

# Rochester

## MEDICINE



**The Taubman  
Approach:**

**Orchestrating  
URMC's transition  
to a new era  
in medicine**



**O**n January 1 I became senior vice president for Health Sciences and CEO of the University of Rochester Medical Center. The occasion gave me cause to reflect on my experience here, first as chief of Cardiology in 2003.



A handwritten signature in dark ink that reads "Mark B. Taubman". The signature is fluid and cursive, with the first name "Mark" being the most prominent.

Mark B. Taubman, MD

CEO, University of Rochester Medical Center  
Dean, School of Medicine and Dentistry  
Senior Vice President for Health Sciences

In 2007, I was appointed chair of Medicine. Then, on the morning after Brad Berk's 2009 bicycling accident, I was asked to become acting CEO until his triumphant return nine months later. In 2010, I took over as dean of the medical school, a position I am retaining alongside my new roles.

It has been a very challenging and rewarding journey thus far, particularly during the past five years. This has been a time of disruption for all of the nation's academic medical centers. The rapid technological advancements and new approaches to health care in America have compelled us to rethink who we are, what we do, and how we get it done. At the URM, we have devised thoughtful new strategies to continue fulfilling all of our missions: clinical care, research, education, and community engagement. I am grateful for everything Brad has done to get us here. Now, as CEO, I will be putting these strategic plans into motion.

It is so thrilling to be part of this new frontier in medicine, and I am confident we will find our way. Not only do we have a great leadership team, we have at least four hundred and thirty-five reasons to get the job done right. That's how many students are currently working toward their medical degrees in the School of Medicine and Dentistry. We, along with other leaders in academic medicine across the country (many of whom came out of the SMD), want to hand them a health care system that works.

Our students are among my primary sources of inspiration; this issue of *Rochester Medicine* will show you why. We begin with *Research 101* and a visit to the department of Pediatrics, where Nina Piazza has been working on a project that could help reduce Rochester's alarming teen pregnancy rate. After that, we cross the street to the Saunders Research Building, where Patrick Asselin is sifting through data to uncover clues that will help us better understand concussions.

In *The App Man*, we meet Spencer Craven, who can teach nearly all of us a thing or two about using the iPad to be better learners – and caregivers. The article *Published* explains how Mica Esquenazi is bringing medical students from around the world together in one place, a burgeoning online medical student publishing group.

*When Students Teach* takes us to the Case Method Room, where Jessica Lindemann, an enrollee in the School of Medicine and Dentistry's Medical Education Pathway, is giving a lecture. The Pathway is arguably the most rigorous of its kind in the country. That's attractive to students like Lindemann, who want to be more than great doctors. They want to be great teachers too.

There are four hundred and thirty more stories like these in the SMD. Every one of our medical students is exceptionally smart, imaginative, and hopeful that he or she will make a difference in the world. As we tackle today's challenges, they help remind us how truly bright the future is.



OVER THE PAST TWO YEARS,  
I HAVE DISCOVERED A CURE FOR ONE OF  
MY PROFESSION'S MOST DREADED MALADIES:  
WRITER'S BLOCK.



Before this finding, I had fully accepted the notion that an occasional bout of frontal lobe malfunction was “normal” for us. We writers would often try to walk it off. Or, if we were at home when it hit, we might self-medicate with a glass of Chianti or a steaming cup of ginkgo biloba tea. So I confess, finding the antidote for writer's block was purely accidental.

Here's how it happened.

In January 2013, I became editor of *Rochester Medicine*. That was intended to be a career choice, not some sort of exploration into the sluggish neurons of a frustrated wordsmith. Unbeknownst to me, however, I was (literally) walking smack dab into the cure.

You see, the remedy for writer's block is classified as an Academic Medical Center. When combined, the practice, invention and instruction of medicine quickly wipe out the disease. This elixir packs an even bigger punch when taken with unprecedented health care reform, technological advancement, and a new CEO. The University of Rochester Medical Center is filled with far more great stories than a full staff of writers could tell in a lifetime.

I have had the pleasure of interviewing some phenomenal people here, including many SMD students and alumni – like David Nash and all of the future MDs featured in this issue of *Rochester Medicine*. This is a place full of leaders, good ideas, enthusiasm and compassion. No matter how you are connected to the URMCC, you know how special it is.

Therefore, it is not without a twinge of regret that I am leaving my post. I've been presented with one of those amazing opportunities I just couldn't turn down, even though a part of me wanted to. This is my last issue of *Rochester Medicine*. I am hopeful the cure I discovered here is a permanent one, but I'm stocking up on ginkgo biloba just in case.

Cheers,  
Julie

*Julie Philipp*  
Editor

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**Write to us!** *Rochester Medicine* welcomes letters from readers. The editor reserves the right to select letters for publication and to edit for style and space. Brief letters are encouraged.

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University of Rochester Medical Center  
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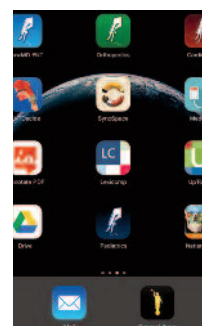


# Rochester

## MEDICINE

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Associate Vice President for Communications	Christopher DiFrancesco
Editor	Julie Philipp
Contributing Writers	Lori Barrette, Emily Boynton, Heather Hare, Mark Michaud, Leslie Orr, and Leslie White
Art Direction & Design	Mitchell Christensen
Photography	Antonino Barbagallo, Ken Huth

For questions or comments, contact:  
Dept. of Alumni Relations and Advancement  
for the School of Medicine and Dentistry  
300 East River Road, Rochester, NY 14627  
Phone 800.333.4428 585.273.5954  
Fax 585.461.2081

Comments on this issue, e-mail:  
[RochesterMedicineMagazine@urmc.rochester.edu](mailto:RochesterMedicineMagazine@urmc.rochester.edu)  
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**There is a new addition to the medical center landscape.**

It's a twenty-one-foot-long sculpture titled *A Dream of Two Snakes (DNA)*. Created by New York City sculptor Ilan Averbuch, the work is made of steel, granite, and glass. The sculpture pays homage to the double helix nature of DNA, drawing on a story about a dream in which one of the scientists credited with discovering DNA reportedly saw two intertwining snakes: this provided a clue to the molecule's structure. Donated by alumnus Martin E. Messinger (BA '49), the sculpture has found a fitting home outside the SMD, where the Double Helix curriculum intertwines basic science and clinical medicine across all four years of medical school. Meet the artist at [www.RochesterMedicine.urmc.edu](http://www.RochesterMedicine.urmc.edu)









# Wilmot Cancer Center scientist earns Exceptional Investigator award

Michelle C. Janelsins, PhD, MPH, of Strong Memorial's Wilmot Cancer Institute, has received an NIH Director's New Innovator Award, the highest honor conferred by the National Institutes of Health to young investigators.

Janelsins is one of forty-nine scientists nationwide to receive a 2014 New Innovator Award, a five-year grant for \$2.3 million. She trained as a brain biologist and studied basic science related to Alzheimer's disease before transitioning into cancer research after seeing close family and friends struggle with the disease. Now she specializes in the investigation of chemo-brain, a collection of symptoms associated with chemotherapy that includes forgetfulness, foggy, lack of concentration, and difficulty with multitasking.

The highly competitive New Innovator program supports creative projects with high risk but high reward. Janelsins is bringing a new approach to cancer-control research by starting with bench science, rather than the more typical route of focusing on clinical studies with patient volunteers.

Her main hypothesis is that inflammation may fuel cognitive impairment in cancer patients. But it's not clear what drives the inflammatory response in

relation to brain function and neurotoxicity, making it critical to first investigate that information in animal models.

"Understanding the mechanisms of chemotherapy-related cognitive problems will allow us to target biologically relevant pathways so that we can develop treatments we are confident about," Janelsins said. "Although animal studies are not equivalent to human studies, they provide valuable information and have implications for the human condition."

Janelsins also would like to be able to predict which patients are most likely to suffer from severe chemo-brain, based on pre-chemotherapy inflammatory markers and other factors in their blood.

"It is our hope that predictive markers of chemotherapy toxicity may also help us to tailor a treatment plan for each patient," she said. "For example, related to exercise, the ultimate goal is to be able to tell each patient exactly what level might help them deal with cognitive problems — a daily walk, or some form of exercise three times a week, or maybe to be as active as possible around the house," Janelsins said.



"Understanding the mechanisms of chemotherapy-related cognitive problems will allow us to target biologically relevant pathways so that we can develop treatments we are confident about."

— Michelle C. Janelsins, PhD, MPH



## URMC launching new translational PhD track

A new PhD track at the University of Rochester Medical Center will train scientists to think small and big at the same time.

Curing infectious diseases requires extensive knowledge of the microscopic cells that make up the body, but in order to ensure that people embrace those cures, scientists also need to possess a deep understanding of the massive, seven-billion-strong human population.

Traditionally, these are two separate fields. The new track, which is within the Translational Biomedical Science doctorate, is called Infection and Immunity: From Molecules to Populations (IIMP) and will develop

scholars who are adept with both bench research and population health.

"We have a strong pipeline for basic scientists, and we train many physicians and doctoral students in population health science," said Nancy M. Bennett, MD, co-director of the URMC's Clinical and Translational Science Institute, where the new program will be housed.

"Great scientists of tomorrow are going to have to do both, and to participate on teams including scientists at both ends of the spectrum of research."

IIMP, which is supported by \$2.5 million from the Burroughs Wellcome Fund, aims to bridge the gap between basic science advances and health improvements for the community at large.



## U of R in top ten

The University of Rochester has been identified by the journal *Nature Biotechnology* as one of the top ten universities in the nation for the impact of its life sciences research.

"This recognition reflects not only the University's success in attracting federal research funding, but our ability to translate this research into new ideas and technologies that stimulate economic activity and will ultimately improve lives," says Stephen Dewhurst, PhD, vice dean for Research at the University of Rochester School of Medicine and Dentistry.

"It is a testament to the exceptional quality of our scientists and more evidence that our faculty continues to outperform their peers when it comes to the impact of our scientific innovation."

Using data from 2013, the journal ranked universities based on their research funding and technology commercialization activities. The data included the number of licenses, licensing/royalty revenue, the number of startups, and the number of awards and total funding from the National Institutes of Health. According to the report, the University of Rochester ranked eighth in the nation.

The other universities in the top ten are the University of California system, the University of Washington, Columbia University, the University of Minnesota, New York University, Wake Forest University, Northwestern University, the University of Massachusetts, and Princeton University.

*Nature Biotechnology* is part of Nature Publishing Group. The organization's flagship publication, *Nature*, founded in 1869, is recognized as one of the world's leading scientific journals.



## Susan H. McDaniel, PhD, elected APA president

Susan H. McDaniel, PhD, director of the URM's Institute for the Family, has been elected 2016 president of the American Psychological Association (APA). The APA is the largest professional organization representing psychology in the United States.

In the coming year, McDaniel will be laying the groundwork for major initiatives she plans to undertake as APA president. Her main focus will be furthering the integration of psychology into all areas of health care, eliminating the distinction between mental and physical care.

"We have separated the body and the mind as if they are distinct entities and

don't have a major influence on each other," says McDaniel, who is also Dr. Laurie Sands Distinguished Professor of Families and Health and associate chair of Family Medicine. "They are one hundred percent connected."

"As one of our leading faculty members, Dr. McDaniel's breadth of knowledge and experience has been critical to the development of our patient- and family-centered care model. Being selected as APA president demonstrates her outstanding national reputation as well," says Mark B. Taubman, MD, CEO of the URM and dean of the School of Medicine and Dentistry.

"This is another sign the University of Rochester is leading the way as the nation transforms its health care system."





## URMC names new chief financial officer

The URMC has named David A. Kirshner as chief financial officer. Kirshner succeeds Michael Goonan, who retired in December.

Bringing more than three decades of experience in public accounting, hospital financial management, and CFO positions in academic medicine, Kirshner is credited with engineering a remarkable financial turnaround for Boston Children's Hospital, the primary pediatric teaching affiliate of Harvard Medical School.

"David is an extraordinarily talented chief financial officer, whose work at the Boston Children's Hospital was striking for its positive impact and sensitivity to employees," says University of Rochester president Joel Seligman. "I believe David will prove to be a great successor to Mike,

who has done an outstanding job as CFO at the Medical Center for thirty years."

Kirshner most recently served as vice president of Corporate and Business Development for Valence Health, a long-established provider of value-based care services and solutions for hospitals and health systems. He was also the founding director and senior CFO consultant to Warbird Consulting Partners in Atlanta, which advises academic medical centers on research enterprise strategy, infrastructure, and business capabilities.

Prior to that, in fifteen years as Boston Children's senior vice president for Finance, CFO, and treasurer, he worked to improve credit ratings; develop institutional financial policies and governance to support research; and implement new financial information systems to improve forecasting; improve productivity and reduce operating costs for the \$1.3 billion operation.



## URMC researchers to develop LungMAP

Physicians know what a healthy human lung looks like, but researchers have never before created a comprehensive map that specifically measures lung development from birth through childhood.

