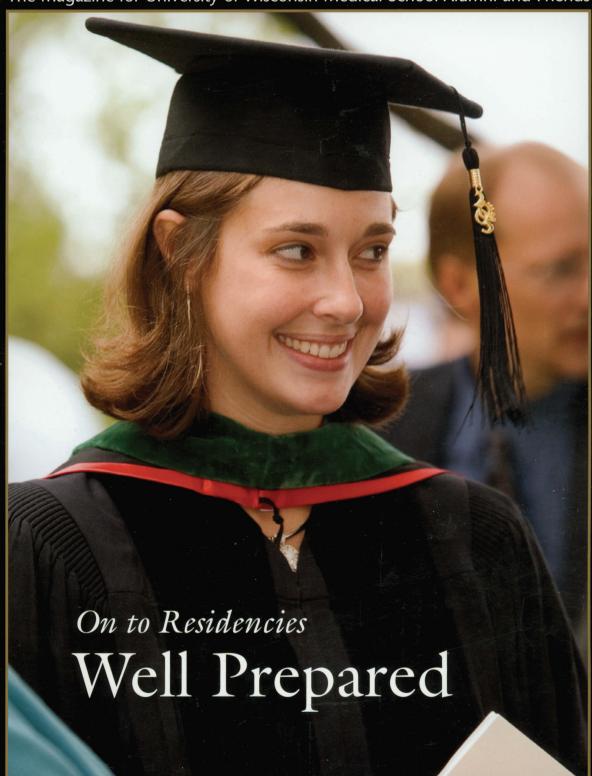
OUARTERLY

The Magazine for University of Wisconsin Medical School Alumni and Friends





VOLUME 7 NUMBER 3 SUMMER 2005

OUARTERLY

Magazine for versity of Wisconsin Medical School mni and Friends

ART DIRECTOR Christine Klann

Todd Brown Michael Lemberger Andy Manis Sutter Photography Michael Venner

EXECUTIVE DIRECTOR

EDITORIAL BOARD

Russell Lewis, MD '41 Maureen Mullins, MD '79 Sandra Osborn, MD '70 Patrick Remington, MD '81, MPH Wade Woelfe, MD '95

Linda Brei Philip Farrell, MD, PhD Dian Land Karen Peterson

Kathleen O'Toole Smith

ALUMNI ASSOCIATION BOARD OF DIRECTORS 2005-2006

Avadh B. Agarwal, MD, PG Kathryn S. Budzak, MD '69 Donn Fuhrmann, MD '76 Charles Gehring, MD '82 Charles V. Ihle, MD '65 Susan Isensee, MD '83 Thomas Jackson, MD '67 Robert J. Jaeger, MD '71 John Kryger, MD '92 Christopher L. Larson, MD '75 Johan A. Mathison, MD '61 William C. Nietert, MD '78 Sandra L. Osborn, MD '70 David C. Riese, MD '68 Paul Sienkiewicz, MD '79 Harvey M. Wichman, MD '65 Wade Woelfe, MD '95

Quarterly is published four times a year by the Wisconsin Medical Alumni Association (WMAA) Medical School.

For editorial information, call (608) 263-9893.

For address corrections and to reach the WMAA, call (608) 263-4915.

Contents

■ Features

On to Residencies

By all metrics, UW Medical School graduates overall are well prepared for the next step in their training.

Lawmakers to Students

Project Medical Education gives Wisconsin lawmakers a firsthand look at the medical education system.

27 Alumni Weekend

The WMAA welcomes graduates back to the place of their professional beginnings.

Departments

Volume 7 Number 3

Summer 2005

Dean's Message

WMAA Executive Director's Message

17 Spotlight

18 Alumni Profile: Tim Cordes, MD '04

Student Life

Research Digest

26 Alumni Notebook



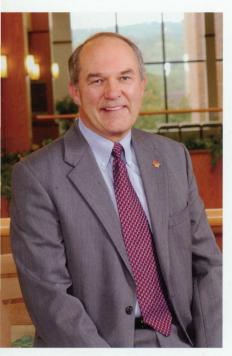
WMAA Top Award

Cancer specialist George Bryan, MD '57, PhD, wins the 2005 Citation Award.



On the Cover

Not long after graduation on May 13, Amy Slawter of the Class of 2005 began a residency in emergency medicine at the Medical College of Wisconsin Affiliated Hospitals in Milwaukee. Photo by Todd Brown.



Philip Farrell, MD, PhD UW Medical School Dean UW-Madison Vice Chancellor for Medical Affairs

Three feature stories in this issue of the *Quarterly* deal with a variety of educational activities that have occurred recently at University of Wisconsin Medical School.

You will read about
Project Medical Education,
a program the school
organized to bring
Wisconsin's state and federal
legislators and their staff
to campus for an insider's
glimpse of the complex
medical education system.
You will get an overview of
an Association of American
Medical Colleges (AAMC)
regional conference focusing
on medical curriculum issues
that the school hosted. And

you will learn how well the school prepares its graduates for their residency training, from the perspective of both graduates and residency program directors.

Educational activities constitute our core mission, and we are always trying to improve in this area. In the past several months, we have devoted much time and energy to examining the environment in which educational activities, particularly student-clinician interactions, take place. The result has been a new set of guidelines outlining standards of professional conduct in clinical settings—whether teaching is involved or not.

I've wanted to create such a document for a long time. In my decade as dean, I've become aware of many examples of unprofessional behavior. In surveys we have conducted, we have learned of cases of humiliation, disregard for safety, sexual harassment and other displays of abuse.

No academic medical center is immune to these kinds of problems; the problems usually aren't rampant, but they clearly exist. Unfortunately, at UW-Madison, where faculty rights are championed so strongly, some people have resisted efforts to specify faculty responsibilities in the clinical settings.

As fate would have it, the Liaison Committee on Medical Education (LCME) cited us and many other medical schools for inadequately addressing this issue of climate when they visited us four years ago. They told us that the UW-Madison faculty policies and procedures were not specific enough to cover the conduct of people in the clinical learning environment.

To help remedy the situation, we appointed a Committee on Excellence in the Learning Environment and created a new policy with the UW Medical Foundation. In addition, I attended an AAMC session on professionalism that dealt heavily with codes of clinical conduct. I was impressed to see what some other medical schools are doing. I also enlisted the help of the UW-Madison legal services office, where experts determined that professional conduct guidelines for UW Medical School and UW Medical Foundation faculty and staff were necessary.

We now have a document that is an affirmative expectation for clinical behavior—a standard of conduct. Among other things, it outlines ways to maintain respect, honesty and integrity in clinical settings. It clarifies measures to ensure patient

confidentiality, avoid conflicts of interest and assume responsibility for peer behavior.

The document lists ways to report concerns about transgressions. It outlines informal procedures for improving or preventing future behaviors not meeting the guidelines. Borrowing heavily from UW-Madison's excellent policies for maintaining integrity in scientific conduct, the plan also provides a framework for protecting against unfair accusations.

In fact, we borrowed heavily from existing standards set forth by a variety of sources, including the Wisconsin medical licensing code, the American Medical Association Code of Ethics and Current Opinions, and state and federal law. The document still must be approved by several groups, but I'm confident there will be no major delays.

These guidelines are a milestone for our school and university. They will help guarantee that clinicians conduct themselves with the utmost professionalism at all times. Such standards will make the University of Wisconsin Medical School an even better place to work and learn.

■ EXECUTIVE DIRECTOR'S Message



Karen S. Peterson Executive Director

reetings, medical alumni! It's hard to believe that another academic year has passed us by already. Alumni Weekend and graduation are now history, but certainly not forgotten. We've just experienced a very successful spring semester filled with many events and activities for alumni and students.

During Alumni
Weekend, for example, we honored the Class of 1955, congratulated many award recipients and celebrated six class reunions. The article and photos beginning on page 27 tell the story. I hope you enjoy these reflections.

The Class of 2005 enjoyed a beautiful graduation day. It began with our recognition ceremony at the Memorial Union Theater and ended with a grand celebration at the Monona Terrace Convention Center. More than 900 guests thoroughly enjoyed themselves. The event was co-sponsored by the Medical School and the Wisconsin Medical Alumni Association (WMAA). Articles and photos within this issue capture the celebrations.

Now we all look forward to the future and more exciting events, including the following.

Fall reunions

Plans are under way for 1965, 1975, 1980, 1990, 1995 and 2000 class reunions. Class representatives for these classes have made the decision to celebrate in the fall in conjunction with Homecoming Weekend. The date for the reunions will be October 21 and 22, 2005. Some of your representatives will soon be sending details, if they haven't already done so.

Homecoming

The WMAA will host its annual tailgate party the morning of October 22 at Union South before the Purdue-Wisconsin football game. Tickets for medical alumni will be available through the WMAA office. As always, priority will be given to WMAA members and class reunion attendees.

WMAA golden jubilee and the Medical School's centennial

The WMAA will turn 50 in 2006, and the Medical School will celebrate its centennial in academic year 2006-07. I hope that you have enjoyed the rich history and reflections written by the WMAA's cofounder and first director, Ralph Hawley. He reviews the WMAA's second decade in this issue.

Plan to join the special anniversary celebrations that we are organizing in conjunction with our regular events in 2006: Homecoming, the Winter Event and Alumni Weekend. A highlight will be the Rhine River cruise. Two Anniversaries, one beautiful cruise on the classic Rhine. Be sure to mark your calendars for June 9-19, 2006. For more details, see page 26.

As always, feel free to contact me with your ideas, issues and concerns. You can reach me by e-mail at kspeters@wisc.edu; by phone at (608) 263-4913 or by writing me at: Karen S. Peterson, Assistant Dean for Alumni/External Relations and WMAA Director, 750 Highland Avenue, Madison, Wisconsin 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 there, you can update your records, join our association, nominate your colleagues or classmates for awards and sign up for events.

On to Residencies

Well Prepared

"Coming from a state school, I arrived with a keen awareness of those around me who came from places like Harvard, Johns Hopkins, Yale and Stanford. I wondered: Were they ahead of me? Was their level of competency reflective of the reputation of their schools?"

by Dian Land

Pollowing this spring's graduation ceremonies and celebrations, members of the University of Wisconsin Medical School Class of 2005 bid farewell to the first formal phase of their medical education and fanned out across the country to begin intense residency programs that will prepare them in entirely new ways for their future practices.

Of the many questions the apprehensive new MDs may have had in making the transition, one very likely may have been: "How well will I stack up next to the other residents?"

Certainly this question was on the mind of Charles Galanis, MD '03, when he first entered a general surgery residency program at Johns Hopkins Medical School two-years ago.

"Coming from a state school, I arrived with a keen awareness of those around me who came from places like Harvard, Johns Hopkins, Yale and Stanford. I wondered: Were they ahead of me? Was their level of competency reflective of the reputation of their schools?" recalls Galanis,

a Wisconsin native who as an undergraduate attended UW-Madison as a medical scholar.

He quickly found his answer. "I realized that I was just as capable as the next person," he says.

Not only did Galanis feel prepared academically, he also felt prepared socially.

"In Madison, there's a camaraderie with faculty, residents and colleagues that certainly aids you in becoming a more complete physician, in terms of bedside manner and working with other staff," he says. "Here social interactions are a bit different, but my ability to adjust and succeed in any environment is in no small part a result of my UW experience."

Galanis allows, however, that no matter how well qualified new graduates may be, almost all of them will be challenged significantly by their residencies.

"I think that everyone arrives on July 1 with the same element of trepidation," says Galanis, who has found his residency experience alternately grueling, fun, tiring, fulfilling, demanding and stressful.

"I like the way one of my chief residents put it," he says. "When you're just starting out, every time that pager goes off, you almost get scared. You just don't know if you have the knowledge or experience to handle the problems you're about to face. It's a sobering thought for a new physician. But with time, that fear gradually subsides. Eventually, the beep of the pager might elicit a roll of the eyes but certainly not a quickening heart rate."

For more than a decade, UW Medical School has actively sought the answer to the question of how well its graduates stack up. The school surveys graduates and their residency directors at the end of the first year of residency to obtain information on a number of relevant topics.

"We ask graduates things like how well UW Medical School prepared them for their residencies, whether the school made enough resources available to them and how well a variety of subjects had been covered in classes," says Susan L. Dottl, PhD, of the Medical School's Office of Medical Education.

Continued on page 6.



"We ask residency directors about graduates' preparedness and competency in several areas."

The school has used the survey results in different ways over the years, Dottl says.

"One of the most important uses, of course, is to track how well our graduates are doing overall," she says. "We also have provided summaries of responses to faculty, course directors, clerkship directors, deans and the curriculum group on students' perceptions of how well various topics are covered. This information can then be used to improve courses, clerkships and other training situations and to ensure our curriculum is effectively addressing student needs."

The survey response rates vary; between 36 percent and 67 percent of the graduates complete and return the surveys, while between 64 percent and 95 percent of the residency directors complete and return the forms.

Most items on the residency director survey are rated on a six-point scale, explains Dottl, an expert at statistical analysis. A score of one represents poor, while a score of six signifies outstanding.

"First, we ask residency directors to think back to the previous year, when the graduate first started the residency," she says. "We ask On average, residency directors have rated UW Medical School graduates between very good and excellent over the past 10 years, reports Dottl.

them specifically to rate the quality of the medical school preparation the resident had at that time, relative to mastery of skills required to begin their residency."

On average, residency directors have rated UW Medical School graduates between very good and excellent over the past 10 years, reports Dottl.

Next, the directors are asked to consider the graduate's performance at the time of the survey and to rate current performance in several areas.

In the past decade, the directors gave UW graduates a range of ratings in the following areas:

- Fund of knowledge Very good to excellent; the trend is upward (toward excellent) over time.
- **History taking** Very good to excellent; the trend is upward over time.
- Physical exam skills Very good to excellent; the trend is upward over time.

- Cost-effective laboratory use Very good; the trend is fairly stable over time.
- Procedures/technical skills Very good to excellent; the trend is fairly stable over time.
- Clinical judgment—basic patient management skills
 Very good to excellent; the trend is upward over time.
- Use of literature to enhance learning Very good to excellent; stable from 1994 through 1999; gradual increase since 2000.
- Medical student teaching skills Very good to excellent; stable over time.
- Professionalism
 (punctuality, appearance,
 etc.) At or near excellent
 over all years, with slight
 increase over time.
- Humanistic behavior (sensitivity, caring, etc.)
 At or near excellent over all years, with slight increase over time.
- Communicates effectively with patients At or near excellent over all years, with slight increase over time.
- Communicates effectively with members of the healthcare team At or near excellent over all years, with slight increase over time.
- Works to improve his or her weaknesses At or near excellent over all years, with slight increase over time.

Finally, adds Dottl, residency directors are asked: Compared to other first-year residents, now or in the past, how does this resident compare?

