

Quarterly

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School of Medicine
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UNIVERSITY OF WISCONSIN-MADISON

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QUARTERLY

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

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MARCH 2023

Friday, March 17

Match Day*

APRIL 2023

Friday, April 28

Spring WMAA Board of Directors
Meeting, Scholarship Reception and
WMAA Awards Banquet*

MAY 2023

Friday, May 12

MD Graduate Recognition Ceremony

JUNE 2023

Thursday, June 1,
and Friday, June 2

Medical Alumni Weekend, including
Reunions for the MD Classes of 1958,
'63, '68, '72 and '78 and the Annual
Reunion of the Half-Century Society*

* Event details are subject to change based on Centers for Disease
Control and Prevention guidelines related to COVID-19 in this region.

CALENDAR

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Snow dusts the red bridge railing and the roof of the gazebo in the Pond Garden of Allen Centennial Gardens on the University of Wisconsin-Madison campus in late fall 2022. —Photo by Althea Dotzour/UW-Madison

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Participants of the Diversity Summit examined past and present factors related to Indigenous health, as they looked forward.

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Skyward Views

Health care professionals have captured stunning aerial views from the Med Flight helicopter as they embark on life-saving journeys.

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Homecoming Weekend

Warm hugs were prevalent when in-person autumn gatherings resumed for MD alumni and their guests.

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Nicholas Lepa, MD (PG '19)—an emergency medicine flight physician who completed postgraduate training at UW Health—looks out over Lake Mendota and Madison from the Med Flight helicopter.
—Photo by Pete Rankin, RN

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ROBERT N. GOLDEN, MD



The start of a new year is a wonderful time to reflect on the past and to make commitments (also known as “resolutions”) for the future. In this issue of *Quarterly* magazine, we share news about richly deserved honors that spotlight the accomplishments of some of our distinguished faculty members, alumni and students. For example, we reflect on those outstanding faculty members who recently received endowed professorships, chairships and fellowships. In the Impactful Giving section, you will read about the University of Wisconsin School of Medicine and Public Health’s (SMPH) inaugural Faculty Investiture Celebration, at which we recognized the talented recipients and generous donors of these endowed positions.

This fall, we presented the SMPH’s highest award—the Folkert Belzer Award—to Richard Moss, PhD. For four decades, he has served with distinction in several leadership roles here, while he simultaneously developed an international reputation for his groundbreaking research in cardiac physiology. We also applaud Andrea Kratzke Nelson, MD, a resident in the

UW Baraboo Family Medicine Residency’s Rural Training Track, who wrote the winning entry in the 30th annual Monato Best Rural Health Essay Prize. Finally, I extend my personal congratulations to a dedicated alumnus and friend, Rolf Lulloff, MD ’67 (PG ’72), who has participated in four Boston Marathons, and this year, at age 80 and with a hamstring injury, he walked almost half the course. His goal was to raise awareness and funding for the Brain Center of Green Bay, which he co-founded to educate the public about neurological health and provide free, one-on-one counseling for individuals and family members affected by Alzheimer’s disease, Parkinson’s disease or other conditions that affect the brain.

As we look forward, we rededicate our school’s commitment to diversity, equity and inclusion—cornerstones for achieving our full potential in medicine and public health. The feature story in this issue highlights the SMPH’s deeply inspiring Diversity Summit. The afternoon of learning explored the theme of Indigenous health and celebrated the 10th anniversary of our school’s Native American Center for Health Professions.

As we continue our reflections, we share bittersweet news and pay homage to a remarkable trailblazer, Ada Markita Fisher, MD ’75, MPH, who was among our school’s first Black graduates and was the first Black woman to earn a medical degree from the SMPH. Her legacy lives on in many of our programs that advance health and health equity, including the Centennial Scholars and Centennial Clinicians Programs.

A bridge connecting the best traditions of the past with a bright and promising future is apparent in a key leadership transition at the SMPH. Upon his retirement, it was a personal pleasure to thank Ken Mount for his transformational role as the senior associate dean for finance. We also revel in welcoming the school’s new chief financial officer, Heidi Conrad. As you will read in the Leadership Q&A, she will be carrying on Ken’s legacy to ensure that the SMPH continues to have a secure financial base for advancing our missions.

As I compose this message, gentle snowflakes are falling outside my office window. At the same time, I am witnessing another dramatic transition as we say goodbye to the road-repair season (also known as spring, summer and fall) and welcome the joys of winter. While today’s snowfall will not require shoveling, it serves as a harbinger for the excitement of embracing winter and the inevitable passage of the seasons. May you enjoy those seasons, whatever they look like in the place you call home.

Robert N. Golden, MD

*Dean, University of Wisconsin School of Medicine and Public Health
Vice Chancellor for Medical Affairs,
UW-Madison*

KYLA LEE, MD '98, FACP

Salutations, Badger medical alumni! It is a tremendous privilege to be selected to serve as the president of our Wisconsin Medical Alumni Association (WMAA). I am thrilled to be moving forward—alongside our talented board members, WMAA staff and executive director, Sarah B. Rothschild—the many vibrant, inclusive missions of the WMAA. And I am proud of the organization's commitment to engagement, connection and philanthropy.

One of my most meaningful opportunities came when I realized my dream of acceptance into the University of Wisconsin School of Medicine and Public Health (SMPH), and I cherish the influence of the Wisconsin Idea. Another exceptional opportunity presented itself when Professor Emeritus Patrick McBride, MD '80, MPH, and former WMAA Executive Director Karen Peterson recruited me to serve on the WMAA Board of Directors in 2013. I jumped at the chance to support all that the WMAA does, including promoting scholarships for medical students in need, furthering the efforts of student interest groups, and supporting the school's leaders. I embrace the joy of helping to host WMAA events that foster interactions among medical trainees and alumni. These rays of inspiration were invaluable in my medical school journey.

In September, the Medical Student Association Class of 2024's co-presidents, Eric Hess and Alyssa McClelland, asked the WMAA for assistance for medical students. Upon hearing that the students' virtual experiences during the pandemic left them yearning for in-person events to create deeper connections with each other, the WMAA staff—with support from regional board members and alumni—planned and hosted Phase 2 and 3 “kickoff dinners” across the state.

The following month, Homecoming weekend was a blast! (See article on page 10.) At the WMAA's Friday Night Bash, I was fortunate to catch up with Kate

Skendzel Breslin, a medical student who is completing Phase 1 of the curriculum. She described her preparations to move in January from Madison to Marshfield, Wisconsin, to begin Phase 2 in the Wisconsin Academy for Rural Medicine. Despite our late-night talk, she was committed to volunteering the next morning at the student-run free clinic, MEDiC. My Saturday morning included meeting with more highly engaged trainees at the Student Organization Showcase and Reception organized by the SMPH Office of Multicultural Affairs and WMAA. We learned about many ways students impact the SMPH and beyond.