Now, researchers at the University of Rochester Medical Center have launched a five-year effort to develop such a map. The project, called the Human Lung Molecular Atlas Program, or LungMAP, includes researchers from several other institutions and is supported by more than \$20 million from the National Institutes of Health, \$6.1 million of which was awarded to the URMC.

With a detailed map of human lung development, health care providers will be able to more readily identify children

who may be at risk for lung problems. For example, physicians know that infants who are born prematurely are more likely to develop emphysema or chronic obstructive pulmonary disease (COPD) in adulthood or older age.

"But we don't always know which ones, or how severe their complications will be," says Gloria Pryhuber, MD, professor of Pediatrics and Environmental Medicine and the study's lead researcher at the URMC. "So that's what this is really all about — we need to know more about how the lung is formed and heals normally, in order to encourage preterm infants to develop more normally and to help adult lungs to heal from diseases like pneumonia and emphysema."

In the coming months and years, researchers at the URMC will collect lung tissue through a multistate organ donor network. Researchers will analyze the samples through CT scans, reconstruct

the lung samples in 3D for analysis, and process the tissue for further analysis down to the individual cell and gene level.

URMC researchers will then dig deeper into the function and development of infection-fighting white blood cells in the lungs, while colleagues at collaborating universities will analyze other aspects of the tissue. Data generated from the LungMAP will be accessible to the public, allowing doctors and researchers all over the world to view the findings.



# Learn about Simon's Part-Time Medical Management Program

"What I didn't know about the business side of medicine kept me from improving my practice...but the Simon program gave me the knowledge."

– Paul van der Sloot, MD, FRCS(C), '87E, '12S (MS)  
Medical Management Associate Professor,  
Department of Otolaryngology (SMD), URMC

#### INFORMATION RECEPTION:

12:00 - 1:00 p.m. URMC

March 11, 2015      June 10, 2015  
[simon.rochester.edu/mmreception](http://simon.rochester.edu/mmreception)

#### MEDICAL MANAGEMENT EXPERIENCE:

4:00 and 5:30 p.m. sessions

March 27, 2015      June 26, 2015  
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# DAY OF GIVING

## 4.21.15

For the first time, the entire Rochester community - alumni, students, faculty, staff, parents, and friends - will come together in a single day to support every school, program, and department across the University and its Medical Center, including the **School of Medicine and Dentistry**.

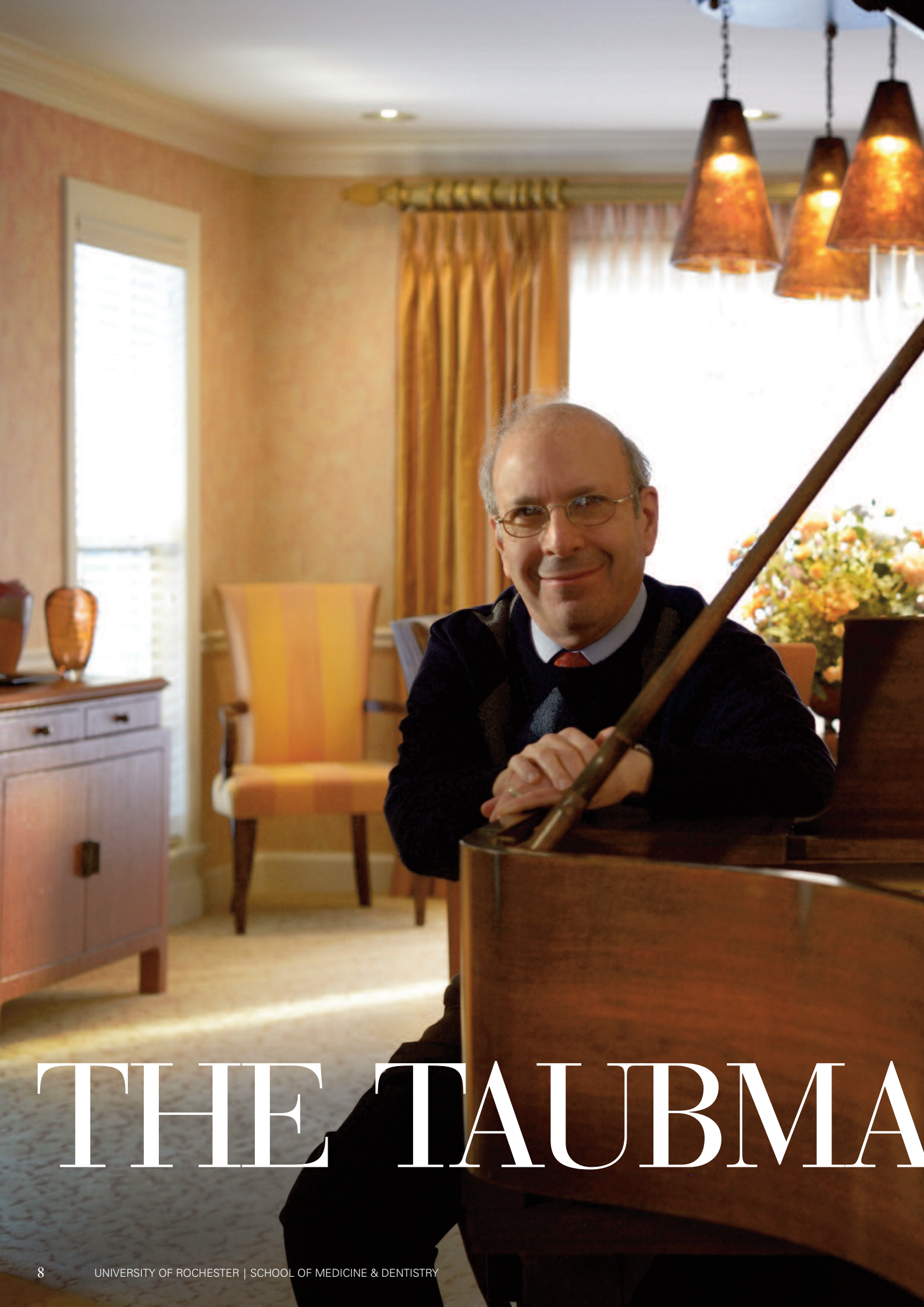
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UNIVERSITY of ROCHESTER

**#URMakingADifference**



# THE TAUBMA





# AN APPROACH



# MARK TAUBMAN

arrived as chief of Cardiology twelve years ago, and has been steadily assuming greater responsibilities ever since. Now, as CEO, Taubman has developed a distinctive leadership style.

Mark B. Taubman, MD, is about to give new meaning to the “Taubman Approach.” If you’re unfamiliar with the *old* meaning, you probably don’t spend a lot of time playing the piano. But Douglas Humphreys does. He is chair of the Piano department at the University of Rochester Eastman School of Music.

“The Taubman Approach is a well-known, technical approach to playing the piano,” Humphreys says. “It has a strong track record of helping pianists with injuries such as tendonitis or carpal tunnel syndrome.”

The ergonomic method was developed by an eminent piano teacher from Brooklyn, Dorothy Taubman, who instructed a number of world-renowned players. When she

died in 2013, a headline in *The New York Times*’ music section dubbed her “Dorothy Taubman, Therapist for Pianists.”

She and her husband were also the parents of an only child — a son — and he has just been named chief executive officer of the University of Rochester Medical Center. Mark Taubman stepped into the CEO spot on January 1. He replaces Bradford C. Berk (MD ’81, PhD ’81), who stepped down to start a premier neurorestorative institute at the U of R.

Taubman and Berk are longtime colleagues and close friends, but Taubman has his own way of getting things done. Here are a few basic tenets of the “Taubman Approach” to leadership, and a look at what he plans to accomplish while at the helm.

## Find Common Ground

Taubman grew up in a house filled with music. There were, of course, his mother’s students. While one received instruction in the studio, another would be practicing down the hall. But Taubman’s father, who had been coached by the same person who trained operatic star Beverly Sills, was also a strong influence. Taubman was given his first record player before he turned two years old, and he has been playing the piano since age three. Today, he owns the equivalent of eight thousand albums, including atonal music, heavy metal, and show tunes, on a hard drive in his family room. To demonstrate the clarity of sound coming from two strategically placed speakers (both nearly



## The Accompanists

It is the number-one question people ask when they run into Mark Taubman these days: How are you going to do it all?

His answer is: He's not. As dean, he assembled a strong, innovative, and experienced leadership group at the School of Medicine and Dentistry. He gave each member the power needed to produce results. Now Taubman is doing the same thing in the executive suite. On these pages, you'll meet several of the people he has appointed to new or expanded leadership roles.

as tall as he is), he pulls up Paul Simon's 1986 single, "Diamonds on the Soles of Her Shoes."

"He's got a very nice audio system," says Robert Clark, senior vice president for Research across the U of R, dean of the Hajim School of Engineering and Applied Sciences, and an expert on acoustics. "One of the technologies he uses to listen to his music came out of a company I used to work with."

And that is how it begins. A single conversation with Taubman is typically all it takes to uncover some sort of connection, a mutual passion, or a shared experience. His remarkable array of interests allows him to quickly build an affinity with nearly everyone he meets, a phenomenon he is very conscious of.



## Vice Dean for Research

Associate Vice President for Health Sciences Research  
Chair of Microbiology and Immunology

### Stephen Dewhurst, PhD



When asked how he complements Mark Taubman, Steve Dewhurst is quick to respond.

"Look at a picture of us together," he says with a sly smile. "I complement him vertically."

Dewhurst is tall and angular, looking every bit the dedicated runner that he is. He arrives to work on foot, showing up at early-morning meetings in athletic pants and sneakers. He usually keeps his sneakers on for the rest of the day, though he switches from Lycra to jeans and a T-shirt until it's time to run back home. As vice dean, he doesn't plan to change his customary wardrobe. It makes his titles seem a little less intimidating, which he feels is essential in his new role.

"I want faculty and department chairs to know they can always come to me to communicate their concerns," says Dewhurst, who still keeps his own calendar in order to be as responsive as possible.

Dewhurst is guiding the implementation of the Medical Center's strategic plan for research. Adjusting to technological changes and a tighter funding environment, the strategic plan calls for a redesign of program and funding priorities. This affects everything from lab space to recruitment, and it requires unprecedented collaboration between disciplines and campuses. As faculty members put the pieces in place, Dewhurst is providing extensive support and making sure their activities align with the institution's broader vision.

"We're growing our large research enterprise in a much more thoughtful, focused way, so we can help our scientists compete in this new climate," he says. "Research is extremely important to our identity as an institution."

Dewhurst grew up in the United Kingdom, but decided to attend grad school in Nebraska after Bruce Springsteen released an album by that name (yes, that is the sort of thing diehard Bruce fans do). A highly accomplished molecular virologist, he first joined the U of R faculty in 1990, and is a past senior associate dean for Basic Research. But Dewhurst is probably best known as the guy who runs down Elmwood, through wind, rain and snow.

"I'm always surprised by how many people see me running. At least they are polite about it, and don't mention how slow I am."



## Michael Rotondo, MD



Mike Rotondo knows how to play the drums. He started as a first-grader at a small Catholic elementary school in Rochester. Three months later, the “music nun” urged his parents to send him for private lessons at the city’s esteemed Hochstein School of Music & Dance. They weren’t sure they could afford it, but Rotondo performed so well at his audition he was given a scholarship to attend Hochstein for many years; his family paid just one dollar per week. He grew up jamming with some of the best local musicians in Rochester and played professionally. Perhaps that is where he learned that, no matter how well you bang the buckets and keep the beat, a drummer cannot be the whole band.

“To really accomplish something great, you’ve got to have all different types of people. You need people who are process-oriented, people who are creative and open and free, people who are collaborative, and people who are competitive,” Rotondo says. “If you embrace all of these types of people, you can truly innovate and transform.”

That sums up Rotondo’s primary role at the URM. He is working with the U of R’s largely independent-minded clinical faculty, loosely associated departments, and a growing number of physicians throughout the region, as they organize into tightly coordinated, multi-specialty groups. They will deliver care in a novel way — one that makes the most sense to patients. This is critical, as the Medical Center gears up for challenging new reimbursement models, which will demand higher quality at a lower cost.

“We are in a perfect position to make changes in Rochester that will be important, not just for the people in this community, but also for health care in general,” Rotondo says with passion. “You can hear me getting excited about it. We have a lot going for us here.”

Rotondo was recently lured back to Rochester after three decades, during which he became an internationally renowned trauma surgeon and earned leadership positions at the University of Pennsylvania and East Carolina University. One of the first things he did upon his return was join Hochstein’s board of directors, helping give others the same opportunity he had.

“It is one of the nicest feelings I’ve ever had.”

“The number-one role of a leader is communicating with people. You have to really listen to what they are saying, and be able to understand their viewpoints as well as your own. You have to make them grasp what you are trying to achieve, so they will want to help. But before you can do any of that, you have to bond,” Taubman says. “The easiest way to bond is to talk about something you have in common.”