"Our residents consistently are rated as better than average," Dottl says, adding that ratings have increased an entire point since 1994.

In terms of the graduates, they are asked to rate the quality of the education they received at UW Medical School on the same six-point scale ranging from poor to outstanding.

Over the past 10 years, the grads on average have rated their medical education at UW between very good (four) and excellent (five).

"Graduates agreed that the Medical School provided a supportive environment, with mean ratings ranging from slightly better than very good in the 1990s to near excellent since 2000," Dottl says.

Most graduates agreed or strongly agreed that they had adequate opportunities to develop independent learning skills and to learn the basic medical sciences and necessary clinical skills while they were at UW Medical School.

In other words, by almost all metrics, UW graduates stack up quite well.





Medical Students No More

Ith the proud letters MD now written after each of their names, almost all members of the Class of 2005 have begun their residencies and gotten a first taste of their radically different lives. They are in the throes of making the many adjustments that will be required before they are comfortable in their new roles. The graduates and the programs they have entered are listed below.

But before they departed for their residencies, the members of the Class of '05 marked the end of their time as medical students in several ways.

At the Recognition Ceremony, with all the colors of academic regalia, the students were invested into the profession. They listened to keynote speaker Helene Nelson, secretary of the Wisconsin Department of Health and Family Services, and other leaders who offered them inspiration.

Finally, following the UW-Madison afternoon graduation ceremony, the Medical School and the Wisconsin Medical Alumni Association hosted a reception at the Memorial Union Great Hall to honor the students and their families.

Graduates move on to their next challenge: Residency

Asra Ahmed Ali

Alexandra Louise Anderson

University of California-San Francisco School of Medicine **General Surgery**

Scott Allen Anderson

University of Wisconsin Hospital and Clinics Madison, Wisconsin

Matthew Joseph Arens Charles R. Drew University Los Angeles, California Emergency Medicine

Brian Gerald Arndt

University of Wisconsin Medical School Family Medicine

Kimberly Kegel Arndt

Medical Foundation

Transitional Year Madison, Wisconsin Physical Medicine and Rehabilitation

Danielle Ann Baumann

Cleveland, Ohio **Pediatrics**

Nicole Lynn Baumann-Blackmore

University of Wisconsin Hospital and Clinics **Pediatrics**

Anita D. Bhagat

MacNeal Memorial Hospital Family Medicine

Andrew Charles Boies

Postponing postgraduate

Brian Re Branchford

Medical College of Wisconsin Affiliated **Pediatrics**

Andrew Thierman Braun

University of California San Francisco School of Internal Medicine

Daniel John Breault

McGaw Medical Center of Northwestern University Evanston, Illinois Internal Medicine

Erin Grace Brooks

University of Vermont College of Medicine Burlington, Vermont Pathology

Lionel Richard Brounts

Madigan Army Medical General Surgery

Erica Renee Brown

Beth Israel Deaconess Medical Center General Surgery

Kara Lee Burrow

University of Wisconsin Medical School Madison, Wisconsin



Kathryn Anne Cahill

University of Wisconsin Hospital and Clinics Madison, Wisconsin **Pediatrics**

Briana Lynn Calore

Wayne State University/ **Detroit Medical Center**

Detroit, Michigan Orthopedic Surgery

April Anita Camp

Rush University Medical Chicago, Illinois General Surgery



Elizabeth Jean Cardinale Santa Barbara Cottage

Hospital Santa Barbara, California Internal Medicine

Kelly Anne Carter

Pitt County Memorial Hospital

Janina Cervera

University of Washington School of Medicine Seattle, Washington Primary Care

Jinhee Choi

University of Wisconsin Hospital and Clinics General Surgery

Jason Christopher Clark

Madigan Army Medical Center Family Medicine

Timothy John Cordes *

Medical Scientist University of Wisconsin Medical School

Meredith Ordonez Cruz

Aurora Sinai Medical Center **Obstetrics and Gynecology**

Kevin James Dahlman

Medical College of Wisconsin Affiliated **Pediatrics**

Maya Das

Saint Luke's Hospital Transitional Year Baltimore, Maryland School of Public Health

Megan Elizabeth Deisz

Medical College of Wisconsin Affiliated Milwaukee, Wisconsin **Pediatrics**

Robert Jason Deisz

Medical College of Wisconsin Affiliated **Emergency Medicine**

Christopher Colin Dillon

Postponing postgraduate

Allison Kathleen Duffy

California Pacific **Medical Center** San Francisco School of Medicine San Francisco, California Anesthesiology

Bethany Marie Duffy

Saint Luke's Medical Center Transitional Year University of Wisconsin Hospital and Clinics

Cesar Duque Gomez

Scripps Memorial Hospital Chula Vista, California

Sarah Catherine Durst

Medical School Family Medicine

Eric Maitland Dvorak

Wisconsin Affiliated Hospitals Milwaukee, Wisconsin Internal Medicine Rehabilitation

Todd Louis Eisenberg

University of Minnesota Medical School Minneapolis, Minnesota **Psychiatry**

Timothy Richard Enright Saint Luke's Medical Center Transitional Year **Hospital and Clinics** Madison, Wisconsin

Bradley Lief Erickson

Dartmouth-Hitchcock Lebanon, New Hampshire Psychiatry

Kristina Elizabeth Espinoza

University of Virginia **Medical Center** Emergency Medicine

Bryan Tole Fisher

Ohio State University Medical Center General Surgery

Angelique Christine

Saint John's Mercy Medical Center Transitional Year

Cynthia See-Ming Fok

Medical Center Maywood, Illinois

Raymundo Ahteri Forcada-Lowrie

Rhode Island Hospital-

Kathryn Jane Fowler

Saint John's Mercy Medical Center Transitional Year Barnes-Jewish Hospital Diagnostic Radiology

Sarah Elizabeth Fox

University of Wisconsin Medical School Madison, Wisconsin Family Medicine

Kathleen Elizabeth Garvey

Mayo Graduate School of Medicine Jacksonville, Florida Transitional Year

Eric David Gausche

University of Illinois College of Medicine **Psychiatry**

Michael Aaron Gelman

School of Medicine Seattle, Washington Internal Medicine

Christina Marie Golner

Rush University Medical Center

Christopher Robert Grindle

Thomas Jefferson University Hospital

Katherine Ann Grum

Saint Luke's Medical Center Diagnostic Radiology

Sabrina Elsie Guse

Summer Elizabeth Hanson

University of Wisconsin Hospital and Clinics Madison, Wisconsin Plastic Surgery

Brian Owen Haug

University of Utah School of Medicine Salt Lake City, Utah Ocularpathology Research Gregory Mark Heideman

Saint Joseph Regional Medical Center Transitional Year Medical College of Wisconsin Affiliated Milwaukee, Wisconsin

Marisa Kathleen Holubar

Rhode Island Hospital-Lifespan Providence, Rhode Island Internal Medicine-Pediatrics

Diane Marie Idsvoog

University of Wisconsin Hospital and Clinics Madison, Wisconsin

Zaid Waleed Jabbar

Loyola University Médical Center Maywood, Illinois Internal Medicine

Jennifer Lynn Janisewski

Kalamazoo Center for Emergency Medicine

Courtney Ann Jensen

Wake Forest University Baptist Medical Center Carolina Internal Medicine

Hans Christopher Jensen

University of Wisconsin Madison, Wisconsin

Kristin Ann Johnson

University of Minnesota Medical School Minneapolis, Minnesota

Raj Kumar Kakarla

Advocate Illinois Masonic Medical Center Diagnostic Radiology

Meghan Colleen Kehoe

Medical Center Milwaukee, Wisconsin Transitional Year University of Wisconsin Hospital and Clinics

Sarah J. Kiesling
Medical College of
Wisconsin Affiliated
Hospitals
Milwaukee, Wisconsin
Pediatrics
University of Minnesota
Medical School

Minneapolis, Minnesota Physical Madicine and Rehabilitation

Katherine Ann Kleinfeldt

University of Wisconsin Hospital and Clinics Madison, Wisconsin Pediatrics

Obrad Stevan KokanovicBaylor College of Medicine

Houston, Texas

Internal Medicine

Katherine Elizabeth Kormanik

University of Michigan Hospitals and Health Centers Ann Arbor, Michigan Pediatrics

Samip Dhiren Kothari

University of Arizona College of Medicine Tucson, Arizona Pediatrics

Jennifer Lynn Krupp

University of Wisconsin Hospital and Clinics Madison, Wisconsin Obstetrics and Gynecology

Michael Joseph Krzyzaniak

Naval Medical Center San Diego, California *General Surgery*

Katie Marie Larson Ode

University Hospitals of Cleveland Cleveland, Ohio Pediatrics

Alexander John Lepak

University of Wisconsin Hospital and Clinics Madison, Wisconsin Internal Medicine

Indra Adi Lim

Saint Joseph Mercy Health System Ann Arbor, Michigan Internal Medicine University of Michigan Hospitals and Health Centers Ann Arbor, Michigan Physical Medicine and Rehabilitation Alberto Mario Locante

University of Illinois College of Medicine Chicago, Illinois Pathology

Sara Danielle Lorenz

College of Medicine of Bronx, New York Internal Medicine-Social Medicine

Nathan Allan Maertz

Michigan State University/ Kalamazoo Center for Medical Studies Kalamazoo, Michigan Transitional Year

Patrick Joseph Maloney

University of Florida College of Medicine Jacksonville, Florida Emergency Medicine

Sharon Lynn Martinez *

Saint Joseph Mercy Health System Ann Arbor, Michigan Internal Medicine

Erin Leah Maslowski

Gundersen Lutheran Medical Foundation La Crosse, Wisconsin Transitional Year University of Colorado School of Medicine Denver, Colorado Physical Medicine and Rehabilitation

Joel Augustus McCauley

University of Minnesota Medical School Minneapolis, Minnesota Internal Medicine

Laura Ann McCauley

University of Minnesota Medical School Minneapolis, Minnesota

Amrendra Singh Miranpuri

University of lowa
Hospitals and Clinics
Iowa City, Iowa
General Surgery

Colin James Mooney

University Hospitals of Cleveland Cleveland, Ohio Internal Medicine

Sandeepa Musunuru

University of Wisconsin Hospital and Clinics Madison, Wisconsin *General Surgery* David William Niedermeier

Saint Mark's Health Care Foundation Salt Lake City, Utah Family Medicine

Cody Allen-Rogan Nikolai

Cody Allen-Rogan Nikolai Milton S. Hershey Hershey, Pennsylvania General Surgery

Jacquelyn Christine NohlMedical College of

Medical College of Wisconsin Affiliated Hospitals Milwaukee, Wisconsin Pediatrics

William George Ochoa
Postponing postgraduate

Postponing postgraduate training

Timothy Charles Olson

Family Practice Residency of Idaho Boise, Idaho Family Medicine

Temitayo Oyefunmike Oyegbile

New York Presbyterian Hospital New York, New York Pediatrics Child Neurology

Christine Amy Pagel

University of Wisconsir Hospital and Clinics Madison, Wisconsin Pediatrics

Jessica Ann Paisley

Saint Luke's-Roosevelt Hospital Center New York, New York *Emergency Medicine* **Scott Charles Parrish**

National Naval Medical Center Bethesda, Maryland Internal Medicine

Jill Marie Patzner
University of Wisconsin

University of Wisconsin Hospital and Clinics Anesthesiology

Naomi Peck *

Postponing postgraduate training

Jane Kirsten Wilcox Peterson

University of Minnesota Medical School Minneapolis, Minnesota Family Medicine

Trevor John Pitsch

LDS Hospital Salt Lake City, Utah Transitional Year Oregon Health and Science University Portland, Oregon Anesthesiology

Jennifer Lee Poehls

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

Harvey Anton Pollack *

Stanford University Hospital Stanford, California General Surgery

Amanda Raye Preimesberger

University of Wisconsin Medical School Madison, Wisconsin Family Medicine Kathryn Ann Radigan

McGaw Medical Center of Northwestern University Chicago, Illinois Internal Medicine

Stephen John Randall * Postponing postgraduate

Postponing postgraduate

training Mark Joseph Reischel

Gundersen Lutheran Medical Foundation La Crosse, Wisconsin Internal Medicine University of Michigan Hospitals and Health Centers Ann Arbor, Michigan

Jessica Noel Rock

Maine Medical Center Portland, Maine Anesthesiology

Brett Daniel Rusch

University of Wisconsin Hospital and Clinics Madison, Wisconsin Psychiatry

David Mark Ruttum

Aurora Sinai Medical Center Milwaukee, Wisconsin Internal Medicine

Kathleen Therese Ryan

Michigan State University/ Kalamazoo Center for Medical Studies Kalamazoo, Michigan Internal Medicine-Pediatrics

Douglas Francis Salm

Grand Rapids Medical
Education and
Research Center
Grand Rapids, Michigan
Transitional Year
Loyola University Medical
Center
Maywood, Illinois
Ophthalmology



Amy Jean SchnettlerUniversity of Connecticut School of Medicine
Farmington, Connecticut

Daniel John SchumacherUniversity of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Pediatrics

Jessica Alysia Scott University of Wisconsin Hospital and Clinics Madison, Wisconsin Padiatrics

Nisha Gala SeckSaint Luke's Medical Center
Milwaukee, Wisconsin
Transitional Year

Anil Bellur Seetharam Barnes-Jewish Hospital Saint Louis, Missouri Internal Medicine

Ricardo Benjamin SerranoVirginia Mason
Medical Center
Seattle, Washington
General Surgery

Tania Ann Shapiro-BarrPostponing postgraduate training

Einav ShochatDeaconess Medical Center
Spokane, Washington
Transitional Year
Oregon Health and Science

University Portland, Oregon Diagnostic Radiology **Amy Elizabeth Slawter**

Medical College of Wisconsin Affiliated Hospitals Milwaukee, Wisconsin *Emergency Medicine*

Stacey Jo Sperlingas University of Wisconsin Medical School Eau Claire, Wisconsin Family Medicine

Anne Katherine Sracic Saint Anthony Hospitals Denver, Colorado Family Medicine

Paul Thomas Stanton
Saint Luke's Medical Center
Milwaukee, Wisconsin
Transitional Year
University of Wisconsin
Hospital and Clinics
Madison, Wisconsin
Diagnostic Radiology

Steven Wallace SteinmetzUniversity of Wisconsin
Medical School
Eau Claire, Wisconsin
Family Medicine

Samuel John StellpflugHealthPartners Institute for
Medical Education
St. Paul, Minnesota
Emergency Medicine

Uma G. Swamy
Alameda County
Medical Center
Oakland, California
Transitional Year
New York Methodist
Hospital
Brooklyn, New York
Radiation Oncology



University of Wisconsin Hospital and Clinics Madison, Wisconsin Obstetrics and Gynecology