My recent talks with medical students Max Wetzel, Cole McDonald and Spencer Treu have been heartening. We have spent time together learning acute inpatient medicine and pondering ways to cultivate humanism in medicine. They are known for caring deeply about the welfare of patients and families. Max recently returned from Ecuador, where he lived with a family and studied linguistics. He stated, “The number one complaint in the U.S. health care system is that doctors are too cold. I am passionate about learning Spanish to improve health care access for our Spanish-speaking patients in rural Wisconsin. This trip was about learning the semantics of how to help them feel respected and welcome.”

I've found that by supporting the heartfelt missions of our talented students, we create inclusive leaders, committed researchers and empathic health care providers.

Thank you for all that you do for your communities and the WMAA. I encourage all alumni to “be difference makers” by giving back to our SMPH in some manner. Here are examples of ways to show your gratitude:

- Participate in the **Stethoscope Program**. A \$200 donation provides a high-quality, SMPH-branded tool to welcome a new medical student.
- Volunteer for our **Student Alumni Partnership Program**. Students



BROOKE DOVAL/GUNDERSEN HEALTH SYSTEM

appreciate the opportunity to get an insider perspective of the community in which they are interviewing; hands-on experience through shadowing; and guidance and advice over e-mail or a cup of coffee.

- Host an **SMPH alumni reception** in your geographic area. The WMAA staff can help you do this.
- Contribute to the **WMAA Fund**. The association provides funds to help when a student has unexpected expenses such as medical bills or the need to travel for a loved one's funeral, and to produce the beloved *Quarterly* magazine, plus much more.

It is more important now than ever for all of us to spread the mission of the WMAA and the beneficent Wisconsin Idea. On, Wisconsin!

Kyla Lee, MD '98, FACP

(she/her/hers)

President, Wisconsin Medical Alumni Association



TODD BROWN/MEDIA SOLUTIONS (3)



Top row (left to right): Marlon Skenandore speaks about his roles in the Oneida Nation; Donald Warne, MD, MPH, shares the keynote address at the Diversity Summit. Bottom photo: Danielle Yancey, MS (left), and Bret Benally Thompson, MD (right), present Warne with a symbolic blanket as a gift from the Native American Center for Health Professions.

Indigenous Health

DIVERSITY SUMMIT PONDERES THE PAST, PRESENT AND FUTURE

Learning from the past, living in the present and envisioning the future were all top of mind as members of the University of Wisconsin School of Medicine and Public Health (SMPH) and UW Health community gathered on September 29, 2022, for the annual Diversity Summit focused on the theme Honoring Indigenous Health: Past, Present and Future.

The event brought together Indigenous scholars, professionals and community members for an afternoon of programming that immersed attendees in the history, current state and future of Indigenous health equity—and the important roles that Indigenous history, food and culture play in health.

Danielle Yancey, MS (Menominee/Santee), the director of the SMPH's Native American Center for Health Professions (NACHP) who led the programming, says the event's goal was to create an immersive cultural experience to make Indigenous health visible. The Diversity Summit featured multiple speakers during its welcome, plenary and breakout sessions, as well as a reception.

"It was really important to us to not only have the opportunity to tell the story of Indigenous health, but to tell it in our ways, which are reflective of our traditions, our culture, our ways of being," says Yancey. "That is such a fundamental part of how we approach health and well-being and, at this event, it served as the connective thread throughout the talks and presentations."

The Diversity Summit began with an invocation by Elliott Funmaker, a member of the Ho-Chunk Nation. Next up was a welcome song by the MadTown Singers, a student-led drum group, and a welcome by Shiva Bidar-Sielaff, MA, CDM, the SMPH associate dean for diversity and equity transformation and the UW Health vice president for diversity, equity and inclusion.

Bidar-Sielaff presented a land acknowledgment to recognize Indigenous peoples as the traditional stewards of the land the school occupies.

"We are here today, and that is a great start," Bidar-Sielaff told participants. "We are taking action that begins not just by attending today's event, but by taking key learnings with us and reflecting on what

changes we can make in our personal lives and what society- and systems-level changes we can support."

Opening remarks by Dean Robert N. Golden, MD, highlighted NACHP's significant success as the center celebrates its 10th anniversary (see sidebar article).

Indigenous Health in Wisconsin

To start the plenary session, Amy DeLong, MD, a member of the Ho-Chunk Nation and a family physician with the Ho-Chunk Nation Department of Health, presented an overview of the state of Indigenous health in Wisconsin. She noted that there are 11 federally recognized tribes and 53,000 Native Americans living in the state. Approximately 45 percent of Wisconsin's Native American population resides in urban areas.

"Each tribe has its own government and maintains a government-to-government relationship with the state and federal governments," DeLong explained. "Each tribe also has its own unique culture, language, spiritual practices and health practices."

—Continued on next page

She presented data from the County Health Rankings and Roadmaps, published by the UW Population Health Institute. By overlaying a map of Wisconsin counties over tribal land, she showed how Native Americans experience some of the worst health disparities and outcomes in the state in counties such as Juneau, Adams, Menominee, Jackson and Sawyer. DeLong also discussed how decades of federal policies have limited access to fresh healthy food, exercise and overall traditional wellness—a situation that contributes greatly to chronic illness—but she noted that new programs are starting to change this dynamic. She also spoke about the resilience and assets of Indigenous communities and what they contribute to their communities and to Wisconsin and beyond.

“I want to remind everyone that Indigenous people in Wisconsin share a history marked by atrocities and trauma, such as genocide, boarding schools and forced urban relocation,” DeLong said. “And yet, here we are, with strong connectedness to our families and our culture, and with resilience and a sense of humor to see us through what we see as our responsibility to create a better world for our precious youth and the generations to come.”

Upstream Determinants of Health

The event’s keynote speaker, Donald Warne, MD, MPH—a member of the Oglala Lakota Tribe from Pine Ridge, South Dakota, co-director of the Johns Hopkins Center for American Indian Health, and Provost Fellow

TODD BROWN/MEDIA SOLUTIONS (3)



The Madtown Singers, a local drumming group, shared their talents through Native music.

for Indigenous Health Policy—began his presentation with a story.

He told of three sisters walking along a river and seeing babies struggling to stay afloat. The first sister declared, “This is a crisis, and we need to get the babies out of the water right now.” The second sister thought for a moment and said, “No, we need to teach the babies to swim so they can survive while they are in the water.” And the third sister continued walking upstream as the other two became angry and asked where she was going. She responded, “I am going to find out who is putting these babies in the water—and I am going to stop them.”

Warne explained, “That is public health, and that is traditional medicine. That is working further upstream. I would argue that we spend a lot of resources and money on the crisis and outcomes, rather than focusing on prevention.”

Speaking about the history of modern medicine and its beginnings in traditional medicine and Indigenous culture, he shared examples of seldom-told stories: Willow bark, a traditional medicine used to treat pain and inflammation, was used to develop aspirin. The first bulb syringe was used by Indigenous peoples of the Americas. And archeologists and anthropologists have documented that the first brain surgeries were performed by Indigenous peoples of South America.

“I often get asked how I incorporate traditional medicine into my modern medical practice,” he said. “And the answer is, I don’t. I incorporate modern medicine into a traditional practice because the traditional practice is much bigger. It transcends modern medicine.”