Take your pick: Taubman and his wife, Lois, both native New Yorkers, fashion their own series of a dozen operas each season at the Metropolitan Opera. In between, they go to Broadway shows, sometimes fitting two or three performances in during a single weekend. They have started collecting art, and playfully point to their *almost* bona fide masterpiece — an abstract painting by a patient (they’ve forgotten his name) at the Saint-Rémy asylum, where Vincent van Gogh painted *Starry Night*. Taubman, who wears a Fitbit to track his steps throughout the day, hits a treadmill in the basement every night. He admits to an obsession with *Shark Tank*, an entrepreneurial-themed reality show full of backstabbing billionaires, and he has a secret penchant for romantic movie endings (*An Officer and a Gentleman*, anyone?). He can pick out theoretical physicist and bestselling author Michio Kaku in a crowd. He loves watching sports on television, especially football, which he compares to the ballet. And then ... there are those Yankees.

“It’s all about that slow battle between the pitcher and the hitter,” he says wistfully. “To me, that is the game.”

The Yankees, as anyone who knows professional baseball is well aware, have an ugly rivalry with the Boston Red Sox. But that doesn’t present a problem for Taubman, even in the midst of Red Sox aficionados. “He’s the only real Yankees fan I know whose second favorite team is the Red Sox,” Michael C. Goonan says with a big smile. Goonan, who recently retired from his post as chief financial officer, is a Red Sox fan.

“We still get along great,” he says.

### Work the Problem

In fact, Goonan considers Taubman to be a chief financial officer’s dream CEO.

“The guy just loves numbers,” he notes.

When Taubman was named dean of the U of R School of Medicine and Dentistry in 2010, medical schools across the country were scrambling to adjust to a quickly evaporating pool of public and private research dollars. Their budgets were sliding deeper into the red, with no end in sight. At the SMD, Goonan and the School’s CFO, William Passalacqua, would typically be called upon to lead the way back toward black in a crisis like this. But Taubman spent nights and weekends working on



a solution from home.

“He put together more than one hundred and fifty different financial models for us to consider. It might have been two hundred,” Goonan recalls with amazement. “Mark has a better understanding of what it takes, from a financial position, to run a medical center than any other dean or CEO I know.”

Taubman’s love for math and problem solving is conspicuous. The guy reads math books for fun. He animatedly holds up his favorite tome of all time, *Gödel, Escher, Bach: An Eternal Golden Braid*. The Pulitzer Prize-winning book links the theorem of a twentieth-century Austrian mathematician (Gödel) with a mathematically motivated artist (Escher) and the similarly inspired composer (Bach), while also dipping into the possibility of artificial intelligence. (*Phew.*) It is full of puzzles.

“You work the problem,” Taubman says, quoting from *Apollo 13*. “That’s what attracts me to virtually everything I do.

I love challenges — and for academic medical centers, this is the most challenging time.”

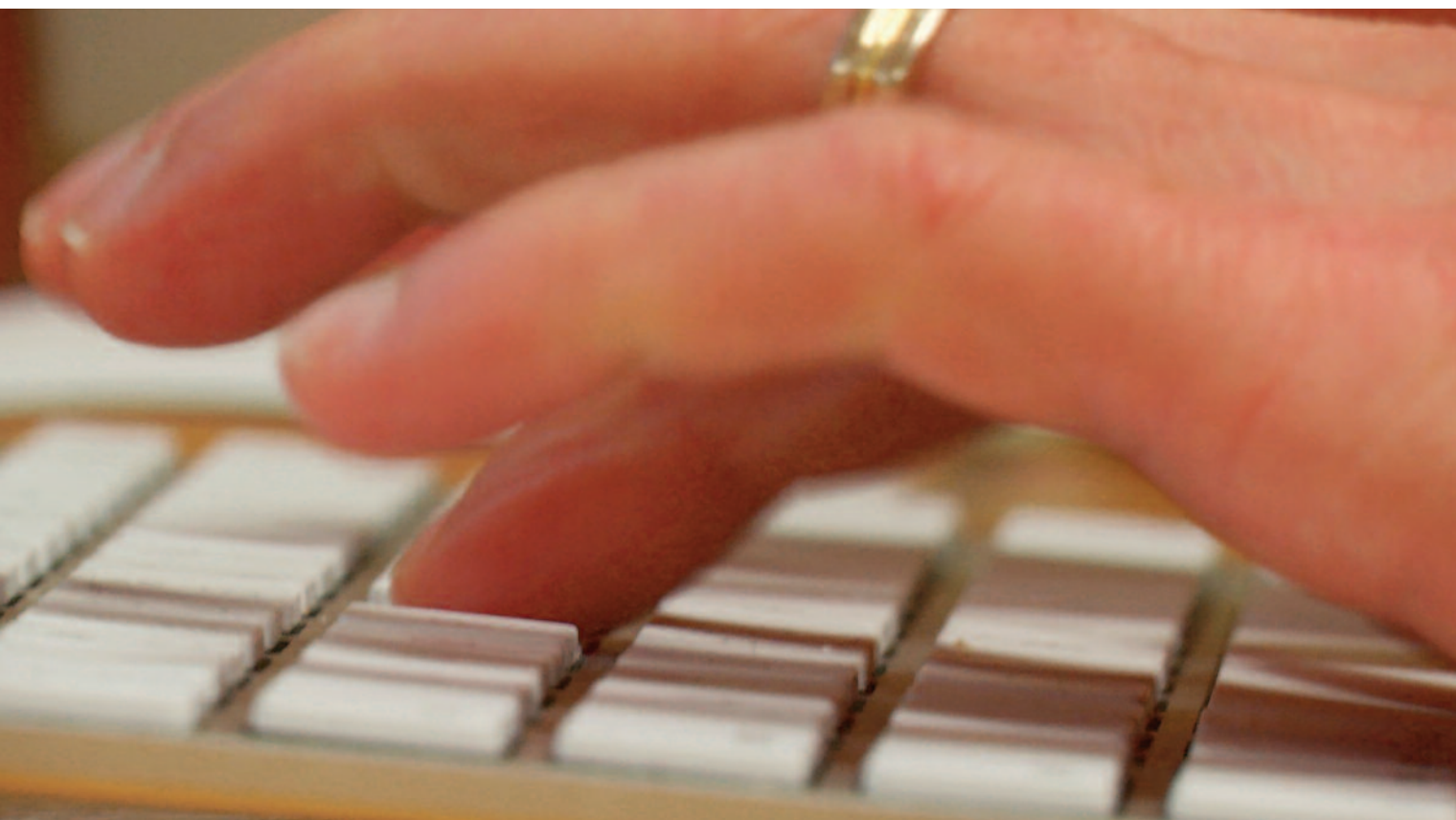
He is starting to break down the URM’s strategic plan, finalized last year, into actionable items. Though his approach

to this complex and urgent task is strikingly methodical, he strives to make it personal. He emphasizes the need to always put together the right team of people for each task, regardless of title or department.

## CEO Stats

<b>Position</b>	<b>Mark B. Taubman, MD</b> CEO, University of Rochester Medical Center Dean, University of Rochester School of Medicine & Dentistry Senior Vice President for Health Sciences
<b>Record</b>	2010 to present: Dean 2009 to 2010: Interim CEO 2007 to 2009: Chair, Department of Medicine 2003 to 2007: Chief, Cardiology Division
<b>Education</b>	New York University School of Medicine (MD '78) New York University School of Medicine (MS '76) Columbia University (BA '72)

“The number-one role of a leader is communicating with people. You have to really listen to what they are saying, and be able to understand their viewpoints as well as your own.”





“When something upsets me, I just see a problem and I want to solve it,” Taubman explains.  
 “Instead of focusing on my anger, I focus on finding the solution. That is so much more satisfying.”

It’s a practice that worked well for him as dean during difficult times.

“He successfully enlisted the faculty in solving shared problems, creating the sense that we are all in this together,” notes Stephen Dewhurst, PhD, vice dean for Research. “If not an entirely bottoms-up strategy, it is certainly one in which the faculty were much more involved in their own fate.”

Lois Taubman says her husband has always shown a deep concern for people, and he has an innate desire to see everyone win. She recounts a story his mother told her about one of Mark’s first days in kindergarten. He came home bubbling with excitement.

“He told his mother, ‘Today has been such a good day! *Richard* got elected class president,’” Lois says. “*That* is Mark.”

#### **Maintain a Sense of Humor**

Being CEO of an academic medical center *and* dean of a medical school, particularly during this era of upheaval, is not a job for

the timid or the weak. Logistics alone are hard to imagine, given the fact there are only twenty-four hours in a day. Taubman spends the majority of those hours in meetings.

“What’s his biggest challenge going to be? It could be finding time to eat,” Robert Clark says with a laugh.

“I tried to negotiate either an extra day, or seven more hours to each day,” Taubman banters, “but I couldn’t get either of those as part of the deal.”

It’s the middle of an arduously long day, but Taubman’s sense of humor remains intact. He carries it with him to most meetings, subtly pulling it out without warning. He is not one of those people who laugh at their own antics, so sometimes it takes a second or two for the joke to settle in. Then, the sparkle in his eye gives it away.

“He is very, very funny, especially in small-group settings,” says Jonathan W. Friedberg, MD, MMSc, director of the James P. Wilmot

Cancer Institute (and a Red Sox fan). “It makes him very approachable.”

Taubman says he cannot imagine living life without a sense of humor. And, he adds, no one will ever see him get angry. As a cardiologist, he obviously knows the dangers of bottling up emotion. But that is not what is happening here.

“When something upsets me, I just see a problem and I want to solve it,” Taubman explains. “Instead of focusing on my anger, I focus on finding the solution. That is so much more satisfying.”

#### **Pssst, Eastman School, Are You Listening?**

While Taubman’s rise through the ranks at the URM has been much more expeditious, he says he mentally commits to every job for one decade. Over the next ten years, he has three primary goals for the URM: (1) grow as a research institution by focusing on multidisciplinary Centers of



### Teri D'Agostino



Teri D'Agostino was lost, somewhere inside the 522,419 acres known as the Great Smoky Mountains National Park, and her cell phone wasn't working. She had ventured out that morning, with her husband and two of her sisters. They had somehow wandered off the trail and were uncertain which way to go. Then they remembered the river. They recalled the direction it was flowing as they hiked into the woods, and they followed it in reverse. It was a long walk back to camp, but they made it.

This sort of attention to detail, poise, and perseverance is serving D'Agostino well in her role as Taubman's chief of staff. As the CEO directs the institution-wide changes required for this new era in health care, research, and education, D'Agostino is working to ensure that nothing falls through the cracks.

"I gather the facts and organize the process to help our leadership team make informed, thoughtful decisions," she notes. "I try to keep things running smoothly so they can focus on patients, students, and science."

Making adjustments that involve more than nineteen thousand URMIC department heads, faculty members, and staff – as well as a growing number of health care providers in the region – requires tremendous communication skills and a deep understanding of the URMIC culture. D'Agostino fits the bill. She was recruited into Communications and Public Relations seventeen years ago; for the past eight, she served as associate vice president. She is familiar with nearly every facet of the Medical Center.

"We have an incredible wealth of skills and experience throughout all departments. We have people who have been here long enough to truly know who we are and what our mission is, and we have great new talent bringing fresh ideas in," D'Agostino says. "We have all this momentum going as we put the strategic plan into action."

D'Agostino, who has worked in health care communications for more than three decades, still intends to recharge the way she always has: heading outdoors, where cell phone coverage is sometimes spotty, and rivers lead the way home.



Excellence; (2) continue to innovate medical education, with an emphasis on interprofessional learning; and (3) be the top clinical health system in western New York.

"All three can happen," Taubman says. "What underlies them is enhancing the reputation of the University and raising its profile. I want people to take notice of Rochester."

He stops there, having made his final point. But his wife has something to add, another ambition he failed to mention aloud.

"He wants to play piano with the Eastman School Symphony Orchestra. I know that is one of his goals," she states.

His mother, without a doubt, would be proud.

# Research 101

Many SMD students, like Nina Piazza and Patrick Asselin, are working with researchers on campus. The experience is often life-changing, giving students knowledge and opportunities that help shape their future careers.



## Nina Piazza (MD '17) Spreading the Word

Birth control for adolescent girls in the United States usually means "the pill." Teens know what that is, and they're likely to ask their doctors for it when trying to prevent pregnancies. But most of them don't know that there is something more effective called LARC (Long-Acting Reversible Contraceptives). Even some health care providers aren't up to date on the safety of LARC, which are now recommended for sexually active teenagers by the American Academy of Pediatricians. So the URMCC recently started a campaign to increase awareness and use in Rochester, and Nina Piazza signed up to help study that effort.

"I was supposed to conduct focus groups to gather baseline data about what girls think about LARC now, as the initiative begins," says Piazza, who received a summer research grant from the Office of Medical Education (OME).

Under the guidance of her preceptors, C. Andrew Aligne, MD (Flw '99, MPH '01), and Katherine Greenberg (MD '07, Flw '14), Piazza got her first experience with the Internal Review Board. Once the study was approved, she reached out to community youth organizations and scheduled four focus groups with adolescent girls, ages fifteen to nineteen. Piazza's mentors helped her practice before she, armed with pizza and wings, headed out.