Banu Esin Edil Tinjum Christiana Care Health Services Newark, Delaware *Emergency Medicine*

Anita Tiwari Milton S. Hershey Medical Center Hershey, Pennsylvania General Surgery

Danita Tom
University of CaliforniaLos Angeles Medical Center
Torrance, California
Transitional Year
University of CaliforniaIrvine Medical Center
Irvine, California
Ophthalmology

Lisa Marie Tortorice University of Arizona College of Medicine Tucson, Arizona Pediatrics

Megan Marina Trester Hansen

Loyola University Medical Center Maywood, Illinois Obstetrics and Gynecology

Alfred Gregory Valles
Mayo Graduate School of
Medicine
Rochester, Minnesota

Jeremy James Van Buren Saint Luke's Medical Center Milwaukee, Wisconsin Transitional Year University of Wisconsin Hospital and Clinics Madison, Wisconsin

Jamie Joseph Van Gompel Mayo Graduate School of Medicine Rochester, Minnesota General Surgery Neurological Surgery

Joshua Peter Vrabec University of Wisconsin Hospital and Clinics Madison, Wisconsin Internal Medicine Ophthalmology Katharine Sue Wachowski

University of Pittsburgh Medical Center Pittsburgh, Pennsylvania *Pediatrics*

Anna Kathryn Warpinski
Tucson Hospitals Medical
Education Program
Tucson, Arizona
Transitional Year
University Iowa Hospitals
and Clinics
Iowa City, Iowa
Radiation Oncology

Elizabeth Rose Weisse McGaw Medical Center of Northwestern University Chicago, Illinois Pediatrics

Tara Megan WhiteMedical College of
Wisconsin Affiliated
Hospitals
Milwaukee, Wisconsin
Pediatrics

Janell Renee Wilson Medical College of Wisconsin Affiliated Hospitals Waukesha, Wisconsin Family Medicine

Elizabeth Stover Woods Barnes-Jewish Hospital St. Louis, Missouri *Psychiatry*

Michael Anthony Woods Barnes-Jewish Hospital St. Louis, Missouri *Orthopedic Surgery* David Michael Woosencraft

Saint Joseph Regional Medical Center Milwaukee, Wisconsin Transitional Year Medical College of Wisconsin Affiliated Hospitals Milwaukee, Wisconsin Anesthesiology

Janice Josephine Yeung
Strong Memorial Hospital of
the University of Rochester
Rochester, New York
General Surgery

Pamela Jean ZielinskiDartmouth-Hitchcock
Medical Center
Lebanon, New Hampshire
Internal Medicine

Andrew Richard Zinkel
University of Illinois
College of Medicine
Chicago, Illinois
Emergency Medicine

Franklin Roger Zuehl Naval Medical Center Portsmouth, Virginia Transitional Year

Todd Albert ZuhlkeRush University
Medical Center
Chicago, Illinois
General Surgery

Matthew Eric Zussman University of North Carolina Hospitals Chapel Hill, North Carolina Pediatrics

* Degree conferred December 2004





Project Medical Education

Turning Lawmakers into Students

by Corissa Jansen

lad in crisp white lab coats, the medical students watched intently as the physiology professor outlined the anatomy of the pig heart pulsating on the screen in front of them.

With a clamp shutting down the blood flow through the main anterior coronary artery, a heart attack was beginning. Starved for blood, the heart became chaotic and started turning blue as the blood pressure monitor fell to zero and pumping ceased.

"Now, you all watch TV. What should you do?" the professor asked as students suggested CPR or administering a shock.

Like an "ER" episode shot with a single camera focused on the heart, each option was played out on the screen. Finally, after both methods failed, a clot-busting agent was introduced and the surgeon attempted cardiac massage. And after 35 minutes without blood flow, the heart began its recovery.

"So, that's pretty amazing," the professor said as the students watched the stabilizing beat with rapt attention. "The heart is really a robust organ." The scene that played out on the screen is familiar to University of Wisconsin Medical School students, who participate in similar demonstrations to learn about the critical moments of a heart attack. But on this particular day at the Health Sciences Learning Center, the students watching the demonstration weren't future doctors.

The 12 people who had assumed the roles of medical students and residents were Wisconsin lawmakers and legislative staff members—more practiced in pressing the flesh than cutting through it. Together, they constituted the first class participating in "Project Medical Education" (PME) at UW Medical School, a day-and-a-half program that gives participants an insider's glimpse at the complex medical education system and how it is funded.

A new education for lawmakers

Created by the Association of American Medical Colleges and borrowed by many schools nationally, PME strives to give policy makers information to make informed decisions on issues



Michael Shmagin, a Wisconsin-based legislative assistant for U.S. Senator Russ Feingold, listened intently as medical student Travelle Franklin-Ford explained what was next on the busy PME schedule.

affecting the future of medical education.

In addition to the cardiac session presented by Richard Moss, PhD, UW Medical School chair of physiology, students spent the morning interviewing patients and getting an orientation to patient care in internal medicine, pediatrics and surgery.

Continued on next page.



State Representative David Ward (left) and other PME students spent time in the OR, watching surgeons install a pump in a patient to release back pain medication. Ward was struck by the number of healthcare workers needed to perform such an operation.

In the afternoon, PME students were fast-tracked into residency, with some of them changing into surgical scrubs and observing a procedure in the operating room. Others observed in UW Hospital and Clinics' Trauma and Life Support Center.

PME participants said they gained a greater understanding of the challenges of medical education. They also said they appreciated the candor of the medical students and residents who took time out of their grueling schedules to offer their perspectives and coach them throughout the day.

An "eye-opening" experience

"I was most impressed by the medical students who took us around," says Michael Shmagin, a Wisconsin-based legislative assistant for U.S. Senator Russ Feingold.

Shmagin, who helps
Feingold constituents solve
problems relating to Medicare
and Medicaid, said PME gave
him new insights that will
help him on the job. "PME
explained how much medical
education costs and how
much the hospital receives in
Medicare reimbursements,"
he says.

State Representative David Ward, a PME student and a member of the UW Hospital and Clinics Authority Board, says he gained a valuable insider's view from Project Medical Education.

"It was very helpful to me to actually watch the day-to-day operation of the hospital," Ward says. "It was very eye-opening, and I very much appreciated the expertise and willingness of the residents to share their thoughts."

As a PME surgical resident, Ward says he enjoyed his afternoon in the OR, watching surgeons install a pump in a patient to release back pain medication. He was struck by the number of healthcare workers it takes to perform such an operation,

and he now has a greater appreciation for the amount of preparation that goes into surgery.

"You can tell the person didn't just walk in off the street and get on that table," Ward says.

Honing interpersonal skills

In addition to taking a glimpse of the technical skills necessary to get through medical school, PME students also learned about the interpersonal side of medical education. During one workshop, they were asked to walk into an exam room and ask volunteer patients about their "chief complaint" and to

take a "history of the present illness."

Randy Thorson, a staff member for Wisconsin Representative Gregg Underheim, admitted that he was initially nervous to walk into the room and begin asking probing questions of a stranger—particularly when the only background information he was given was that each patient had "a problem."

But he opened the door with a smile and a friendly greeting, and then got down to business—asking questions about the patient's condition and medical history. Coached by second-year medical student Erin Kimball, Thorson learned that his first patient, a female, was experiencing elbow and arm pain.

"You did a good job," the patient told Thorson when it was her turn to provide feedback. "I felt like you were listening to me, and you asked good questions."

Thorson admitted with a smile, "Well, they gave me a cheat sheet. I didn't know I was going to do this when I walked in this morning!"

Escalating costs of medical education

PME students also learned about the mounting costs of medical education for students and medical institutions alike. When the day of training began, they were asked to keep in mind that the typical medical



Randy Thorson (right), a staff member for Wisconsin Representative Gregg Underheim, and others listened as the Medical School's Bill Schwanke (left) prepared them for their individual sessions with volunteer patients.

student graduates with about \$150,000 in debt.

Medical education is also a costly undertaking for medical schools. The video demonstration of the pig's heart, for example, cost about \$85,000 to produce. But for Richard Moss, who uses the video and shares it with other institutions, the teaching tool can be invaluable.

"People don't forget the lessons that emerge from that kind of interaction," he says.

"Graduation" and accolades

At the end of a long day, PME students received certificates of completion from Carl J. Getto, MD, Medical School associate dean for hospital affairs and senior vice president for medical affairs at UW Hospital and Clinics; Susan Skochelak, MD, MPH, UW Medical School senior associate dean for academic affairs; and the

Medical School dean, Philip Farrell, MD, PhD.

The school administrators had high praise for Project Medical Education and the legislative students who completed the program.

"We've had a good time," Getto says. "It worked out far better than I would have dreamed, and the students were absolutely wonderful." Skochelak also complimented the students for learning as much as they could about the medical education system in such a short time.

With a sly smile, she asked them: "And, who's on call tonight?"



Elizabeth Pika (left), Washington, D.C.-based legislative assistant for U.S. Representative Tammy Baldwin, tried her hand at interviewing a volunteer patient.

Springtime at the HSLC Welcomes

Medical Education Leaders, Learners

"One of the best things about this type of meeting compared to much larger meetings is that we truly can exchange ideas in an informal way...People like coming to this group because they feel they can interact with others at a grassroots level, without barriers."

by Kris Whitman

sunny, warm weekend and the stunning backdrop of the Health Sciences Learning Center (HSLC) welcomed members of the Central Group on Educational Affairs (CGEA), when University of Wisconsin Medical School hosted the group's spring meeting April 7 through 10. The CGEA is one of four regional educational affairs organizations of the Association of American Medical Colleges (AAMC). representing a subset of 34 member medical schools from 12 states and Canada.

With a theme of "Promoting Educational Scholarship, Collaboration and Innovation," the meeting drew 232 participants. The intent was to bring together members as leaders and learners in medical education to showcase current best practices related to curriculum and educational issues, stimulate interest in new educational methods and advance knowledge through research and networking. Conference organizers also anticipated that the CMEaccredited get-together would encourage the exchange of resources between colleagues across the spectrum of medical education—from undergraduate to graduate to continuing medical education.

Carolyn Bell, MD, UW Medical School associate dean for curriculum, reflected on the collegial nature of the CGEA.

"One of the best things about this type of meeting compared to much larger meetings is that we truly can exchange ideas in an informal way," she says. "People like coming to this group because

they feel they can interact with others at a grassroots level, without barriers."

While most meetings of this type are held in hotels and conference centers, the UW gathering "offered the chance to showcase the HSLC so participants could experience the building's exciting educational design, including its state-of-the-art technology," says Susan Skochelak, MD, MPH, senior associate dean for academic affairs at UW Medical School. She says the school's administration hopes that in addition to serving



The setting offered meeting participants the opportunity to interact informally on a grassroots level.



The UW Medical School conference planners were pleased to showcase the unique aspects of the new Health Sciences Learning Center, including its spacious atrium for getting acquainted and state-of-the-art technology for educational sessions throughout the building.

health sciences students, the new building will become a resource for other education and community groups.

Bell headed the UW
Medical School team of
approximately 40 faculty and
staff who pulled together
myriad logistical aspects
of hosting the meeting,
including registration,
audiovisuals, publications,
transportation and meals. She
and Skochelak give major
kudos to the committee
members and CME staff who
worked together to make
the program successful and

provide CME accreditation. While all say it was a significant undertaking, Bell comments that everyone seemed to have fun in the process. Skochelak adds that conference participants said they felt welcomed and well cared for by their Madison hosts.

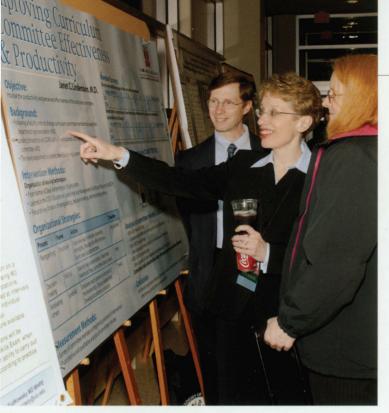
The spring meeting featured skill-building workshops, sessions focusing on different perspectives of educational scholarship, special interest group meetings and peer-reviewed papers and posters. In

addition, it offered an array of opportunities for collaboration, innovation and scholarship in medical education in a variety of formats—lectures, panels, small group discussions and workshops.

The HSLC atrium provided ample space for the meeting's poster presentations. Twenty-eight UW Medical School faculty and staff authored 15 posters. An additional 13 faculty and staff gave presentations or workshops.

On Thursday afternoon, participants could choose from a variety of professional development certificate programs in the educational leadership series or medical education research series. Bell explains that some such programs require participation for multiple years and result in a certificate that indicates valuable knowledge and skills in a specific area.

Friday and Saturday featured a variety of invited and peer-reviewed concurrent educational



Twenty-eight UW Medical School faculty and staff authored 15 posters, and an additional 13 gave presentations or led workshops.

sessions, as well as special interest group meetings dealing with topics such as basic science education, computers in medical education, continuous quality improvement, culture and health, curriculum, faculty development, population medicine and standardized patients.

Bell reflects on the Friday evening dinner at Monona Terrace, overlooking Lake Monona. Coda Blue, a string ensemble of six UW medical students, shared their talent while conference participants dined. Later Heather Sabin, of Frank Lloyd Wright Wisconsin, entertained the crowd with a talk about the building's architect, Frank Lloyd Wright. "We learned about the man, Taliesin and Monona Terrace," says Bell.

Sunday morning offered unique small-group collaborator connection meetings at which members could identify and work with colleagues with similar interests. "For example," says Bell, "junior faculty members may want to connect with senior faculty to help evaluate their progress and get input on career development-related improvements."

Throughout the conference, participants had opportunities to learn about the AAMC's new MedEdPORTAL. This Web-based tool promotes collaboration across disciplines and institutions by facilitating the exchange of peer-reviewed educational materials, knowledge and solutions. It serves as a central repository of high-quality

educational materials such as PowerPoint presentations, assessment materials, virtual patient cases and faculty development materials.

Bell says another technological resource described at the conference was CurrMIT, the AAMC's "Curriculum Management and Information Tool," which is used to document and report on curriculum content and educational methodology. CurrMIT also contains information to support major activity areas such as preparation for Liaison Committee on Medical Education site visits, documentation and reporting of faculty efforts, and education of faculty.

Regarding take-home messages, Bell feels participants left with many. An example of one such message for her is "just downstairs," she quips. "For years, I've wondered how our staff are able to help students who were doing poorly on exams. I know they've been able to help improve reading and study skills, but I've always wanted to know how they did it," Bell says. In their Saturday session titled "Reading Revisited: A Course to Teach Medical Students," UW Medical School's Georgia Hinman, PhD, and Susan Dottl, PhD, shared some of the pretesting techniques they use, described how they set goals for students, and discussed how they are able to get students to read faster and more accurately and problem solve more effectively.

