outcomes

Skochelak explained that the SMPH annually reports data on educational outcomes to regulatory boards and accreditation agencies, as well as internally to its Education Policy

Council and Admissions Committee. Such measurements include student scores on the National Board of Medical Examiners (NBME) exams, medical residency directors' survey feedback about SMPH graduates' performance, student course evaluations, and Association of American Medical Colleges (AAMC) graduate student questionnaires.

"In aggregate, SMPH students continue to rank above the national average in steps 1 and 2 of the U.S. Medical Licensing Examination (USMLE), and the majority of our graduates consistently receive scores of 'very good' to 'excellent' (when compared with other interns in the program) from residency directors," states Skochelak, who also provided discipline-specific USMLE data that serves as one factor considered in determining which SMPH courses excel or need improvement. She explains that curriculum planners regularly use past years' USMLE data, graduate surveys and other sources in planning for and evaluating changes made in medical education.



Elaine Mischler, Michael Monniger and Nick Cozzi reacted to "Use of an Audience Response System in Medical Education," a talk presented by George Mejicano, director of the SMPH Office of Continuing Professional Development in Medicine and Public Health.

Summary of New Initiatives

- The Wisconsin Academy for Rural Medicine (WARM) program (see fall '06 *Quarterly*) will enroll its initial five first-year medical students this fall. These students will enter their clinical training at Marshfield Clinic in Rice Lake, Wisconsin, in 2009. When fully implemented, 25 WARM students will be enrolled in each year of medical school.
- The Innovations in Medical Education (IME) program—funded by a Wisconsin Partnership Program grant—continues to help jump-start substantial improvements in medical education. Focus areas include professionalism, ethics, cultural competence, the Clinical Training and Assessment Center and distance-education technology aimed at more effectively sharing resources of the SMPH and HSLC around the state. The recently launched online IME Digital Video Library is one example of this work.
- New curricula in behavior and social science, including understanding the structure and financing of healthcare systems, are supported by a National Institutes of Health award for curriculum development. The SMPH was one of only nine medical schools to receive this prestigious four-year award.
- Course directors and curriculum leaders have made significant progress toward redesigning the medical education curriculum. First-year medical students who start in the fall of 2008 will begin with the new curriculum, which will expand incrementally over the following eight semesters.

"As we move forward with our educational innovations, I hope that we continually integrate and synthesize the content so there are semi-permeable membranes surrounding the first two and the last two years of medical education,

2006 Dean's Teaching Awards

The Dean's Teaching Awards, established in 1992, honor outstanding contributions to student education in medical school programs. Award winners are selected by a committee of faculty who have previously been honored for their excellence in teaching; they are the SMPH's only peer-selected teaching award. Selection criteria include excellence in education; extraordinary and sustained dedication and effort on behalf of student education; demonstrated high level of teaching effectiveness; and innovation in education.

During Medical Education Day, Dean Robert Golden, MD, presented the 2006 Dean's Teaching Awards to:

- Shobhina Chheda, MD, MPH, who is co-director for the third- and fourth-year Department of Medicine clerkship
- Gary E. Lyons, PhD, who has taught medical histology to first-year medical students for nearly 15 years
- Gwenevere C. McIntosh, MD, MPH, who serves as third-year clerkship director in the Department of Pediatrics
- Vishnu Moorthy, MD, director of the renal pathophysiology course for second-year medical students

Golden also gave a special recognition award to John L. Olson, MD '82, who served as director of the Marshfield Clinic Division of Education from 1999 until earlier this year.

creating a good two-way flow of clinical into basic science and basic into clinical science in our educational model,” comments Robert Golden, MD, SMPH dean.

Golden adds that faculty development, including in the area of teaching, is critical to the SMPH mission.

“We need to continue to find ways to support faculty development internally, and that’s why we are very excited about the ongoing search for the associate dean of faculty development,” he says. Golden credited Medical Education Day with

helping to make sure that all of the school’s teachers understand the philosophy and principles supporting the new curriculum.

Judging by the event’s attendance of more than 200 faculty and staff members, coupled with early feedback, Skochelak believes that Medical Education Day’s new format was successful. Several of the presentations were recorded and posted on the IME Digital Video Library Web site. Anyone may log in for free and listen to or view the files at <http://videos.med.wisc.edu>.



Dean Golden presented Gary Lyons, who has taught histology to first-year medical students for 15 years, a Dean’s Teaching Award.

Seibert Appointed Associate Dean of Medical Education

Christine Seibert, MD, associate professor of medicine at the SMPH, has been appointed associate dean of medical education. She will be responsible for the overall development, management and assessment of the MD curriculum.



Seibert will ensure that the school achieves and maintains new MD standards set by the Liaison Committee on Medical Education. She will oversee implementation of changes that are expected to result from an expansive MD curriculum reevaluation process begun last fall. And she will take a lead role in helping the school incorporate public health instruction into all four years of the MD curriculum. Measuring the effectiveness of all changes will be a critical element of the job.

“Individually, educators at our school are doing wonderful things,” says Susan Skochelak, MD, MPH, SMPH senior associate dean for academic affairs. “But medical education requires a holistic, coordinated approach, and Dr. Seibert will help ensure that this happens.”

Seibert is an experienced educator who is uniquely qualified to take this global approach, adds Skochelak. For the past 10 years, Seibert has been co-director of Patient, Doctor and Society (PDS), a required four-semester course for first- and second-year medical students that teaches communication skills, physical exam skills, evidence-based medicine, professionalism and ethics.

The PDS position has entailed designing and implementing curriculum, including large-group, small-group and clinical activities; directing ongoing curriculum management and innovation; leading faculty development efforts and providing leadership to recruit and retain some 200 generalist clinic preceptors.

Seibert participates regularly in the SMPH’s Generalist Partners Program, has been a member of the school’s Educational Policy Council, supervises residents in the General Internal Medicine Clinic at UW Hospital and Clinics and has formally mentored several internal medicine colleagues. Her educational work is recognized nationally.

A dedicated physician who feels strongly that her clinical practice lends legitimacy to her educational work, Seibert practices at the UW Health East general internal medicine clinic.

Seibert says she’s excited to take on a larger leadership role for the school.

“So many things are happening nationally and at our own school in terms of curriculum reform. It’s clear that we are at a crossroads,” she says. “This affords us an excellent opportunity to take a long, close look at our curriculum to see if we are training medical students to really meet all the challenges of being a practitioner in this century.”

Marshfield Clinic—SMPH

An Enhanced Relationship Addresses the Rural Physician Shortage and Other Issues

by *Dian Land*

Building on a highly productive long-term relationship, the University of Wisconsin School of Medicine and Public Health (SMPH) and the Marshfield Clinic recently signed an affiliation agreement that enhances their combined efforts in teaching medical students.

With the new agreement, Marshfield becomes the SMPH's third academic campus, joining Aurora Health Care in Milwaukee and Gundersen Lutheran in La Crosse as sites offering essential clinical training for SMPH students.

"We are delighted to formally recognize the growing partnership between the Marshfield Academic Campus and the school," says Robert Golden, MD, SMPH dean. "For years, Marshfield has provided invaluable educational opportunities for our students. These shared academic activities will continue to expand, especially with Marshfield's critical involvement in WARM, our new Wisconsin Academy for Rural Medicine."

To launch this coming fall, WARM will train physicians to practice in rural hospitals, clinics and offices where current shortages are expected to worsen. The inaugural class of WARM students will spend their first two years in Madison at the SMPH and their third and fourth years at Marshfield and its satellite clinics.

"Marshfield Clinic is proud of its long-standing affiliation with the UW School of Medicine and Public

Health," says Karl Ulrich, MD, MMM, Marshfield's president and chief executive officer. "We are thrilled to engage in an expansion of our role with SMPH and remain dedicated to the education of those wishing to enter the healthcare field."

The Marshfield Clinic system provides patient care, research and education in more than 40 locations in northern, central and western Wisconsin, making it one of the largest comprehensive medical systems in the United States.

For decades, third-year SMPH students have chosen Marshfield as the place to complete their required month-long internal medicine, pediatrics or primary care clerkships. Marshfield was also one of the original sites in the SMPH preceptorship program, created in 1926. This contribution has continued and will continue. Marshfield preceptors provide fourth-year medical students six to eight weeks of concentrated blocks of hands-on training, ensuring diverse clinical experiences that complement clinical training in urban hospitals in and around Madison.

Although the recently signed affiliation agreement focuses primarily on shared educational objectives, the two institutions have significantly strengthened their research collaborations in recent years as well. These too are expected to grow, notes Golden.

Marshfield's research arm, the Marshfield Clinic Research Foundation, is the sole external partner in UW-Madison's new Institute for Clinical and Translational Research (ICTR). With a \$20 million budget, the SMPH-based institute will stimulate teamwork across Wisconsin to facilitate the translation of scientific discoveries into tangible improvements in clinical practice and individual health.

Marshfield is also integrally involved with the SMPH, Aurora and Gundersen Lutheran in the Wisconsin Network for Health Research (WiNHR), which will provide consumers and healthcare providers access to state-of-the-art health and medical information. The Wisconsin Partnership Program has provided funding for WiNHR, ICTR and WARM. Q





Graduation 2007

On May 18, 2007, the 147 students in the Class of 2007 at the University of Wisconsin School of Medicine and Public Health (SMPH) became medical doctors. The students, who now are scattered in residencies across the country (listed below), make up the 100th class to graduate from the medical school. The Class of 2007 was the first to graduate under the leadership of the school's ninth dean, Robert Golden, MD.

The day began with a recognition ceremony at the Memorial Union Theatre with school leaders seated onstage and Dean Golden presiding over the ceremony. Dennis Maki, MD '67, a professor in the SMPH Department of Medicine and an internationally recognized infectious disease expert, was selected by the class to be the guest speaker.

Maki described how much medicine has changed since he graduated from the

SMPH four decades ago and how many more medical innovations the graduating students could expect to see in their lifetimes. The student speaker, Robert Behm, talked in an animated way about the camaraderie he and his classmates had experienced and the great journey their four years at medical school had been.

Following the speakers, each student came to the stage and was draped in a velvet hood signifying the

Doctor of Medicine degree. As a class, the group recited the Declaration of Geneva, and following the ceremony, students were invited to a reception sponsored by the Wisconsin Medical Alumni Association.

Following evening graduation ceremonies at the Kohl Center, students continued to celebrate at the annual graduation party at the Monona Terrace, hosted jointly by the school and the medical alumni association.

The 2007 Graduating Class

Matthew Philip Abdel
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Orthopedic Surgery

**Sahar Mustafa
Abdelrahman**
Postponing postgraduate
training

Hoda Ahmadi
William Beaumont Hospital
Royal Oak, Michigan
Ophthalmology

Michael Joseph Anderson
Wright State University
Boonshoft School of
Medicine
Dayton, Ohio
Orthopedic Surgery

Sara Lynn Anderson
Saint Louis University School
of Medicine
Saint Louis, Missouri
Obstetrics and Gynecology

Sharon Joy Anderson
Southwest Washington
Medical Center
Vancouver, Washington
Family Medicine

Ijeoma Muriel Asota
Postponing postgraduate
training

Tamara Rose Axelsen
Mercy Health System
Janesville, Wisconsin
Family Medicine

Scott Robert Bassuener
Indiana University School of
Medicine
Indianapolis, Indiana
Orthopedic Surgery

Beth Christine Becker
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

Hillary Ann Becker
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Orthopedic Surgery

Robert John Behm
Guthrie-Robert Packer
Hospital
Sayre, Pennsylvania
General Surgery

Tracy Carol Blichfeldt
Gundersen Lutheran
Medical Foundation
La Crosse, Wisconsin
Internal Medicine

Frederick Joseph Boehm III
Postponing postgraduate
training

Jessica Lynn Bowman
Medical College of
Wisconsin
Milwaukee, Wisconsin
Pediatrics

Ryan Robert Byrne
Medical University of South
Carolina
Charleston, South Carolina
Psychiatry

Daniel John Cabrera
Postponing post graduate
training

Ryan Daniel Cassaday
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine

Elizabeth Mary Charipar
University of Michigan
Hospitals
Ann Arbor, Michigan
Internal Medicine

Clement Chi Kai Chow
Gundersen Lutheran
Medical Foundation
La Crosse, Wisconsin
(Transitional Year)
University of Illinois College
of Medicine
Chicago, Illinois
Ophthalmology

Dierdre Antoinette Conley
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Anesthesiology

David Norbert Conrad
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Orthopedic Surgery

Caleb Howe Creswell
McGaw Medical Center of
Northwestern University
Evanston, Illinois
(Transitional Year)
University of Minnesota
Medical School
Minneapolis, Minnesota
Dermatology

Daniel Luke Crozier
SUNY Upstate Medical
University
Syracuse, New York
Otolaryngology

Michael Edward Curley
Medical College of
Wisconsin
Milwaukee, Wisconsin
Internal Medicine

Christine Erin Curry
University of Washington
Affiliated Hospitals
Seattle, Washington
Psychiatry

Heather Marie Curtiss
Postponing postgraduate
training

Timothy John Daley
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Ophthalmology

**Cristina Monraz
Delgadillo**
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

Dustin Alan Deming
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine

Jeremy Steven Dority
University of Kentucky
Medical Center
Lexington, Kentucky
Anesthesiology



Dennis Maki ('67) told the graduates that they could expect many medical innovations in their lifetimes.