"I was nervous at first," she recalls, "but most of the young women were willing to open up to me. They appreciated the fact we wanted their opinions."

Piazza recorded their conversations and questioned the young women about the likelihood that they would recommend





LARC to a friend. It seemed like the study was off to a good start, accumulating quantitative and qualitative evidence. But then she discovered what virtually every researcher does at some point in their careers: "It didn't go as we planned."

Because the teens were recruited through adolescent health educators, it turned out the girls were more familiar with LARC than most of their peers. This meant the study results could not be used to evaluate baseline attitudes. But the research team noted that these young women were very enthusiastic about LARC.

"The early adoptees of LARC are young women who have been educated about it, so we can ask them how they learned about it, what made them excited about it, and how we can better promote it to their peers," Piazza says. "By hearing their perspectives, we can collect valid data to improve the effectiveness of the URM campaign."

Piazza has put research aside for now as she focuses on her

studies, but the experience has had a lasting effect.

"It definitely made me more comfortable talking about sex, contraception, and all of that. I never thought I would be interested in Ob/Gyn, but that has definitely gone up on my list," says Piazza, who is leaning toward public health and primary care. "I am more interested in pursuing work with teenagers," she states.

Above center: Nina Piazza (MD'17) discusses her public health project with the C. Andrew Aligne, Executive Director of the University of Rochester's Hoekelman Center (right).



# Patrick Asselin (MD '17)

## Running the Numbers

Last summer, as the NFL and its former players were trying to reach a historic, concussion-related settlement in court, Patrick Asselin was involved in a momentous undertaking as well. Huddled over a computer in a small room inside the Saunders Research Building, he was looking at thousands of data points, gathered from U of R football players whose helmets had been equipped with sensors. Every time the players took a hit, the sensors sprang into action, measuring the impact and noting its location on the players' brains.

"I was asked to physically program the computer to perform a new algorithm that weights these values, taking

into account the amount of time between hits and the force of each hit," Asselin explains. "No one has ever tried to create an algorithm like this before."

But Asselin was working in a lab run by Jeffrey J. Bazarian (MD '87, Res '90, MPH '02), a professor of Emergency Medicine who has emerged as one of the nation's leading experts on concussions, particularly those related to football and other sports. Bazarian had assembled a team of University scientists to develop the algorithm, but he needed a programmer to make it work. That's where Asselin, who got hooked on biostatistics and computer programming as an undergrad, came in.

Asselin had been awarded a stipend from the Office for Medical Education to spend the summer in Bazarian's lab. Asselin admits he was skeptical at first. No one knew whether the algorithm would actually produce useful results, and he suffered moments of self-doubt as he wrestled





with the computer.

"It could be a little frustrating at times," says Asselin, who used a known set of data and results to test the algorithm while he was setting it up on the computer. "It would run through everything and then tell me there was an error, or it would give me numbers that just didn't make sense. I'd go through the lines of code to figure it out and then wait another twenty minutes while it ran, only to have it fail again."

Finally, the program was ready to tackle the vast amount of data that had never been analyzed in this way. The computer churned out the first scatter plot, showing the relationship between changes in the brain and the value a player had been given based on the pattern of his hits. The significance was immediately apparent to Bazarian and research manager Kian Merchant-Borna, MPH (S '15).

"It was really neat to see their reactions. They were

pretty pumped," Asselin says.

The study findings will soon be submitted for publication, with Asselin listed as an author. He's now deep into his second year of medical school, and hoping – at least, for now – to become a child neurologist. He's also considering applying for a Year-Out Fellowship from the OME after his third year, so he can spend a little more time running the numbers in Bazarian's lab.







# The App Man



It weighs less than one pound, but Spencer Craven's iPad helps him do, well, just about everything. He uses it to keep his schedule, carry books, take notes, project images on the wall, and study for exams. He pulls it out to create birthday cards for relatives, or listen to his wife sing a silly tune. And that's just for starters.

"I play a lot of music," says the 27-year-old Utahan, who can occasionally be heard strumming a guitar in the SMD student lounge. Right now, he's trying to master a Coldplay song. "I have my guitar playing app to learn the chords," he says.

Mobile apps, those software programs that run on smartphones and tablets, are rapidly becoming a requisite

piece of modern life. Since beginning to incorporate iPads into the curriculum in 2012, the SMD has supported an app that lets students add their own notes to the electronic syllabi, highlight sections of the material, and draw things like circles and arrows. This app is free, but students are given an allowance that can be used to download other apps of their choosing.

"I spent all of it on the *Netter's Anatomy* app," Craven says, admitting it was a bit impulsive. But it paid off. "I find *Netter's* to be so beautiful that I enjoy studying anatomy more."

Craven didn't stop there. He relies on about a dozen apps to help with his coursework, test prep and clinical rounds,

and he is always testing out new finds. He's contacted the developers of favored apps, asking for a group discount so his classmates will be more inclined to try them, and he's the first to know when a developer improves an app. In short, he is the "App Man," a title bestowed by Senior Associate Dean David R. Lambert, MD.

Craven's interest in apps originated before he came to medical school, when he was working as a tutor for the MCAT.

"I was always trying to find ways for students to increase their efficiency."

He found a number of good study apps, which he adopted for himself when the SMD handed him his first iPad. For the first two years of medical school, his



**Spencer Craven** (MD '16) is part of the first SMD class to receive iPads at orientation. Three years later, he has built a reputation for putting his skills to good use.



workhorse was one called *iAnnotate*. To demonstrate how it works, he pulls up an uploaded version of his Step 1 study guide. (For non-docs, that's the test medical students take at the end of their second year. It's part of the process of obtaining a medical license.) The guide is marked up with colors. The orange notes relate to neuroanatomy, so he could sort the pages and focus on that area when desired. Notes in red meant he really needed to work hard to master those topics; green meant he had them down pat.

Another of Craven's favorite apps is called Anki, which he used to create digital flashcards. He scheduled how often each card appeared. Some cards

would show up every few days; others would resurface in sixty seconds. He had the app synced with his iPhone.

"So when I was standing in line at Subway, stressing out because I wasn't studying, I could just pull out my phone and flip through the flashcards," he recalls.

When he reached his third year, Craven sold his iPad because it wouldn't fit in his pocket for rotations. Now he owns an iPad mini, which does. Feeling overwhelmed, he started tracking medication changes on the device. Soon, a couple of residents picked up on it and he showed them how to do it as well.

Craven also uses apps to help patients understand their medical conditions.

"There are a slew of apps by drawMD that help you show patients what is happening in their bodies, and what we're doing to help them," he says. "Patients love it. They might have an idea where the gallbladder is, but they can't picture it or understand why a gall stone affects the pancreas."

He predicts it will take a few more years before apps are fully integrated into the learning of medicine, since some students still carry heavy baskets full of flashcards, paper notepads, and pencils. And, he adds, it will be even longer before apps permeate the *practice* of medicine.

"But the fact that we are sitting here talking about it shows that it is happening."

# Published

## MICA ESQUENAZI HAS LAUNCHED AN INTERNATIONAL MEDICAL STUDENT PUBLISHING GROUP

Mica Esquenazi (MD '17) is the cofounder and editor-in-chief of a one-of-a-kind student publishing group that is quickly drawing notice around the globe.

Esquenazi started the Medical Student Press (MSPress) last year with Gabriel Glaun, a medical student at the University of Central Florida. The MSPress is an online publishing group that produces a blog, a journal, and an archive of medical school commencement speeches. In its first year, the website has been viewed more than sixty thousand times, and Esquenazi is overwhelmed by the number of students who want to join the editorial team.

The group already has eighty peer reviewers, editors, and bloggers from medical schools throughout the United States, as well as far-flung hangouts like Costa Rica and Slovenia. *Neurology* editor-in-chief Robert Gross, MD, PhD, professor of Neurology at the SMD, is among the group's faculty mentors. In addition to students, early contributors include physician and bestselling author Abraham Verghese, MD, and a smattering of other familiar faces.

But as Esquenazi describes the MSPress, it's hard not to wonder about the story behind the story. Fluent in Spanish, Hebrew, and English, Esquenazi is driven by the idea of building a global community full of medical students.

"We need to make sure that, as we progress through medical school, we are reflective. Our classes don't always show us how all of the changes in medicine will impact our careers," she says. "We need to talk, be open to one another, and get to know people outside of our own schools."

The MSPress is Esquenazi's way of making that happen. And it's working.

On the MSPress Blog, students are discussing forensic science and police brutality; emergency treatment in England, Germany, and Portugal; and what it feels like to be a first-year medical student ("... like I am trying to drink from a full-powered water hose that won't shut off").

Students are publishing Q&As in the *MSPress Journal* with leading physicians like Robert Montgomery (MD '87), chief of Transplant Surgery at Johns Hopkins University. Other offerings include a study

on brain metastases, a Fulbright Scholar's essay about midwifery in West Africa, and a digitized acrylic that portrays two students listening to one another's heart beat.

But what is it exactly that is pumping Esquenazi's desire to bring her peers here, to this digital space where acceptance is based on intelligence, creativity, and the ability to use words or images to pry open minds?

Raised in Dallas by a Cuban father and Israeli mother, Esquenazi is intrigued by the diverse experiences of others.

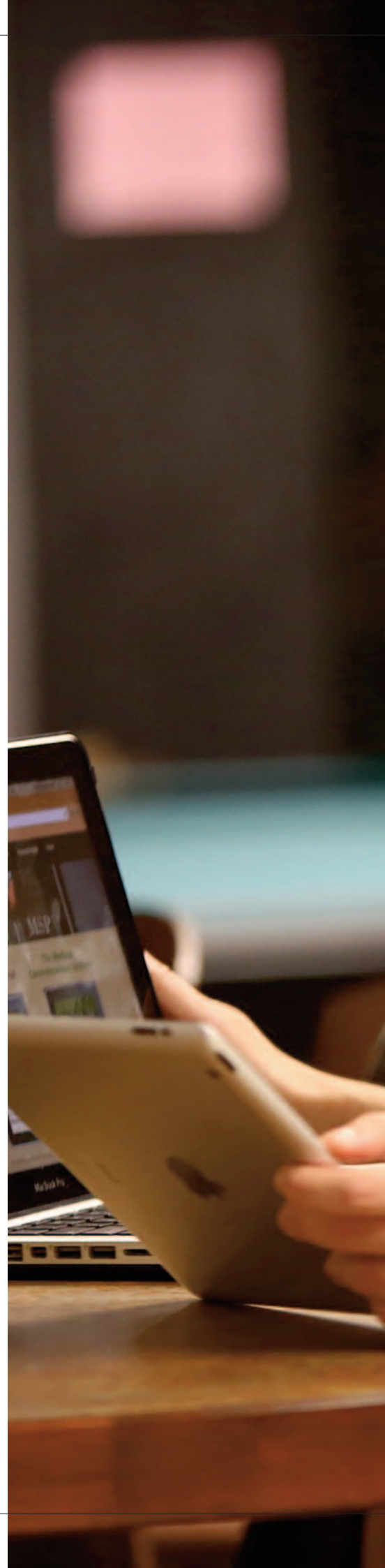
"My culture is my blessing," she says in appreciation of the abundant mix of languages, foods, and values she grew up with.

She also grew up with books, and credits her high school English teacher for introducing her to authors like John Steinbeck. In her own writing, she discovered the power of self-reflection. And her undergraduate mentor at Stanford University, John Willinsky, PhD, sparked an interest in publishing with open-source software. Her desire to hold on to all of these passions while pursuing a medical degree provided the inspiration she needed to launch the MSPress.


Esquenazi, who has heard many stories about her family history, has an ingrained understanding of the connectivity between the past, present, and future. This is one of the reasons she added the Medical Commencement Archive to the group's portfolio. The budding collection includes speeches by the U of R's Timothy E. Quill (MD '76, Res '79, Flw '79) and a handful of others.

"Medicine is changing so much, it's nice to have a record of what was being said," Esquenazi notes. "Sometimes what they say in their speech speaks more to what's going on in the world than what they would write for a journal or publication."

You can find a link to the MSPress at: [www.RochesterMedicine.urmc.edu](http://www.RochesterMedicine.urmc.edu)







“Our classes don’t always show us how all of the changes in medicine will impact our careers. We need to talk, be open to one another, and get to know people outside of our own schools.”



# WHEN STUDENTS TEACH

Barbara Davis, PhD, director of the Medical Education Pathway (MEP) program, has mixed feelings about the size of the audience in the SMD's Upper Adolph auditorium. Nearly a third of the two hundred seats are already full, and students continue to trickle in as she begins her presentation. She has run out of handouts.

"It's difficult," Davis says. "We can only take fifteen of you into the Pathway."

Throughout the informational session, Davis unabashedly tells them how hard this is. The Medical Education Pathway has a rigorous, two-year curriculum: the application process alone requires students to spend hours developing a formal proposal, securing a mentor, and obtaining multiple signoffs on their teaching plans. Once accepted into the MEP, students commit to forty hours of teaching, not counting preparation time. There are numerous mandatory workshops and journal club meetings. The MEP students are responsible for fitting all of this into their schedules, already brimming with clinical clerkships and coursework.