A side benefit to coming together in the small forum of the CGEA meeting is to renew friendships, adds Bell, explaining that many CGEA members are good friends.





The meeting drew 232 participants from medical schools that are members of the AAMC's Central Group on Educational Affairs.

Ebling Library named Wisconsin

Health Sciences Library of the Year





t the spring Wisconsin Health
Science Library Association (WHSLA)
meeting in Oshkosh, Wisconsin,
UW-Madison's Ebling Library was named
the 2005 WHSLA Library of the Year.

The award is given to a Wisconsin health sciences library for distinguished achievement in service. The recognition is based on criteria dealing with: library collection growth, innovative planning or utilization of physical facilities, exceptionally user-friendly services, promotion of the field of librarianship, participation in networks and multi-type systems, and leadership in technology.

"This award reflects the esteem of our colleagues in hospital, academic health center and other health science libraries with whom we work closely to provide the highest quality health information to the citizens of Wisconsin," says Terry Burton, Ebling Library director.

In the photo above, Julie Schneider, WHSLA president and Ebling Library information resources coordinator, presented Burton the award at the April 25 meeting.

PHOTO: Michael Forster Rothbert/ UW-Madison University Communications

"Things are only impossible until they are done"

"Sometimes you can psych yourself out and anticipate problems that don't materialize.... You can sit there and plan for every contingency or you just go out and do things....That was the best way."

Blind student Tim Cordes earns MD

by Sharon Cohen

The young medical student was nervous as he slid the soft, thin tube down into the patient's windpipe. It was a delicate maneuver—and he knew he had to get it right.

Tim Cordes leaned over the patient as his professor and a team of others closely monitored his every step. Carefully, he positioned the tube, waiting for the special signal that oxygen was flowing.

The anesthesia machine was set to emit musical tones to confirm the tube was in the trachea and carbon dioxide was present. Soon, Cordes heard the sounds. He double-checked with a stethoscope. All was OK. He had completed the intubation.

Several times over two weeks, Cordes performed this difficult task at the University of Wisconsin Hospital and Clinics. His professor, George Arndt, MD, marveled at his student's skills.

"He was 100 percent," the doctor says. "He did it better than the people who could see."

Tim Cordes is blind.
He has mastered much in his 28 years: Jujitsu.
Biochemistry. Water-skiing.
Musical composition. Any one of these accomplishments would be impressive.
Together, they're dazzling.
And now, there's more luster for his gold-plated resume with a new title: Doctor.

Cordes has earned his MD. In a world where skeptics always seem to be saying stop, this isn't something a blind person should be doing, it was one more barrier overcome. There are only a handful of blind doctors in this country. But Cordes makes it clear he could not have joined this elite club alone.

"I signed on with a bunch of real team players who decided that things are only impossible until they're done," he says.

That's modesty speaking. Cordes finished medical school at the University of Wisconsin-Madison in the top sixth of his class (he received just one B), earning honors, accolades and admirers along the way.

"He was confident, he was professional, he was respectful and he was a great listener," says Sandy Roof, a nurse practitioner who worked with Cordes as part of a training program in a small-town clinic.

Without sight, Cordes had to learn how to identify clusters of spaghetti-thin nerves and vessels in cadavers, study X-rays, read EKGs and patient charts, examine slides showing slices of the brain, diagnose rashes—and more.

He used a variety of special tools, including raised line drawings, a computer that simultaneously reads into his earpiece whatever he types, a visual describer, a portable printer that allowed him to write notes for patient charts, and a device called an Optacon that has a small camera with vibrating pins that help his fingers feel images.

"It was kind of whatever worked," Cordes says. "Sometimes you can psych yourself out and anticipate

With the guidance of German shephe Vance, Tim Cordes walked with Blue-Hannah on campus last March.





With his MD earned, Cordes is now working on his PhD in the school's Medical Scientist Training Program. He studies the structure of a protein involved in a bacteria that causes pneumonia and other infections.

problems that don't materialize....You can sit there and plan for every contingency or you just go out and do things....That was the best way."

That's been his philosophy much of his life. Cordes was just 5 months old when he was diagnosed with Leber's disease. He wore glasses by age 2, and gradually lost his sight. At age 16, when his peers were getting their car keys, he took his first steps with a guide dog.

Still, blindness didn't stop him.

He wrestled and earned a black belt in tae kwon do and jujitsu. An academic whiz, he graduated as valedictorian at the University of Notre Dame as a crowd of 10,000 gave him a standing ovation.

Cordes finished medical school in December but still is working on his PhD, studying the structure of a protein involved in a bacteria that causes pneumonia and other infections.

Though he spends 10 to 12 hours a day in the lab, Cordes also carried the Olympic torch when it made its way through Wisconsin in 2002 (he runs four miles twice a week) and has managed to give a few motivational speeches and accept an award or two.

He's even found time to fall in love; he's engaged to a UW Medical School student.

But Tim Cordes doesn't want to be cast as the noble hero of a Hallmark special.

"I just think that you deal with what you're dealt," he

says. "I've just been trying to do the best with what I've got. I don't think that's any different than anybody else."

He also shuns suggestions his IQ leaves his peers in the dust.

"I just work hard and study," he says. "If you're not modest, you're probably overestimating yourself."

Through the years, plenty of people have underestimated Cordes.

That was especially true when he applied for medical school and was rejected by several universities, despite glowing references, two years of antibiotics research and a 3.99 undergraduate average as a biochemistry major.

Even when Wisconsin-Madison accepted him, Cordes says, he knew there was "some healthy skepticism." But, he adds, "the people I worked with were top notch and really gave me a chance."

The dean of the medical school, Philip Farrell, MD, PhD, says the faculty determined early on that Cordes would have "a successful experience. Once you decide that, it's only a question of options and choices."

Farrell worried a bit how Cordes might fare in the hospital settings, but says he needn't have.

"We've learned from him as much as he's learned from us...one should never assume that any student is going to have a barrier, an obstacle, that they can't overcome," he says.

Sandy Roof, the nurse practitioner who worked with Cordes in a clinic in the town of Waterloo, wondered about that.

"My first reaction was the same as others': How can he possibly see and treat patients?" she says. "I was skeptical, but within a short time I realized he was very capable, very sensitive."

She recalls watching him examine a patient with a rash, feel the area, ask the appropriate questions—and come up with a correct diagnosis.

"He didn't try and sell himself," Roof adds. "He just did what needed to be done." Cordes says he thinks people accepted him because most of his training was in a teaching hospital, where he blended in with other medical students. One patient apparently didn't even realize the young man treating him was blind.

Cordes grins as he recalls examining a 7-year-old while making the hospital rounds with Vance, his German shepherd guide dog. The next day, he saw the boy's father, who said, "I think you did a great job. (But) when my son got out, he asked me, 'What's the dog for?'"

With his sandy hair and choirboy's face, Cordes became a familiar sight with Vance at the university hospital. The two were so good at navigating the maze of hallways that interns would sometimes ask Cordes for the quickest route to a particular destination.

Some professors say Cordes compensates for his lack of sight with his other senses—especially his incredible sense of touch. "He can pick up things with his hands you and I wouldn't pick up—like vibrations," says Arndt, the anesthesiology professor.

Cordes says some of his most valuable lessons came from doctors who believed in showing rather than telling. "You can describe what it feels like to put your hand on the aorta and feel someone's blood flowing through it," he says, his face lighting up, "but until you feel it, you really don't get a sense of what that's like."

Yolanda Becker, MD, UW assistant professor of surgery who performs transplants, noticed that Cordes had a talent for finding veins. "I tell the students, 'You have to feel them... you just can't look.' For Tim, that was not an option."

Becker soon became one more member of Tim Cordes' fan club.

"He was a breath of fresh air," she says. "He appreciated the feel where the kidneys are.... He asked very good questions."

Cordes' training included observing surgery, helping treat psychiatric patients at a veterans hospital and traveling beyond the hospital walls to the rural corners of Wisconsin.

For six weeks, he experienced the front lines of medicine with Ben Schmidt, MD, accompanying him from house calls to the hospital, tending to everything from heart trouble to chicken scratches.

They took time, too, to indulge Cordes' passion for cars. Cordes, who reads *Road & Track* and *Car and Driver* magazines faithfully, is a Porsche fan. Knowing

that, an internist in Schmidt's clinic brought her husband's metallic gray Turbo 911 to work one day. Schmidt took the wheel, roaring down the road with Cordes in the passenger seat—his keen hearing detecting the sounds of the valves opening up.

Cordes also enjoys camping and canoeing with his fiancee, Blue-leaf Hannah (her exotic first name comes from a character in *Centennial*, a James Michener novel). They met when both interviewed for medical school.

"I was just mostly curious how he was going to do it," she says. "I must have asked him a million questions."

"I figured she was just sizing up the competition," he teases.

She was impressed. "He was smart and pretty modest," she says.

"Handsome, too," he adds.

"Yes, handsome," she laughs.

They began dating and will marry this fall. It's a match made for Mensa. Hannah is now finishing medical school. She already has a PhD in pharmacology—her dissertation was on a human protein implicated in heart disease called thrombospondin.

"Too long for a Scrabble game," Cordes jokes.

The two have talked about starting a research lab together someday.

Looking back on medical school, Cordes says he savored the chance to help deliver babies and observe surgery—things he's probably not going to do again. "I just made it a point to treasure them while I had them," he says.

He once thought he'd become a researcher but is now considering psychiatry and internal medicine. "The surprise for me was how much I liked dealing with the human side," he says. "It took a little work to get over. I'm kind of a shy guy."

Cordes attended graduation ceremonies in May.

For now, he's humble about his latest milestone.

"I might be the front man in the show but there were a lot of people involved," he says. "Everybody was giving a good effort for me and I wanted to do right by them."

Reprinted with permission from The Associated Press. Copyright © 2005 The Associated Press. All rights reserved. The information contained in the AP News report may not be published, broadcast, rewritten or redistributed without the prior written authority of The Associated Press.

Students honored at annual award ceremony

This spring's student honors and awards ceremony, held May 12, 2005, marked the end of another year of

high achievement for UW Medical School students. Nearly 100 of them—from all four classes—were given awards,

citations and scholarships for activities above and beyond the usual demands of medical school.













Clockwise from top left: Marisa Holubar earned the Compassion in Action Community Health Award sponsored by Zorba Paster, MD. Mark Morrey, with wife and child, celebrated winning the George Rowe Scholarship with Rowe's widow, Pat. Robert Schilling, MD '43, congratulated Jennifer Wipperman, recipient of the Schilling Scholarship. The Murray Angevine Patholgy award went to Andrew Schroeder. Dean Farrell presented Courtney Jensen the Van Liere Award. WMAA Student Scholarship winners included Jacqueline Redmer, David Sommerfeld and Erin Henrich.

22

Black Bag Ball

W Medical School students, faculty and alumni gathered April 15, 2005, at the Concourse Hotel for the annual Black Bag Ball.

The Wisconsin Medical Alumni Association (WMAA) sponsors the event each year for students, faculty, alumni and guests. Attendees at this year's ball enjoyed music performed by the student band called the "Benign Tuners" during the social hour, followed by a sit-down dinner and dancing.









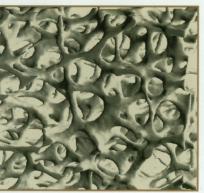


Clockwise from top left: First- and second-year students proudly posed in their tuxedos. Erin Henrich, MSA president, attended with her fiance, Adam Turner. Christopher Larson, MD '75, WMAA board member and chair of the Quarterly editorial board, visited with Sharon Younkin, PhD, director of community service programs at the Medical School, and student Jacqueline Redmer. Black Bag student organizers Sarah Endrizzi, Brian Grogan and Jenny Pofahl were extremely pleased with their efforts. Maggie and Jon Printz joined in the night's festivities.

Summer 2005

Tracking Research Productivity





Researchers hope that 2MD turns osteoporotic bone (above) into dense bone.

Major research awards

Several University of Wisconsin Medical School investigators won major new research awards between November 2004 and January 2005. Highlights of two studies follow.

Rebuilding bone mass lost to osteoporosis

UW is one of only a dozen sites worldwide chosen to conduct a clinical trial involving 2MD, a vitamin D-based drug compound that builds bone mass.

November 2004 through January 2005

Researchers will track 30 to 40 post-menopausal women who aren't currently taking calcium supplements. About half of them will receive doses of 2MD, while the other half will receive a placebo.

"If 2MD works in humans like it does in rats, it's going to be a major advance in osteoporosis treatment," says lead researcher Neil Binkley, MD, UW Medical School associate professor of medicine and an osteoporosis specialist at UW Hospital and Clinics. "This could be really significant."

Most currently used osteoporosis therapies are anti-resorptive—they don't stimulate bone formation, but rather curtail bone loss. Newer drugs can build bone, but they're expensive and difficult to administer. 2MD stimulates osteoblasts and can be administered in a less expensive, easy-to-digest pill form.

In addition to 2MD's bone-building capabilities, researchers hope that the compound may help to correct the muscle weakness—and resulting falls and fractures—that vitamin D-deficient patients often suffer.

Understanding HBV

Hepatitis B virus (HBV) affects millions of people and in some parts of the world it is endemic. A primary cause of liver cancer, HBV leads to death in 15 percent to 25 percent of chronically infected people.

"We're not sure exactly how the virus causes liver cancer, but we do know it takes a long time," says Dan Loeb, PhD, professor of oncology at the Medical School's McArdle Laboratory for Cancer Research. "During the entire time of infection, which can be decades, the virus is always replicating, or reproducing."

With a new grant from the National Cancer Institute that will extend previous studies, Loeb and his team will build on their work examining how the virus carries out replication within cells. The scientists use the closely related duck version of the virus, an excellent experimental model for human HBV.

One fundamental aspect of the virus is that even though it is a DNA molecule, it replicates through an RNA intermediary in a process called reverse transcription.

"By understanding how reverse transcription works in this virus, we hope to identify steps that could be targets for drug intervention," says

The key to any good antiviral drug is that it affects a mechanism that is unique to the virus in question and spares other normal cellular structures and processes. "We hope that's what will come out of our work," Loeb says.

Publications

UW Medical School investigators authored 345 publications from November 2004 through January 2005, including the following, which appeared in *Science* on December 17, 2004.

Zeroing in on fear and anxiety

A split-second flash of the whites of a pair of large fearful eyes is enough to light up the amygdala of normal human research subjects, according to the recent findings of Paul Whalen, PhD, a professor of psychiatry at the Medical School. An ancient brain structure responsible for responding to fear, the amygdala relies on visual cues such as facial expressions to quickly detect danger.