K. Charmian Dresel-Velasques

University of California-Davis
Medical Center
Sacramento, California
Obstetrics and Gynecology

Vanessa Helen Newburn Duquaine

Postponing postgraduate
training

Peter Joseph Eichenseer

Rush University Medical
Center
Chicago, Illinois
Internal Medicine

Joseph Ivan Eichenseher

Sutter Medical Center
Santa Rosa, California
Family Medicine

Patrick Duero Fehling

University of Colorado
School of Medicine
Denver, Colorado
Psychiatry

Renee Marie Fohl

Mercer University School of
Medicine Medical Center
Macon, Georgia
Family Medicine

Amy Marie Fowler

Gundersen Lutheran
Medical Foundation
La Crosse, Wisconsin
(Transitional Year)
Barnes-Jewish Hospital
Saint Louis, Missouri
Diagnostic Radiology

Katherine Therese Franklin

Duluth Graduate Medical
Education
Duluth, Minnesota
Family Medicine

Melissa Anne Gannage Weinfurter

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pathology

Lasya Gaur

University of Pittsburgh
Medical Center
Pittsburgh, Pennsylvania
Pediatrics

Lindsay Marie Geier

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

George Tharwat Gendy

Loma Linda University
Loma Linda, California
Orthopedic Surgery

Mia Marie Gintoft

Saint Luke's-Roosevelt
Hospital Center
New York, New York
Psychiatry

Christopher Alan Guite

University of Wisconsin
Hospitals and Clinics
Madison, Wisconsin
Anesthesiology

Leyla Maria Hamizadeh

Medical College of
Wisconsin
Milwaukee, Wisconsin
Pediatrics

Dawn Felicity Hannah

University of Michigan
Hospitals
Ann Arbor, Michigan
Internal Medicine

Elizabeth Edith Harris

Johns Hopkins Bayview
Medical Center
Baltimore, Maryland
*Internal Medicine-Primary
Care*

Michael Thomas Haubenschild

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine

Kelly Ann Gostomski Herold

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
*Internal Medicine-Primary
Care*

Claire Elliot Herrick

University of California-San
Francisco
San Francisco, California
Obstetrics and Gynecology

Emily Kay Hill

University of Chicago
Medical Center
Chicago, Illinois
Obstetrics and Gynecology

Laura Heather Hoff

University of Washington
Affiliated Hospitals
Seattle, Washington
Obstetrics and Gynecology

Rebecca Anne Horne

Children's Hospital
Boston, Massachusetts
Pediatrics-Primary Care

Caroline Marie Houston

University of Iowa Hospital
and Clinic
Iowa City, Iowa
Internal Medicine

Sara Kay Johnson

University of California-San
Francisco
San Francisco, California
Internal Medicine

Andrew Hankyung Kim

UCLA Semel Institute for
Neuroscience and Human
Behavior
Los Angeles, California
Psychiatry

Erin Betty Kimball

University of Wisconsin
School of Medicine and
Public Health
Appleton, Wisconsin
Family Medicine

Ryan Timothy Kipp

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine



Rick Moss (right) and class mentor Eugene Weston (not seen) hooded Ryan Byrne.



Natascha Wathne celebrated with her daughter.

Christina Katherine Kloss
Swedish Covenant Hospital
Chicago, Illinois
(Transitional Year)
Oregon Health and Science
University
Portland, Oregon
Anesthesiology

Sarah Elizabeth Lolnik
New York University School
of Medicine
New York, New York
Pediatrics

Carl Johannes Koschmann
University of Washington
Affiliated Hospitals
Seattle, Washington
Pediatrics

Jennifer Marie Lamps
Postponing postgraduate
training

Maurice Calvin Lawton
University of Minnesota
Medical School
Minneapolis, Minnesota
Family Medicine

Gabrielle Betty LeMarbre
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Internal Medicine

Joshua David Lindsey
University of Washington
Affiliated Hospitals
Seattle, Washington
Orthopedic Surgery

Allison Melanie Loeffler
Texas Tech University Health
Sciences Center
El Paso, Texas
Obstetrics and Gynecology

**Elizabeth Magnan
Longmier**
University of Texas Medical
School
Houston, Texas
General Surgery

Kristin Marie Lyerly
Postponing postgraduate
training

Elizabeth Ann Lyons
University of California-San
Francisco
San Francisco, California
Pediatrics

Anthony Thomas Machi
Postponing postgraduate
training

Nichole Michelle Mahnert
Kaiser Permanente Santa
Clara Medical Center
Santa Clara, California
Obstetrics and Gynecology



Chris Parrish received many hugs.

Rajeev Reddy Mannem
Grand Rapids Medical
Education
Grand Rapids, Michigan
(Transitional Year)
Medical College of
Wisconsin
Milwaukee, Wisconsin
Diagnostic Radiology

Adam Douglass Marks
University of Michigan
Hospitals
Ann Arbor, Michigan
Internal Medicine-Pediatrics

Carrie Lee Marquette
University of Alabama
Medical Center
Birmingham, Alabama
Internal Medicine

Anne Michele Marsh
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

Matthew Steven Martin
Postponing postgraduate
training

**Christina Marie
Mazurczak**
Medical College of
Wisconsin
Milwaukee, Wisconsin
Family Medicine

Nona Yunzhu Mei
Strong Memorial Hospital of
the University of Rochester
Rochester, New York
Internal Medicine

Marty Thomas Mertens
University of Minnesota
Medical School
Minneapolis, Minnesota
Internal Medicine

Jay Michael Miesfeld
University of Iowa Hospital
and Clinic
Iowa City, Iowa
Pediatrics

Anna Christine Momont
Presbyterian Health
Center of the University of
Pennsylvania
Philadelphia, Pennsylvania
(Transitional Year)
University of Michigan
Hospitals
Ann Arbor, Michigan
Ophthalmology

Amanda Ann Monahan
Caritas Carney Hospital
Boston, Massachusetts
(Transitional Year)
Beth Israel Deaconess
Medical Center
Boston, Massachusetts
Anesthesiology

Mark Edward Morrey
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Orthopedic Surgery

Bridget Lynn Muldowney
University of Wisconsin
Hospitals and Clinics
Madison, Wisconsin
Anesthesiology



Sayana Thomas posed with Gabrielle LeMarbre.



Bucky Badger greeted guests at the graduation party.

Ramana Kumar Naidu
Saint Mary Medical Center
Long Beach, California
Internal Medicine
University of Washington
Affiliated Hospitals
Seattle, Washington
Anesthesiology

Andrew Harrington Nelson
Advocate Christ Medical
Center
Oak Lawn, Illinois
Emergency Medicine

Stephanie Ann Neuman
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Anesthesiology

Nadine Elizabeth Nixon
University of Wisconsin
School of Medicine and
Public Health
Eau Claire, Wisconsin
Family Medicine

Sara Elizabeth Northway
Medical College of
Wisconsin
Milwaukee, Wisconsin
Emergency Medicine

Cesar Omar Ochoa
Saint Joseph Hospital
Milwaukee, Wisconsin
(Transitional Year)
Lincoln Medical Center
Bronx, New York
Emergency Medicine

Jared Michael Olsen
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Anesthesiology

Robert Allan Olsen
University of Minnesota
Medical School
Mankato, Minnesota
Family Medicine

Clinton Burdette Olson
In His Image at Hillcrest
Medical Center
Tulsa, Oklahoma
Family Medicine

Sarah Elizabeth Panzer
University of Vermont and
Fletcher Allen Healthcare
Burlington, Vermont
Internal Medicine

Brian Hyun Park
University of Missouri-
Columbia School of
Medicine
Columbia, Missouri
Pediatrics

Christopher Paul Parrish
University of Southern
California Medical Center
Los Angeles, California
Internal Medicine-Pediatrics

Leo Passov
Mayo School of Graduate
Medical Education
Pediatrics
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Child Neurology

Kunal Manohar Patel
Saint Joseph Mercy Hospital
Ann Arbor, Michigan
(Transitional Year)
University of Minnesota
Medical School
Minneapolis, Minnesota
Diagnostic Radiology

Kari Anne Paulson
Saint John Hospital
Detroit, Michigan
General Surgery

Mary Theresa Pawlak
Community Hospitals of
Indiana
Indianapolis, Indiana
Family Medicine

Sarah Elizabeth Pierce
Saint Luke's Medical Center
Milwaukee, Wisconsin
Family Medicine

Surya John Pierce
University of Wisconsin
School of Medicine and
Public Health
Madison, Wisconsin
Family Medicine

Jennifer Elizabeth Pofahl
Maine Medical Center
Portland, Maine
Obstetrics and Gynecology

Alissa Ashley Possin
University of Michigan
Hospitals
Ann Arbor, Michigan
Internal Medicine

Kerry Abbot Pulliam
Providence Milwaukee
Hospital
Milwaukee, Oregon
Family Medicine

**Michael Alexander
Puskarich**
Carolinas Medical Center
Charlotte, North Carolina
Emergency Medicine

**Carolyn Therese Franz
Rank**
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

Sridhar Kadumpalli Reddy
Temple University Hospital
Philadelphia, Pennsylvania
Internal Medicine

Jacqueline Sue Redmer
Postponing postgraduate
training

Michael Dean Repplinger
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Emergency Medicine

Jennifer Lee Rickard
Rush University Medical
Center
Chicago, Illinois
General Surgery

Nestor Salvador Rodriguez
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Emergency Medicine

Katharine Mae Roman
Postponing postgraduate
training

Patrick Winston Russell
Grand Rapids Medical
Education
Grand Rapids, Michigan
(Transitional Year)
Medical College of
Wisconsin
Milwaukee, Wisconsin
*Physical Medicine and
Rehabilitation*

Jason Matthew Sansone
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Orthopedic Surgery

Youssef Ahmes Sawers
University of Kansas School
of Medicine
Kansas City, Kansas
Internal Medicine

**Amanda Lynn Schmeihil
Micklos**
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Obstetrics and Gynecology



David Allen performed during the social hour.

Christopher Stephen Schmidt

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Anesthesiology

Anna Lisa Schmitz

Reading Hospital and
Medical Center
Reading, Pennsylvania
Obstetrics and Gynecology

**Nathan Todd Nelson
Schreiber**

University of Utah Medical
Center
Salt Lake City, Utah
Otolaryngology

Andrew Mark Schroeder

University of Virginia
Medical Center
Charlottesville, Virginia
Anesthesiology

Lisa Lorrae Schroeder

Geisinger Health System
Danville, Pennsylvania
Internal Medicine

Meredith Marie Schultz

University of Colorado
School of Medicine
Denver, Colorado
Pediatrics
University of Colorado
School of Medicine
Denver, Colorado
Child Neurology

Jeffrey Daniel Seybold

University of Michigan
Hospitals
Ann Arbor, Michigan
Orthopedic Surgery

Amber Leigh Shada

University of Virginia
Medical Center
Charlottesville, Virginia
General Surgery

Gina Renteria Shirah

Maricopa Medical Center
Phoenix, Arizona
General Surgery

Adam Foster Silberman

Einstein Montefiore Medical
Center
Bronx, New York
Psychiatry

**Stephanie Maureen
Solberg**

University of Minnesota
Medical School
Minneapolis, Minnesota
Anesthesiology

David Paul Sommerfeld

University of Wisconsin
School of Medicine and
Public Health
Appleton, Wisconsin
Family Medicine



Pasithorn Suwanabol, Nona Mei and Sahar Abdelrahman were overjoyed.