But this doesn't seem to scare very many students away.

"In medical school, you're not going to have time for anything if you don't set priorities," says MEP participant Jessica Lindemann (MD '15), who served as a tutor and teaching assistant throughout high school and college. She chose to come to the SMD, in large part, because of the MEP program. "I didn't come across another medical school that offered anything like it."

Senior Associate Dean David R. Lambert, MD, put the MEP committee together in 2007. It devised a unique curriculum, and

The Medical Education Pathway has a rigorous, two-year curriculum.

The MEP students are teaching in every first- and second-year course, as well as third-year basic science blocks.

Their lectures and small-group activities bring new topics into the classroom.

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the Pathway accepted its first two students in 2009. Since then, eighty-seven more students have enrolled, and Lambert, Davis, and another committee member, Celeste A. Song (MD '08, Flw '14, MSc '14), are now evaluating the program. In a study published online in *Academic Medicine*, the trio report success.

The MEP students are teaching in every first- and second-year course, as well as third-year basic science blocks. Their lectures and small group activities bring new topics into the classroom.

"I learned so much from her!" says Davis, who turned a Human Structure and Function (HSF) lecture over to Lindemann. "Her lesson on the female reproductive system incorporated





## The SMD's Medical Education Pathway is likely the most structured student-as-teacher program in the country. But does it work?

clinical applications, because she's had some experience there, and I'm a basic scientist."

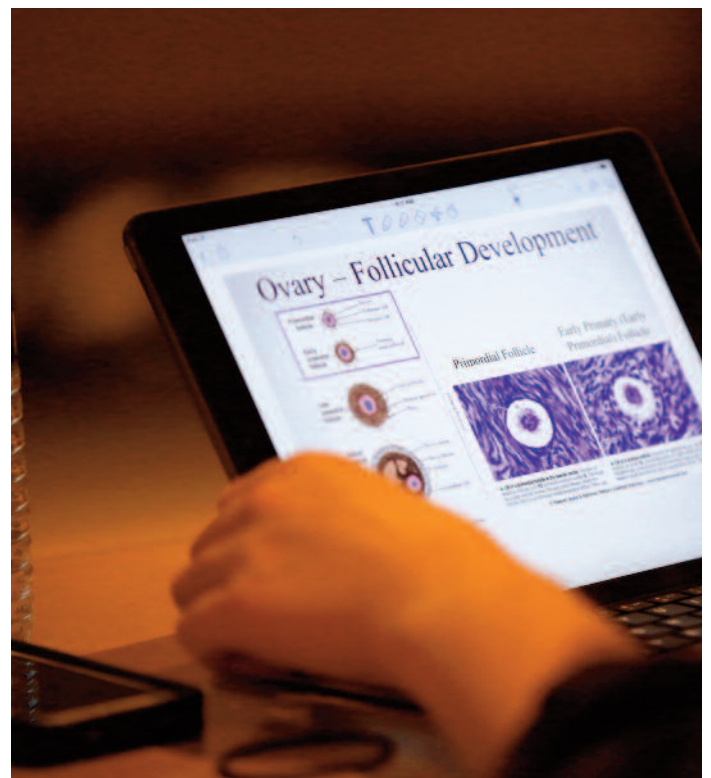
The students taking the courses are usually enthusiastic about the MEP student presentations, while not being shy in offering constructive criticism.

"After my first lecture, the students said there was a lot of information for the amount of lecture time," Lindemann recalls. "That resonated with me. I was so focused on including every detail of the female reproductive system, because the HSF course helps lay the foundation for the rest of medical school and I didn't want them to miss anything. But that wasn't realistic."

With guidance from Davis, Lindemann fine-tuned her lecture and gave it again the following year. While she's still waiting for the student assessments, they were obviously impressed when she finished. Allowing the MEP students to revise their work is a key component of the program; it leads to their growth and development as teachers.

Committee members continue to study the program, which they view as a model for training the next generation of teachers. If adopted on a wider scale, this model could potentially help meet the shortages of academic medical educators. But for now, the fact that it is so unique to Rochester is a bonus for Lindemann as she interviews for a surgical residency.

"It definitely catches their attention," she says. "Part of the role as a physician is to teach, and the MEP helped me to develop that skill set. It was a fantastic opportunity."



# Ahead of the Curve

HOW A ONCE-STRUGGLING MED STUDENT, SMD ALUMNUS DAVID NASH, HAS BECOME ONE OF THE NATION'S MOST SOUGHT-AFTER EXPERTS ON POPULATION HEALTH.

The call came on Halloween in 2007.

David B. Nash (MD '81) was ushered into the office of the president of Thomas Jefferson University, where Nash had been recruited nearly two decades earlier. He had risen from a staff position to department chair of Health Policy, a post he was quite happy with. As Nash sat across from then-president Robert L. Barchi, MD, PhD, however, his relatively comfortable job vanished and another slid into its place.

"He said, 'You will build a new school for me,'" Nash recalls. "And, God help me, he looked at his watch and told me I had ten minutes to decide."

In a daze, Nash walked back across the street to his own office and tried to tell his longtime executive assistant what had happened. Major changes were coming in health care, and Jefferson was taking a bold step to get ready. Nash had been chosen to lead the way, as founding dean of the Jefferson School of Population Health (JSPH).

"Calling it that was a brilliant stroke of serendipity," Nash says, crediting Barchi for insisting on the phrase "population health" while it was still chiefly relegated to a handful of dusty, academic papers.

Not long after, however, discussions about population health began surfacing in back rooms of the US Capitol. As lawmakers were piecing together the Affordable Care Act (ACA), Nash was busy supervising the development of Jefferson's groundbreak-



ing, online curriculum. As the nationwide debate over health care was raging, the JSPH quietly opened in September 2009. That was nine months before the ACA, which necessitates a population health approach, was signed into law.

## From the Beginning

Upon graduating from high school, Nash knew he wanted a career that combined business and medicine. He proudly arrived at the

U of R carrying an honors degree in Economics from Vassar College, where he also completed a Pre-Med major. Determined to continue the pace, he decided to simultaneously earn a MD and a master's in Community Health at the School of Medicine and Dentistry. But before the first semester was over, Nash was ready to quit.

"I flew home for Thanksgiving and told my father I was not going back," Nash explains. "I was flunking genetics and barely passing anatomy. I was overwhelmed by all of the memorization. As an economics major, I had never taken a short-answer test. It was a complete culture shock."

His father, however, strongly advised him to change his attitude and get back on the plane.

Nash dropped the master's program to focus on his basic science courses, managing to plow through until his third-year rotations began. When he stepped into the Ob/Gyn unit at a local hospital, he felt like his dreams were finally coming true. But soon, he wanted to leave Rochester again.

This time, it was because of a sparkling brunette named Esther, whom he had sat next to at a regional conference of the Associated Medical Schools of New York and married less than two years later. She was a top student at Brown University's fledgling Alpert Medical School, just over three hundred and eighty *long* miles east of Rochester. And there wasn't room for her at the U of R. So Nash spent his final summer here trudging across campus, securing permission from his professors to finish most of his fourth-year requirements at Brown. He returned for his emergency medicine rotation and graduation. In true Nash fashion, after his residency, he earned a MBA from Wharton while also serving as a Robert Wood Johnson Foundation Clinical Scholar and the medical director of a nine-physician faculty group affiliated with the University of Pennsylvania.

In 1990, he began his first job at Thomas Jefferson University, running the Policy and Outcomes office. He eventually turned that office into a department of Health Policy, one of the first of its kind.

He received an endowed professorship and earned tenure. He and Esther had fraternal twin girls and a son (now all in their twenties and working in health care).

"I had climbed to the top of the hill," Nash says.

But then the hill got bigger.





Hundreds of Jefferson students are earning graduate degrees in Health Care Quality and Safety, Health Policy, and Applied Health Economics and Outcomes Research, thus forming the nation's first wave of population health care managers. At a moment when most of the nation's health care leaders are scrambling to catch up, David Nash is holding the crystal ball.

#### If We Don't, Who Will?

As the nation's health care providers come to terms with population health, Nash is a hot commodity.

"The last year has been the busiest year I've ever had in academic medicine," he says.

Nash's list of recent speaking engagements reads like a jumbled table of contents from a Rand McNally atlas: South Carolina, Illinois, Wisconsin, Nevada, North Carolina, Idaho, New York, West Virginia, Washington.

"Some of the invites come from people starting new schools or programs, asking for advice," says the JSPH dean. "But really, most people just want us to explain what population health is. That's what I spend most of my time on the road doing."

Nash maintains a population health travel blog of sorts, called Nash on the Road. The *MedPage Today* columnist has published more than one hundred articles in major journals and edited nearly twenty books, primarily focused on various facets of population-based care. Hundreds of Jefferson students are earning graduate degrees in Health Care Quality and Safety, Health Policy, and Applied Health Economics and Outcomes Research, thus forming the nation's first wave of population health care managers. At a moment when most of the nation's health care leaders are scrambling to catch up, David Nash is holding the crystal ball.

"I was worried that I wouldn't see this happen in during my career," says Nash, who firmly believes – when all is said and done – that population health management will make health care in America much better and far more affordable for patients.

That is what has kept him motivated through the years.

"If places like Jefferson and Rochester ignore reality and don't do this, just imagine the consequences," Nash says, adding it is the responsibility of academic health professionals to lead health care reform. "We're doing God's work."



## What Is Population Health?

In its most fundamental sense, population health is a systematic approach to health care that aims to prevent and cure disease by keeping people healthy. Population health builds on public health foundations by:

- Connecting prevention, wellness and behavioral health science with health care delivery, quality and safety, disease prevention/management and economic issues of value and risk – all in the service of a specific population, be it a city, a provider's practice, a hospital's primary service area, or pre-school children.
- Identifying socioeconomic and cultural factors that determine the health of populations and developing policies that address the impact of these determinants.
- Applying epidemiology and biostatistics in new ways to model disease states, map their incidence, and predict their impact.
- Using data analysis to design social and community interventions and to develop new models of healthcare delivery that stress care coordination and ease of accessibility.

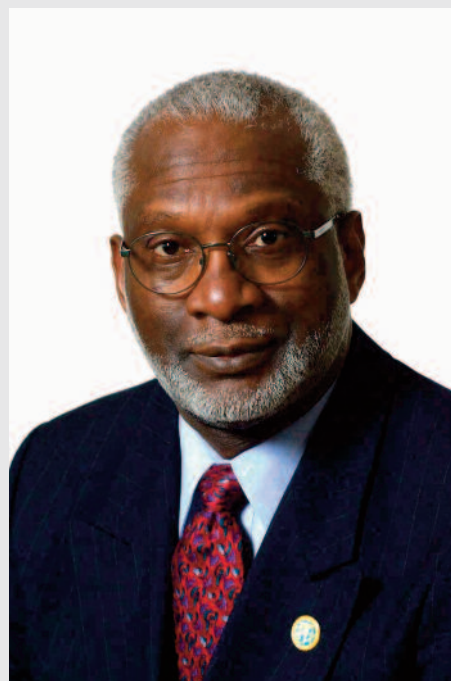
When applied to healthcare delivery, population health differs from conventional health care by emphasizing value rather than volume of services rendered.

Source: Jefferson School of Population Health

## Alumni Council Awards

For a complete description of award criteria and nomination instruction, please visit:

[www.urmc.rochester.edu/smd/alumni/alumni-awards/](http://www.urmc.rochester.edu/smd/alumni/alumni-awards/)



### Distinguished Alumnus Award David Satcher (Res '72, HNR '95)

The sixteenth surgeon general of the United States and former assistant secretary for Health in the US Department of Health and Human Services, David Satcher was the second person in history to hold both posts simultaneously. A four-star admiral in the United States Public Health Service Commissioned Corps, he is a renowned champion for healthy lifestyles and for eliminating racial and ethnic disparities in health. He is founder and director of the Satcher Health Leadership Institute at the Morehouse School of Medicine in Atlanta, where he holds the Poussaint-Satcher-Crosby Chair in Mental Health.



### Alumni Service Award Elethea H. Caldwell (Res '73)

Caldwell is professor emeritus of Surgery at the University of Rochester School of Medicine and Dentistry. A retired plastic surgeon, her clinical practice focused on the care of children with congenital deformities, specifically cleft lips and palates. Her other areas of interest involved the care of patients with breast and hand deformities, as well as patients suffering from burn injuries.



### Humanitarian Award Dr. Norman B. Abell '51M (MD)\*

Dr. Norman Burt Abell was a physician who devoted his life to serving thousands of patients in the remote areas of the Congo (Zaire). A career missionary of the American Baptist Foreign Mission Society, he was committed to healing body and spirit, and played an instrumental role in advancing public health and nursing education in medically underserved areas of the Congo.

Abell died in 2012. He was survived by Jean, his wife of sixty-five years; their four children; thirteen grandchildren; and five great-grandchildren.