The root of the issue goes back to representation in medicine, explained Warne. On the 2020 census, he said, Native Americans made up 3 percent of the U.S. population, but only made up about 0.56 percent of physicians and less than 0.5 percent of faculty members, pointing to a lack of mentors and role models to recruit more Native students.

Data Warne presented from the Association of American Medical Colleges revealed that only approximately 100 or fewer Native students apply to medical school each year—out of 62,000 individuals who apply. And of the 22,000 people who

Kiana Beaudin, MPAS '15 (left), executive director of health, Ho-Chunk Nation, and Amy DeLong, MD, family physician, Ho-Chunk Nation Department of Health



are accepted annually to medical school, only 30 to 40 are Native Americans.

“This should not be acceptable to anyone,” Warne said. “I really applaud the work being done here in NACHP because we need to fix this. We have to be the third sister going upstream.”

Intentional Themes Throughout the Summit

Three concurrent breakout sessions carried on the earlier presentations’ themes of food as medicine, traditional healing and community engagement. Indigenous health professionals, elders, community engagement experts, NACHP staff and others—representing the Oneida, Menominee and Ho-Chunk Nations of Wisconsin, as well as the Koyukon Athabascan, Dena of Alaska—led the breakout discussions.

Some of the community engagement presenters are working with Carey Gleason, PhD, an SMPH associate professor of medicine, on projects related to Alzheimer’s disease and related dementias, in partnership with the Oneida Nation.



Diversity Summit participants learn from a poster presentation about Indigenous health.

The Diversity Summit ended with a meal of Indigenous foods prepared by Wild Bearies, led by executive chef and founder Elena Terry, and a closing song by the MadTown Singers.

Yancey notes that the level of intentionality in the event’s content was on full display throughout the afternoon. For instance, a discussion of food as medicine was followed by an Indigenous meal, the importance of community engagement was evident in a breakout discussion that included two Oneida elders, and aspects of traditional healing were present in everything

from the invocation to the Indigenous languages spoken at the event.

“I hope this helped attendees understand the culture and connections that contribute to Indigenous health,” she says.

“One of the most important parts of this event was that so many Indigenous people were a part of it,” Yancey reflects. “At the Native American Center for Health Professions, we recognize that this work cannot be done alone. It takes strong partnerships and collaborations. It was important to us to create space for these multiple voices.”

NACHP’s Ten Years of Success

The Native American Center for Health Professions (NACHP) at the University of Wisconsin School of Medicine and Public Health (SMPH) began its 10th anniversary in 2022. This milestone made the theme of the 2022 Diversity Summit—Honoring Indigenous Health: Past, Present and Future—extra poignant as representatives of NACHP shared presentations about a decade of progress and partnerships with Wisconsin’s Indigenous communities.

Established in 2012 by Erik Brodt, MD, an Ojibwe family medicine physician, with strong support from many people—including Bret Benally Thompson, MD (White Earth Nation), an SMPH associate clinical professor of medicine—the center’s goal is to increase the representation of Native Americans in the health care workforce and advance the health of Native Americans. Today, Benally Thompson is the principal investigator of NACHP’s Indians

into Medicine Grant, a competitive grant through the Indian Health Service held by only a handful of other medical schools in the United States.

Dean Robert N. Golden, MD, spoke at the Diversity Summit on September 29, 2022, about NACHP’s progress.

“When the Native American Center for Health Professions was founded, there were just five Native American medical students and faculty members in the school,” he said. “Now, following a decade of commitment and hard work, NACHP has grown tremendously. It currently serves almost 60 Native American health profession students across our campus, hosts an advisory council of more than 25 dedicated Native American health professionals, and has graduated nearly 80 students.”

Other points of pride include the 100 percent graduation rate of all Native

American and Alaska Native health professions students at the SMPH and, since NACHP’s founding, a 100 percent success rate of Native medical students who participate in the residency match. Multiple graduates are practicing in tribal communities and mentoring the next generation of Native health professionals.

Danielle Yancey, MS, NACHP’s first full-time director who joined the center in 2017, says she is proud of the community of healers that NACHP has fostered.

“Over the last 10 years, NACHP has worked really hard to fulfill our mission,” Yancey notes. “To celebrate this anniversary and help host the Diversity Summit in the same year was a great culmination of the work by our team and our partners, as well as an opportunity to highlight Indigenous health.”

Skyward Views

MED FLIGHT TAKES TO THE AIR TO SAVE LIVES





For the most serious medical emergencies, UW Health Med Flight's experienced teams are ready 24 hours a day, seven days a week. Each day, they transport and care for critically ill and injured patients of all ages throughout the upper Midwest, with bases in Madison, Mineral Point and Portage, to allow its state-of-the-art helicopters to arrive as quickly as possible.

The team—including highly trained doctors, nurses and respiratory therapists who specialize in emergency medicine—has served the area for more than 35 years, logging more than 1,500 transports per year. Med Flight is one of a few programs in the nation to fly with an attending physician routinely on board.

While the work is intense, the aerial and landscape scenes the flight crew encounter can be spectacular. Thus, Ryan Wubben, MD '97, a clinical professor in the BerbeeWalsh Department of Emergency Medicine, University of Wisconsin School of Medicine and Public Health, and a member of the Wisconsin Medical Alumni Association Board of Directors; Pete Rankin, RN, flight nurse, UW Health; and other Med Flight team members often snap an image when not caring for a patient on board the helicopters.

Rankin and Wubben share many photos and videos online, and Wubben manages Med Flight's channels on Facebook and Twitter. Follow @UWMedFlight to see more awe-inspiring views.

Opposite page, middle left: Pete Rankin, RN; bottom right: Ryan Wubben, MD '97. Below, bottom right: Med Flight pilot Kai Ficek.





A Badger-Style Homecoming

MD ALUMNI ENJOY FESTIVE GATHERINGS AND A FOOTBALL WIN

TODD BROWN/MEDIA SOLUTIONS (9)

“Warm” aptly describes October 21 and 22, 2022, for medical alumni of the University of Wisconsin School of Medicine and Public Health (SMPH) and their guests who made their way to Madison from near and far. Indeed, warm smiles and hugs prevailed among friends who gathered for their first in-person Homecoming weekend since before the COVID-19 pandemic. And delightfully warm weather—with ample sunshine and daytime highs nearing 80 degrees Fahrenheit—meant red and

white apparel didn’t require parkas, like some October weekends might.

With its usual flair, the Wisconsin Medical Alumni Association warmly rolled out the red carpet as it hosted a Friday Night Bash and reunions for the Classes of 1971, ’77, ’82, ’87, ’92, ’97, ’02, ’07 and ’12 (plus a virtual reunion in early November for the Class of 2017). The ballroom at the Best Western Premier Park Hotel on the Capitol Square buzzed with excitement as 220 alumni and guests greeted each other, introduced their guests, reminisced about their days at the SMPH and enjoyed a meal together.

Presiding over her first Homecoming as WMAA president, Kyla Lee, MD ’98, FACP, began by wishing her fellow Badgers “a very warm welcome home!”