Michael Charles Stauder

Saint Francis Hospital
Evanston, Illinois
(Transitional Year)
Mayo School of Graduate
Medical Education
Rochester, Minnesota
Radiation Oncology

Kelly Irene Stephens

Postponing postgraduate
training

Pasithorn Amy Suwanabol

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
General Surgery

Krista Marie Swenson

Wright State University
Boonshoft School of
Medicine
Dayton, Ohio
Obstetrics and Gynecology

Allison Rae Tanck

Albert Einstein Medical
Center
Philadelphia, Pennsylvania
General Surgery

Sayana Rachel Thomas

University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Radiation Oncology

Kelly Ann Traeger

Medical College of
Wisconsin
Milwaukee, Wisconsin
Pediatrics
Medical College of
Wisconsin
Milwaukee, Wisconsin
Anesthesiology

Andrea Jenae Van Wyk

Postponing postgraduate
training

John Michael Vasudevan

Tucson Hospitals Medical
Education
Tucson, Arizona
(Transitional Year)
Thomas Jefferson University
Philadelphia, Pennsylvania
*Physical Medicine and
Rehabilitation*

Zachary Charles Wachtl

University of Colorado
School of Medicine
Denver, Colorado
Family Medicine

Natascha Wathne

Postponing postgraduate
training

Charles Anson Wiltrout

University of Chicago
Medical Center
Chicago, Illinois
Internal Medicine

Jennifer Lynn Wiperman

University of Kansas School
of Medicine
Wichita, Kansas
Family Medicine

Michael Adam Witcik

Gundersen Lutheran
Medical Foundation
La Crosse, Wisconsin
Internal Medicine

Diane Marie Witek

Medical College of
Wisconsin
Milwaukee, Wisconsin
Family Medicine

Peter Mares Wolfram

University of Michigan
Hospitals
Ann Arbor, Michigan
Pediatrics

Joanna Stephanie Yi

University of Minnesota
Medical School
Minneapolis, Minnesota
Pediatrics



Guests danced to the music of the Arrhythmias, the medical student band.

EMBRACING THE ARTS

MEDICAL STUDENTS DISPLAY THEIR TALENTS



by Sarah Gale Wyrick, Med 3

Student interest groups abound here at the University of Wisconsin School of Medicine and Public Health. There are groups for medical specialties, for a plethora of athletic pursuits, even a group dedicated to karaoke. Each group offers something beyond our day-to-day medical curriculum.

Medical Students for the Arts (MSFA) encourages students to use elements of themselves not challenged by questions of biochemistry or pharmacology. We embrace a wide definition of art. Over the past few years,

MSFA has sponsored a book club, outings to Madison performing arts venues and make-your-own sushi lunches (loosely categorized as both a culinary and craft activity). We have organized talent shows and "Music in the Atrium," an annual week during which medical students perform music over the lunch hour. Among our peers are concert pianists, a capella troupe members, jugglers, comedians, poets and harpists.

These are not talents often showcased in our classes, but such events remind us that we are each so much more

than our grade on the last exam or exactly how much anatomy we can currently recall. That's the goal: to encourage wholeness—or at the very least, have a little fun. These events can be highly entertaining.

This year, MSFA resurrected the student art show. "An Eye for Art: A Small Offering from Medical Students for the Arts" ran on the third floor of the Ebling Library from March 12 to April 8, 2007. All medical students were invited to participate, and works were exhibited from everyone who stepped forward. In total, 16 student artists submitted

32 pieces. These included photographs, drawings, paintings and a pregnancy cast from a second-year student who was a proud mother. We held a public reception the evening of March 14, which many of the artists were able to attend.

I submitted two photographs for the show, both landscapes. However, I hardly consider myself a photographer. In fact, the title of artist sits uneasily on my shoulders.

Actually, that's the point—you don't have to be an artist to be enriched by your participation. I'm a hobby art

lover. I've played instruments, performed onstage, sung in choirs, refinished furniture and created many construction paper and glitter masterpieces over the years. All of it has been enjoyable and a playground for my creativity, a source of personal growth. But none of it seems weighty enough to earn the term artist. If anything, I aspire to be a writer. As I've grown up I've found the most pleasure in arranging words. Tweaking verbs and pausing to contemplate the best way to express myself. To entertain. To communicate.

All in all, the art show was a great success. Putting student art on the walls of the building where we spend so much time was meaningful—it is, after all, our space. And medical students once again proved to ourselves that we're an awfully talented bunch. The show would not have been possible without the invaluable support of Micaela Sullivan-Fowler, curator of rare books and special collections at the Ebling Library, and Mary Hitchcock, historical services librarian. Malinda Jorgensen, also a second-year medical student, served as co-coordinator of the show, and her help was much appreciated.

One might ask why art is important to medical students. Are art and medicine an unusual combination? What do the visual arts, literature, music or theater have to do with the complex biomedical model of health



Sarah Leadley, *a Med 1*, earned her undergraduate degree in the visual arts at UW-Madison.

and illness? To me, art and medicine have never seemed discordant. This is probably a result of the diverse interests of my father, Ken GaleWyrick, MD. Before he started medical school, he spent a year in Italy studying classical art forms. At the time, he was an oil painter, although today he prefers sculpting (he is a family practitioner in Eau Claire who completed his residency at UW).

I remember wandering through art museums with him as a child, my hand in his, as he pointed out both the splendor of the ancient sculptures and a few anatomical landmarks. I recall being surprised by the nudity of ancient works, and him patiently explaining that the human body itself is a work of art, that it is intricate and beautiful.

Later, I learned of historical connections between the visual arts and medicine, particularly anatomy. Michelangelo dissected human bodies to enhance his knowledge of anatomy and perfect his depiction of the human form. Vesalius's

groundbreaking *De humani corporis fabrica* (*On the Workings of the Human Body*)—a copy of which is housed in our Ebling Library—is filled with beautiful drawings illustrating the Belgian physician's firsthand experience of the human



Self-portrait by Med 2 Chris Vaughn.



Sarah Leadley, Steve Almassi, Gabby Zimbric, Jesse Coenem and Grace Nam enjoyed the art and refreshments.

EDITOR'S NOTE

A growing number of medical schools, including the SMPH, are beginning to offer students an opportunity to engage the arts and humanities as a way to examine and enlarge their understanding of successful doctoring. A personal essay reflecting on a powerful event, a work of art rich in telling detail—these can provide some of the most critical and memorable lessons in empathy, compassion, communication and observation.

With the next issue of Quarterly, we will begin a new section showcasing readers' impressions reflecting their personal experiences related to becoming—or being—a physician. We look forward to sharing compelling, dramatic, surprising, humorous and, above all, instructive representations of life in our medical world. More information about submission guidelines and other details will be published in the fall.

body. Thus, anatomy, so central to medicine that most first-year medical students are required to dissect cadavers, is closely tied to classical art. Artists like Michelangelo were able to so accurately depict the glory of the human form because they had seen the muscles that ripple beneath the surface.

Today, medicine is often called an art. Perhaps that is because there is much about the delicate balance between health and illness that continues to perplex us. Patients do not materialize perfectly out of textbooks with all the appropriate symptoms, and they do not necessarily respond to the appropriate evidence-based-medicine solution. Ideally, doctors follow evidence as far as they can, then use their instincts and partner with the patient to tailor an intervention.

Although we know the science, our patients know themselves. They are the experts there: experts on their aspirations and dreams, comfort level and bodies.

They have their own personal definitions of health. Thus, the day-to-day practice of medicine becomes an amalgamation—of science, life experience, perspective, emotion. And in that messy, human, frustrating richness, it becomes an art. A pluralistic world where there is no single right answer or viewpoint. Where beauty and suffering coexist. Where the human experience is reflected.

Thus, art is important to medical students. We need to grasp that despite our years of scientific training, of answering multiple choice questions and shading in the bubble, we must recognize that in medicine, just as in life, there is very rarely one right answer. There may be no "right answer." We're going to be better doctors if we can accept that, or at least try to minimize our aggravation.

And when all else fails, art reconnects us with our own humanity. After all, at its most basic level, art reflects human experience. It allows us to see beauty in complexity, on days when little makes sense.

Because intellect and your MD may not explain healing, suffering, birth and death. But art might. The sonata, the play, the book, the painting. Each could bring you joy or illuminate an experience you did not understand. At the very least, it may give you someone else's perspective on life's great mysteries. We cannot all be great artists. But perhaps through the arts—creating or enjoying them—we can become better doctors.



Sarah GaleWyrick and Matt Holleque admired a painting.

Students Raise Awareness During Cover the Uninsured Week



Emeritus faculty member Eugene Farley (left), a longtime proponent of healthcare reform, urged student advocacy. David Kindig, also an emeritus faculty member, and Barbara Lawton, Wisconsin lieutenant governor, were keynote speakers for the event.

by Nina Pang, Med 1

Brewed in the Learning Communities—or, more fondly, the “cluster rooms”—of the Health Sciences Learning Center (HSLC), where medical students congregate to study and cram for exams, the idea for the UW Cover the Uninsured Week 2007 (CTUW) arose from an informal discussion on healthcare among first-year medical students in October 2006.

Student Christine Rustad had read about Cover the Uninsured, which has been sponsored by the Robert Wood Johnson Foundation for the last ten years to engage individuals and organizations across the country in a weeklong campaign to promote the importance of the State

Children’s Health Insurance Program (SCHIP) and the need to cover America’s uninsured children. As students shared their opinions and values, their concern about universal access to healthcare for all populations took center stage.

Conveniently, a sub-committee of the American Medical Association-Medical Student Section (AMA-MSS) at the UW School of Medicine and Public Health had just been formed, and what originated as a cool idea became the focus of these students’ medical activism for the next six months.

The series of events kicked off with the Symposium on Increasing Health Care Access in Wisconsin on Wednesday, April 18, 2007, at the HSLC. The symposium drew an estimated 130 people from the UW

health professions schools, UW hospital, the university and the greater Madison community.

After an introduction by SMPH dean Robert Golden, MD, both Lieutenant Governor Barbara Lawton and David Kindig, MD, PhD, professor emeritus of population health sciences, gave keynote speeches addressing the issue of healthcare access.

Next a panel consisting of state legislators Carol Roessler and Spencer Black, who both are public health advocates, and Gordon Ridley, SMPH senior associate dean for administration and finance, discussed Governor Jim Doyle’s health budget proposal. Symposium participants then broke up into small groups, attending any of four interactive workshops.

One workshop furthered discussions on proposed state healthcare bills and was led by David Riemer, director of the Wisconsin Health Project; David Newby, president of the Wisconsin AFL-CIO; and Eugene Farley, MD, SMPH professor emeritus of family medicine. At the other workshops, experts discussed immigrant and minority healthcare access, how to navigate the Medicaid maze and the basics of healthcare insurance. Some of the events are now in the IME Video Library and can be viewed at <http://videos.med.wisc.edu/>.

The symposium was followed by two weeks of healthcare access community outreach efforts across Madison—at St. Vincent’s Food Pantry, Allied Boys and Girls Club Food Pantry, Door to Door at Allied Drive, Madison Job Center,

Event participants listened intently as Jane Barnett, president and CEO of University Health Care, Inc., presented a mini-workshop on the basics of healthcare insurance.



Savory Sunday, Madison Literacy Network and Bethel Lutheran Church. Medical students Brian Frederick and Sarah Amend organized these activities. Students conducted one-on-one surveys at each site to assess community views on the issue and provide information on local resources. A brochure about local healthcare access developed specifically for outreach was passed out at all sites as well as the student-operated, low-cost MEDiC clinics.

The medical students also participated in Lobby Day at the State Capitol and

collaborated on bringing three related noon talks to the SMPH: “Health Economics,” by Ralph Andreano, PhD, UW professor emeritus of economics; “Health Systems Technology: Human Factors and Improving Access Without Politicians,” presented by the Health Systems Engineering Association (HSEA) at UW; and “Two Models of Healthcare Provision in Inner-city Milwaukee,” by Eugene Pruitt, MD, from the Medical College of Wisconsin.

According to the U.S. Census Bureau, 9 percent

of the 5.5 million people living in Wisconsin do not have health insurance coverage, and 6.4 percent of Wisconsin’s children are uninsured. A report titled “Wisconsin Health Insurance Coverage” found that “a majority of children who were uninsured for part of the year lived with adults who were employed full-time.”