\* Posthumously





### **Alumni Achievement Award** **Ian Jermaine Wilson** **(MD '99, Res '04, Flw '06)**

Wilson is an assistant professor in the department of Imaging Sciences at the School of Medicine and Dentistry. He is also the cofounder of the Synthesis Collaborative, a nonprofit organization that supports two initiatives: WALL\THERAPY, a Rochester public mural initiative, and IMPACT! (IMProving Access to Care by Teleradiology), a medical philanthropy organization.



### **Humanitarian Award** **Bernard Guyer (MD '70)**

Guyer is the Zavyk Kreiger Professor of Children's Health, Emeritus, at the Johns Hopkins Bloomberg School of Public Health. He retired in 2011; his forty-year career included a post as a medical epidemiologist for the Centers for Disease Control's Smallpox Eradication and Measles Control Program in Central Africa. As Family Health Services director at the Massachusetts Department of Public Health, Guyer established one of the nation's first maternal and child health research units. The award recognizes his exemplary work advancing the health of mothers, children, and families worldwide.

## **The Charles Force Hutchinson & Marjorie Smith Hutchinson Medal**



### **The Charles Force Hutchinson and Marjorie Smith Hutchinson Medal** **C. McCollister "Mac" Evarts** **(MD '57, Res '64)**

Among the School of Medicine and Dentistry's most loyal and supportive alumni, Evarts was recognized for the pride he has brought to the School and the department of Orthopaedics, where he not only trained, but became the first chair. An impressive philanthropist, his most recent contribution established a new Professorship in Orthopaedics for Resident Education, which reached the Distinguished Level. He and his wife, Nancy (N '54), are also steadfast supporters of the School of Nursing. Evarts serves on the SMD Alumni Council and the SMD National Council. He has received numerous national and local awards, and was appointed to the Institute of Medicine of the National Academy of Sciences in 1997.

# University of Rochester School of Medicine & Dentistry Awards



## Dean's Medal The Wilmot Family

*Judy Wilmot Linehan, the late Bill Wilmot, Tom Wilmot*

In Rochester and the surrounding region, the Wilmot name has become synonymous with excellence in cancer research and care. Inspired by the tragic loss of loved ones, the family's multigenerational fight against cancer was launched when James P. Wilmot created a foundation to fund research fellowships at the University of Rochester Medical Center. Since then, the Wilmot family has donated more than \$50 million to the University to support cancer

research and treatment. More than one hundred Wilmot Fellows have trained in cancer research, having a profound impact on the diagnosis, prevention, and treatment of cancer. Earlier this year, the Wilmot family established a distinguished professorship to support a senior researcher in the relatively new field of cancer genomics.

We are sad to note the passing of Bill Wilmot on September 8, 2014.



## John N. Wilder Award Michael F. Buckley

An attorney in the Rochester community for forty-six years, Michael Buckley has devoted a tremendous amount of his time to volunteer for the University of Rochester Medical Center. A Highland Hospital board member for three decades, he is past chair of the Highland Hospital Foundation and currently chairs the Hospital's capital campaign committee. In addition to his role as chair of Strong Partners Health Systems Inc., he serves on the board of the Medical Center and chairs its Development Committee. A steadfast supporter of the James P. Wilmot Cancer Institute, he has also served on its board and is legal counsel to the James P. Wilmot Foundation.





## Dean's Special Recognition Award Class of 1954

*Top (L–R): John Peachey, David Kluge, Harold Coleman, Robert Rene, Theodore Max, F. Gilbert Gregory, Clifton Peterson, Lanse Hoskins. Botton (L–R): Eugene Gangarossa, Robert Wright, Joae Walker, F. Josph Flatley*

Members of the Class of 1954 are known as a generous and tightly knit group. In honor of the class's 35th reunion, David Kluge led a one-year drive to raise \$50,000 for an endowed scholarship. That effort expanded to a fifteen-year drive. Today, the Scholarship Fund of the Class of 1954 has a value of more than \$1.3 million and is by far the largest endowed scholarship established by a University of Rochester class. More than eighty medical students have benefited from this generosity.

"The Hourglass Project: Physicians' Reflections on Fifty Years of Patient Care 1954-2004" was launched in celebration of the class's fiftieth reunion. Their essays, which describe how the momentous changes in health care affected their relationships with patients,

are accessible on the School's website.

In 2004, the Class of 1954 Problem-Based Learning Room was named in honor of the group's reunion and their ongoing gifts to the School of Medicine and Dentistry. Find a link to their essays, which describe how the momentous changes in health care affected their relationships with patients, at [RochesterMedicine.urmc.edu](http://RochesterMedicine.urmc.edu).

Class members have excelled in various medical disciplines in locales throughout the world, and several have been honored with the School's alumni awards.

## Susan B. Anthony Center



### Susan B. Anthony Lifetime Achievement Award Linda H. Chaudron, M.D.

Chaudron, associate vice president and senior associate dean for Inclusion and Culture Development, has received this year's Susan B. Anthony Lifetime Achievement Award for her work as a champion of women in science and medicine.

"Linda's tenacious spirit guides her to mentor younger scholars to be their best and accomplish their goals. She is always there to provide a listening ear and encouraging word," said Catherine Cerulli, J.D., Ph.D., director of the Susan B. Anthony Center at the University of Rochester.

Chaudron is a professor of Psychiatry, Obstetrics and Gynecology, and Pediatrics at the SMD. She has earned national recognition for her clinical and research efforts to treat women with mental illnesses during pregnancy and postpartum. Chaudron was recently elected to the board of directors of the Women Executives in Science and Healthcare, and was named a distinguished fellow in the American Psychiatric Association in 2009. Her research and clinical care have helped many patients who suffer from perinatal depression.

Chaudron is the 14th woman to receive the Susan B. Anthony Lifetime Achievement Award. Prior recipients include Nora Bredes, former New York State legislator and past director of the Susan B. Anthony Center, and the late Esther M. Conwell, Ph.D., winner of the 2010 National Medal of Science and research professor of Chemistry at the University.



# Templeton gift supports health informatics at the University of Rochester

Phil Templeton (MD '82) entered the School of Medicine and Dentistry hoping to become a family physician. When he got mononucleosis during a rotation in Pediatric Emergency, however he was forced to change his class schedule, he added a radiology elective. This pointed him in a new direction.

Templeton became the youngest radiology chair in the country, and a pioneer in digital x-ray, picture archiving, and communication system and teleradiology.

"I have decided to give back to the University that has played an important part in my career and life," says Templeton, "who is now CEO of Atomic Database" Corporation (AtomicDB).

Templeton donated \$250,000 to support the Rochester Center for Health Informatics (RCHI), which will form one of the cornerstones of the University's new Institute for Data Science. The Medical Center and University are now involved in a tremendous new data initiative applied to medical problems and questions.



"I believe the University is poised to be a national leader in health informatics," he says. "I hope that my gift will serve as a foundation for new discovery and applications to better understand and solve complex problems in health care."

Templeton's gift will allow Martin Zand, MD, PhD, director of the RCHI, to hire an analyst and use AtomicDB's system to combine very large amounts of data—from areas such as social and physician

networks and health care delivery systems—rapidly and efficiently. The technology simplifies big data and allows a researcher to focus more on research than data management. Zand's team will work with the University's IBM BlueGene/Q supercomputer—one of the top five most powerful university-based supercomputing sites in the nation—along with the AtomicDB system, to study population health and health care delivery in the greater Rochester community.

"These unique tools will put the RCHI at the forefront of big data health informatics research," says Zand.

Templeton, a board certified radiologist and a fellow of the American College of Radiology, was chief of Thoracic Radiology at Johns Hopkins and University of Maryland Hospitals, and chair of Radiology at the University of Maryland. At Maryland, he created the largest electronic imaging department in the United States. He also developed a successful national teleradiology business and has been a consultant, chief medical officer and investor/entrepreneur in various fields of medicine, finance and social networking.

## A Dream of Two Snakes (DNA)

Alumnus Martin E. Messinger (BA '49), a life trustee of the University, donated *A Dream of Two Snakes (DNA)*.

Pictured with Messinger is Medical Center CEO and SMD dean Mark Taubman, MD (See page 2 for full story.)







## Gary Morrow, Benefactor Distinguished Professor

Gary Morrow, PhD (Flw '77, MS '88), an authority in cancer control and survivorship for nearly forty years, was installed as the inaugural Benefactor Distinguished Professor. A professor in the departments of Psychiatry and Surgery, Morrow directs the Wilmot Cancer Institute's Cancer Control and Survivorship research program. Morrow

has been a leader in attracting more than \$40 million in federal grants. Most recently, as principal investigator of an \$18.6 million, five-year grant from the National Cancer Institute, he is leading a nationwide clinical research network to investigate cancer-related side effects.

*Pictured from left: medical center CEO and dean Mark Taubman, MD; Morrow; former medical center CEO Bradford C. Berk, MD (MD '81, PhD '81); and UR president Joel Seligman.*

## Schyve gift to enhance bioethics scholarship

University of Rochester alumnus Paul M. Schyve (BA '66, MD '70, Res '74) has committed \$5 million to the University to support the study and practice of bioethics in health care and research.

"Breakthroughs in areas such as stem cell research, assisted reproduction, genomics, and neurocognitive science are rapidly changing the way we are born, live, and die. Patients, families, providers, and policy makers are facing difficult and confusing decisions, fraught with moral and ethical implications," says Stephanie Brown Clark, MD, PhD, director of the division of Medical Humanities and Bioethics. "This gift will help us further develop informed and thoughtful approaches to these kinds of concerns."

"As an academic medical center located on a university campus, we are uniquely positioned to become a leading resource for bioethics scholarship in upstate New York. Dr. Schyve's generous gift will help make

that a reality," says Mark B. Taubman, CEO of the URM, dean of the SMD, and University vice president for Health Sciences.

Schyve, a Rochester native, became



increasingly interested in the ethics of health care three decades ago, when developing accreditation standards related to clinical, research, and organizational ethics at the Joint Commission. He is senior advisor for Healthcare Improvement at the Joint Commission, which he joined as director of Standards in 1986; subsequently serving as vice president for Research and Standards and senior vice president before assuming his current role.

"My education at the University played an important formative role in my professional career," Schyve says. "I am pleased to find such a deeply meaningful way to give back."

# Nathan / Goldberg gift will advance research on myotonic dystrophy type 2

A \$1.25 million gift from Lilyan (Lil) and Albert (Alfy) Nathan of Florida and Michael and Sherry Goldberg of Chicago will support research on myotonic dystrophy type 2 (DM2) at the SMD. The gift will create a new research program that will be led by URM neurologist Chad Heatwole, MD.

Funds from the Goldberg Nathan Myotonic Dystrophy Type 2 Endowment will be dedicated to finding new therapies for the disease. Specifically, it will allow Heatwole and other researchers to develop a more precise understanding of DM2 – how it progresses, what factors impact the disease, what symptoms are important to patients, and what the most suitable clinical trial outcome measures are – and create the infrastructure necessary to entice pharmaceutical companies to invest in new experimental treatments. The researchers also plan to begin studying cell samples of individuals with the condition to evaluate whether promising genetic therapeutic strategies in DM1 can also be utilized to help patients with DM2.

The generic symptoms that DM2 patients tend to report – muscle aches and weakness – often result in the disease being mistaken for a pain disorder such as fibromyalgia, leading the patient and their physicians on a long and frustrating diagnostic odyssey. Despite troubling symptoms, patients often remain undiagnosed for years or even decades.

This was the experience of Michael Goldberg's son, who suffered for many years before a diagnosis was finally made. Even after it was determined that their son had DM2, the family struggled to find neurologists who specialized in treating

the disease. They were even more discouraged to discover that very little research funding was being dedicated to find new therapies.

On a trip to Israel, a researcher at the Hadassah Medical Center in Jerusalem told Goldberg that research on DM2 was being done at the U of R and, in his opinion, the physicians and scientists in Rochester were leaders in the field. Shortly thereafter, Michael and his son came to Rochester and met with Heatwole.

"Dr. Heatwole gave us the first glimmer of hope that someone was actually interested in helping people with this disease," said Goldberg, founding partner of the Chicago firm Goldberg Weisman Cairo.

"While our family had never made a major donation to a charity or medical institution before, we believed in Dr. Heatwole and the University of Rochester, and in the importance of helping find a cure for DM2 for our son and the untold number of other people afflicted with this disease."

In addition to the money given by Sherry and Michael Goldberg, and by Sherry's parents, Lil and Alfy Nathan, the family has also helped raise funds for DM2 research at the U of R from friends and family. Alfy Nathan recently passed away and the family suggested that donations be made on his behalf to the University and the Goldberg Nathan Myotonic Dystrophy Type 2 Endowment.



Above: Albert and Lilyan Nathan; below: Sherry and Michael Goldberg





If you see any alumni whom you would like to contact, use the Online Directory at [www.alumniconnections.com/URMC](http://www.alumniconnections.com/URMC) to find address information.

Submit class notes to your class agent or to [RochesterMedicineMagazine@urmc.rochester.edu](mailto:RochesterMedicineMagazine@urmc.rochester.edu).

Note: MD alumni are listed alphabetically by class, resident and fellow alumni follow in alphabetical order, and graduate alumni are listed separately in alphabetical order.