She continued, “It is always an honor to have you back here in Madison. As I look out into this incredible crowd—filled with faces from an impressive nine classes of our great school of medicine and public health—I am reminded of how very fortunate we are to have such a dedicated and accomplished community of alumni. . . . And we’re grateful that you so proudly represent our



Opposite page: Deborah Patrick Wubben, MD '98 (PG '06), hugs a friend. Above, top row (left to right): Christopher (Peary) Regala, MD '97, and Oliver Kim, MD '97; Bob Folsom, MD '71 (PG '74), John Gwin, MD '71, Loren Rosenthal, MD '71, and Dan Cleary, MD '71; John Kryger, MD '92 (PG '97), Ellen Neuhaus, MD '92, and Steven Staehling, MD '92. Middle row: Joanne Brooks, MD '97 (PG '00), Sheryl Strange-Canady, MD '98 (PG '01), and Melvin (Chris) Fussell, MD '97; Student Ambassadors M1 Helia Gagnon, M1 Iris Chiou, Bucky Badger, M1 Thomas Staniszewski and M1 Leah Mushall. Bottom row: Stephanie Tadayon, MD '17, Evan Liang, MD '17, and Kelly Bruce, MD '17; Diane Gallo, MD '87, Bucky, and Scott Hagen, MD '87; Steven Salisbury, MD '92 (PG '97), and Robert Matthews, MD '92.

UW-Madison values wherever you go, in your communities and in your practices."

On Saturday morning, Badger spirit continued at Union South, where nearly 30 revelers attended the Student Organization Showcase and Reception—at which six student organizations described their

priorities and activities—hosted by the SMPH Office of Multicultural Affairs and WMAA.

Next, approximately 300 people attended the WMAA Tailgate Party and trekked to Camp Randall for the Wisconsin Badgers vs. Purdue Boilermakers football game. A joyful 35-24 victory for Wisconsin added to the warm memories alumni will keep in their hearts.

With Homecoming marking her first anniversary as the WMAA executive director, Sarah B. Rothschild reflected upon the weekend's success by saying, "It was a thrill to welcome home so many alumni. This community is really something special!"

Fall MD Class Reunions

TODD BROWN/MEDIA SOLUTIONS (8)



CLASS OF 1971: Front row (left to right): John Wegenke, Bob Folsom, Loren Rosenthal, John Gwin, Jerry Splittgerber. Back row: William Treichel, Dan Cleary, Douglas Kramer, Glen Burmeister, Bradley Munson.



CLASS OF 1982: Front row (left to right): Kent Robertson, Michael Bayer, Curt Studey, Richard Parfitt, Virginia Wintersteen, Greg Gill, Mark Asplund. Back row: Thomas Kloosterboer, Thomas Wood, Timothy Yeko, Gary Kindt, Wayne Heidenreich, Wilfrido Castillo, Salahuddin Abdur-Rahman, Charles Gehring.

CLASS OF 1987:

Front row (left to right): David Rohde, Elizabeth Bartos, Kelly Delongpre, Mary Woodhouse, Joan McGrath, Henry Simpson, Diane Gallo. Back row: Mark Hallett, Alan Lorenz, James Mitchell, Doug Peaslee, Elizabeth Mitchell, Forrest Krause, Maureen Lavin.



CLASS OF 1992:

Front row (left to right): Andrea Munoz, Rise Futterer, Steven Salisbury, Jill Cardwell, Mary Landry, Peggy Scallon, Elizabeth Bensen. Back row: John Kryger, Steven Staehling, Renee Staehling, Anne Simson, Donita Croft, Steve Connelly, Matthew Hattenhauer, David Lang.



CLASS OF 1997:

Front row (left to right): Joanne Brooks, Sheryl Strange-Canady, Amy Herbst, Jennifer Jaucian, Christina Granger, Kathleen Carr, Jessica Young, Kristine Wake. Back row: Marc Young, Derek Hubbard, Melvin (Chris) Fussell, Linell King, Jeffrey Collins, Christopher (Peary) Regala, Oliver Kim, Kusi Fordjour, Netsere Tesfayohannes, Aaron Schwaab.



CLASS OF 2002:

Front row (left to right): Matthew Lynch, Chris Tornehl, Mary Tornehl, Mary Ehlenbach, Dawn McNamee, Sarah Mirocha, Barbara Burns. Back row: John Hawkins, William Ehlenbach, Mark Flanum, Tara Schulz Snow, Sarah Schaettle, Christine Babcock, Tari Advani, Don Lee, Bryan Wichman, Brett Twente.

CLASS OF 2012:

Front row (left to right): Emily Abeyta, Callie Hansen, Taya Schairer, Michelle Clark-Forsting, Amy Penwarden, Adam Page, Aurora Lybeck, Desiree Mohandas, Kyle Wood, Joel Wood. Back row: Ben Abeyta, Tim Kufahl, Brent White, Bob Zemple, Kacey Kronenfeld, Appesh Mohandas, Abby Taub, Erika Mikulec, Gena Cooper, Ashley Flannery, Walker Flannery, Joseph Hippensteel, Mark Welnick, Mike Oldenburg.



CLASS OF 2017:

Top row (left to right): Kathryn Ritter, Andrea Larson (WMAA), William Jacoby, Evan Liang, Nathan Baggett. Second row: Erica Walters, Annie Dunham, Stephanie Tadayon, Linh Ea Vo, Dennis Ea, Kelly Bruce. Third row: Karen Flores, Tyler Van De Voort, Kaylene Fiala, Zoe HarnEnz, Mohammad Rashid Siddiqui. Bottom row: Ellie Chen, Maggie Barnes, Cameron Blegen, James Ircink, Alex Becka.



NAYELI A. SPAHR, MD '16, MPH '16

I am the director of reproductive and child health at Project H.O.M.E., a non-profit organization in Philadelphia with the mission to break the cycle of homelessness and poverty. I work at federally qualified health care centers within Project H.O.M.E. The letters in H.O.M.E. stand for housing, opportunities in employment, medical care and education; these factors perfectly highlight the fundamental ingredients needed to attain mental, physical and emotional well-being.

In my role, I supervise perinatal and young pediatric

care, as well as oversee the reproductive and family planning services offered at our sites. I love being able to use my full-spectrum training every day. I also am able to use skills I gained through my master of public health degree to build connections with other local leaders to improve the outcomes and disparities in maternal and infant mortality, and to advocate for improved care coordination across systems.

Before I started medical school, I was not sure what specialty I wanted to pursue. I had never heard of family medicine until I looked into the

UW School of Medicine and Public Health, and as it turns out, this field is a perfect fit for me. In my practice, I cultivate a sense of community and partnership with the families I care for in the clinic and beyond it, with the help of an excellent team of nurses, behavioral health counselors, community health workers, peer specialists and social workers, to name a few.

I completed my residency at the Hospitals of the University of Pennsylvania in Philadelphia. Family medicine has allowed me the flexibility to make my practice my own and do what I love—build a community that helps



take care of each other. What an honor it is to meet inspirational individuals each day and know they trust that I will take the best possible care of them and their families.