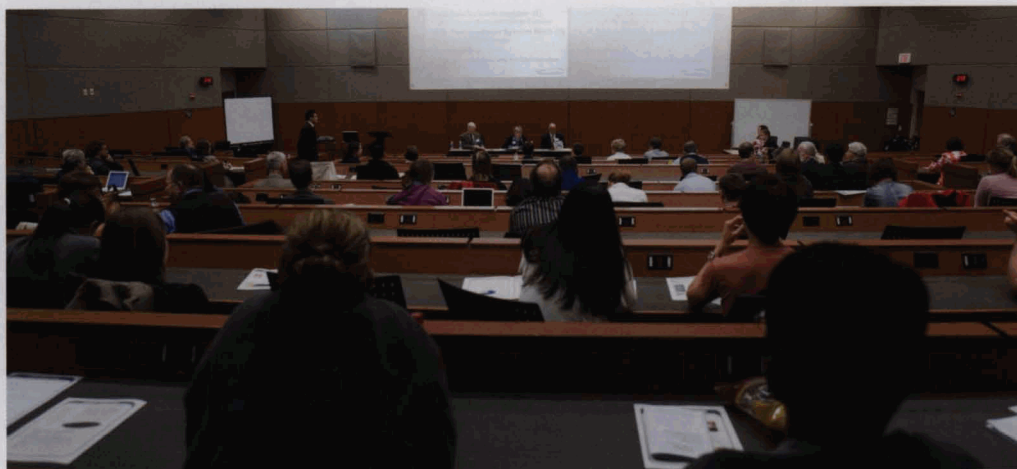
In discussing these figures, one student who attended the symposium compared getting healthcare coverage and buying coffee at Starbucks. “Even if I can’t afford a \$4 frapuccino on a student budget, I can still

buy a regular cup for \$1.50 to get through a rough day. Healthcare, on the other hand, doesn’t have that equivalent,” he said. “It just doesn’t make any sense that I can’t get a regular cup of coffee and basic healthcare coverage without breaking the bank.”

In brainstorming for CTUW, student organizers drew inspiration from Eugene Farley, MD, and Linda Farley, MD, also an SMPH professor emeritus of family medicine.

“The Farleys are very committed to the issues that are important to all of us. They really encouraged student advocacy, and they urged discussion and an exchange of ideas to promote change in our healthcare system,” recalls first-year medical student Helena Chang. “One of the goals of the symposium was to create a dialogue—for the community as a whole—on healthcare access issues that people care about.”

In biweekly meetings prior to CTUW, student organizers determined that for any





Gordon Ridley (left), SMPH senior associate dean for administration and finance, and state legislators Carol Roessler and Spencer Black discussed Governor Jim Doyle's health proposal budget.

meaningful discussion to occur, the voices of all parties involved needed to be heard. Having prominent speakers would get people's attention, while the media was needed to amplify the collective message.

Still, the students wondered whether their vision would actually transpire, as the task at hand was rather daunting without the right connections and resources. Support from Dean Golden and Pat McBride, MD '80, MPH, SMPH associate dean for students, was key to moving the planning forward. Dean Golden not only matched funding from other grants and provided administrative resources to make the symposium feasible, but also contextualized the event within the school's public health mission. And so the connection between a vision and the agenda for CTUW was established.

With SMPH administration on board, the next set of challenges was structuring the program and securing speakers. The students

received governmental affairs guidance from Lisa Maroney of UW Hospital and Clinics and public affairs guidance from Jonathan Sender of the UW Medical Foundation. The two seasoned specialists coached student organizers on writing letters, choosing speakers, timing the events, keeping the discussion balanced, engaging the media and getting coverage, and ways to increase event sponsorship, community involvement and public awareness.

Grants from the Association of American Medical Colleges, the AMA-MSS, University Health Services, the Wisconsin Medical Society and the Wisconsin Medical Alumni Association helped fund the event series, refreshments, advertising, and flier and brochure printing. The group also received donations and discounts from local businesses for food, printing and other supplies from UW Health, Media Solutions, the Printing Partners and Panera Bread.

After a long evening of panels and workshops, student organizers and attendees alike were pleasantly surprised by how informative and thought-provoking the event was. Many stayed late into the evening for the reception that followed to discuss their ideas on a personal level and to pass on their rave reviews.

Because healthcare access is such a critical issue, SMPH students are already discussing the idea of creating a coalition among student organizations to integrate activism efforts and to form a united voice for policy changes. The consensus is that a basic level of healthcare access should be compulsory, without which one cannot be a productive member of society. As future physicians, students are in an excellent position to advocate for this issue because people listen to doctors, patients want their doctors to speak up for them and, frankly, it's part of the job. As students, getting involved through activism is a great place to start.

"One of the best things about the symposium was that it was almost entirely a student-organized event," says Kyle Fischer, keynote student moderator. "It took an issue that a few dedicated students were interested in; and they then exposed it to their fellow students, faculty members and community."

Adds Fischer, "Probably the most interesting thing for me was learning how interwoven doctors, politicians, business leaders and patients all are when it comes to the healthcare system. Each has a significant impact on the others. It became increasingly obvious that if any meaningful reform is ever going to occur in the future, it will be a battle fought simultaneously on these four fronts."

With the symposium behind them, the weary student organizers hurried back to the cluster rooms for studying again—and perhaps brewing new ideas for next year's events.

Trial Run

Med 3s and 4s Learn to Handle Risky Situations on a Patient Simulator

by Aaron R. Conklin



Mr. Jones is in a world of hurt. The car accident earlier this evening has left him with a severely broken leg and some kind of neck injury. He's drunk—and he's complaining. A lot.

"Can I get this thing off my neck? I'm really sleepy. I have to pee," Jones whines. His exposed wound and broken bones gape at the edge of the blue blanket that covers the rest of his body.

The trio of medical students hovering over the table look at each other nervously. After asking a few basic questions, they confer, select an antibiotic and move to begin delivering the anesthesia.

Suddenly, Mr. Jones begins to aspirate. Just as suddenly, the surgeon storms in the door. "I'm ready to get started," he barks. "Are we ready yet? I've gotta go pick up my new car at three."

Worst OR day ever? Not quite. Instead, these third-year UW School of Medicine and Public Health (SMPH) students are getting a challenging lesson in Catastrophe 101 in UW Hospital and Clinics' patient simulator lab. "Mr. Jones" isn't a human, he's "iStan," an elaborate human patient simulator developed by Medical Education Technology Inc. (METI). His voice—and drunken

Students Jacklyn Karban, Alex Feix and Irisa Devine practiced intubating iStan, an elaborate human patient simulator.

antics—are provided through a microphone courtesy of Thomas Kloosterboer, MD '82, the assistant professor of anesthesiology who runs the simulator program. The surgeon isn't a doctor, but David Redon, PhD, a UW Hospital researcher who ran the program for eight years before Kloosterboer took over.

Yes, much of the experience isn't "real." But for the three students, it's anything but make-believe.

"Petrifying," says Med 3 Alex Feix, of his first experience with the simulator. "You spend so much time studying what you'll need to do in stressful situations, and it's scary how quickly it all slips away from you when you're in the middle of it. The border between real and unreal just evaporates."

Like other medical schools, the SMPH has recognized that there's inherent value in students practicing catastrophic events before they experience them in an actual operating room. The program isn't new—UW Hospital has been using a version of this particular simulator since 1998. It was one of the first in the country to use METI simulators to train students and residents.

Third- and fourth-year medical students experience the patient simulator at least twice as part of their anesthesiology rotation. On the first day, they use it to learn how to intubate a patient and deliver simple

anesthesia. In the rotation's final days, they simulate crisis situations, like the one involving Mr. Jones.

"You don't have to put patients at risk," says Kloosterboer. "You can simulate incredibly adverse events you might only rarely encounter in an operating room, and the residents have to make the diagnosis and make a treatment choice."

The simulator can be programmed and used for any number of scenarios. Unusual situations, like malignant hypothermia and anaphylaxis. And common ones, like sudden drops in blood pressure. In one particularly harrowing scenario, students must treat a patient who has fallen from a scaffolding and been pierced by a spike. To further complicate the issue, Kloosterboer plays a frantic friend who won't leave the triage room.

The simulator is designed to function as a real patient would: Its "eyes" dilate and constrict, and the machine's software causes breathing and pulse to fluctuate accurately in response to the drugs and treatments the students deliver.

"If you don't give it the right drug, it continues down whatever path you've chosen. If you give the right drug, you get recovery. If you have a scenario involving ventricular tachycardia and you're supposed to shock the patient and don't, the simulator won't recover."

Increasingly, medical centers across the country are using simulators like this to train residents and physicians on everything from laparoscopic surgery to obstetric and pediatric procedures. At UW Hospital, simulation also helps to ground students and residents in a variety of disciplines and procedures. Simulated bronchoscopy in intensive care and an infant simulator are just two examples.

Susan Skochelak, MD, MPH, SMPH senior associate dean for academic affairs, notes that school leaders have begun talking with leaderships at UW Hospital and Clinics and the UW Schools of Pharmacy and Nursing about developing a strategic plan to take simulation to the next level.

"I think the whole health complex needs to move even farther in this direction," she says. "I don't know that we need an actual building dedicated to simulation, but we need to grow our capacity for doing more."

Once the simulation is done, Kloosterboer emerges from the adjacent control room where he's been monitoring the action to go over the scenario with the students.

Some things went well—the students remained calm and worked together to intubate and deliver antibiotics to Mr. Jones—and some didn't. The students missed performing a rapid sequence induction, and

their attempt to intubate the patient simulator would have resulted in several broken teeth on an actual patient. Kloosterboer avoids overt criticism, is patient and supportive as he does the post-mortem, a fact that isn't lost on the students, who look at him gratefully and take mental notes.

This group's experience isn't at all unusual, says Redon, who recalls the days when his wife, now an anesthesiologist with 30 years experience, would be left alone in an operating room with a patient.

"Generally, the students can locate a clinical finding," he says. "But then they don't know what to do about it."

In other cases, the simulation training ends up saving lives down the road. Six months ago, says Kloosterboer, a medical student recognized an anaphylactic reaction in a recovery room patient, preventing disasters. It's those kinds of things, rare events that crop up unexpectedly, that make the technology so useful.

Med 3 Irisa Devine no longer needs convincing. Her experience with Mr. Jones affected her more than she expected.

"I didn't want to lose this patient," she says, her choice of the word "patient" particularly revealing. "It wasn't like I was working with a dummy."

UW ESTABLISHES Stem Cell and Regenerative Medicine Center



PHOTO: Jeff Miller/University Communications

by Terry Devitt

In an effort to strengthen and sustain its leadership in the companion fields of stem cell research and regenerative medicine, the University of Wisconsin-Madison will establish a new Stem Cell and Regenerative Medicine Center.

The announcement, made May 17, 2007, sets the stage for a critical central entity under which UW-Madison can enhance and strengthen its programs of stem cell research, training and education.

"We hope to provide a bridge for all researchers on campus involved in stem cell research," says stem cell authority Clive Svendsen,

PhD, professor of neurology at the UW School of Medicine and Public Health (SMPH). Svendsen will co-direct the new center with cardiologist and stem cell researcher Timothy Kamp, MD, PhD.

The new center will focus broadly on stem cells ranging from embryos and adult tissues to cancer stem cells. It will encompass existing programs in regenerative medicine and an interdisciplinary stem cell postdoctoral training program, and will serve as a focal point for basic, preclinical and clinical research in stem cell biology and regenerative medicine, an emerging multidisciplinary field that seeks to develop

technologies to repair or replace diseased or defective tissues or organs.

Kamp and Svendsen estimate that as many as 50 UW-Madison faculty members are engaged to varying degrees in stem cell research and regenerative medicine. In addition to the work with human cells on the UW-Madison campus, scientists whose work could be supported by the new center include basic scientists who study stem cells and development in other animals ranging from non-human primates to nematodes, a roundworm widely used in biomedical research.

The new center, Kamp says, will serve as a focal point for research by helping to develop core facilities, a seed grant program, funding for postdoctoral fellows and educational and outreach programs. To begin with, the center will be a virtual one, with no building but with the administrative and support capacity to effectively fuel key areas of research and education.

This will be especially important, the researchers note, as key campus projects such as the SMPH's Interdisciplinary Research Complex and the Wisconsin Institutes for Discovery evolve.

"We see strong links between the various programs through collaborations and funding programs," Kamp explains. "Given the wide interest in stem cells and regenerative medicine, the interdisciplinary and translational nature of the work, and the preeminence of Wisconsin in this area of biology, we feel this is both timely and crucial for Wisconsin to maintain its leadership."

Both Kamp and Svendsen say the new center will be critical to the university's ability to maintain and strengthen its programs. It will, for example, be an asset in helping to attract the best faculty and students to Wisconsin.

"Another emphasis of the center will be on recruitment and retention," Svendsen says. "It is important to show UW-Madison has leadership and focus in this area," especially as competition from other states and from Europe and Asia becomes more intense.

The center will also serve as a focal point for fund-raising, advocacy and outreach.

GRANT WILL FUND New PET Scan Cyclotron

by Dian Land

UW Health physicians' ability to make diagnoses related to cancer, heart disease and neurological disorders will be greatly expanded soon, thanks to a \$1.5 million grant for a significantly upgraded positron emission tomography (PET) tracer production facility at the University of Wisconsin School of Medicine and Public Health (SMPH).

With a new 30-ton cyclotron as the centerpiece, the facility will also allow SMPH scientists to expand their research on normal and abnormal tissue and organ function. The cyclotron will be located in the new Interdisciplinary Research Complex (IRC), which is currently under construction.