Whalen used functional magnetic resonance imaging

to assess amygdala responses to very fleeting images of wide, fearful eyes—in which the whites were large—and less fearful eyes—in which the whites were more narrow.

The findings showed that the amygdala responded much more robustly to fearful eyes than to less fearful eyes, even when subjects had no idea they had seen any eyes.

By describing these details of the brain circuits involved in fear, the studies may eventually help people suffering from anxiety disorders.

"It may be that such people are much more sensitive to very subtle environmental cues relating to fear than previously thought," Whalen says. "This information could point the



A fleeting look at fearful eyes (left) triggers a robust brain response.

way to new medications and new ways to test them."

Patents

UW Medical School faculty and staff submitted 18 patent disclosures in the second quarter of last fiscal year. The U.S. Patent Office awarded five patents, which were assigned to WARF, including the following.

Setting the stage for umbilical therapy

Karen Downs, PhD, studies the mouse allantois, precursor tissue consisting of a mass of cells that gives rise to the blood vessels of the umbilical cord. The lifeline of the fetus during pregnancy, the umbilical cord shuttles fetal blood into a region of the placenta that is responsible for the



exchange of nutrients, gasses and metabolic waste during much of gestation. The cord also holds potential as a route to treat defects arising before and after birth.

Using the most sophisticated microsurgical techniques, Downs, a UW associate professor of anatomy, isolated the mouse allantois at a very early stage, without contamination from adjacent cells and tissues. This newly patented system allows Downs and her team to grow allantois cells in culture dishes, where they can now observe the critical steps in the formation of blood vessels.

The system may also be a critical tool for umbilical therapy, in which therapeutic genes and proteins are introduced to the fetus via the cord. It could be used to treat hemophilia A, for example, which is caused by an aberration in clotting factor IX.

"Many patients with hemophilia A develop inhibitors against the recombinant factor IX they are given for treatment," Downs says. "One way to prevent inhibiting antibodies from forming would be to begin therapy *in utero*, before the immune system develops, recognizes the therapy as foreign and rejects it."

The therapy could entail adding factor IX to allantoic cells in culture and transferring the cells to the umbilical cord. The cord would deliver factor IX to the fetus before the immune system develops, ensuring that the protein is accepted and tolerated later in life.

Umbilical therapy may be especially useful in cases where the therapeutic factor is toxic to the mother, cannot cross the placenta or is very short-lived.

One additional advantage, notes Downs, is that the therapy would end at birth with the shedding of the placenta.

UW Medical School Research Awards

| Category | 2nd Q 2004 | 2nd Q 2005 | % Change |
|------------------------------|--------------|--------------|----------|
| Federal | \$35,169,498 | \$28,563,853 | -18.78 |
| Clinical trials-Industry | \$3,446,858 | \$3,781,142 | 9.70 |
| Clinical trials-Non-industry | \$177,245 | \$14,040 | -92.08 |
| Clinical trials-Federal | \$1,127,716 | \$175,062 | -84.48 |
| Industry | \$468,167 | \$972,422 | 107.71 |
| Gifts | \$3,605,151 | \$4,021,476 | 11.55 |
| Other (State & Private) | \$2,365,411 | \$3,935,733 | 66.39 |
| TOTAL | \$46,360,046 | \$41,463,728 | -10.56 |

Awards given to UW Medical School during the second quarters of fiscal years 2004 and 2005.

| | CHARLES AND ADDRESS OF THE PARTY OF THE PART | THE PERSON NAMED IN | |
|------------------------------|--|---------------------|----------|
| Category | YTD FY2004 | YTD FY2005 | % Change |
| Federal | \$135,606,757 | \$119,037,372 | -12.22 |
| Clinical trials-Industry | \$9,672,498 | \$9,366,055 | -3.17 |
| Clinical trials-Non-industry | \$268,795 | \$211,894 | -21.17 |
| Clinical trials-Federal | \$1,374,014 | \$1,590,923 | 15.79 |
| Industry | \$2,159,850 | \$4,009,030 | 85.62 |
| Gifts | \$9,632,375 | \$12,647,880 | 31.31 |
| Other (State & Private) | \$13,185,993 | \$8,270,128 | -37.28 |
| TOTAL | \$171,900,282 | \$155,133,282 | -9.75 |

Awards given to UW Medical School during the first three quarters of fiscal years 2004 and 2005.

A Classic Rhine River Cruise

Marking two very special celebrations



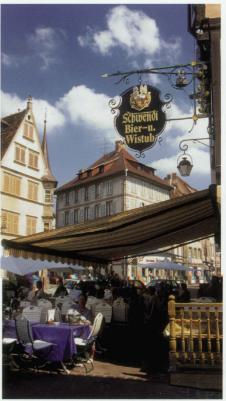
In academic year 2006-2007, the University of Wisconsin Medical School will mark its 100th year, and the Wisconsin Medical Alumni Association will recognize its 50th anniversary with a golden jubilee in 2006. To celebrate the dual events, organizers are planning a once-in-a-lifetime cruise on the Rhine River next summer.



Between June 9 and 19, 2006, the elegant 78-passenger *Rembrandt* will cruise the Rhine from Basel, Switzerland, to Amsterdam, the Netherlands. The custom-built river vessel will pass charming medieval towns and villages along its route. Stops will be made at historic towns such as Colmar, Strasbourg, Heidelberg and Cologne.

With Dean Philip Farrell and his wife, Alice, as hosts, the voyage will also include many educational opportunities relating to the history of medicine, including special CME-accredited lectures presented by current and past faculty from UW Medical School.

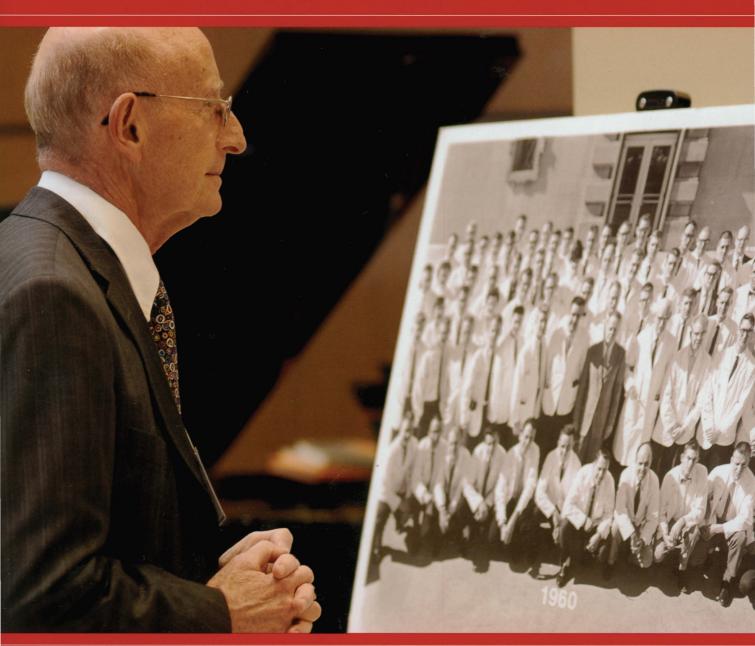
Depending on availability, the deadline to book reservations on the cruise has been extended for *Quarterly* readers. To make arrangements, call Wisconsin Alumni Association Travel at (888) 922-8782. For more information, visit uwalumni.com/medicalcruise.





Alumni Weekend

GRADS RETURN TO THE PLACE OF THEIR PROFESSIONAL BEGINNINGS



Continued on next page.

Summer 2005 27

Dean's Reception



Shirley Inhorn, above at left, was one of many people who enjoyed the Dean's Reception that served as the kick-off for another memorable Alumni Weekend.

Dean Philip Farrell visited with many alumni. Six classes held special reunions.



by Susan Pigorsch

People who attended the Alumni Weekend 2005 seminar given by Ruth Benca, MD, PhD, a sleep expert and University of Wisconsin Medical School professor of psychiatry, may never miss another class reunion. After all, attendees joked, if white-crowned sparrows can routinely migrate 2,700 miles—mostly at night—without sleep and without suffering the annoying

effects of sleep deprivation, surely graduates of UW Medical School can return easily to the place of their professional beginnings.

Whether flying back to Madison for their 50th reunion or their 20th, alumni found that the distance in miles, and time, soon seemed irrelevant. The Memorial Union Terrace is the same as it ever was, and the blooming plum trees on Library Mall were simply glorious that second weekend in May. And there

were plenty of old friends and faculty members joining in on the return migration, with a new generation of medical students to greet them.

In addition to getting back in the classroom, the classes of 1945, '50, '55, '60, '70, and '85 kicked off the weekend with an elegant Dean's Reception held in the atrium of the newly completed Health Sciences Learning Center (HSLC).



The Wisconsin Medical Alumni Association sponsored many of the festivities.

Frank Murray, class representative for the Class of 1960, had a grand time at the Dean's Reception. Twelve members of the class were present, as were six of their former professors.



"We had a very fine reunion in the beautiful new learning center," says Frank Murray, MD '60, of California, who returned with 12 members of his class and six former professors. "There were lots of opportunities to exchange information with one another, and to learn what we'd been doing over the years." Better yet, class members had a chance to reconnect with their teachers and learn about each others' lives in retirement.

"I felt that the HSLC was beautifully designed and very functional—it looks like a neat place to go to medical school," says Gene Weston, MD '55. Student guides and staff took groups on walking tours of current classrooms, answering questions about medical education today.

In the evening, all alumni were invited to the Concourse Hotel for the Awards Banquet, which featured presentations from distinguished award winners. Alumnus George T. Bryan, MD '57, PhD, a professor emeritus at the school, received the Citation Award (see story on page 33), the highest honor bestowed by the Wisconsin Medical Alumni Association (WMAA).

"Back in 1962," remembers Weston, who was chief of surgery at the Air Force Academy at the time, "we put on a cancer conference, and I sent a jet to Madison to pick up George."

Continued on next page.



The Dean's Reception provided ample opportunity for alumni to reconnect after many years, remembering days long past and catching up on what has happened since.

Ilse Judas, MD '50, shared a moment with Annie Engebretson of University of Wisconsin Foundation.



At the conference, Bryan described UW research on 5-FU, a revolutionary cancer drug. After 40 years, Weston says, it was a pleasure to see Bryan again in person and to join a ballroom crowd of 225 in saluting one of the Medical School's best.

During Alumni Weekend, the WMAA board also honored three outstanding students, each of whom received a \$1,500 scholarship.

In addition, Karen Peterson, WMAA executive director, unveiled plans for a

one-of-a-kind celebration of the Medical School's centennial and WMAA's golden jubilee, both of which are coming up in 2006 and 2007.

"We're planning a Rhine River cruise for the entire Medical School and alumni community in June of 2006," Peterson says. The cruise will be an opportunity to enjoy the company of Dean Farrell and his wife, the WMAA board and other alumni while marveling at castles and milestones of European history. It also will be an educational opportunity, one

that combines seminars with onshore excursions, fine dining and Wisconsin camaraderie on an intimate, 78-personcapacity ship.

"The Madison campus is still a great place to go to school," concludes Weston, now retired and living in Arizona. It's even better to take the best of the campus with you, wherever you may travel.

Class Reunions



Seated, left to right: Bill Nielsen, John Steinhaus, Dale Hoff, Henry Peters, Nate Smith and Tom Rice. Standing: Joe Wepfer, Jack McCullough, Leroy Misuraca, Dean Hales and John Irvin.

1950
Front row, left to right: Jim Veum,
Tom Jansen, Ilse Judas, Martin
Fliegel and Mary Berg. Back row:
Bob Starr, Roger Laubenheimer,
Jack Guy and Al Molinaro.





Front row, left to right: Raymond Skupniewicz, Donald Werner, Victor Gieschen and Harry Yamahiro. Second row: Eugene Weston, Marliese Lehtmets, Robert Mataczynski, Robert Wheaton, Elizabeth Smithwick, Glenn Baumblatt, Sonja Williams. Back row: Henry Anderson, Marvin Hinke, Robert Douglas, Walter Schwartz, Richard Wolfgram, Robert Brown and Richard Holder.

Class Reunions



1960 Front row, left to right: Richard Yee, Carol Young, Professor Gabrielle Zu Rhein, Leonard Stein and

Zu Rhein, Leonard Stein and Dennis Francsali. Back row: Donald Powers, Paul McLeod, Glenn Meyer, Herbert Oechler, Frank Murray, Mary Herman-Rubenstein and Robert Blomquist.

Front row, left to right: Sandy Osborn, Ann Selzer, Christine Sawyer and Kay Heggestad. Back row: Daniel Wochos, Steven Stoddard, Kurt Konkel, Richard Horak, Paul Wertsch, Marcia Richards, Robert Younkins and Ronald Goldschmidt.





1985

Front row, left to right: Joanne Jensen, Rose Schultz, Kim Friedman, Brenda Dierschke and Jennifer Garvin-Cress. Middle row: Ken Solis, Dan Ripp, Jerry Hardacre, Steve Wiesner, Phil Bain, Jim Nicholson and Jerry Van Ruiswyk. Back row: Tim Gundlach and Jim Robinson. Awards

George Bryan, MD '57, PhD Wins Top WMAA Award

by Susan Pigorsch

Perhaps you didn't know that Antigo, Wisconsin, is the hometown of several internationally acclaimed professionals. D. Wayne Lukas, for example, left this rural community not far from Green Bay to train racehorses, winning many a prize, including the Kentucky Derby on several occasions.

Fortunately for University of Wisconsin Medical School-and humanity at large—another of Antigo's celebrated sons fell off the only horse he ever mounted as a boy, firmly grounding him in a career that has combined chemistry, medicine, academia and a resolve to battle a ravaging disease—cancer. The Wisconsin Medical Alumni Association proudly presented its 2005 Citation Award to George T. Bryan, MD '57, PhD, on May 6, 2005, during Alumni Weekend.

"A friend of mine's mom died from breast cancer when we were in high school," says Bryan, who served as professor of surgery, medicine and human oncology at UW Medical School as well as deputy director of the University of Wisconsin

Comprehensive Cancer Center (UWCCC) and director of the Wisconsin General Clinical Research Center. "She lay in bed for months at a time, and we watched her wither away. I knew there was nothing I could do."

Not just then, anyway.
When Bryan came across
a newspaper account of the
work of Van Potter, PhD,
a scientist at the McArdle
Laboratory for Cancer
Research at the University
of Wisconsin, he knew that
he wanted to take his love of
chemistry to Madison to learn
more about the scientific
team that was dedicated to
cancer research.

He enrolled at the UW, and found ways to support himself through school. As an undergraduate, Bryan's first job was in the Pine Room, where he scraped plates in the kitchen of legendary chef Carson Gulley. By his third year on campus, the young man who was to become an esteemed teacher, researcher and administrator had landed a lab job in entomology and was torn between pursuing a career in chemistry and applying for medical school. At the urging of Philip Cohen, MD, then chair of



physiological chemistry, as well as Harold Rusch, MD '33, and Potter, both of McArdle, Bryan decided to give medical school a try.