BRANDEN J. PFEFFERKORN, MD '08, MPH '09

Since I started in family medicine, I have had some amazing privileges. Walking with patients through life-altering and ultimately life-ending diagnoses. Celebrating big wins—complete changes in lifestyle, previous diagnoses falling away. Celebrating small wins—smoking less, blood sugar numbers closer to goal. And a handful of babies, now children, in the world whose parents gave them my first and/or middle name.

I completed the Swedish Medical Center Cherry Hill Family Medicine Residency, with my clinical site at the Seattle Indian

Health Board. I then practiced for five years in Seattle, and for the past five years, I have practiced at HealthPartners in Minnesota. During my career, I have already gotten to experience a wide swath of medicine, various practice arrangements and changes in practice geography from the Pacific Northwest back to the Midwest, and more recently, changes in clinical leadership and a new subset of primary care in worksite health care.

What sticks with me through that time are the relationships made along the way and the immense privilege of hearing and sharing stories with patients

and colleagues alike. Family medicine is an exceedingly broad discipline, but at its core, it is about relationships, particularly ongoing relationships.

When I started medical school, I wanted to become a family physician. I chose all my medical school experiences around that goal and was privileged to learn from and with some amazing mentors, including Byron Crouse, MD, Cynthia Haq, MD (PG '87), Douglas Smith, MD '82, and Sharon Younkin, PhD. I learned at a variety of sites within Wisconsin, including a dedicated block at Mile Bluff Medical Center in Mauston,



as well as other domestic and international sites.

These experiences and mentorship have prepared me very well for my career in family medicine and given me the opportunity to adapt to the needs of the population I'm working with, while also referencing the broad scope of medicine in which I've participated.

DEMARCO A. BOWEN, MD '18, MPH '18

Following my graduation from the UW School of Medicine and Public Health, I completed a global child health residency at Baylor College of Medicine/Texas Children's Hospital. I am now completing a pediatric hospital medicine fellowship at University of California, San Diego/Rady Children's Hospital. These experiences have taught me a great deal about quality improvement, research methodology and medical education for learners in the hospital setting.

Clinically, I take care of kids who have general

pediatric illnesses such as bronchiolitis, asthma and acute gastroenteritis, but also many medically fragile children—such as those with gastrostomy and tracheostomy tubes, ventilators, etc.—who require admission for acute-on-chronic illnesses. As a hospitalist, I also take care of children who have as-yet undifferentiated diseases, such as Crohn's, tuberculosis, or even cancers. As each patient's and family's initial primary doctor in the hospital, it's a privilege to walk with them in the first steps of their diagnostic journey.

One of the best things about pediatrics is the ability to connect

with families and work together with caregivers, advocating for the best outcomes for the child. Even in the hospital wards, public health is intrinsic to the work of pediatrics. Preventing illnesses through counseling of caregivers, promoting safe environments, and advocating for better policies for kids is all part of the gig.

If you're interested in public health and advocacy as a physician, I highly recommend pediatrics. The field affords so many opportunities in your career. Every day, you can advocate for your patients, whether to the parents at the bedside or to legislators in the



halls of Congress. In clinic, you can counsel about safety measures and, on behalf of your hospital, work on safety initiatives. The list goes on. Add the feeling of helping kids get through acute illnesses, and pediatrics just can't be beat.

Class Notes

Class of 2022

Katarina

Braun—during the doctoral portion of her MD and PhD degrees at the UW School of Medicine and Public Health—was training with Thomas Friedrich, PhD, and Dave O'Connor, PhD '01, when the COVID-19 pandemic began. In January 2020, Braun helped sequence and analyze the first confirmed case of SARS-CoV-2 in Wisconsin (12th in the United States). She and a colleague performed viral sequencing and analysis for the state and helped interpret findings for public health recommendations. Braun was inspired by seeing how powerful science and medicine can be when people collaborate across disciplines and departments with a common goal. She was the first author on a study, published in *Nature Communications*, related to her work sequencing virus samples from Dane and Milwaukee counties and reconstructing viral family trees. The study showed that COVID-19's R factor fell significantly following the statewide Safer-at-Home order. She co-authored another study, published in *Clinical Infectious Diseases*, in which she and colleagues sequenced SARS-CoV-2 from health care workers at UW Health and determined that infection control procedures were protecting personnel from infection. Braun is now completing an obstetrics and gynecology residency at Yale University.



Class of 2015



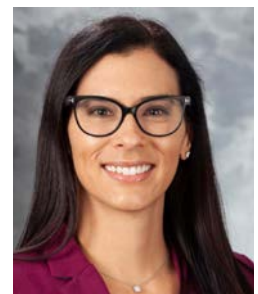
Augustine and Allison Saiz started faculty careers in fall 2022; throughout their training, they have received numerous awards and honors. Augustine Saiz is an assistant professor of orthopaedic surgery in the Division of Orthopaedic Trauma at University of California (UC) Davis; and Allison Saiz is an assistant professor in the Division of Gynecologic Oncology at Kaiser Permanente Northern California and a volunteer clinical faculty member at UC Davis, where she teaches obstetrics and gynecology residents and gynecologic oncology fellows. After medical school, they couples-matched to UC Davis and were married in 2017. Allison Saiz completed an obstetrics and gynecology residency at UC Davis followed by a gynecologic oncology fellowship at Northwestern University; she also earned a master's degree in health services and outcomes research. Augustine Saiz completed an orthopaedic surgery residency with a year of dedicated research at UC Davis. He also completed a fellowship in orthopaedic traumatology at University of Texas-Houston. He was selected for the Orthopaedic Research Society Clinician Scholar Career Development Program and American Orthopaedic Association C. McCollister Evarts Resident Leadership Forum. He has received research grants and presented at numerous national and

international conferences. During her residency, Allison Saiz held leadership roles with the American College of Obstetricians and Gynecologists. She was the first U.S. resident to serve as a Society of Gynecologic Oncology (SGO) congressional ambassador. Her peers elected her as a co-administrative chief resident. Also, she was elected to the SGO Board of Directors as the fellow-in-training representative and joined the Legislative and Regulatory Affairs Subcommittee.

Class of 2011

Erica Knavel Koepsel

completed a diagnostic radiology residency at UW Health and an interventional and vascular radiology fellowship at the UW School of Medicine and Public Health. While working at Mayo Clinic in Rochester, Minnesota, she added to her experience in ablation procedures, including those with magnetic resonance imaging (MRI) guidance. With her Mayo team, she has presented at national professional meetings on MRI-guided treatment of vascular malformation, and her work has been published in *RadioGraphics*. In September 2021, Knavel Koepsel joined the SMPH as an assistant professor in the Section of Interventional Radiology, Department of Radiology. There, she proposed creating a program focused on MRI-guided procedures; so far, she and her team have completed prostate cryoablations and biopsies. She hopes the team can offer MRI-guided ablation of vascular malformations.