The grant is part of the National Institutes of Health's National Center for Research Resources High-End Instrumentation Program, which funds cutting-edge equipment needed to advance biomedical research. The SMPH is one of 14 institutions to receive the grant.

"With this generous award, faculty led by researchers in medical physics, radiology and human oncology will enjoy new vistas of targeted, disease-based research not possible in the past," says

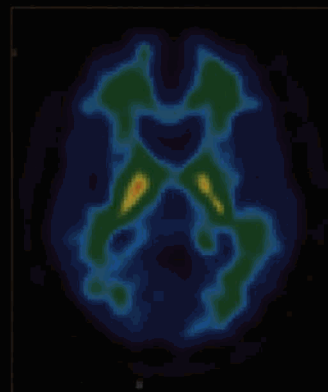
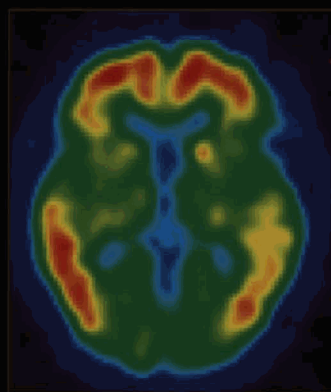
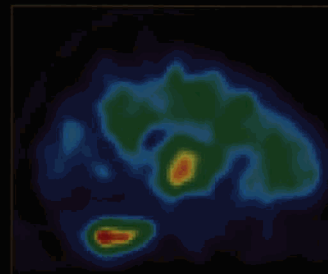
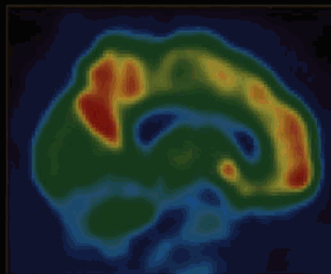
Paul DeLuca, PhD, SMPH vice dean. "As such, the imaging sciences facility at the IRC will enjoy a national leadership position."

Since 1985, SMPH medical physicists have used an 11-megavolt proton cyclotron housed in the basement of the Medical Science Center to make tracers, or markers, for PET studies conducted at UW Hospital and Clinics and the PET facility at the Waisman Center. The new cyclotron will be a higher energy, state-of-the-art machine.

Unlike CTs and MRIs, which display anatomical structures, PET images provide information about the biochemistry and function of normal and diseased tissues and organs. PET images can reveal the level of tumor activity, for example, and can distinguish regions in the heart that may be completely damaged by infarction or only somewhat damaged by ischemia.

"Simply put, PET involves four steps: shooting, cooking, imaging and diagnosis," explains PET technology expert Jerry Nickles, PhD, SMPH professor of medical physics and radiology. "Since most positron emitters are short-lived, these steps are locked into a time-critical sequence."

In the first step, the cyclotron and its high-



energy beam make the initial product, a positron-emitting radioactive isotope, by accelerating, or shooting, atomic and subatomic charged particles onto a target.

In the second step, a natural biochemical substance is combined with minute amounts of the radioactive isotope. The tagged substance will go to places in the body where it normally functions. Dozens of substances can be used for this step, but the most common is the glucose look-alike FDG, an energy source used in many parts of the body. Since tumors

metabolize more glucose than normal tissue, their activity shows up very clearly in a PET image.

Tracers have a short half life, so they are quickly transferred to the PET imaging facility to be injected into the patient. As the radioisotopes are annihilated, or "decay," they produce radiation that is captured by a camera and used to generate a three-dimensional color image, the third step in the process.

In the final step, the clinician uses the information seen in the image to make a diagnosis.

Nicaragua Experience

ENRICHES PLASTIC-RECONSTRUCTIVE SURGERY TRAINING

by *Dian Land*

Cleft lip and palate repairs in children are among the most rewarding procedures a plastic and reconstructive surgeon can perform, according to Michael Bentz, MD, chair of the Division of Plastic and Reconstructive Surgery at the University of Wisconsin School of Medicine and Public Health (SMPH).

"In less than two hours and using very few materials, the surgeon can

transform a child's appearance, speech and entire life," he says. "These kinds of cases best represent what we do."

Participants in the plastic and reconstructive surgery residency at UW Hospital and Clinics regularly experience this kind of gratification in a part of their training that takes them to Nicaragua. That's where UW and Nicaraguan surgeons partnered 16 years ago to create Eduplast, a program that introduces physicians in training from both countries to an array of new clinical and educational experiences.

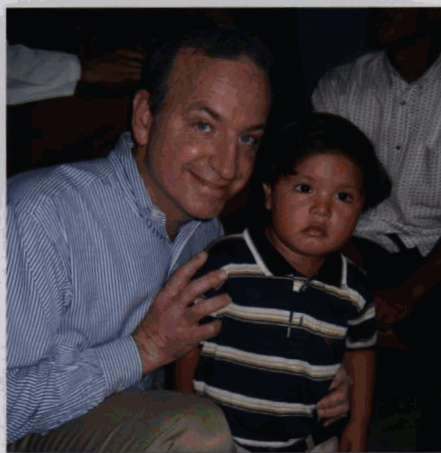
The UW residents join a group of surgeons and nurses who travel from Madison to Nicaragua each fall and spring to assist local practitioners, many of whom trained with UW faculty, with plastic surgical treatments. In addition to cleft lips and palates, which for a variety of medical reasons are much more common in Central America than in North America, the group

treats patients with issues ranging from severe burns to congenital problems to cosmetic concerns as well as many other conditions usually found only in the tropics.

David Dibbell, Sr., MD, former chair of the SMPH Division of Plastic and Reconstructive Surgery; John Noon, MD '79, who heads the St. Mary's plastic and reconstructive service; Andrew Baertsch, MD '84; and Roy Brabham, MD, created the program with the Universidad Nacional Autónoma de Nicaragua (UNAN) in 1991.

Noon had visited Nicaragua as a senior UW medical student in 1979 with the group *Compañeros de America* and went back in 1990. In the intervening years since the program's start, he has returned to the country some 40 times.

Eduplast places a heavy emphasis on being bidirectional, stresses Noon, also an SMPH clinical associate professor of surgery. The UW division provides many training opportunities for Nicaraguan doctors interested in plastic and reconstructive surgery. Two of them



Michael Bentz posed with a pre-op patient dressed to attract his attention.

travel to UW Hospital each year, some as visiting professors.

Adds Bentz, "In addition to scrubbing with us and observing our surgeries and participating in classes, they attend board review courses and our weekly teaching conferences. We recently also began providing live Internet access to our grand rounds here, which lets them dial in from home."

War-torn Nicaragua is among the poorest countries in Central America, with a crumbling infrastructure that translates to a severely challenged healthcare delivery system.

"But the country is beautiful and despite the poverty, Nicaraguans are happy, hardworking and truly lovely," Bentz says. "Local doctors and nurses are extremely talented, and dedicated to helping their people."

Leaving Madison very early in the morning, the UW team, typically loaded with boxes of donated supplies, reaches Leon, Nicaragua, home of UNAN, by midafternoon. The group stays in the fishing village of Poneloya, driving the 20 kilometers by van or ambulance to the university hospital, where a special clinic is set up twice a year to administer care. The rest of the time is spent at hospitals and clinics in smaller towns, such as Jinotega and Matagalpa in the lush coffee plantation area of the country.

"We screen between 100 and 200 kids and adults on any given trip, which usually lasts 7 to 10 days," Bentz says. "This is a patient population that's generally sicker than what we see in Madison so not all of them are appropriate candidates for surgery. Through this screening, residents learn to refine their decision-making process."

The equipment in the operating rooms is secondhand and far from high-tech.



David Dibbell (in red scrubs), co-founder of Eduplast, made a point during surgery to (from left) Jose Cruz, Mary Snyder and Matthew Swelstad, all of whom have trained in the program.

"The lights go out often, so it's not unusual for us to work with an REI headlight or flashlight," says Bentz, who's made the trip six times since joining the SMPH division in 1999. "You learn to do with a lot less than you're used to in the U.S. This forces you to become more creative and resource-focused. At the same time, the Nicaraguan trip gives Wisconsin doctors a renewed appreciation for all the resources they have at home."

The overall effect on residents is maturing and always unforgettable, says Bentz.

"They are reminded of the reasons they got into medicine in the first place," he says. "The patient has a problem and the doctor fixes it. Getting pre-authorization from insurance companies, doing scheduling and documenting cases—all become secondary."

Residents are exposed to disease processes they may never see in Madison, learn to interact with patients with different cultural backgrounds, function within alternative healthcare systems and acquire new perspectives on global medicine.

Perhaps the most enriching aspect of the experiences is that they stimulate a lifelong interest in international and

community service, Bentz adds. "Once you develop the habit of caring for others in these circumstances," he says, "you find it difficult to stop."

Approved by the UW System Board of Regents and formalized through official agreements, Eduplast has become a national model for delivering care and providing training in developing countries.

The program's goal from the beginning, says Noon, has been to avoid the usual medical relief scenario in which, despite good intentions, outsiders travel to another country, take over a hospital during a short stay, deplete the resources and leave, never to return again.

"We wanted to create a program that was self-sufficient and self-propagating," says Noon. "This success has been built on consistency, trust and close friendships developed over many years."

Noon and UW plastic surgery division members are helping build another enduring Eduplast program in Ecuador, and are hoping to do the same in Kazakhstan and Honduras in the future.

CME (OCPD) Expands Public Health Offerings

The Office of Continuing Medical Education is now the Office of Continuing Professional Development in Medicine and Public Health (OCPD). The change occurred shortly after the school became the University of Wisconsin School of Medicine and Public Health (SMPH) in 2006.

The name change signifies the OCPD's commitment to produce, deliver and evaluate educational activities that will foster and maintain competent public health as well as medical workforces in Wisconsin, says Linda K. Pittz, OCPD administrator of continuing public health education. The change also involves teaching Wisconsin physicians about public health issues.

"We are extremely well positioned to expand into public health education since we have been involved for years in educating physicians about all kinds of clinical practice issues," says Pittz.

One example of the enhanced public health activities is OCPD's participation in the Healthy Wisconsin Leadership Institute (HWLI), a new joint initiative of the SMPH and the Medical College of Wisconsin funded by the Wisconsin Partnership Program (WPP). HWLI's goal is to build public and community health skills and leadership capacity throughout Wisconsin. It does this through three programs: the Community Teams Program, the Health Policy Program and the Lifelong Learning and Mentoring Program.

The OCPD is providing direct logistical, technical and educational support for the Lifelong Learning and Mentoring Program, says Pittz. In one effort OCPD staff worked with the HWLI to present a preconference

workshop at the Wisconsin Public Health Association's 2006 meeting. Participants learned techniques for effective coaching and mentoring.

Another example of OCPD's expanded mission is informing physicians, policy makers and other healthcare leaders about emerging public health issues. Pittz recently worked closely with A. Vishnu Moorthy, MD, SMPH associate professor of medicine, to organize a special conference on chronic kidney disease (CKD).

Leaders of major Wisconsin health plans and others attended the conference, which was held in Madison last spring on World Kidney Day, March 16, 2007. In addition to Moorthy, speakers included U.S. Congresswoman Tammy Baldwin; Wisconsin Secretary of Health and Family Services Kevin Hayden; SMPH professors Jeffrey Grossman, MD, Patrick Remington, MD '81, MPH, Bryan Becker, MD, and Teresa Darcy, MD; and CKD patient Anthony Johnson.

Nearly 16 percent of all American adults have CKD and the incidence and prevalence are increasing, according to national statistics. "This puts a heavy strain on our dialysis centers and has resulted in a kidney transplant waiting list of 70,000 patients," says Moorthy. "There are not enough nephrologists to handle this coming crisis."

At the conference, Moorthy urged that a proactive preventive approach be developed to address the problem. "Screening people at risk of CKD—those with diabetes, hypertension and a family history of kidney disease—with tests that are the best predictors of kidney function—eGFR and

microalbuminuria—must occur in our primary care clinics," he says.

Moorthy discussed current treatments for managing patients with CKD, which primarily consist of ACE inhibitors, and described the link between CKD and heart disease. Prevention strategies include early diagnosis of CKD, controlling diabetes and hypertension, quitting smoking and adhering to standard cardiac prevention practices.