As luck would have it, Bryan met his future wife, Mary, along the way, and she took a research job in the surgery department to support him through medical school. "They were doing lab work there," remembers Bryan. "I'd go over for lunch, and soon I did a project in the cancer area. I realized that this is what I wanted to do."

Following graduation from Medical School, he applied for a scholarship with the National Cancer Institute (NCI) and entered the doctoral program at McArdle in the late 1950s. Soon he was an instructor in the Department of Surgery, specializing in oncology. By 1963, he was an assistant professor and the father of five. In 1969, he was a tenured full professor who was teaching as well as doing clinical studies of cancer drugs with Anthony Curreri, MD, head of the Division of Clinical Oncology at UW.

"A lot of things happen in this world that you can't predict," says Bryan. "People at the time were anxious to lose weight with cyclamates and saccharin. There were a lot of products sold with these substances."

Continued on page 37.

Honoring Excellence







IEWIS '41

SANDMIRE '53

ANDERSON '47

At the annual Awards Banquet on May 6, 2005, the Wisconsin Medical Alumni Association (WMAA) and friends gathered to honor alumni who have made outstanding contributions on a number of important levels. The WMAA also recognized distinguished teachers, stellar emeritus faculty, superlative researchers and dedicated physician-educators. At the banquet, the WMAA presented its top honor, the *Medical Alumni Citation Award*, to George Bryan, MD '57, PhD (see story on page 33). A summary of the other awards presented follows.

Both Russell Lewis, MD '41, and Herbert Sandmire, MD '53, received the WMAA's *Ralph Hawley Distinguished Service Award*. The award is given to alumni who have made outstanding contributions to their

communities through medical practice, teaching, research or other humanitarian activities.

Lewis, an obstetrician, has been affiliated with the Marshfield Clinic for some 60 years. Viewed as a master planner and visionary there, he served as president and member of the executive committee for many years. He initiated and encouraged quality growth of the medical staff and development of the impressive physical facility. He is widely recognized as the moving force behind the development of the Greater Marshfield Community Health Plan—one of the first HMOs ever, which now offers membership to rural residents.

Sandmire, also an obstetrician, is a clinical professor at UW Medical School who maintains an obstetrics-gynecology practice in Green Bay, Wisconsin. Over the course of his medical career, he has delivered nearly 11,000 babies. He has authored 41 publications, many of which concern shoulder dystocia, macrosomia and caesarean birth. He is the recipient of 11 prestigious awards, two of which were specifically initiated in recognition of his contributions to his discipline.

Richard B. Anderson, MD '47, was given the *Medical Alumni Service Award*, which recognizes outstanding service to the WMAA. It is offered to an alumnus who has exhibited exceptional commitment to the association over a period of years.

Anderson held joint appointments in pediatrics and child psychiatry at UW Medical School for many years. He was responsible for organizing the child and adolescent consultation service between the pediatrics and

Awards

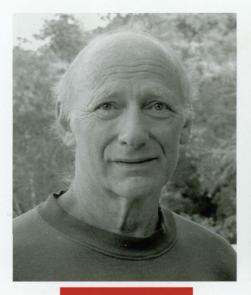


CUPERY '67 (LEFT) AND SIVERTSON

The Medical School and the WMAA recently created the Sigurd Sivertson Medical Education Award to honor the contributions of Sigurd Sivertson, MD '47, to medical student education. Throughout his career at UW Medical School. Sivertson maintained an unflagging commitment to providing medical students rewarding community-base clinical experiences. He was a major force behind the school's preceptor program, in which physicians working in local communities welcome fourt year students for six- to eight-week clinical experiences.

The award recognizes the contributions made by hundreds of preceptors who provide quality healthcare while offering medical students rich educational opportunities in small communities.

At the 2005 Awards Banquet, Stanley Cupery, MD '67, of Beaver Dam, Wisconsin, was given the first Sigurd Sivertson Medical Education Award. When a preceptor site was first established in Beaver Dam, Cupery served as the associate preceptor, later becoming the head preceptor and finally the director of the entire UW preceptor program. His commitment to his community i exemplary. He served as chief of stat at Beaver Dam Community Hospital medical advisor to the Cambria-Friesland school system and volunte physician to Beaver Dam's athletic





MAZESS

SHAHIDI

psychiatry departments. He also started Wisconsin's first eating disorders clinic. Through the years, Anderson has devoted himself to teaching and mentoring medical students and residents, and he has continued to enjoy this activity since his retirement in 1991. He is very active with the WMAA.

The 2005 Emeritus Faculty Awards for a basic scientist and clinical scientist were presented, respectively, to Richard Mazess, PhD, and Nasrollah Shahidi, MD. The awards are given in recognition of long and effective service to the Medical School in the areas of teaching, research or noteworthy administration, including program development.

Mazess, a faculty member in the UW Department of Medical Physics, was director of the UW Bone Mineral Laboratory, where today's bone densitometry methods and equipment were first developed. He became an expert on the topic, as well as on osteoporosis and metabolic bone disease. In 1980, he founded Lunar Corporation, the world's leading manufacturer of bone densitometers. He retired from the university in 1985.

Shahidi, a specialist in childhood anemia and hematology, joined the Department of Pediatrics at UW Medical School in 1966. He headed the Division of Pediatric Hematology/Oncology and was director of the Pediatric Hematology Clinical Laboratories for three decades. In his teaching, mentoring and clinical activities, Shahidi always tries to instill in others the wonder of determining "how it works."

Continued on page 36.

Awards-





ALLEN-HOFFMANN

Two awards were created this year to recognize the breadth of vision of **Harold P. Rusch, MD '33**—the *Harold P. Rusch Awards in Translational Cancer Research.*

Rusch's leadership resulted in the 1940 opening of the McArdle Laboratory for Cancer Research on the UW-Madison campus, the first basic science cancer center at an academic institution in the United States, and later the UW Comprehensive Cancer Center, one of only a handful of centers carrying the designation.

The awards, one for clinical science, the other for basic science, were given to two UW Medical School faculty members who have made seminal contributions to translational research.

Paul Harari, MD, professor of human oncology, was given the clinical science award. In addition to treating patients with head and neck cancers, Harari has developed an internationally acclaimed and highly successful research program that examines how specific molecularly targeted agents interact with radiation, and how their potency can be dramatically enhanced in combination with radiation.

Lynn Allen-Hoffmann, PhD, professor of pathology and laboratory medicine, was given the award for basic science. She has discovered a line of cells that can be genetically engineered to recapitulate the tissue structure of human skin. She has developed a Madison-based company that is making progress with its human skin substitute, which may revolutionize the treatment of burn victims.



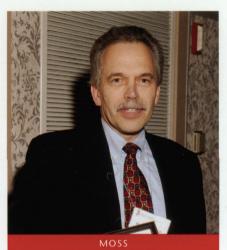








Six educators received WMAA *Distinguished Teaching Awards* at the banquet. Recipients are selected by a vote of the Medical School students in recognition of outstanding qualities as a teacher.



Richard Moss, PhD, won the Distinguished Teaching Award for Basic Sciences teaching. He joined the UW Department of Physiology in 1979 and has served as chair since 1988. He also has been director of the Cardiovascular Research Center since 1997. Moss teaches cardiovascular physiology to first-year medical students and cardiovascular pathophysiology to second-year students. He very effectively applies interactive learning techniques to his teaching.

The Distinguished Amands for Clinical Teaching honor clinical teachers from the Medical School's major teaching locations. The awards went to Steven Manson, MD, of La Crosse; Andrew Urban, MD, of Madison; Scott Erickson, MD, of Marshfield; and Carol Hasenyager, MD, of Milwaukee.

Manson, a pediatrician, currently teaches third- and fourth-year UW medical students, transitional students and physician assistants from UW-LaCrosse, the Mayo Clinic and the Gundersen Lutheran Program.

Urban, who joined UW Medical School in 1998, is chief of infectious diseases at the William S. Middleton Memorial Veterans Hospital. He teaches medical student pre-clinical and clinical courses, and resident and fellow infectious disease courses.

Erickson, an internist at Marshfield Clinic, has participated in the internal medicine residency program there for more than 20 years. As he helps transform students into clinicians, he urges them to consider the patient and the illness in the context of the environment.

Hasenyager is an obstetriciangynecologist at the Medical College of Wisconsin in Milwaukee. She has worked in a community health clinic and college health service for several years. She is interested in medical student and resident curriculum development.

Mark Flanum, MD '02, was given the Distinguished Award for Outstanding Resident Teaching. A resident in orthopedic surgery at UW Trospital and Umires, he viring years of experience in wilderness medicine to his teaching.



ohn A. DeGiovanni, MD, chief of surgery at Sauk Prairie Memorial Hospital in Prairie du Sac, Wisconsin, was given University of Wisconsin Medical School's 2005 Max Fox Preceptorship Award at an evening celebration on May 25.

The Max Fox award honors one volunteer doctor in the school's preceptorship program every year for exceptional service and commitment. An integral

Prairie du Sac Surgeon Wins Max Fox Award

part of the UW Medical School curriculum since it was created in 1926, the preceptorship program involves local physicians across the state who open their offices and clinics to fourth-year medical students. The six- to eight-week experiences immerse students in busy clinical practices under the guidance of their preceptors.

"Dr. DeGiovanni has been a long-standing preceptor modeling compassion for patients, engagement in community and interest in medical student education as well as medical students as people," says Byron Crouse, MD, UW Medical School associate dean for rural and community health.

DeGiovanni's commitment to students is widely appreciated at the Medical School, adds Crouse. "He has been a preceptor we could always turn to when we had a special need on short notice, such as a unique student," he says. "He has always been eager to help students."

DeGiovanni earned his medical degree in 1972 from the University of Illinois College of Medicine. He completed an internship in the UW Department of Family Medicine and a surgical residency at UW Hospital and Clinics.

He has been a surgeon in Sauk Prairie since 1977 and formed Surgical Associates of Prairie du Sac in 1993. In 2002, he was named the Wisconsin Physician Citizen of the Year by the State Medical Society of Wisconsin.

The Max Fox Award was created in 1969 with a gift from H. H. Shapiro, MD, to honor his preceptor, the late Max Fox, MD. Fox was a preceptor in Milwaukee for more than 25 years.

George Bryan, MD '57, PhD (continued from page 33)

The chemicals were somewhat similar to products known to affect people in industrial environments, such as dyes, which increase the risk of bladder cancer. In a fluke that is the essence of scientific discovery, one of Bryan's control groups tested positive—twice. The research linked cyclamates to bladder cancer and, with other studies, led to the removal of the artificial sweetener from the marketplace.

"Science is a continuum," Bryan notes. "Rarely are there new facts that transcend all facts known before. This leads to understandings of the world, our bodies and ourselves that eventually lead to comprehension."

Harold Rusch tapped Bryan to help create one of the nation's first academic-based comprehensive cancer centers, the UWCCC, in the early 1970s. Paul Carbone, MD, was recruited to lead the

new center, and he named Bryan his deputy. In the 1980s, Bryan's devotion to cancer research took on new meaning. His spouse died of cancer, as did the husband of his current wife, Sandy, whom he married in 1985.

With renewed resolve, Bryan took on Carbone's toughest assignment yet. He was asked to develop an application for funding a General Clinical Research Center that would qualify for National Institutes of Health funds, desperately needed to continue clinical research that was no longer covered by third-party sources. In just three months, Bryan pulled together a grant request that normally would take more than a year's development time. The UW-Madison's General Clinical Research Center won funding, and Bryan was appointed director.

"I take pride in helping others get the facilities to do their work," explains Bryan, who also has served on major national and international review committees, including the U.S. Food and Drug Administration, the NCI, the Environmental Protection Agency and the World Health Organization. "One doctor can't predict results. We all have to work collaboratively to do that— even if it means traveling in airplanes far more than one would like."

Bryan believes that collaborations, and not administrative structures, will lead to the discoveries that will abate the threat of cancer. "If you're ready," he says, "you can understand what the unexpected 'bolt of lightning' is trying to tell you in the lab. If not, then it's just a waste of energy."

Class Notes compiled by Kathleen Freimuth

1947

After retiring as chief of the pulmonary unit from the Chaim Sheba Medical Center, Tel Hashomer, in 1991, Gerald Baum accepted a position as medical director of the Israel Lung Association in Tel Aviv. In 1997, the clinic was assigned to be the institution responsible for care of all aspects of tuberculosis control in the Tel Aviv area (pop. 2 million). Gerald and his colleagues immersed themselves in the care of patients with tuberculosis and administration of preventive therapy. Treatment results, he notes, have matched the best in the world. From his home in Givat Shmuel, Israel, he sends best wishes—"On Wisconsin!"

1955

Henry Anderson practiced family medicine for 35 years in Rockford, III., delivering babies for more than 30 of those years. Upon closing his practice in 1989, he joined SwedishAmerican...

Hospital, also in Rockford. For the next 14 years, he served as officer/administrator of the 400bed hospital and as medical staff liaison to the board of trustees. Anderson retired last year at age 80, after serving the medical profession for 49 years. He and his wife, Dorothy, have seven children and 14 grandchildren. The couple enjoys traveling to the Scandinavian countries and throughout Europe.

Marliese Lehtmets

completed her internship at Mercy Hospital in Buffalo, N.Y., in 1956, followed by obstetricsgynecology, residency, training, at. Philadelphia General Hospital.

After completing her residency in 1959, she entered private practice in Media, Penn. She practiced there until she retired. In 2004, she published Stories Stones Tell—a book that depicts, through photographs, war memorials and historical monuments commemorating the victims of communist oppression and deportation. She and her husband, Harry Lukk, have three children, two granddaughters and one grandson. She continues to travel back to her home country of Estonia.

Sonja Williams completed her residency training in psychiatry at Wisconsin General Hospital in Madison in 1960. After three years on staff at the Mendota State Hospital, she joined the staff at the Veterans Administration (VA) Medical Center in Minneapolis. During her 37 years with the VA, she held a variety of clinical, administrative and teaching positions—in Minneapolis and at the VA Medical Center in Palo Alto, Calif. Sharetired in 2000 Sharbas twow

thauditiers: a professor at thanvard University and a senior scientific analyst with Cincinnati Children's Hospital Medical Center. Sonja's interests include genealogy, music, art history, literature and travel.

1960

Roger Cass, clinical professor of medicine, was recently named master clinician at the University of Rochester in New York. Active in teaching medical students, he practices internal medicine and consults with patients with rheumatism. In addition to his professional schedule, he notes that he holds a night job-piano player for his band.