## MD Alumni

### 1948

After retiring from the practice of internal medicine and cardiology in 1993, **Marvin A. Epstein**, along with his wife, still leads a very active life. John Muir Medical Center, of which he was one of five founders, is one of the best hospitals in the San Francisco Bay area and Marvin is still somewhat involved. He and his wife often go to the theater, and they have many friends in this area. They have ten grandchildren, and six great grandchildren.

### 1952

**Jerry T. Nolan** (BA '49) writes, "After eighty-nine years of avoiding hospitals and surgery (cataracts don't count), I was caught big time in September. I had what seemed like a minor fall, but it started a slow bleed. Weeks later, when I couldn't ignore the symptoms any longer, I submitted to a CAT scan, which revealed to my horror a large subdural causing a midline shift. Craniotomy and clot removal followed and I made a full recovery in a few weeks. I've even grown my hair back. All my dire thoughts about the risk of hospitalization and surgery were unfounded in my case."



### 1954

**F. Gilbert Gregory** was elected to the Hamburg (NY) High School Wall of Fame in September 2013. He retired from fifty-four years of private practice of internal medicine in April 2014.

### 1955

**Douglas B. Hansen** writes, "Interned at Barnes Hospital St. Louis, two years at NIH in neurophysiology, four years at Columbia Presbyterian in psychiatry and child psychiatry and chief resident of psychiatry. Two years as instructor at Columbia and in 1964 moved to Baylor College of Medicine in Houston as head of child psychiatry and retired in 1987 as professor of psychiatry and retired from practice in 1993.

I was the first president of the US state organizations of child psychiatry and was the founder of the national review course in child and adolescent psychiatry. I began a child and adolescent hospital that was very successful and retired in 1993. And I did retire, not looking back, and had a very good life with a wonderful wife and three children—one founded a national corporation and retired at age fifty.

We have travelled the world with emphasis on unusual places, soon to go to Cuba. We live adjacent to the Houston Yacht Club and life is good."

### 1959

**A. Lawrence Rose** writes, "Staying active dog-walking (Chance, our chocolate Lab), leaf-raking, errand-running, and Victorian Staffordshire Figurine-collecting. Just retired as treasurer of the Staffordshire Figure Association. Actively practiced ophthalmology for thirty-six years, initially on Miami Beach, and then for eleven years in Harrisonburg, VA, located in the Shenandoah Valley of Virginia (almost Heaven)."

### 1960

**William E. Powell** (BA '56) writes, "Retirement continues not to disagree with me. I am functioning now as de facto med class representative. Our Clear Lake Area Writers has just published its second anthology titled, *Selections Fall 2014: A sampling of works from a variety of authors along the Texas gulf coast*, available on Amazon. I sing bass in the Noteables, a chorus representing the Houston Symphony League – Bay Area (HSL-BA), where we sing (for honoraria) for Houston area organizations. I'm also a member of OLLI (Osher Life Learning Institute), associated with University of Texas Medical School - Galveston. We write and read life stories twice a month for three hours. I usher at the Alley Theater, Houston's recognized repertory theater, which is second to none. I am soon to celebrate, with my extended family, my entry into the octogenarian club where most of my classmates reside. I am historian for the HSL-BA board of directors and have just finished

writing a forty-year history of this group from its origins in 1975. I continue to function as a hand puppeteer for the HSL-BA, teaching first graders in twenty-six elementary schools about the four families of a symphony. I am "Maestro, the Magnificent," the conductor. I attend a local city meeting weekly to discuss elements of our community. Finally, I am attempting to keep up with four children and ten grandchildren."

### 1963

**Paul Levine** (Res '64) is now research professor of Epidemiology in the department of Epidemiology, School of Public Health, University of Nebraska Medical Center in Omaha, where he teaches graduate students about infectious agents associated with cancer and conducts research. His latest publications involve prognostic markers of inflammatory breast cancer (IBC), clusters of IBC, and risk factors for early-age onset of chronic myelocytic leukemia. He is beginning work on a new NIH grant investigating links between chronic fatigue syndrome, autoimmunity, and cancer, particularly non-Hodgkin's lymphoma and brain cancer. Most of his teaching is online. He still lives in Bethesda, MD.

### 1968

Xavier High School inducted eleven individuals to its Hall of Fame in November 2014, including **Richard H. O'Reilly**. As chairman of the department of Pediatrics at Memorial Sloan-Kettering Cancer Center, O'Reilly is one of the world's foremost scientists working on bone marrow transplantation. An extraordinary clinician, researcher, and teacher, O'Reilly pioneered the development and application of cellular therapies to treat lethal diseases. He was the first doctor to conduct a successful marrow transplant from an unrelated, compatible donor — a technique now used on 2,500 cancer patients annually. O'Reilly also developed the transplant method that has allowed children born without an immune system to receive a curative transplant from a half-matched parent or sibling.

He won the Lifetime Achievement Award from the American Society for Blood and Marrow Transplantation. Author or co-author of hundreds of articles, papers, and research studies, O'Reilly has served as a visiting scholar or professor at the University of Rochester, Johns Hopkins University, Yale University and Emory University. O'Reilly serves on the Board of Regents of Ronald McDonald House, where he is a tireless fund raiser for research.

## 1968

XA study published in May's *New England Journal of Medicine* showed that long-term antimicrobial prophylaxis can significantly reduce the risk of recurrent urinary tract infection in children with vesicoureteral reflux. The findings are part of the national RIVUR (Randomized Intervention for Children with Vesicoureteral Reflux) trial. The NIH study was co-authored by Le Bonheur Children's nephrologist **Russell Chesney**, who serves as chairman of the RIVUR study steering committee.

## 1977

**J. William Parke** writes, "My wife Ann (Peach) and I live in Lancaster, PA. Our son Tom and his wife Amy live in San Francisco and have two children. Daughter Sarah and her husband Tripp live in Manchester, NH, and have one child. Daughter Maggie lives in Bangor, Wales (UK) and works at the university there.

## 1990

**Ellen L. Singer** (Res '94) remains busy with a full-time combination of internal medicine, pediatrics, and urgent care clinics and administrative work as regional chief of outpatient Internal Medicine for Northwest Permanente. She proudly serves, for the past two years, as the board president for Neighborhood House. Neighborhood House is a 110-year-old social service non-profit organization in Portland that serves more than seventy thousand low-income city residents with emergency food and housing, family education, Head Start, school-based programming for at-risk children, and home- and community-based care for senior citizens.

## 1991

**Darrell Pardi** (Res '95) writes, "I am now professor of Medicine and vice chair of the division of Gastroenterology and Hepatology, associate dean for Medicine and Pediatrics in the Mayo School of Graduate Medical Education, and associate chair for Education in the department of Medicine at the Mayo Clinic. I have three children aged seventeen, fifteen and twelve."

## 1992

**Bernard J. Plansky** is continuing solo family medicine practice in Pittsford, NY, and developing trauma-informed educational programs for patients with chronic medical conditions through non-profit Center for Integrative Medical Research (CIAMAR). As director of CIAMAR, he is integrating Eternal Spring Chi Kung, Nei Kung, Tai Chi and playing

Shakespeare into medical practice. He is on the board of directors of Rochester Community Players and recently performed in *King Lear*.

## 1994

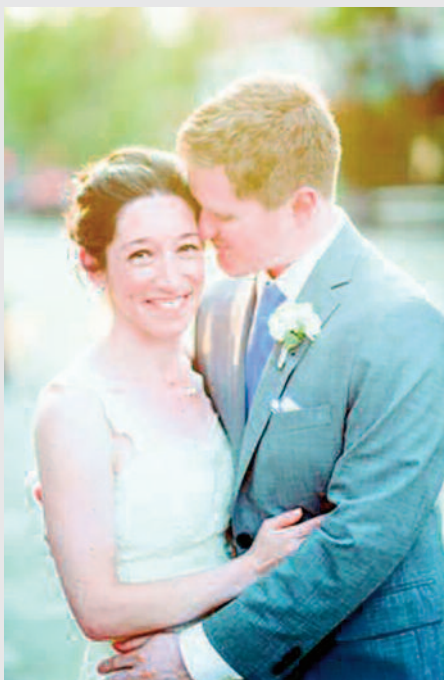
**Caterina Violi** has been widely recognized for showing dedication, leadership and excellence in obstetrics and gynecology. Her accolades include the Special Excellence in Endoscopic Procedures award, as well as recognition for several consecutive years in the Castle Connolly listing of Top Doctors of the New York Metro Area. She has been named a top doctor in Fairfield County by *Greenwich* and *Stamford* magazines, and has been recognized by the Leading Physicians of the World.

## 2002

**Elizabeth A. Reddy** joined Upstate Medical University as assistant professor of Medicine, specializing in infectious diseases. Prior to joining the hospital, she served in Tanzania as assistant professor of infectious diseases for the Duke University-Kilimanjaro Christian Medical Center Collaboration and clinical research site leader for AIDS Clinical Trials Group studies.

## 2010

**Allison Pollock** married **Andrew Pistner** (MD '12) on August 2, 2014, at the Overture Center for the Arts in Madison, WI. Pollock is a pediatric endocrinology fellow at the University of Wisconsin in Madison. Pistner is an internal medicine resident there.



## 2012

**Andrew Pistner** – See MD Class of 2010

# Resident & Fellow Alumni

**Robert T. Buran** (Res '58) writes, "I have my fellowship in radiology and started a school of x-ray technology. The school is now being run by a graduate of Strong Memorial. I'm eighty-seven and well — Arlene is eighty-five and having some health problems. We miss Rochester."

**Sandra Dayaratna** (Res '00) has been appointed clinical associate professor and director of the division of General Obstetrics and Gynecology at Thomas Jefferson University. She previously held faculty positions at Harvard and Case Western Medical Schools, and joins Jefferson most recently from West Virginia University where she served as assistant professor and clerkship director in the department of Obstetrics and Gynecology. She has been board certified as an Ob/Gyn specialist since 2002, and has served as an examiner for the American Board of Obstetrics and Gynecology since 2011

**Jonathan B. Gavras** (Res '90, Flw '90) has joined Avalon Healthcare Solutions as president. In this capacity he is accountable for Avalon's key profit/loss metrics and provides leadership to the Account Management, Network, and Product divisions.

Gavras most recently served as president of GuideWellHealth, a group of companies under GuideWell Mutual Holding Corporation that includes Florida Blue (Florida's Blue Cross and Blue Shield Plan), where he was responsible for the oversight of their wholly owned, direct delivery of care entities. Prior to joining GuideWell Health, Gavras served as Florida Blue's senior vice president, Delivery System and chief medical officer. Before joining Florida Blue in 2006, Gavras held several leadership positions at UnitedHealth Group, including national medical director with oversight of the health plan clinical operations for UnitedHealthcare.

**Armando R. Filomeno** (Res '71) just published *Los Recuerdos en la Memoria* (*Remembrances in Memory*), the third volume of *Reminencias y Anécdotas* (*Reminiscences and Anecdotes*). The first volume was published in 2010; the second volume was published in 2012. All three books were published by Universidad Peruana Cayetano Heredia.

**Paul Levine** (MD '63, Res '64) — See MD Class of 1963



**Harry C. Miller** (Res '61) writes, "I was happy and honored to be awarded the Distinguished Alumnus Award last May 31 by Yale University School of Medicine at my sixtieth reunion. My name is on a plaque on a stairway wall in the medical school, although one needs to know which one in order to find it. Still, it was awfully nice of the dean to present it to me at the annual meeting of the medical alumni."

"Otherwise, my wife Kari and I are well, happy, and functioning far better than we deserve, and plan to continue to do so for the foreseeable future. We met at Strong Memorial Hospital and married some forty-five years ago. Smartest thing I ever did!

"Major accomplishment of the past few years has been shooting my age in golf on four occasions, most recently two years ago, but I plan on some lessons this year."

While splitting her time between the Golisano Children's Hospital REACH Program at the Bivona Child Advocacy Center and the division of Pediatric Emergency Medicine, **Elizabeth Murray** (MBA '99, Flw '10) is also a spokesperson for the American Academy of Pediatrics. In addition, she recently completed the Mayo Clinic's Social Media Residency Program.

**Navin C. Nanda** (Flw '73) received a Conferred Honorary Doctorate of Science Degree (D.Sc) from Sakaria University, near Istanbul, Turkey. She is Distinguished Professor of Medicine and Cardiovascular Disease at the University of Alabama at Birmingham.