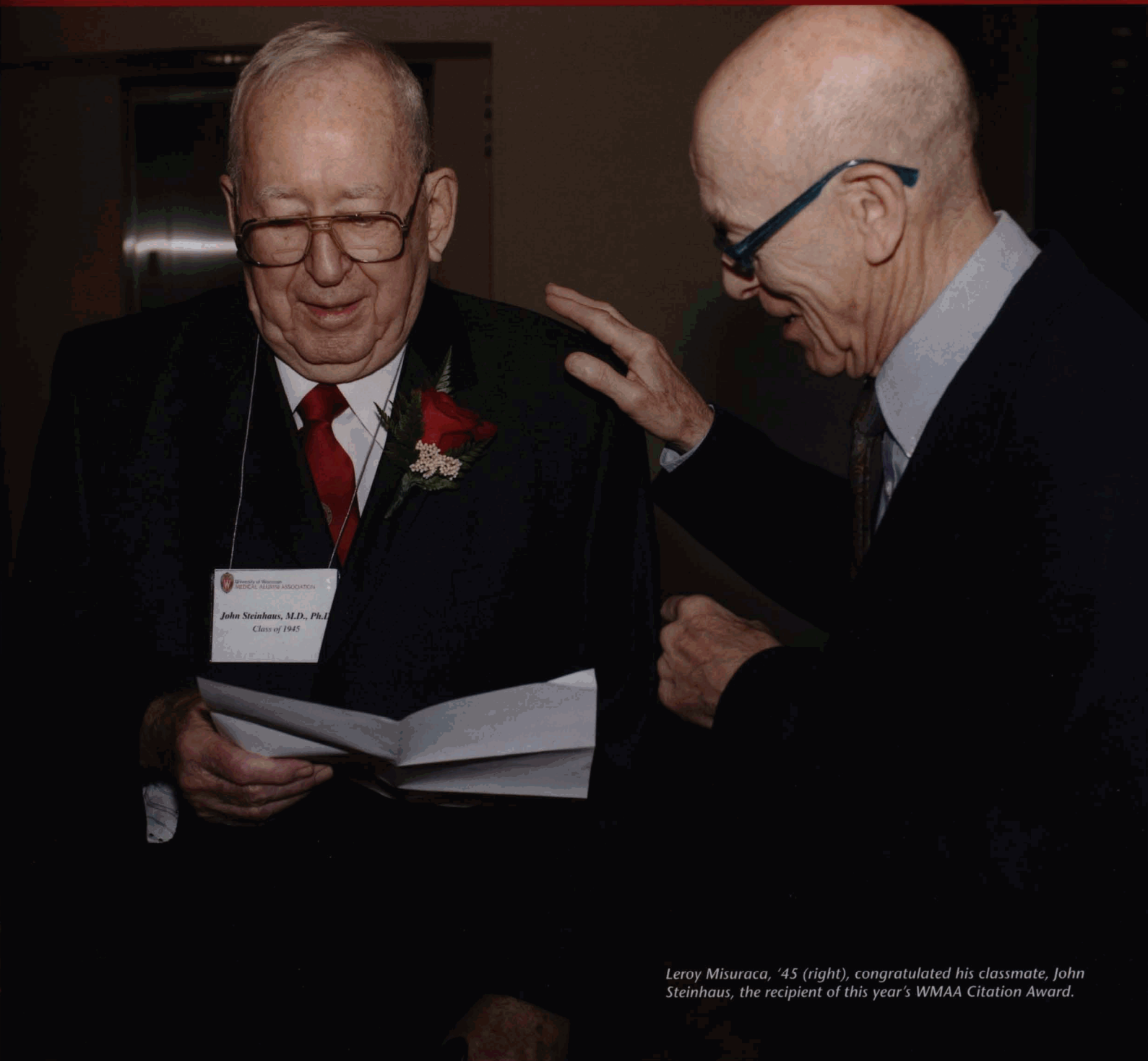
OCPD also played a leading role in the 39th annual Emergency Care and Trauma Symposium that was held June 27-29, 2007. Nearly 700 emergency care specialists and first responders attended; registration fees were covered by the WPP and the Chancellor's Office via the Wisconsin Ideas Project, the Regional Trauma Advisory Committee for Wisconsin and OCPD.

A wide range of emergency medical topics and response scenarios were covered, such as injuries to children, brain and spinal cord injuries, improving response times, responding to automobile and farm accidents and education regarding special needs populations.

"This year we attempted to incorporate more public health perspectives into the program," says Pittz, who has helped coordinate the symposium for 22 years. "The scope of emergency medical services (EMS) work is expanded to include bioterrorism, so the public health role of EMS workers is becoming more important than ever."

For more information on all OCPD activities, go to <http://www.ocpd.wisc.edu/>.

Alumni Weekend



Leroy Misuraca, '45 (right), congratulated his classmate, John Steinhaus, the recipient of this year's WMAA Citation Award.



Dolf Pfefferkorn ('57, center) caught up with old friends.



Thomas Gocke ('47) shared a laugh with Patty and James Gunn ('47).

"This was a great way to surround yourself with good friends from class and maintain contact with your school."

by Meghan Conlin

This year's Alumni Weekend, held May 11 through 13, 2007, marked a busy, fun-filled weekend for University of Wisconsin School of Medicine and Public Health (SMPH) students and alumni. Beginning Thursday afternoon with record-breaking attendance at the Dean's Reception and ending with a brunch and tours at the Health Sciences Learning Center (HSLC) Saturday morning, the weekend was jam-packed with events meant to bring alumni and

current students together to reminisce about the past and think about the future.

"This was a great way to surround yourself with good friends from class and maintain contact with your school," says Ronald Olson, MD '57, who was on hand for his class' 50th reunion. "I encourage all graduates of the school to come to their reunion."

The turnout for the weekend's first event, the Dean's Reception at the Madison Club, was outstanding; over 140 alumni were in attendance and many took the opportunity to meet

SMPH dean Robert Golden. Members of the classes of 1947, '52 and '57 celebrated reunions at various locations throughout Madison on Thursday night as well.

Starting bright and early Friday morning, alumni had a chance to become students again with UW-Madison's Day on Campus event. Educational sessions were held throughout the day on subjects such as native people of Wisconsin, naturally occurring retirement communities, political party differences and why they matter, and ethics. Alumnus Dennis Maki, MD '67,

Alumni Weekend



WMAA president Sandra Osborn (right) visited with MSA president Lisa Shen.



Charles Miller ('62) teased his classmate James Basiliere (at left).

presented a popular session called "Emerging Infectious Diseases of the 21st Century."

On Friday afternoon, members of the fiftieth anniversary class and their guests attended the Class of 1957 Recognition Luncheon at the Memorial Union. During the event, all class members were presented a medallion honoring their 50 years in the medical profession. Upon accepting their medallions, each physician offered a piece of advice to first-year medical students to help them succeed in the field. The seasoned

doctors urged students to study hard throughout their lives, try to have a life outside of medicine, listen to their patients and stay healthy themselves.

"Try to maintain your new enthusiasm," said Harvey Budner. "Remember that to be a good doctor you need to have a life outside of medicine."

Following the luncheon, the Wisconsin Medical Alumni Association (WMAA) Board of Directors spent the weekend planning for the future at their spring meeting on Friday. The board recognized fourth-year class

presidents Emily Hill and John Vasudevan, awarded scholarships to Rachel Uttech, Joel Adler, Diane Reis and Brittany Allen, all second-year students, and recognized fourth-year student David Sommerfeld as the 2007 Bardeen Award recipient.

Dean Golden and Mark Wells, assistant dean for facilities, also discussed progress on the Interdisciplinary Research Complex (IRC), which is under construction, and Dean Golden commented on how alumni could help the school by promoting the idea of

the IRC, helping publicize the school's new name and facilitating partnerships with media, elected officials and donors.

"The board meeting and Alumni Weekend as a whole were a tremendous success. It was heartwarming to see so many alumni come together to reminisce," says Karen Peterson, WMAA executive director. "Student leaders were very involved in the weekend and did a wonderful job of introducing alumni to our new building. It was great to see everyone enjoy the weekend so much."

Continued on next page.

Reunions



1947

Front row, left to right: John Koepsell, Norman Makous, James McIntosh, Phillips Bland, James Gunn, Dean Emanuel, Herbert Giller, Thomas Gocke and Irving Becker. Back row: Frederick Cook, Richard Anderson, Merlin Olson, Sig Sivertson, Dale Wiefenbach, Roy Rotter, William Stephen and Donald Jeffries.



1952

Front row, left to right : D. Joe Freeman, David Smith, Gwendolyn Smythe, Benjamin Schuser, Raymond Hansen, Baldwin Lloyd and C. Weir Horswill. Back row: Richard Botham, John Sanders, Jack Peterson, Erby Satter and C. Emil Mueller.

1962

Left to right: Charles Miller, Charles Vavrin, Alan Bensman, David Hill, James Basiliere, Jerome Gunderson, Kathryn Nichol, John Konnak, Richard Van Dreel, Marcus Cohen and Richard Geline.



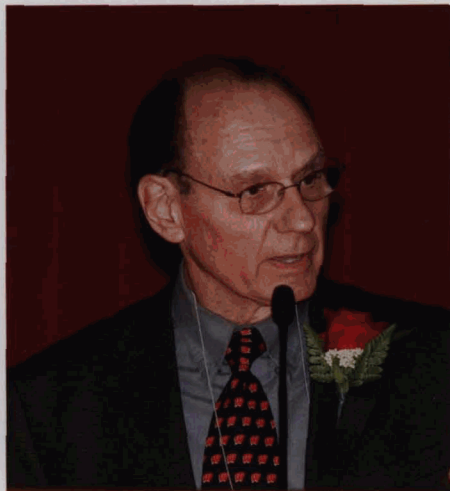
1972

Left to right: James Pettersen (former anatomy professor who was invited to join the class celebrations), Warren Procci, John Pederson, George Gay, Robert Justl, Sidney Herszenson and Roger Resar.



Awards Banquet

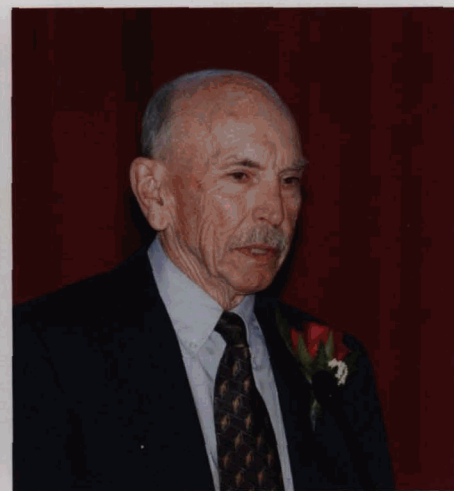
Honoring Excellence



RIESE



BERNHARDT



KOELLER

The annual Awards Banquet, always a highlight of Alumni Weekend, was held on May 11, 2007. Hosted by the Wisconsin Medical Alumni Association (WMAA), the event recognizes alumni who have made outstanding contributions in several important ways. Exceptional teachers, researchers and distinguished emeritus faculty at the school also are honored.

David Riese, MD '68, was given the *Medical Alumni Service Award*, which honors an alumnus who has exhibited exceptional commitment to the WMAA over the years. He was president of the WMAA from 1996 to 1998, and has served on numerous WMAA committees including the awards, student participation and strategic planning committees. Riese has been an active member in many other committees and organizations, including the Wisconsin Society of Anesthesiologists (of which he

was president in 1983), the Wisconsin State Medical Society and the Madison Society of Anesthesiologists. Following graduation from the SMPH, Riese completed an internship at Mercy-St. Luke's Hospitals in Cedar Rapids, Iowa, and then returned to UW for an anesthesiology residency. He spent most of his career working as an anesthesiologist at St. Clare Hospital in Monroe, Wisconsin, and was the chief of anesthesiology there from 1975 to 1978 and again from 1983 to 1986. He also served as the president of the St. Clare medical staff in 1975 and again in 1993.

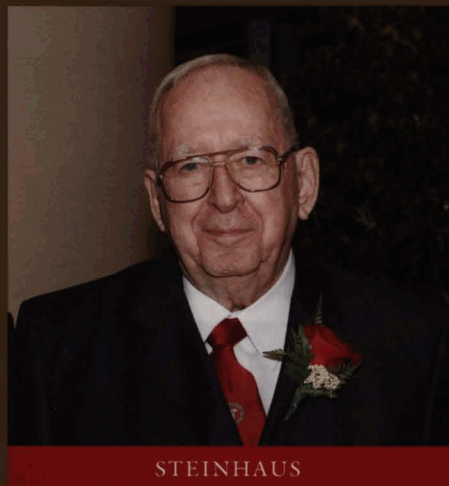
Louis Bernhardt, MD '63, was given the *Ralph Hawley Distinguished Service Award*, which is conferred on an alumnus who has made major contributions to the local community. Bernhardt serves on the Hospice Care Foundation board and is co-chair of the "Promise to Keep" capital campaign

for Hospice. He also works with the Benevolent Specialists Project, which is dedicated to providing quality secondary (specialty) healthcare to uninsured and low-income patients. Following medical school, Bernhardt completed an internship at Mt. Sinai Hospital in Milwaukee, and a general surgery residency at UW Hospital and Clinics. He practiced at Dean Medical Center in Madison his entire career, and after retiring in 2002, he became the surgical education coordinator for St. Mary's Hospital in Madison. Bernhardt taught in the UW Department of Surgery since becoming an instructor during his residency in 1968. He has also served as president of the WMAA and the Wisconsin Surgical Society, and as a member of the University of Wisconsin Admissions Committee.