Class of 2008

Jordan Olson

was reappointed as chair of pathology for HNL Lab Medicine and medical director for Lehigh Valley Health Network (LVHN) in Allentown,



Pennsylvania. HNL Lab Medicine is a regional leader in high-quality, innovative laboratory medicine; and LVHN is the region's leading health care network. Olson is board-certified in clinical pathology, clinical informatics, blood banking and transfusion medicine. Formerly, at Geisinger Medical Laboratories, he served as division chief of clinical pathology informatics and as a faculty member in the Geisinger Health System Clinical Informatics Fellowship Program and the Geisinger Medical Laboratory Residency Program. Olson has published widely in peer-reviewed journals and presented nationally.

Class of 2005

Summer Hanson completed a residency in the SMPH Department of Surgery, Division of Plastic and Reconstructive Surgery. Now an associate professor at the University of Chicago's Department of Surgery, Section of Plastic and Reconstructive Surgery, she is also the director of plastic surgery research. Her translational research lab studies fat tissue, fat grafting and tissue engineering. Clinically, she specializes in breast microsurgery and lymphedema surgery. Hanson is married to Nick Maassen, MD '08 (PG '13), and they have a 6-year-old daughter, Rori.

Class of 2001

O'Rell "Ron" Williams was recognized by *Continental Who's Who* as a Trusted Healthcare Professional for his excellence in medicine and in acknowledgment of his work with Ascension-Southeast Wisconsin. He is a regional medical director for the Ascension health care network in Milwaukee. He says he always wanted a career in which he could make a difference in the lives of others. He served for 14 years as a firefighter in Milwaukee. Williams earned a bachelor of science degree in biology from UW-Milwaukee, graduating Magna Cum Laude; earned his medical degree from the SMPH; and completed an internal medicine residency at Aurora Health Care. He enjoys spending time with his two young daughters and playing the guitar.

Class of 1995

Tom Weigel joined Blue Cross and Blue Shield of Vermont as the vice president and chief medical officer. He has a strong interest in health care technology and its ability to measure outcomes, improve access to care and reduce costs. Weigel completed training in psychiatry at Massachusetts General Hospital and in child psychiatry at Children's Hospital, Boston, both through Harvard Medical School. He received a master's in business administration degree from Massachusetts Institute of Technology, with a focus on data-driven methods to direct change across organizations and industries. After living in Boston for more than 20 years, he has embraced the rural Vermont lifestyle, living on a farm with his wife, two children, and many dogs, cats, chickens and horses.

Class of 1993

Nancy K. Sweitzer joined the Washington University School of Medicine as vice chair of clinical research for the

Department of Medicine and director of clinical research for the Division of Cardiology. She completed graduate medical training in internal medicine, cardiology, echocardiography and heart failure, and transplantation at Brigham and Women's Hospital and Harvard Medical School. Sweitzer served on the faculty at Harvard Medical School, UW School of Medicine and Public Health, and the University of Arizona Health Sciences. At Arizona, she was the chief of cardiovascular medicine, director of the Sarver Heart Center and co-director of the Clinical Translational Sciences Graduate Program. Having devoted her career to the physiology and multi-organ interactions in heart failure, Sweitzer is an international leader in clinical trials. She is a fellow of the American College of Cardiology, the American Heart Association and the Heart Failure Society of America. She is the past president of the Association of Professors of Cardiology, and she has authored more than 100 papers in peer-reviewed journals. She is editor-in-chief of *Circulation: Heart Failure*.

Class of 1988

Daniel M. Jorgensen is the new chief executive officer for Critical Path Institute (C-Path) as of October 2022. An experienced leader in drug development, health care and business, he will continue C-Path's distinguished reputation of collaboration with global stakeholders—including patient groups, academic institutions, the pharmaceutical industry and regulatory agencies—for its next phase of growth and innovation. Jorgensen has more than 24 years of experience in the biopharmaceutical industry, and in public and private companies of all sizes. Before he joined C-Path, he was the CEO at AxoProtego, where he helped guide the neuroscience startup through funding and partnership activities.

In Memoriam

Thomas J. Beno, MD '46
Green Bay, Wisconsin
September 13, 2022

Edward S. Orman, MD '57
Minneapolis, Minnesota
October 21, 2022

Arvid F. Johnsen, MD '64
Jupiter, Florida
August 20, 2022

Robert W. Krieger, MD '75
Hartland, Wisconsin
August 9, 2022

Marvin Glicklich, MD '50
Fox Point, Wisconsin
November 12, 2022

Ronald E. Borchardt, MD '60
Fresno, California
September 21, 2022

Thad C. Hagen, MD '65
Bayside, Wisconsin
June 17, 2022

Gregory T. Lehman, MD '76
Minneapolis, Minnesota
November 8, 2022

Charles L. Picus, MD '54
Naples, Florida
September 10, 2022

Frank E. Murray, MD '60
Mission Viejo, California
October 6, 2022

Donald E. Riemer, MD '66
Eau Claire, Wisconsin
June 5, 2022

Audley R. Mamby, MD '86
Rockford, Michigan
November 22, 2021

Douglas D. Bradley, MD '57
Diablo, California
September 7, 2022

Haakon P. Carlson, MD '64
Prairie du Sac, Wisconsin
August 12, 2022

Michael Kappy, MD '67, PhD '67
Denver, Colorado
December 3, 2022

Former Staff Member

Zhumin Zhang, PhD
Madison, Wisconsin
November 10, 2022

Don W. Churchill, MD '57
Charleston, West Virginia
September 15, 2022

John L. Duffy, MD '64
Walker, Iowa
October 14, 2022

Ada M. Fisher, MD '75, MPH
Salisbury, North Carolina
October 7, 2022

Goodbye Dear Friend

ADA MARKITA FISHER, MD '75, MPH

A remarkable alumna of the University of Wisconsin School of Medicine and Public Health (SMPH), Ada Markita Fisher, MD '75, MPH, died at age 75 on October 7, 2022, but left a strong legacy.

“Dr. Fisher lived an amazing life of firsts. She was among a handful of our first Black graduates and was the first Black woman to earn a medical degree from the SMPH,” notes Dean Robert N. Golden, MD. “We are deeply honored that she pursued her medical education here during a time when many barriers existed. Her career of public and private service, as well as her commitment to social justice, continues to inspire us.”

Fisher completed a family medicine residency at the University of Rochester and earned a master of public health degree from Johns Hopkins University’s School of Hygiene and Public Health. Her career included clinical medicine, medical research,

policy development and management roles. She was dedicated to serving people and populations who have been traditionally underserved in medicine and health care. In 1984, she was honored as one of 10 Outstanding Young Women of America.

According to her obituary published by the Fisher Memorial Funeral Parlor, Durham, North Carolina, Fisher’s Jewish faith “sustained her in an atmosphere of not always feeling welcomed because of her uniqueness, culture and experiences, despite being the first.”

A widely published leader, Fisher worked for the U.S. Public Health Service Commissioned Corps and John Umstead Hospital in North Carolina; Martin Marietta Energy Systems, Inc., in Tennessee; a self-founded, home-based talent agency, \$Asci, in Tennessee; Amoco Oil Company in Chicago; and the W. G. Hefner Veterans Affairs Medical Center in North Carolina. As noted in her obituary, “One of her proudest



moments was to help draft the Occupational Health Services Standards of Care for corporate America and the Veterans Affairs health system.” Fisher also became the Republican National Committee’s first Black elected committeewoman for North Carolina.