**Darrell Pardi** (MD '91, Res '95) —  
*See MD Class of 1991*

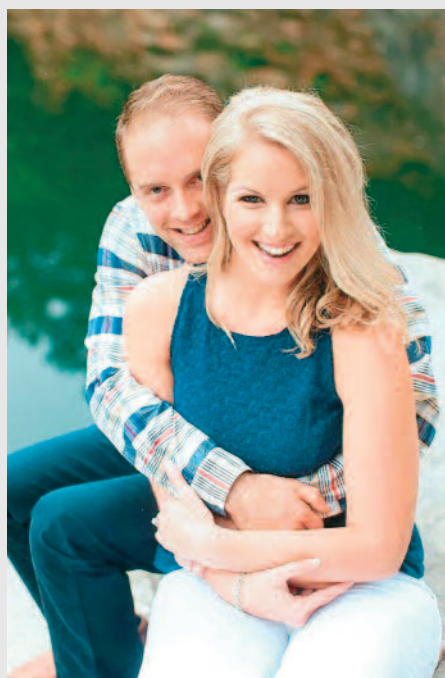
Finger Lakes Medical Associates' Pediatric Department has added **Steven A. Schulz** (Res '10) to its roster of providers. He is a board certified pediatrician and a fellow of the American Academy of Pediatrics. For the last four years, Schulz has worked for Crusader Community Health in Belvidere, IL. Schulz has keen interests in the interaction among general pediatrics, community advocacy and resource coordination; the care of children with developmental-behavioral difficulties and other special healthcare needs, and service to the underserved. His goal is to see a mix of general pediatric patients and children and youth with special health care needs. He also plans to volunteer at the URM to work with pediatric residents and medical students — teaching, developing projects, and allowing for shadowing opportunities at FLMA. Over the course of his career tenure with FLMA, he hopes to strengthen the medical home model

and develop connections to enhance the "Finger Lakes Region's medical neighborhood." Schulz enjoys spending time with family and friends, especially boating and skiing at his family's home on Keuka Lake. Hiking, biking, downhill skiing, attending and participating in various sporting events, and travelling are other interests. Schulz and his wife, Narina, have a son, Cullen.

**Ellen L. Singer** (MD '90, Res '94) —  
*See MD Class of 1990*

## Graduate Alumni

**David J. Easterhoff** (MS '11, PhD '13) is now engaged to Chandler Elise Moeller, both of Durham, NC. He is employed by the Duke Human Vaccine Institute.



**Jennifer A. Powell** (MBA '86, MS '86) writes, "Now in my tenth year as an independent consultant, working with communities, regions and states to build and sustain quality improvement/learning health systems. Rochester has always led the way in building communities of health. It is exciting to see funding from states, philanthropies and CMS focused again on engaging communities in elevating health care for all."





# A Silver Anniversary

Up until a quarter century ago, *Haemophilus influenzae* type B, or Hib, infected about twenty thousand people every year in the United States, and many more around the world. Hib is a ruthless bacterium, causing meningitis and other severe – and sometimes deadly – diseases. Most of its victims are tiny, often still in diapers.

In 2013, however, the Centers for Disease Control recorded two cases of Hib in American children under five-years-old. Just two. Over the past twenty-five years, the incidence of disease in this age group fell from about forty or fifty cases per 100,000 down to point zero eight. Once the scourge of pediatricians, *Haemophilus influenzae* type B is now nearly as innocuous as a teddy bear.

*This vaccine is officially twenty five years old, but it was under development for more than two decades. You began working with Dr. Smith while at Harvard University in the 1960s, prior to coming to the University of Rochester in 1976. What inspired you to join the team?*

Dr. Smith and his Boston group thought that the surface carbohydrate of Hib could be purified and used as a vaccine. I was not particularly interested in the conceptual stuff, being more of a Yankee, engineer type. But I knew how to do the hands-on work. I had an undergraduate degree in chemistry, and had worked in the chemical industry. I was pretty good at getting things done in a laboratory. As Smith and most of the others in his group were doctors, they had less experience with these things. So he recruited me. It was really a matter of fitting in well. Our work in Boston showed the carbohydrate could raise the immunity in kids older than two years, but not in infants.

In Rochester, we began working on a “conjugate” vaccine, joining the Hib carbohydrate to a protein from another bacterium to stimulate an immature immune system.

*(Editor’s Note: For those unfamiliar with the conjugate vaccine strategy, it’s a little like putting a “kick me” sign on the carbohydrate, which would otherwise go unnoticed by immature immune systems.)*

*In addition to its being a long haul, it was sometimes a struggle. After failing to find a manufacturer willing to produce and market Hib vaccine, Dr. Smith left the Medical Center to find investors and launch a company. What kept you moving forward through all of this?*

It was my job. It never occurred to me to stop working on it. I didn’t wake up with visions of dying children who needed to be saved. I just woke up thinking, I’ve got to get out of bed and get to the lab.

All the lab work was done at the Medical Center. Even after Smith formed this little company, called Praxis Biologics, the vaccine was made in a lab in Strong that we converted to a clean room. Praxis raised the capital to pay for the renovation of the space and bring in a few people, particularly chemist Ronald Eby. We had the assent and support of the Medical Center.

Most important, the atmosphere in Rochester was good for our work. Unlike my experience in Boston, I found Rochester to

The reason for this sensational turnaround is easy to pinpoint. In April 1990, the Food and Drug Administration licensed a vaccine that worked, even in the youngest recipients. Today, such vaccines are used in more than one hundred countries, protecting millions of infants and children from this potentially devastating infection.

The first Hib vaccine for infants was developed under the leadership of three URM scientists: the late David Smith (MD ’58), Richard Insel, MD, and Porter W. Anderson, PhD, a microbiologist and U of R professor emeritus of Pediatrics, and of Microbiology and Immunology. In recognition of the vaccine’s 25th anniversary, *Rochester Medicine* caught up with Anderson in Boston.

be a place where there was a real spirit of collaboration among scientists. And people seemed generally more friendly and cooperative; parents were more willing to let us try the vaccination in their kids. They trusted University of Rochester doctors like Mike Pichichero, and were more receptive to medical experimentation. That was critical. There were other institutions and companies quickly following along, but we beat them into the field because of those early human experiments.

*Did you celebrate when the vaccine was finally licensed in 1990?*

I think the moment for me happened this way: The chief of the Pediatric Infectious Disease division was Keith Powell, MD. He had an infant daughter named Lindsey, and he said, “I think what you’re doing may prevent my baby from getting this terrible disease, so I want to vaccinate her and see if she responds.”

So Lindsey became the first infant to be vaccinated with our conjugate vaccine – or any conjugate vaccine. The night that I got the results from testing her blood, and saw that the antibodies went sky high, I knew this was going to work. I sent an abstract to the Society for Pediatric Research based on this one subject, and they accepted it. That was kind of the *aha* moment for me. In 2008, I endowed the Lindsey Chair for Pediatric Research at the School of Medicine and Dentistry to recognize children and parents who participate in clinical trials.

*What are you doing these days?*

The same patent we obtained for the Hib vaccine was used for the conjugate vaccine for *Streptococcus pneumoniae*. It is expensive to make and doubly expensive to use in the field. Industrialized countries can afford it, but it’s too expensive for the Third World, which is where most of the disease happens.

So after I retired in 1996 I returned to Boston and, with pediatrician Richard Malley, started developing a competitor of sorts to pneumococcal conjugate vaccines. It can be made for pennies a dose, and is now being tested in children in Kenya. We may know in a couple of years whether it’s going to prevent the disease. If it does, our intent is to transfer the technology to Third World institutes so they can make their own. We are supported by PATH and funds from the Bill and Melinda Gates Foundation.

## Richard Satran, MD



Richard Satran, MD, a professor emeritus with the University of Rochester School of Medicine and Dentistry, died in September at the age of eighty-five. Satran was one of a key group of faculty and academic leaders that created the department of Neurology in the 1960s.

“Richard was a neurologist’s neurologist and his passion, integrity, and approach to neurology lives on in all of us,” said Robert Holloway, MD, MPH, chair of Neurology. “He was always a fierce advocate for patients and their quality of life.”

Satran arrived at Rochester in 1962, joining two other neurologists in the department of Medicine. He worked to help establish the department of Neurology, founded in 1966 under the leadership of Robert Joynt, MD, PhD. Since then, the department has grown dramatically and is recognized as one of the best in the nation.

Appointed a professor of Neurology in 1976, Satran twice served as acting chair of the department during the 1980s. He also served as associate dean for Admissions at the School of Medicine and Dentistry for four years. He was appointed professor emeritus in 1997.

His primary interest was teaching medical students and neurology residents. Among his many clinical roles, Satran saw Monroe Community Hospital patients who had multiple sclerosis, an interest he maintained throughout his career. He served as a member of the advisory board of the local Multiple Sclerosis Society chapter until his death.

Satran is survived by his wife, Hilda, daughter, Amy (Raymond), son, Neal (Elizabeth), and grandson, Roger.

## J. Daniel Subtelny, DDS



J. Daniel Subtelny, DDS, a pioneer in the field of craniofacial orthodontics and longtime chair and faculty member at the URM’s Eastman Institute for Oral Health, passed away in September at the age of ninety-two.

Widely regarded as one of the world’s foremost educators in orthodontics, he founded the Cleft Palate Team at the Eastman Dental Dispensary and incorporated the diagnosis and treatment of patients with craniofacial anomalies into his orthodontic curriculum.

In recognition of this work, local government leaders declared June 20, 1997, as J. Daniel Subtelny Day, and the orthodontic clinic at Eastman Dental was renamed in his honor. In 2000, the Eastman Orthodontic Alumni Association and the University established the J. Daniel Subtelny Endowed Chair and Professorship to preserve his legacy.

“Dr. Subtelny’s influence and impact on the profession and his students are immeasurable,” said Eli Eliav, DMD, PhD, director, Eastman Institute for Oral Health. “His passing leaves a permanent void.”

Subtelny is the only individual to date to have received all four of the highest honors in the orthodontic profession: American Association of Orthodontists’ Milo Hellman Award (1959); American Association of Orthodontists’ Louise Ada Jarabek Memorial International Orthodontic Teachers and Research Award (1993); the American Board of Orthodontics – Albert H. Ketcham Memorial Award (1996); and the AAO’s James E. Brophy Distinguished Service Award (2006).

He is predeceased by his wife, Joanne Subtelny, PhD. He is survived by his children, Gregory Dan Subtelny, DDS, and Alysia Subtelny Plummer; grandchildren Benjamin Joseph and Ty Daniel Lantz-Subtelny, as well as a brother and numerous nieces and nephews.



## Richard Witherington Hyde, MD



The founding chief of Pulmonary Medicine at the University of Rochester, Richard Witherington Hyde, MD, died in October. He was eighty-five years old.

“He was a wonderful physician and a great mentor and teacher who truly embraced the missions of the institution in every way,” said Patricia Sime, MD, FRCP, chief of Pulmonary and Critical Care Medicine and associate chair for Research in the department of Medicine.

Those who worked closely with Hyde described him as a brilliant physician who had a knack for guiding, challenging and encouraging young doctors as they mastered the art and science of medicine. “I had the unique privilege of working with Dr. Hyde for more than twenty-five years at the URM. He brought outstanding clinical and scientific skills to this institution,” says Paul C. Levy, M.D., chair of the Department of Medicine. “What I admired most about Dick was his humble demeanor and insatiable curiosity. Even as he was nearing retirement, he remained fascinated by scientific problems and eager to jump into discussions on difficult clinical issues. I will dearly miss his down-to-earth attitude and insightful perspectives.”

Hyde joined the URM in 1969. He established and served as medical director of the Respiratory Therapy department, which is now known as the division of Pulmonary and Critical Care. Hyde also served as medical director of the Pulmonary Function Laboratory and oversaw tuberculosis care.

Hyde is survived by his wife Susan; four children – James, Theodore, Penelope Levine, and Robert; and six grandchildren.

## In Memoriam

John T. Bickmore (PhD '56)  
Antonio E. Castellvi (Res '81, Flw '82)  
Samuel S. Ciccio (Res '70)  
George J. D'Angelo (MD '51)  
Herbert C. Enos (MD '44)  
Joshua Allan Fierer (Res '65)  
Roberta E. Flesh (Res '75)  
Steven E. Fritz (MD '86)  
Pamela R. Gilmore (Res '96)  
Robert Glassman (Flw '69)  
Michael M. Gold (MD '53)  
Robert Henry Ginter (MD '73)  
Robert P. Gulick (MD '57)  
J. Carl Hornberger (MD '49)  
Robert K. Johnson (MD '57)  
Ronald F. Kaplan (MD '58)  
Kon-Taik Khaw (MD '57)  
Antonio F. Lasorte (MD '48)  
Horace A. Charles LoGrasso (MD '37)  
John H. Lynn (MD '69)  
James Vincent Maloney (MD '47)  
William B. Mason (MD '50)  
John R. Nye (MD '59)  
John P. Olson (MD '57)  
James A. Reid (Res '59)  
Hugh S. Richards (MD '45)  
John C. Smith (Res '56)  
Barton R. Spitz (MD '59)  
William L. Sutton (MS '55)  
George P. Vennart (MD '53)  
Leslie A. Walker (MD '48)  
Richard S. Wilson (MD '44)  
John H. Wulsin (MD '44)

Medical students Nguyen Mai (MD/PhD) and Stephen Miranda (MD '16). See more photos of our students at: [urmc.rochester.edu/education/md](http://urmc.rochester.edu/education/md)









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**University of Rochester**  
School of Medicine and Dentistry  
601 Elmwood Avenue, Box 643  
Rochester, NY 14642

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