Arlyn Koeller, MD '61, won the Sigurd Sivertson Medical Education

John Steinhaus, MD '45, PhD, Wins 2007

Citation Award



STEINHAUS

by Meghan Conlin

This year, the Citation Award, the most prestigious award offered by the Wisconsin Medical Alumni Association (WMAA), was given to John Steinhaus, MD, PhD, of the School of Medicine and Public Health Class of 1945.

Steinhaus was born in Omaha, Nebraska, in 1917 and completed undergraduate and graduate degrees at the University of Nebraska before coming to Wisconsin for his medical degree. After an internship at Cincinnati General Hospital and a two-year tour of duty in the U.S. Army Medical Corps, he returned to Wisconsin and completed a doctorate in pharmacology. Steinhaus then entered the UW anesthesiology training program, completing it in 1955.

Following completion of the training program, Steinhaus became a diplomate of the American Board of Anesthesiology and a Fellow in the American College of Anesthesiologists. He became the first chief of anesthesiology at Emory University School of Medicine in Atlanta, Georgia, in 1958 and began teaching in Emory's anesthesiology department that same year.

Steinhaus's research has focused on pharmacological action of anesthetics and other drugs affecting the central nervous system and the heart. Because of the shortage of anesthesia personnel, he began a national recruitment effort as the chairman of the Training and Recruiting Subcommittee of the Anesthesia Survey Committee and founded an organization that over time became the National Society of Academic Anesthesiology Chairs, a vital organization supporting the exchange of knowledge and

experiences among 133 anesthesiology chairs today.

Since the beginning of his career, Steinhaus has focused on expanding the number and quality of anesthesia personnel across the country. One of the highlights of his career has been building and expanding the anesthesia residency program at Emory.

"One of the things I have always been most proud of is how much the residency program has grown since I started," says Steinhaus. "During my last year as the chairman, 25 residents finished the program. Since we started with zero, that's a pretty big change."

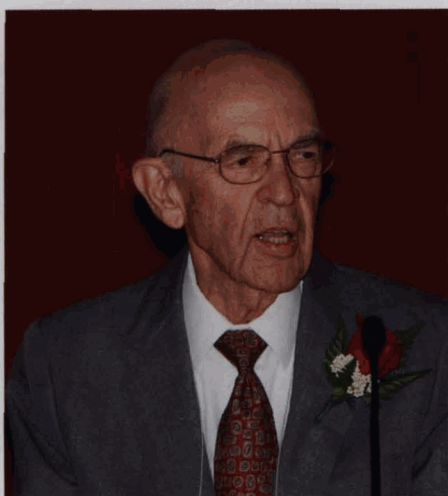
According to Steinhaus, much has changed in the field of anesthesia since he started practicing. Technology advances, public awareness and a huge growth in anesthesia personnel have changed the field dramatically.

"We used to use nothing more than our eyes and a stethoscope," he says. "Now we have all sorts of monitoring equipment and electronic gadgetry developed by the space program. We can monitor the amount of oxygen in the blood, the amount of carbon dioxide; these are things we could never begin to do when I started out."

Steinhaus likes to travel to Madison from his home in Atlanta occasionally and tries to keep in touch with his classmates as best he can.

"What you miss the most when you move far away like I did is not knowing what your friends are up to for large chunks of time," says Steinhaus. "That's why I always try to make it back to the alumni meetings and reunions, so I can see my friends."

Awards Banquet



BOUTWELL

Award. As preceptor for the SMPH since 1974, Koeller has hosted over 200 fourth-year medical students. He was awarded the Max Fox Preceptor Award in 2000 by the WMAA and the Badger of the Year Award by the UW Alumni Association in 2005. He practices at Memorial Medical Center in Ashland, Wisconsin, where he has been based since 1962. He also practices at St. Luke's Hospital of Duluth's Chequamegon Clinic in Ashland. Following medical school, Koeller completed an internship at St. Joseph Hospital in Marshfield, Wisconsin. During his career he has been the physician supervisor of the county public health department and of county jail care. He has taught EMT courses and helped develop a local EMT program. Koeller also has been active with his community schools, serving as the school team physician for the high school and Northland College and as the school health office advisor.

Two *Emeritus Faculty Teaching Awards for Basic Science* were given this year, one to **Roswell Boutwell, PhD**, and the other to **Gerald Mueller,**

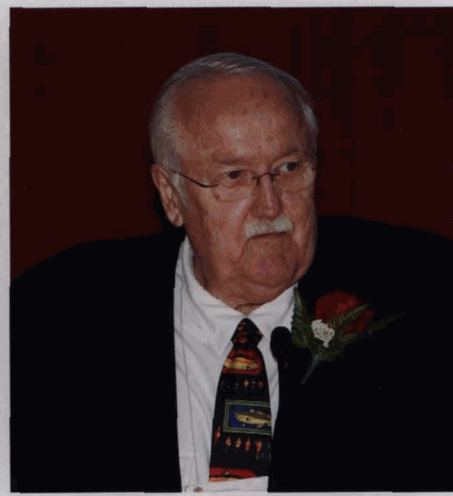


MUELLER

MD '46, PhD. The *Emeritus Faculty Teaching Award for Clinical Science* went to **Gordon Tuffli, MS, MD '64.**

Boutwell received a master's of science and a PhD in biochemistry from the UW-Madison. He has been a professor in the UW's McArdle Laboratory for Cancer Research (Department of Oncology) for over 50 years. He spent two years in Hiroshima, Japan, studying radiation effects with the Radiation Effects Research Foundation. He has also been involved with a number of committees at the National Research Council, including the Food Protection Committee, the Committee on Non-Nutritive Sweeteners and the Subcommittee on Arsenic of the Committee on Medical and Biological Effects of Environmental Pollution. Boutwell has been a member of the editorial advisory board for *Cancer Research*, an associate editor for *Nutrition and Cancer* and on the National Cancer Advisory Board.

After earning his MD degree at the SMPH, **Mueller** completed an internship at the Medical College of Virginia. He returned to UW to



TUFFLI

complete a PhD in biochemistry and oncology. He was also a Schering Scholar at the Max Planck Institute in Tübingen, Germany.

Mueller has been based at the UW's McArdle Laboratory for Cancer Research his entire career. His research has focused on the mechanism of action of hormones and special nutrients in growth and differentiation of animal cells. He has been actively involved with the American Association for Cancer Research and the American Cancer Society. He has also been a scientific advisor to the National Cancer Institute, the National Institute of Environmental Health Services and the Gordon Research Conferences.

Tuffli completed his MD and a master's degree in anatomy simultaneously at the UW. He started his pediatric residency in Maricopa County Hospital in Phoenix, Arizona, later completing it at the UW. Tuffli was offered an opportunity to work part-time as a private practicing pediatrician and the rest in an academic pediatric endocrine position, which gave him the opportunity to practice and teach.



O'TOOLE SMITH



LEE, SIDDIQUI, KRABbenhOFT

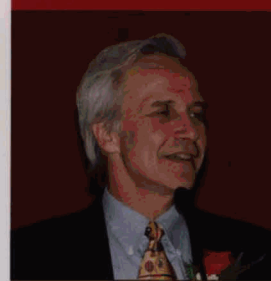
Years later he became the mentor to the SMPH Class of 2001 and took a position in the division of pediatric endocrinology. He retired from pediatric endocrinology in 2003 when he was awarded emeritus status by the school.

The WMAA honored **Kathleen O'Toole Smith** with an *Honorary Life Membership*. Smith joined the University of Wisconsin Foundation in 1997 as director of development for the School of Medicine and Public Health. Her specific responsibilities have included fund-raising efforts on behalf of the Health Sciences Learning Center, SMPH alumni and the UW departments of surgery, neurosurgery and neurology. O'Toole Smith earned her undergraduate degree from UW-Madison in 1984.

The four *Distinguished Awards for Clinical Teaching* honor clinical teachers from the school's major teaching locations. The awards this year went to **Young K. Lee, MD**, of La Crosse; **Donald R. Yandow II, MD**, of Madison; **John Olson, MD '82**, of Marshfield and **Danish Siddiqui, MD**, of Milwaukee.

Lee has been recognized for his excellence in teaching by the WMAA five other times, in 1979, '85, '93, '96 and '01. He is active in the American Society of Anesthesiologists and the Wisconsin Society of Anesthesiologists. He served as president of the Wisconsin society from 1985 to 1986 and has been a delegate to the American Society of Anesthesiologists since 1986. Lee received his MD at the Seoul National University and did an internship at St. Joseph's Hospital in Paterson, New Jersey. He completed a residency at UW and now works as a staff anesthesiologist at Gundersen Lutheran Medical Center in La Crosse. He is a clinical professor of anesthesiology at the SMPH.

Yandow has been the course director for the medical student clerkship in radiology, a medical student mentor and an admissions interviewer. He is the recipient of numerous awards, including the Medical Student Award for Outstanding Teaching in Radiology and the Special Performance Award given to him by the Department of Internal Medicine. He earned his MD at the University of Vermont College



SONDEL



MRS. PROCTOR

Two School of Medicine and Public Health cancer researchers were given the *Harold Rusch Award for Translational Cancer Research*. The awards, which memorialize the founding director of the UW McArdle Laboratory for Cancer Research, now a division of the UW Paul P. Carbone Comprehensive Cancer Center (UWCCC), are given to faculty members who have made seminal contributions to cancer research.

Paul Sondel, MD, PhD, professor of oncology, was given the clinical science award. Sondel's research centers on the immune system and the beneficial impact it can have on treating cancer. He earned a medical degree from Harvard and a PhD in genetics from UW. He completed an internship in pediatrics at the University of Minnesota Hospitals and a residency in the UW Department of Pediatrics. The Reed and Carolee Walker Professor of Pediatric Oncology, he is associate director of translational research at the UWCCC.

Richard Proctor, MD, professor of medicine and of medical microbiology and immunology, was given the award for basic research. His research focuses on bacterial endotoxins, septic shock and bacterial adhesion. He earned his MD from the University of Michigan and served in the U.S. Army at the Institute of Infectious Disease. He also completed an internal medicine internship at UW, a residency at Georgetown University and a fellowship in infectious disease at UW before joining the SMPH faculty in 1978. Proctor's wife accepted the award for him.

Frost Given 2006 Max Fox Award



SANDRA OSBORN, JOHN FROST, BYRON CROUSE AND ROBERT GOLDEN

John Frost, MD '71, of the Ministry Medical Group-Rhineland, is the recipient of the 2006 Max Fox Award. The award is given annually to the preceptor whose service has most effectively helped shape the careers of UW School of Medicine and Public Health (SMPH) medical students.

Frost was joined by family, friends, colleagues and alumni for a dinner hosted by the school and the Wisconsin Medical Alumni Association at Holiday Acres Resort on Thursday, June 21, 2007.

Frost joined Ministry Medical Group-Rhineland in 1976. In addition to his many years of service, he has made several trips to the Ukraine for medical missions. He is board certified by the American Board of Internal Medicine and is a member of the American Society of Internal Medicine, American College of Physicians and the Oneida-Vilas County Medical Society.

Max J. Fox, MD, influenced the careers of some 4,000 physicians during his 46 years of practicing medicine. His love of teaching made Fox a superb preceptor for UW medical students for over 25 years. In 1969, Herman H. Shapiro, MD, founded the award to honor his mentor.



of Medicine. He completed a residency in radiology at the UW Hospital and Clinics and a fellowship in ultrasound and angiography at the University of Utah in Salt Lake City. He is an assistant professor of radiology at the SMPH.

After earning his MD at UW, **Olson** completed an internship and residency in internal medicine at the Naval Hospital in Oakland, California, an affiliate program of the University of California in San Francisco. He was employed on the *USS Carl Vinson* as a general medical officer and at the Great Lakes Naval Hospital in Illinois before joining the Marshfield Clinic as a general staff internist. He was the director of the transitional year residency and had administrative oversight for numerous activities within the clinic. He is a clinical professor of medicine for the SMPH and has served as an assistant dean for academic affairs.