Golden concludes, “Our school’s mission is to advance health and health equity, a mission Dr. Fisher shared. We are very grateful to count her among our distinguished alumnae and to reflect on her history-making legacy.”

Lifelong Passions Fuel Today's Ventures

ROLF LULLOFF, MD '67 (PG '72)

by Michael Felber

Rolf Lulloff, MD '67 (PG '72), is passionate about many things, from medical research to physical fitness. Two of his greatest passions are talking about the love of his life—his late wife, Ann Lulloff—and ways in which he can help others. Rolf Lulloff realizes both passions through an organization he co-founded, the Brain Center of Green Bay (Wisconsin), which educates the public about neurological health and provides free, one-on-one counseling for individuals or family members affected by Alzheimer's disease, Parkinson's disease or other conditions that affect the brain.

"Ann died in 2021 after living with Parkinson's for decades," Rolf Lulloff says. "A few years before she died, I retired from my orthopedics practice and decided it was time to start sharing with others the many lessons I learned about Ann's disease."

Chief among these lessons is that, notwithstanding the role genetics can play in susceptibility to disease, people have enormous control over the health of their brains by keeping them stimulated.

"There are many ways to care for your brain," he says. "Love and laughter are so important, as are good sleep and physical activity. It's easier to sit and watch TV rather than walk around the block, but movement is the trigger for chemicals that produce new brain cells. It's also important to limit how many carbs you consume and eat plenty of good brain foods like avocados, blueberries and other colorful fruits and vegetables."

Parkinson's at a Young Age

Realizing later that Ann Lulloff had undiagnosed, early symptoms of Parkinson's for several years, she naturally was



Rolf Lulloff, MD '67 (PG '72) (center); his daughter-in-law, Elizabeth Lulloff (left); and John Gard (right) stand near the 2022 Boston Marathon finish line.

distraught when she received the diagnosis at age 49. She feared not being able to see their children marry or meet their future grandchildren, recalls her husband.

"That day, I told Ann how much I loved her and that I always will," says Rolf Lulloff. "Thankfully, we had 45 years together after her initial symptoms started before she took her last breath on February 12, 2021."

He continues, "Together, we saw our three children—Susan, Sarah and Andrew—

get married and give us eight grandchildren. We made it to the Rose Bowl, spent many weeks at our vacation home in Sanibel, Florida, and took 12 trips to Europe. Despite Ann's disease, she never let it define her, and she taught me so much, not only about living with brain disease, but about life."

The two met in 1963 at the University of Wisconsin-Madison. She was a medical technology major, and both were working in a research laboratory. Thanks to a tip from

—Continued on page 25

Moss Receives

Folkert Belzer

Award

THE LIFETIME
ACHIEVEMENT
AWARD HONORS
HIS DECADES
OF DEDICATED
LEADERSHIP

Richard L. Moss, PhD

by Beth Fultz, PhD

The career of Richard L. Moss, PhD, at the University of Wisconsin School of Medicine and Public Health (SMPH) was no accident. Growing up in Fond du Lac, Wisconsin, he recalls being “STEM-oriented” from an early age and feels fortunate that his family encouraged his scientific interests, as did faculty members at UW-Oshkosh, where he earned a bachelor’s degree in biology. From there, he received a doctoral degree in physiology and biophysics from the University of Vermont, and went on to post-doctoral studies at Boston Biomedical Research Institute. In 1979, he returned



Dean Robert N. Golden, MD (left), presents the Belzer Award to Richard L. Moss, PhD.

to his home state, accepting a position as an assistant professor of physiology at the UW Medical School (now the SMPH).

Looking back 43 years later, Moss uses the word “fortunate” to describe many aspects of his career. As he tells it, he took advantage of opportunities that came his way, and remarkable—even transformative—things happened.

In turn, the SMPH was fortunate, as Moss shared his intellect, curiosity, energy and ability to engage others. His vision and the school’s were aligned, and his strengths as a leader and communicator drew others to the cause. Prior to his retirement in 2021, he mentored others who have become leaders in research, teaching and administration at the SMPH and across the nation.

On October 24, 2022, Dean Robert N. Golden, MD, acknowledged these many contributions when he presented Moss with the 2022 Folkert Belzer Award, a lifetime achievement recognition that is the school’s highest honor for its faculty. At the award ceremony, Golden cited Moss’s “enormous impact as a scientist, a mentor and a teacher, and especially a leader.”

While Moss describes his career as “much more than I had envisioned,” he confesses that in 1979, none of it seemed likely. In the year before he arrived, the school’s clinical faculty had moved to the new Clinical Science Center on the west end of campus. Tucked away in the Medical Sciences Center (MSC) on central campus, he found himself amid vacated labs and offices. While there were notable examples of collaboration in the school, the basic sciences were largely isolated. During this time, Moss developed a long, productive research collaboration with Marion Greaser, PhD, professor, UW College of Agricultural and Life Sciences.

Moss is grateful for the mentorship of faculty such as Larry Davis, PhD ’61, professor of physiology; Ford Ballantyne, MD (PG ’72, ’74, ’75), professor of medicine, who invited Moss to co-direct a second-year cardiovascular pathophysiology course; and Harry Karavolas, PhD, a basic science chair who became an informal advisor when Moss became chair of the Department of Physiology. In turn, each demonstrated the importance of collaboration and mentoring.

Today, the basic sciences are co-located with clinical sciences in west-campus facilities designed to foster interdisciplinary collaboration. The school’s research and funding models make up a continuum from basic sciences to clinical and translational research and ultimately to community engagement and public health. Moss can describe these changes in detail because in many instances he helped to mold them.

Meanwhile, his laboratory was thriving. Influenced by his teaching experiences, Moss formed a research team focused on regulation of cardiac contractility. He and Greaser developed novel methods to extract

proteins from heart muscle cells to determine the functions of specific proteins in health and disease. The studies identified a myosin-binding protein that mediates regulation of contractility in response to adrenergic inputs and mutations, which can lead to often-fatal hypertrophic cardiomyopathies. Despite initial discouragement by grant reviewers who saw only structural roles for this protein, a dynamic subfield is developing novel therapeutics that address heart failure by targeting regulatory and contractile proteins. Moss’s research has been supported continuously by National Institutes of Health (NIH) grants, including its prestigious Method Extending Research in Time (MERIT) Award, which provides 10 years of funding for research excellence. Golden describes Moss as “the academic equivalent of an Olympic Gold Medalist.”

Moss recognized the benefits of collaboration and diverse perspectives when studying complex biological problems. In this vein, he led the development of NIH program project grants that brought together basic and applied scientists focused on clinically relevant issues. From 1997 to 2018, he was the founding director of the UW Cardiovascular Research Center, which now is led by Hector H. Valdivia, MD, PhD, professor of medicine, and involves more than 130 researchers, physicians and educators dedicated to understanding, preventing and treating cardiac diseases. Moss believes that interdisciplinary centers and institutes at the SMPH—now numbering more than 20—are among the school’s greatest assets.