1969

Rodney Parry has been appointed dean of the University of South Dakota (USD) School of Medicine and Health Sciences and vice president for health affairs. Having served as acting dean since spring of 2004, he accepted his appointment to dean by the South Dakota Board of Regents in May 2005. Since 1987, he has been a full professor of medicine at USD. Prior to this appointment, he served as a major in the U.S. Army Department of Medicine.

1977_

Warren Procci has been re-elected to a second term as treasurer of the American Psychoanalytic Association, effective June 2005. He continues to serve as a member of the board of trustees and the executive committee of Wagner College in Staten Island, N.Y.

1981

Intermountain Health Care in Salt Lake City, Utah, has appointed Marc Williams director of its new Clinical Genetics Institute, and Janet, his spouse, as a supervising genetic counselor of the same institute.

His responsibility as director is to evaluate all aspects of genetic care delivery in a large integrated healthcare system. In his free time, Marc plays trombone in the Orchestra of Sandy City and sings in the Utah Symphony Chorus. He and Janet have two daughters, Alyson and Christiana.

1985

Peter Emanuel has been named acting director of the Comprehensive Cancer Center at the University of Alabama at Birmingham (UAB). He oversees 250 Cancer Center faculty members and nearly \$100 million annually in research grants and contracts. He is a professor in the Department of Medicine with secondary appointments in the Department of Genetics and the Department of Biochemistry and Molecular Genetics. In addition to serving as acting director, he is deputy director of the Division of Hematology/ Oncology. He recently was chosen to be the new editor-in-

chief of The Hematologist: ASH, News and Reports. Peter has been internationally recognized for his pioneering research on a rare pediatric leukemia called juvenile myelomonocytic leukemia. He and his wife, Carla, have three teenage children: Jennifer, Ben and Abby.

1989

In March 2005, Christopher Capelli began a new position at the M.D. Anderson Cancer Center in Houston, Texas, as vice president of technology transfer. His wife, Mary Io, and his two sons, John and Joe, joined him at their new address (3826 Swarthmore St.) the end of May.



1994

Christopher Smith, a general and colorectal surgeon, recently was appointed to the medical staff of St. Joseph Regional Medical Center in Milwaukee. He previously practiced surgery in Bangor, Maine, and at St. Luke's Medical Center in Milwaukee. He is certified as a diplomate of the American Board of Surgery and the American Board of Colon and Rectal Surgery. Before returning to the Badger State, he completed a fellowship in colon and rectal surgery from Saint Louis University in Missouri and residency training from the University of Tennessee in Memphis.



1997

Tim Jessick practices family medicine and also serves as medical director at the Community Home Health and Hospice in Kelso, Wash. He and his wife, Tina, live with son Garett and daughter Madelyn. All the Jessicks are big Badger fans, as can be seen in the picture above. Madelyn displays Big Red.

Rachel Reitan of Irvine, Calif., appeared on the "Dr. Phil Show" on March 31, 2005, as an expert on the subject of women over age 50 who are having babies.

Our apologies

In our last issue, we mistakenly identified **Nicolette Weisensel**, **MD** '**00**, as Karen Weisensel. She recently joined the eating disorders medical staff at Rogers Memorial Hospital in Oconomowoc, Wisconsin. This full-time position provides her the opportunity to work with leaders in the fields of eating disorders, obsessive-compulsive disorder and anxiety disorders.

We incorrectly identified titles for **Drs. Ross Levine** and **George Newman**. Levine, of the Class of '78, is associate professor of neurology, radiology and kinesiology. Newman is visiting professor of neurology and radiology.

Finally, we provided an incomplete e-mail address for **Eugene Weston**. The complete address is pilot-geno@worldnet.att.net.

In Memoriam

Merne Asplund '52

February 10, 2005 Bloomer, Wisconsin

Robert Bugarin '85

Milwaukee, Wisconsin

George F. Crikelair '44

February 24, 2005 Darien, Connecticut

Robert G. Parker '48

March 31, 2005
Los Angeles, California
Dr. Parker was a pioneer in the field of radiation
oncology. The Wisconsin Medical Alumni Association
awarded him the Citation Award in 1990.

Hugh D. Riordan '57

January 7, 2005 Wichita, Kansas

Dr. Riordan was an "iconoclastic physician" who emphasized the link between nutrition and health decades before the concept became mainstream. He founded the Center for the Improvement of Human Functioning.

Bernhardt E. Stein '61

December 6, 2004 Tuscon, Arizona

Gordon J. Strewler '43

May 1, 2005 Franklin, North Carolina

Dr. Strewler began his neurosurgical private practice in Duluth, Minneosta, and dedicated a portion of his practice to pro bono services for the uninsured. He founded the medical school at the University of Minnesota-Duluth.

William H. Whiting '45

January 30, 2005 Anna, Illinois



Pressing On: 1966-1976



To commemorate the coming 50th anniversary of the Wisconsin Medical Alumni Association (WMAA), former WMAA director Ralph Hawley is penning a decade-by-decade history of the association. This is his account of the period between 1966 and 1976.

by Ralph Hawley

The period following the tumultuous first decade of the Wisconsin Medical Alumni Association (WMAA) was anything but placid and uneventful. Societal forces in the late 1960s and early 1970s demanded greater availability of healthcare and more effective treatments, even cures, for major diseases.

The U.S. Congress responded to the demands with large appropriations for biomedical research and training of additional scientists. Medical schools were encouraged to compete for grant funds to increase enrollment and accelerate the production of physicians. Funds for construction of research and educational buildings were also available. For the University of Wisconsin Medical School to remain close to its peer institutions, it was mandatory that it enter this competition.

Following the firing of Dean John Z. Bowers in 1961, two respected and distinguished senior faculty members each served a term as acting dean, and each acted forcefully to do more than simply "mark time" as chief executive.

Philip P. Cohen, MD '38, served from 1961 to 1969, and James F. Crow, PhD, from 1963 until 1965. Both helped to bank the fires of conflict paving the way for the appointment of a full-fledged dean.

In 1965, neurologist Peter L. Eichman, MD, was appointed dean after serving as director of the Student Health Services. He called upon the WMAA to help in reuniting the alumni and strengthening the school, particularly in improving town-gown relations and communicating positive images to legislators and supporters.

New Awards

The practice of creating significant awards to honor different components of the Medical School alumni family continued. New awards were established for outstanding teaching by a resident and for excellence as a preceptor.

John Griest, MD, received the first resident teaching award (he later became a UW professor of psychiatry) and Merritt Jones, MD, of Wausau, Wisconsin, received the initial Max Fox Award. The latter award was created to honor volunteer doctors in the school's Preceptorship Program, in which local physicians across the state open their offices and clinics to fourth-year medical students. The Fox Award was supported by gifts from Professor Herman Shapiro, MD '32, in honor of Max Fox, MD, of Milwaukee. Dr. Fox was a beloved and somewhat eccentric preceptor who was known to buy clothing for needy students and to give preceptees tickets to a burlesque theater. The Fox Awards, still given today, are presented in the recipient's home community in the presence of colleagues and family.

A valuable historical item dealing with the preceptorship program exists because of the foresight of Sigurd Sivertson, MD '47, a former preceptor and director of the program. He arranged for the production of a 15-minute film in which Dean William S. Middleton discussed the program. The film was deposited in the university archives.

In 1971, Mabel Masten, MD, professor emerita of neuropsychiatry, became the first woman to receive the Emeritus Faculty Award. Female members were uncommon on the WMAA board of directors, and it would not be until 1979 that Dorothy Betlach,



A 1970 award ceremony in Milwaukee honored Dr. Max Fox and initiated the Max Fox Preceptorship Awards. Still given today, the awards recognize volunteer doctors in the program. From left: Drs. William Middleton, Max Fox and Richard Wasserburger, and Dean Peter Eichman.

MD '46, would become the first female president of the association.

Supporting Students

A number of measures were implemented to improve the lot of students and to make them more aware of the WMAA. Before the Bardeen Building was built, there was no space for student amenities. A small beginning was made with alumni funds providing for furniture and a ping-pong table in the Bardeen basement locker room. In addition, the WMAA began to allocate funds each year to the Medical Student Association for use at its discretion.

A medical student also was appointed to the *Quarterly* editorial board and the senior class president contributed a column to each issue of the magazine. For candid, pull-no-punches commentary on student perceptions of school shortcomings, they were fascinating reading. The *Quarterly* was mailed to all students and magazine subscriptions were offered to the parents of students.

To include students even more, the WMAA invited one to serve on its board—Jan Weber of the Class of 1974 was the first. And annual meetings were begun between the WMAA board and student representatives.

During the early '70s, the defunct Phi Chi medical fraternity presented its building on Johnson Street to the WMAA to provide low-cost student housing. Inevitably, it became the MASH (Medical Alumni Student House) house. Low-cost housing was provided for 22 to 24 students each year until the building was sold in the mid-nineties because of concerns over liability issues. The house was co-ed and served as a popular gathering place for groups of medical students and student organizations.

Medical students were not isolated from the social activism stimulated by the Vietnam War. Although most demonstrations occurred on central campus, the 1300 block of University Avenue, close to the Medical School and Wisconsin General Hospital, was at times the scene of demonstrations resulting in



In the early 1970s, the Medical School acquired a building on Johnson Street that was transformed into low-cost student housing for 22 to 24 medical students. The MASH house (Medical Alumni Student House) was a popular gathering place. From left: Sigurd Sivertson, Paul Apyan, unknown, William Russell.

confrontations with the National Guard and police. Medical students gave first aid to demonstrators suffering from tear gas distress or contusions. In the fall of 1970, a bomb blast in Sterling Hall killed a graduate student and blew out windows in the cancer wing just across Charter Street from the blast. A detailed report in the *Quarterly* elicited a number of critical letters suggesting that reporting on such matters was not appropriate for the publication.

UW Medical School students were very clear in demonstrating their social consciousness in other areas. Dean Peter Eichman reported that alumni gifts had been used to remodel the "Blue Bus" as a mobile drug information center, staffed in part by students. The vehicle also was used to bring medical care to migrant workers in central Wisconsin through the efforts of faculty, residents and students.

Students also participated in health fairs in low-income areas of Madison. A second-year student initiative involved efforts at the high school level to recruit more medical students from minority and disadvantaged backgrounds. An international program in Nicaragua also was supported by alumni gifts from faculty, residents and students.

Expanding into New Areas

Alumni activity was evident on many other fronts. The Life Membership Program was begun, annual meetings between the board of directors and the dean's staff were started and the WMAA subsidized the publication of Dr. William Middleton's essays titled *Values in Modern Medicine*. The 1935 class paid for the publication costs and presented the books to the association for sale. The books were sold by the WMAA, with all proceeds for its benefit.

Philip Cohen and Dean Eichman were successful in having UW artist-in-residence Aaron Bohrod complete an oil painting that included two dozen symbols meaningful to the Medical School. He gave the painting to the association and supervised the production of true-color prints. Copies

still may be purchased from the WMAA office.

In 1966, alumni-faculty retreat seminars were initiated in conjunction with the Continuing Medical Education Department. The first retreat was held in a skiing venue while all subsequent offerings were cruises. The program was terminated after nearly 10 years despite favorable responses from participants.

In 1975, the WMAA board of directors agreed to mount a campaign to raise \$1 million for a learning center in the new Clinical Sciences Center on the west side of campus. The center, which never came to fruition, was to be an entire floor atop one of the modules that would provide students study space and learning aids.

The WMAA also cooperated with the school's Office of Educational Resources and Research in conducting a study of graduates' practice locations and specialty choices. The study was designed to determine factors influencing specialty choice. In addition, a new Alumni Directory was completed using data processing under the direction of administrative staff member Rollyn Reiahl.

In the 1970s, the WMAA and Medical School administration offices were relocated for a second time. The first move, in the early 1960s, placed the programs at the southeast corner of University Avenue and Randall Avenue—above a Rennebohm's drugstore. The move in the 1970s gave us excellent space in the 14-story Wisconsin Alumni Research Foundation (WARF) Building at the corner of Walnut Street and Observatory Drive. However, the space was convenient for neither students nor faculty.

Growing Pains

During the 1970s, the size and complexity of the faculty were changing greatly. New departments came into being in rapid succession: ophthalmology (previously a division of surgery), neurophysiology, human oncology, rehabilitation medicine and family medicine. The latter was unique in being funded by a line item budget appropriation—perhaps indicative of an ominous lack of trust on the part of the State Legislature.

The new Radiation Therapy Program included radiation biologists and medical physicists. Neurology recruited neurochemists and neuropsychologists. Ethicists, computer scientists, geneticists and faculty members from many arcane disciplines were also recruited.

The faculty competed successfully for National Institutes of Health (NIH) career professorships and career development awards as well as Markle scholarships and other prestigious awards. In 1975, UW Medical School oncology professor Howard Temin received the Nobel Prize. As the faculty expanded, the number of residents, graduate students and fellows inevitably rose. The small, familial ambience that once characterized the school was disappearing rapidly. Such dramatic changes were not embraced by all alumni.

New research buildings followed occupancy of the Medical Science Center in 1960. In 1962, the Genetics Building was occupied. In 1963, the Kennedy Laboratories for Mental Retardation were dedicated. One year later, the new 11-story McArdle Laboratory for Cancer Research was completed, and in 1967 the William S. Middleton Medical Library was dedicated.

In 1967, faculty approved a new curriculum. The second year was organized around organ systems and the fourth year was predominately elective. Pressures to increase enrollment were thwarted by shortages of space. In 1969, the Medical School reluctantly turned away qualified applicants and accepted only 129 students. In 1972, the Independent Study Program (ISP) was implemented, enabling the school to admit 30 additional students within existing space constraints.

The ISP also provided a vehicle for non-traditional students to complete the first two years of medical school. These included single mothers, individuals running a small business and even a Green Bay Packer—Malcolm Snider, of the Class of 1978. The program was terminated after approximately 20 years because the faculty believed that all students should have access to the study aids and support services provided to ISP students.

They Made a Difference

The forward thrust of the WMAA continued during its second decade thanks to the vision and efforts of another group of dedicated presidents. Also important were devoted, caring and eminently approachable individuals who did much to make the experience of students less stressful and more enjoyable. Particularly notable was Registrar Isabelle Peterson and her staff, especially Florence Waisman.

The leadership style of each WMAA president was unique, but each brought to the position a high degree of enthusiasm and commitment. Brief thoughts on each WMAA president follow.



Registrar Isabelle Peterson was beloved by many, including UW System Regent Ben Lawton (left), MD '46, and husband Herb.

1967-1968

Psychiatrist **Bernard Litson**, **MD** '49, used humor with great success as he faced each crisis with equanimity, effectively avoiding serious conflicts.

1968-1969

Cardiologist Richard Wasserburger, MD '46, was the second member of his class to serve as president. With the able assistance of his spouse, Helen, he served with distinction, despite a persistent medical problem. As a dedicated disciple of Dean Middleton, he was determined to promote and reward bedside teaching.