Siddiqui has received numerous awards for teaching medical students and residents. He received his MD from Aga Khan University Medical College in Pakistan and completed residencies in the Department of Obstetrics

and Gynecology there, at Yale New Haven Health Systems in Bridgeport, Connecticut, and at Harlem Hospital Center in New York City. During his residency in Bridgeport, he received the Top Resident Teaching Award, given as recognition of his excellence by faculty and peers. Siddiqui joined the Department of Obstetrics and Gynecology at the Aurora Sinai Medical Center in Milwaukee in 2003 and is also an assistant professor of obstetrics and gynecology at the SMPH.

This year's *Basic Sciences Teaching Award* went to **Karen M. Krabbenhoft, PhD**. In 1997, Krabbenhoft was awarded the Pacemaker, a student-elected teaching award; in 1998, she was awarded the WMAA's Distinguished Basic Science Teaching Award and in 2001, the Dean's Teaching Award. She is responsible for teaching gross anatomy, histology, organology and pathology and functional neuroscience at multiple levels—from undergraduate to first-year medical students.

Krabbenhoft received her PhD in anatomy from the UW-Madison. She worked as a research specialist for the

UW Department of Anatomy for one year before starting as an instructor in the same department.

Alysandra Lal, MD, won the *Outstanding Resident Teaching Award*. She earned her MD from the University of Washington School of Medicine in Seattle. She completed the first three years of a general surgery residency at the University

of Washington before coming to UW-Madison in her fourth year. She is currently completing her fifth year of study. Lal has authored a number of papers for publication in the *Annals of Surgical Oncology* and *Current Opinions in Oncology* and was invited to provide commentary in a book titled *Breast Diseases: A Year Book Quarterly*.

Hosting Alums Offer Students Important Help

by Meghan Conlin

School of Medicine and Public Health (SMPH) graduate Pat Fehling, MD '07, thought he just wasn't getting a good enough feel for the communities where he was interviewing for residencies. He was looking for some personal insight to help him decide where to complete the rest of his psychiatry training.

"When you're expecting to move somewhere unfamiliar, you need some advice outside of what they tell you at the residency program," says Fehling. "You need to know what your life is going to be like there."

To help, Fehling spent four days with SMPH Class of '56 alum Leon Oxman, MD, and his wife, Karen, in Golden, Colorado, while he was interviewing at the University of Colorado School of Medicine.

The Oxmans are members of the Wisconsin Medical Alumni Association (WMAA) Alumni Host Program, a network of about 400 SMPH alumni from across the country who are interested in hosting students while they interview for internships or residencies. Students can access a database to find hosts in the geographic areas in which they are interviewing and then can contact the alums to arrange housing.

While in Colorado, Fehling said he got a good feel for the community and went with the Oxmans on a tour of a nearby brewery and to a local golf course.

"I got to see things I would have never seen if I had stayed in a hotel," says Fehling.

Fehling, who used the host program twice during his interview process, says that the program is rarely used by students, often because



Karen and Leon Oxman ('56) caught up with just-graduated Pat Fehling, whom they had hosted, and Dean Golden at the brunch.

they think that they will be an inconvenience to the alumni they stay with. In his experience, he says this is not the case.

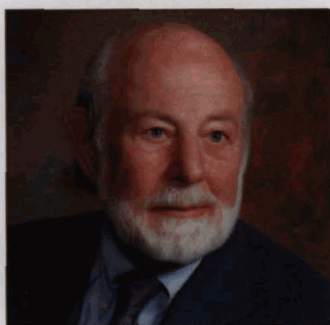
"The people who are signing up to host students are people who want to do this," says Fehling, who has begun his psychiatry residency at Colorado. "They want to entertain you and they want to meet you."

The Oxmans, who agree, have enjoyed hosting students throughout the years.

"It's great to see what the young students are doing," says Leon Oxman. "We get as much out of this experience as the student does. This is just a little something I can do for the medical school when they have done so much for me."

Class Notes compiled by Meghan Conlin

Class of 1958



Named after **John W. Weiss**, the John Weiss Lectureship is a six-year-old annual academic event presented at the spring meeting of the San Francisco Dermatologic Society. Endowed by Weiss in 2001, the lectureship has sponsored a string of nationally known speakers. Past president of the society and its 2005 Practitioner of the Year, Weiss also was the president of the Chicago Dermatologic Society from 1990 to 1991 and the 1992 Practitioner of the Year. Since moving to California in 1992 with his wife, Suzanne, Weiss has been in private practice in Castro Valley, Calif., and a clinical professor of dermatology at the University of California, San Francisco. The Weisses live in Oakland, Calif.

Class of 1975

Chris Larson has accepted a position serving on the UW Department of Ophthalmology Alumni Association board of directors. He has served two previous three-year terms. He was a member of the original board of directors, which, under the leadership of Alice McPherson, MD '51, founded the Department of Ophthalmology Alumni

Association in 1991. Richard Dortzbach, MD (PG), continues to be active as the alumni association's executive director.

Class of 1976

Tom Luetzow, of Watertown, Wisconsin, was recently elected chair of the board of directors of the Wisconsin Medical Society.

Class of 1983

Barry Lessin is still busy as the director of CT Imaging at Elmhurst Memorial Healthcare in Chicago, Illinois. He and his wife, Elena, are busy with their children Jakob, 8, Ava, 6, and Millea, almost 1. Barry is ready for the Class of 1983 reunion, which will be held in fall 2008 during a football weekend. Spread the word!

Class of 1996



The Society of Hospital Medicine (SHM) has named **Jeffery J. Glasheen** the new physician editor for *The Hospitalist*, SHM's monthly newsmagazine. Glasheen is an assistant professor of medicine at the University of Colorado at Denver Health Sciences Center,

where he also holds several other positions in the hospital medicine and internal medicine residency programs. *The Hospitalist* features articles on areas most important to hospitalists, plus profiles and interviews with hospital medicine leaders. Glasheen is the recipient of several awards for his achievements in hospital medicine and teaching, including SHM's 2007 Award of Excellence in Teaching and the 7th Annual Elaine Cleary Faculty Teaching Award given to the most outstanding educator at the University of Colorado's Division of General Internal Medicine. The SHM is the premier medical society representing hospitalists, physicians whose primary focus is the care of hospitalized patients.

Class of 2001

Timothy Wiegand and his wife, Bonnie, welcomed their first son, Elijah Clement Weigand, on May 15, 2006. Elijah recently took his first steps and is getting around the house at amazing speeds. The family loves to travel and recently returned from Greece, where Timothy combined a European conference in toxicology with an extended family vacation. As of July 1, 2007, Timothy will become an adjunct associate professor in the Department of Medicine, Division of Clinical Pharmacology, at the University of California, San Francisco. He will attend at the San Francisco Poison Control Center for the medical toxicology service and attend on the general medicine wards at San Francisco General Hospital. He also will be performing research in clinical pharmacology as well as for

the Department of Neurology, looking at various drugs that may affect parameters of use of alcohol and markers of intoxication. Timothy confesses to being very poor at keeping in touch with friends he made during medical school and says he would appreciate any hellos.

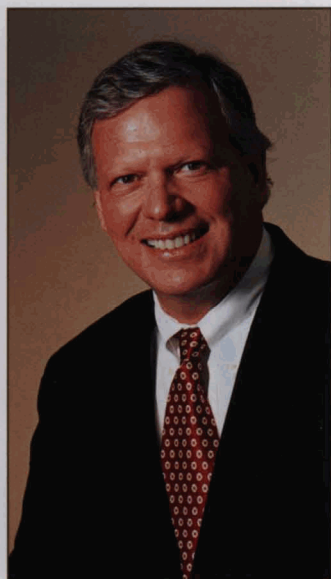
Class of 2003

Sarah Shock is getting married on September 16, 2007, at Bryant Park Grill in Manhattan, New York City. Her fiancé, Keith Chan of San Francisco, is an orthopedic surgery resident at New York University (NYU), where Sarah is a fourth-year radiology resident. Sarah will be staying at NYU after her residency to do a musculoskeletal imaging fellowship. Her fiancé will finish his residency in 2009 and is planning to do a sports medicine fellowship, likely on the west coast. Long-term, the couple hopes to settle down in the San Francisco area.

In memoriam

- Paul Gramling '70**
March 6, 2007
South Dartmouth, Massachusetts
- Robert Natelson '47**
2007
Sherman Oaks, California
- John E. Thompson '51**
April 15, 2007
Nekoosa, Wisconsin

The Lifeblood, Heart and Soul of SMPH



Christopher Larson, MD '75
Editorial Board Chair

Some things in life go without saying. This is evident in two popular novels that touch on personal strength derived from intuition and positive thinking. Malcolm Gladwell, in his book *Blink*, and Rhonda Byrne, in *The Secret*, tell us that some human qualities in the thought process make complex decision making easier, and that a positive approach to life is a major step toward solving problems.

These concepts perfectly describe the generous, heartfelt nature of how we, as alumni and as an alumni association, support our

school, its students, faculty and facilities. To many of us, this generosity is second nature. But much time and planning have gone into making the Wisconsin Medical Alumni Association (WMAA) the successful organization it is today.

For example, our new five-year plan is the culmination of a complex process that included 12 months of meetings of the strategic planning committee. Maury Cotter, campus expert on strategic planning, was our facilitator. The details of the final draft were presented in the winter issue of the *Quarterly*. This now becomes the road map to further strengthen the vision and programs of the successful organization we support.

Chaired by WMAA president-elect John Kryger, MD '92, the committee was made up of the WMAA Executive Committee; Patrick McBride, MD '81, MPH, associate dean of students; Rachel Utech, MD II, president of the Medical Students Association; and Kathryn Nixdorff, MD '06.

This committee's accomplishments will give added direction to the WMAA for the next five years by contributing a prioritizing list of goals in a schematic

action plan. This comes at a time when, having just completed our first five-year strategic plan, we have made our activities more visible to our constituents and are optimally located in the Health Sciences Learning Center, with offices and meeting rooms within the daily traffic flow of our medical students. The plan is particularly well timed since it coincides with the recent arrival of Dean Robert Golden, who has already become an integral participant in our organization.

Our new mission clearly states that we intend to cultivate positive relationships with alumni and students as a means of influencing and supporting students and strengthening the School of Medicine and Public Health (SMPH). This means serving our graduates, current and former residents, students, and current and former faculty.

We will accomplish these goals by being leaders in serving the needs of our constituents and the SMPH. We envision that the school also will be strengthened through the affiliation between the WMAA, the UW Foundation and the school and through the

active engagement of alumni and students.

You will see additional emphasis on our core functions: communications via the *Quarterly*, the WMAA's Web site, and class representatives' correspondences, as well as through ongoing events such as Alumni Weekend, Homecoming and the Awards Banquet. Student initiatives include scholarships, the Dean's Cup, the White Coat Ceremony, graduation celebrations, Operation Education, the HOST program and Student/Alumni Partnership Program.

Clearly, communicating better with our constituents and encouraging increased participation among our fellow alumni will continue to be priorities. New board members cite a growing awareness of our medical school through alumni correspondence. They acknowledge a renewed pride in the direction and accomplishments of the school as a reason for becoming more involved in our alumni association.

We all embrace a common thread. The students are the lifeblood of the medical school, and its alumni the heart and soul.

Calendar of Events

September 2007

September 16

1 p.m. White Coat Ceremony, Memorial Union

October 2007

October 20

Resident tailgate
UW vs. Northern Illinois football game

OCTOBER 26-27 HOMECOMING WEEKEND

Class reunions for classes of 1967, 1977, 1982,
1992, 1997, 2002

October 26

2 p.m. WMAA Board of Directors meeting

4 p.m. Health Sciences Learning Center tours

6:30 p.m. WMAA Homecoming Dinner,
Monona Terrace

October 27

9 a.m. WMAA tailgate, Union South
11 a.m. UW vs. Indiana football game

May 2008

MAY 8-10 ALUMNI WEEKEND

Class reunions for classes of 1948, 1953, 1958,
1963 and 1968

MAY 16 GRADUATION

10 a.m. Class of 2008 Recognition Ceremony
Memorial Union Theater

We Want to Hear From You

Please send us information about your honors received, appointments, career advancements, publications, volunteer work and other activities of interest. We'll include your news in the Alumni Notebook section of the *Quarterly* as space allows. Please include names, dates and locations. *Photographs are encouraged.*

Name _____ Year _____

Home Address _____

City _____ State _____ Zip _____

E-mail Address _____

Recent Activities _____

Have you moved?

Please send us your new address.
Mail to: Wisconsin Medical Alumni Association
Health Sciences Learning Center
750 Highland Ave.
Madison, WI 53705

Rather connect by computer?

Please send your information to us at:
www.med.wisc.edu/Alumni/stayconnected.asp

■ Observations



The terrace at the Memorial Union took on an extra glow on a hot summer night, when lights reflected from a band playing on the outdoor stage. University photographer Jeff Miller captured the scene during the World Music Festival at UW in 2006.

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