1969-1970

Charles Benkendorf, MD, of Green Bay was the first former resident (radiology) to serve as president. His efforts to increase WMAA membership by former house staff were extensive. Unfortunately, his tragic early death cut short a promising career.

1970-1971

The contributions of hematologist Robert Schilling, MD '43, to both the school and the association are unmatched. His decades of service to

OUR SECOND DECADE: 1966-1976

the WMAA include membership on the planning committee, a term as president, and the production of many thoughtful, provocative articles for the *Quarterly*.

1971-1972

John R. Petersen, MD '54, brought to the presidency invaluable administrative experience gained in his role of associate dean at the Medical College of Wisconsin and medical director of the Milwaukee County institution. He charted a course for the WMAA that lifted its sights and dedicated it to lofty goals. He championed the project to raise \$1 million for a learning center in the Clinical Sciences Center, planned for construction in the late 70s.

1972-1973

Louis Bernhardt, MD '63, was appointed assistant dean at the Medical School at an early age. He resigned the position on a matter of principle and began practicing thoracic surgery at Madison Community Hospital. He presided with youthful energy and buoyancy, providing enthusiastic support for many projects.

1973-1974

Loron Thurwachter followed long service as 1945 Class Representative with numerous committee assignments and, finally, a term as association president. He championed programs designed to make the WMAA truly a national organization.

1974 - 1975

"General" G. Stanley Custer, MD
'42, preached the virtue of moving deliberately following careful analysis and a well-developed action plan. He strongly urged that the WMAA support

preparation of an updated history of the Medical School.

1975-1976

Roger Bender graduated from Medical School with the accelerated wartime Class of 1943. His role as preceptor sensitized him to the problems and needs of students. Programs supporting and rewarding teaching excellence were his priority. Every presidential communication he wrote was signed "Love."

1976-1977

Hanno Mayer was the third member of the Class of 1946 to serve as WMAA president. He was always cognizant of student needs. He believed that students were the future of the WMAA, and as such they should be groomed and prepared to be leaders of the association.

The exercise of writing these recollections has brought to mind the large number of alumni who have contributed so significantly to the excellence of the Medical School. Space constraints preclude a comprehensive listing, but the few examples below will communicate something of the variety and magnitude of those contributions.

Philip P. Cohen, MD '38, served as chairman of physiological chemistry and acting dean while maintaining an enviable record as a scientific investigator. I enjoyed facing him across a poker table.

Otto A. Mortensen, MD '29, was chairman of anatomy and associate dean. He touched the lives of countless students and was truly our "Mr. Chips."

Helen Dickie, MD '37, professor of medicine, was an outstanding clinician-investigator in pulmonary disease. What are the odds that, in the 1940s, twin



Harold Rusch, MD '33, creator of the McArdle Laboratory and the Comprehensive Cancer Center, was the prototypical Wisconsin leader.

sisters Ruth and Helen Dickie from rural Sauk County, Wisconsin, would both become UW Medical School professors?

Frederick Mohs, MD '34, developed the Mohs technique for treatment of skin cancer, which is known worldwide.

Harry Waisman, MD '47, was honored for his mental retardation research when the multidisciplinary Waisman Center on campus was named in his honor.

All of these individuals made noteworthy contributions, but, to me, **Harold Rusch**, **MD** '33, was the prototypical leader imbued with the values learned in small-town Wisconsin.

Rusch led and nurtured the McArdle Laboratory for Cancer Research for decades. He recruited a staff of uncompromising excellence and, against great odds, he was successful in securing the NIH grant that made the Comprehensive Cancer Center possible. He was the center's first director. It is particularly appropriate that the Medical School and Wisconsin Medical Alumni Association this year created a Harold Rusch Award for research accomplishment.

We Welcome Your Input

ave you read something in these pages that stimulates you to respond? If so, we'd like to hear from you. With the following letter to Dean Philip Farrell, we begin publishing your comments. When possible, send your correspondences to the editor, Dian Land, in care of WMAA, Health Sciences Learning Center, 750 Highland Avenue, Madison, Wisconsin 53705. We reserve the right to edit all submissions for clarity and length.

Dear Dean Farrell.

Thank you for having the courage to admit in your message appearing in the winter 2005 Quarterly that "physicians today are every bit as effective—and perhaps healthier and happier—as those of generations past."

As a developmental-behavioral pediatrician and faculty member at Children's Hospital in Columbus, Ohio,

I'm always modeling a balance between work and home for physicians and medical students. I'm a baby boomer with a Generation X mentality! Hands down, one of the most rewarding things in my life has been to be a father to our two sons.

Mike Thomasgard, MD, Class of '86

CME Conferences—Late Summer and Fall 2005

AUGUST 2 - 6

3rd Annual Comprehensive Pain Board Review Symposium

SEPTEMBER 18 - 20

7th International Conference on Dose, Time, and Fractionation, Madison

SEPTEMBER 23

Podiatric Medical Conference, Madison

SEPTEMBER 23

Mammography Update 2005, Madison

SEPTEMBER 30 - OCTOBER 1

Psychiatric Update, Madison

OCTOBER 6 - 7

Clinical Pearls in Geriatrics, Edgewater

OCTOBER 12 - 15

The Anatomy, Diagnosis, and Treatment of Chronic Myofascial Pain with Prolotherapy, Madison

OCTOBER 14

Focus on Rheumatology, Madison

OCTOBER 21 - 22

30th Nuclear Cardiology Symposium, Midwest Airline Center, Milwaukee

OCTOBER 21 - 22

2005 Uehling Lectures, Monona Terrace

WMAA Golf Outing



FRIDAY, SEPTEMBER 30, 2005

Wausau Country Club (WCC) Wausau, Wisconsin

Join your alumni, friends and colleagues for a fun day on the beautiful WCC course!

10:30 a.m.: Shotgun start

10:30 a.m.-3:30 p.m.: Golf outing

3:30-5 p.m.: Social hour and awards

For additional information, call the WMAA office at 608-263-4915 or e-mail kspeters@wisc.edu

Class Representatives

Alex S. Tucker Class of 1975

TYPE OF PRACTICE:Family Practice



I recall autopsy
pathology lectures by Dr.
Harrington. The junior skits. The
performance of Urethra Lindgren
and the Incontinents at the
Alumni Banquet.

HOBBIES/INTERESTS: Fishing on Lake Michigan, tending to my tuling and rose garden.

OTHER NEWS: I recently rejoined Columbia St. Mary's Hospitals in Milwaukee and I am busy with my practice and building a new house.

FACULTY MEMBER REMEMBERED THE MOST: |

remember James Pettersen, who was both chair of admissions (no draft) and gross anatomy lecturer. Dr. William S. Middleton's medical rounds at the V.A. Hospital also were memorable.

MESSAGE TO CLASSMATES:

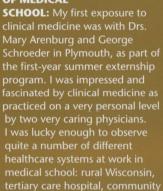
Please let us hear from you. We've got a reat reunion planned for Homecoming Weekend, October 21-22.

PLANS FOR A REUNION: Any suggestions for a "Friday night activity" on October 21, such as family gatherings, lectures, music or dancing.

John S. Hokanson Class of 1990

TYPE OF PRACTICE:Pediatric
Cardiology

FONDEST MEMORY OF MEDICAL



HOBBIES/INTERESTS: What free time available is usually spent with our children and their activities.

later took a job with the English

hospital, Indian Health Service,

and the VA. In residency and

Navajo reservation, spent a

national health service.

OTHER NEWS: I seem to be a habitual government employee, working for the University of Wisconsin, the British national health service, the University of Minnesota and now UW again.

FACULTY MEMBER REMEMBERED THE MOST:

Bob Schilling. He was a voice of experience and reason in what was a somewhat disorienting array of seemingly unrelated facts

MESSAGE TO CLASSMATES: Best wishes and good luck.

PLANS FOR A REUNION: Our 15- year reunion will be held in conjunction with Homecoming Weekend, October 21 and 22. Details forthcoming.

Harvey Wichman Class of 1965

TYPE OF PRACTICE:Orthopedic
Surgery

FONDEST MEMORY OF MEDICAL

SCHOOL: My association with Drs. Thomas, Odland and Gredlen, orthopedists in Janesville, Wisconsin. They enjoyed their practice and taught with enthusiasm.

HOBBIES/INTERESTS: Skiing, fishing and attempts at gdfi (the frustration is still greater than enjoyment).

OTHER NEWS: My oldest son is in practice in my group. My youngest son is a Med IV at UW Medical School and is planning to follow the same path.

FACULTY MEMBER REMEMBERED THE MOST: Otto Mortensen—he was a wonderful, kind man who loved to teach. He brought out the best in his

MESSAGE TO CLASSMATES: Don't forget the significance of our medical education in our professional lives—and stay attached through our alumni

PLANS FOR A REUNION: We will have our 40th reunion during Homecoming Weekend. During that time we will renew old friendships, recall fond memories and see our new school.

Thomas J. Weigel Class of 1995

TYPE OF PRACTICE: I'm a psychiatrist at McLean Hospital's Klarman Eating Disorders



Center, and an instructor at Harvard Medical School. I have a private psychiatry practice in Boston.

FONDEST MEMORY OF MEDICAL SCHOOL: I lived with UW medical students Larry Ionaus. Dave Kunstman and Matt Connolly. One day Larry and I opted to golf rather than attend lectures. When Dave came home, he said we'd missed "the most amazing lecture" on pharmacology. "You guys should have been there, because that stuff is going to be on the exam." Matt then walked in saying, "Wow, that useless lecture was a waste of time."

HOBBIES/INTERESTS: Golf, skiing, running and rock concerts.

OTHER NEWS: My girlfriend, Sarah Hall, and I have been dating for a year and a half.

FACULTY MEMBER REMEMBERED THE MOST:

Dean Laurence Marton. He had a vision of an expanded medical training campus and new programs. He was not appreciated by all, and this led to his demise. But the new buildings near UW Hospital and the status of UW Medical School nationally indicate the strong and permanent impact he had.

PLANS FOR A REUNION: Call or e-mail your old medical school friends and tell them you're going to the reunion and demand that they show up too! We'll gather on Friday night at the Memorial Union Terrace, tailgate before the football game on Saturday morning then meet that evening at State Street Brats.

"It's About Us"



Christopher Larson, MD '75 Editorial Board Chair

This past Alumni
Weekend, I visited the
Health Sciences Learning
Center on the west campus.
The structure is even grander
than artist renderings or
Quarterly photos can show,
and I recommend that you
see for yourself this beautiful,
now completed structure.

In a second-floor hallway, between the learning communities and the lab rooms, I was drawn to a gallery of photographs. The framed Class of 1975 photo hangs in its place among the others. This year, the Class of '75, my class, celebrates 30 years with a fall reunion.

During my terms as a member of the Wisconsin Medical Alumni Association (WMAA) board and as its president, I have seen many different styles and approaches to the reunion celebration. Some classes in particular come to mind.

The Class of '83, for example, was the first to celebrate a fall reunion in conjunction with a football game weekend. Attendance was outstanding. I observed a group that, unquestionably, was having a great time. Dr. Sue Isensee, one of three class representatives, gave credit for the success to personal communication between a nucleus of classmates and potential attendees. Dr. Brian Smith, another representative, provided early organization, keeping people connected and building excitement about the event.

Dr. Isensee also credits Dr. Barry Lessin of Chicago, whom I've learned draws experience from organizing Toga Parties on campus as an undergraduate. Sue and her committee relied largely on personal telephone calls, with e-mails and postal mailings to remind classmates of the four very important years they spent together at UW Medical School. This was encouragement enough for many to return to campus, to reminisce and have fun together. Sue's message to her classmates was simply, "This is about us."

I also distinctly recall when the Class of 1951 celebrated its 50th reunion. For them, it seemed like a gathering of old friends rather than a group with remotely shared medical school experiences. They were up-to-date on the activities and lives of classmates and their families before the event even started.

Dr. Sam Perlson, who is remembered as an active board member and class representative for the Class of 1951, shared his thoughts with me some years ago on

"It's about us in a larger sense: as a class, as proud graduates of this institution and as members of our chosen profession."

how and why his class stayed as close and enjoyed each other as much as they did. For them, staying in touch was something that started without much effort soon after graduation. They wrote class letters as a matter of routine and used WMAA class newsletters to stay current with the activities of the association and the school.

The Class of 1980 has Dr. Pat McBride as its class representative. He is the new dean of students at UW Medical School and in this role he has the advantage of living in Madison and being part of many of the events and student activities at the school. His knowledge of

recent and past happenings and personalities has enabled him to stir his classmates' memories, driving their desire to return for CME, sponsored events and, especially, for their reunion.

The Class of '75 is learning from these examples. Class representatives play a very important role in the success of a reunion. Balloting for our class indicated an interest in a fall gathering on a football weekend. Dr. Alex Tucker, our class representative, has already started preparing. There will be a Friday dinner and a Saturday tailgate followed by the UW-Purdue football game.

I sincerely look forward to seeing my classmates. I also look forward to continuing our discussions about making a gift from the Class of 1975 to the new medical school. This would be a tribute to the success we have attained and to those who have benefited from our efforts.

It is about us. It's about us in a larger sense: as a class, as proud graduates of this institution and as members of our chosen profession. But if it is really going to be about us, then you need to be here. Make plans now to rejoin your class—whichever it may be—for an important and exciting reunion.

Calendar of

Events

SEPTEMBER 2005

Friday, September 9 **MIDDLETON SOCIETY EVENT**

Sunday, September 18 WHITE COAT CEREMONY 1 p.m. Memorial Union Theater

Friday, September 30 WMAA GOLF OUTING Wausau, Wisconsin

OCTOBER 2005

October 21-22

HOMECOMING WEEKEND

and Reunions for the classes of 1965, 1975, 1980, 1990, 1995, 2000

Friday, October 21

9-11 a.m.

Quarterly Editorial Board meeting

WMAA Board of Directors fall meeting

5:30-6 p.m.

Reception and Tours of the Health Sciences Learning Center

WMAA Presidents Dinner

Saturday, October 22

12 noon WMAA tailgate party, Union South 2:30 pm Wisconsin v. Purdue game

NOVEMBER 2005

Friday, November 4

ALPHA OMEGA ALPHA BANQUET

For additional information about these events, please visit the UWMAA website at www.med.wisc.edu/alumni/



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 location. 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



Ebling Library staffer Michael Venner captured the Health Sciences Learning Center and its crystal-clear reflection on an early summer morning.

Wisconsin Medical Alumni Association Health Sciences Learning Center 750 Highland Avenue Madison, WI 53705 Nonprofit Org. U.S. Postage PAID Madison, WI Permit No. 2117