The need for formal interactions among researchers in his field led Moss to organize the first Myofilament Meeting in Madison in 2007. Now a biennial event that attracts more than 160 investigators from the United States, Europe and Japan, it has become the foremost meeting in the field.

“The meeting has been catalytic in terms of collaboration and advancement of early-career investigators,” he says.

Throughout his career at the SMPH, Moss has led initiatives that have contributed to the SMPH’s statewide impact and rise in national prominence. For example, he is a leader in the Wisconsin Partnership Program,

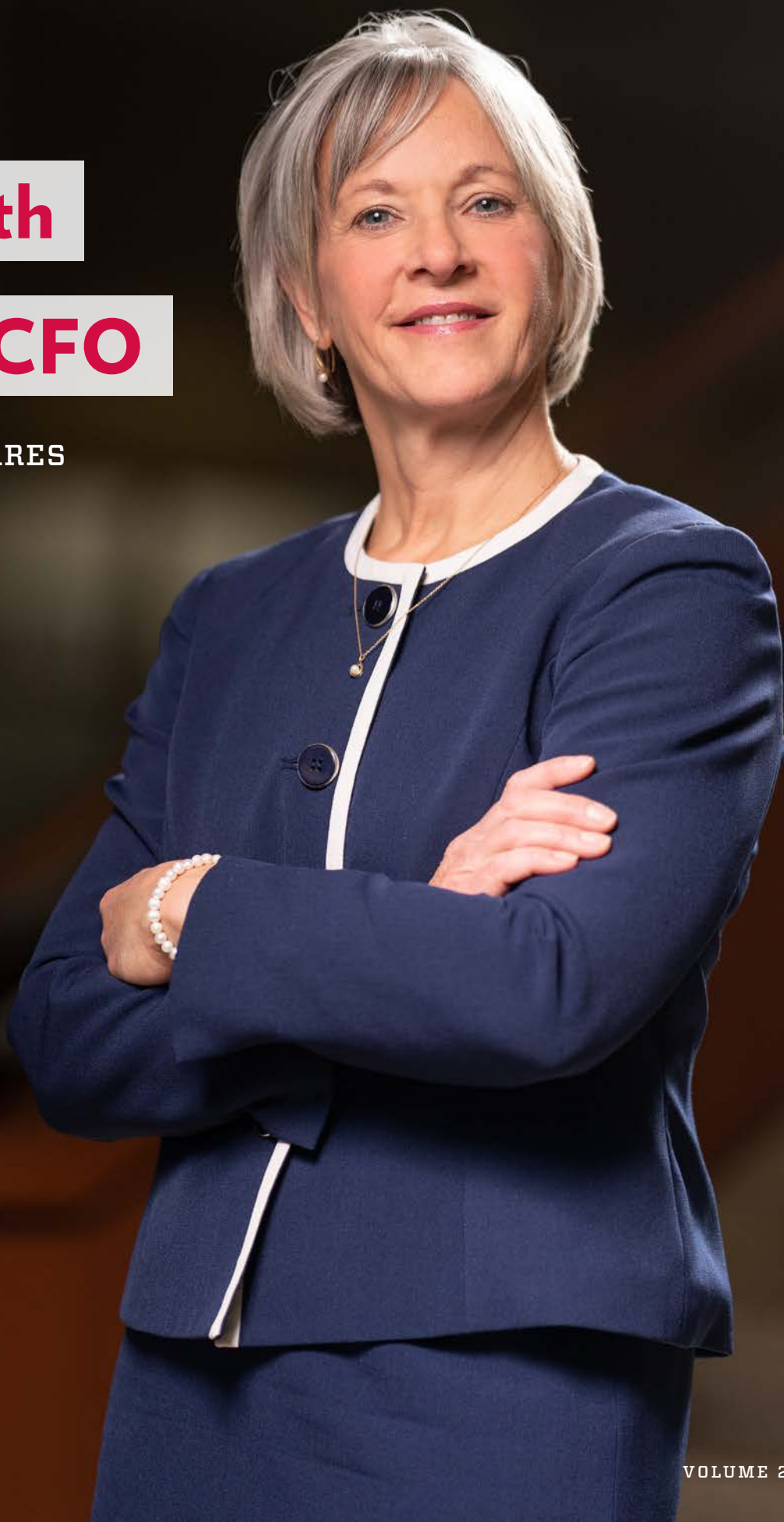
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Q&A

with

New CFO

**CONRAD SHARES
HER VISION**



Heidi Conrad, MBA

Heidi Conrad, MBA—an experienced fiscal strategy leader devoted to education and health care—is the new chief financial officer (CFO) of the University of Wisconsin School of Medicine and Public Health (SMPH). She will guide the financial health of the school and direct its fiscal management and operations by overseeing budgeting, reporting and management of school funds. Conrad also will maintain strong working relationships with finance leaders at UW-Madison, UW Health and other key partners, such as the UW Foundation and Alumni Association. Her appointment began in October 2022.

A native of Mequon, Wisconsin, Conrad draws upon nearly three decades of progressive leadership at HealthPartners, a Minnesota-based \$7 billion integrated, nonprofit system that offers health care delivery, health plan services, medical education and graduate medical education (GME). The organization also conducts research and raises funds to support its health care delivery system. Her recent roles include vice president and CFO for Regions Hospital and senior vice president and CFO for care delivery.

For Regions Hospital, Conrad partnered with HealthPartners and higher education leaders focused on GME to enhance and grow the HealthPartners-sponsored residency programs. She served on the board of the Minnesota Metropolitan Council for GME from 2007 to 2016, including a year as chair of the board of directors. As the financial leader for HealthPartners care delivery, Conrad provided leadership to the care delivery system, which includes eight hospitals, six ambulatory surgery centers and more than 50 clinics.

Conrad earned a bachelor's degree in accounting at UW-Madison and a master of business administration degree at Hamline University in Saint Paul, Minnesota. In 2019, she was named Chief Financial Officer of the Year by *Business Journal*. She also serves on the board of directors of the American Board of Plastic Surgeons.

“Heidi Conrad’s extensive background utilizing values-driven financial strategies will further advance our vision of healthy people and healthy communities,” says Dean Robert N. Golden, MD. “I look forward to her playing a pivotal role in our school’s leadership team as we seek to promote health throughout the state of Wisconsin and beyond.”

Conrad shared with *Quarterly* the following reflections about her career, financial trends and the SMPH.

What would you like readers to know about you?

I am a proud Badger alum of the UW School of Business and am excited to be back at UW-Madison. My role is to work alongside my clinician and administrative partners, providing them with all the financial operations, reporting and analysis they need to lead, innovate and drive the mission forward. I support the strong stewardship of our resources so we can grow and thrive. I am excited to help advance the SMPH’s science and education missions.

What does a CFO do on a daily basis?

I believe numbers are just that, unless you understand the operations and business challenges faced by the faculty and staff who support them. I spend my days engaging with colleagues to learn about their operations, to address their needs and to improve the financial processes that support them. As I get situated in my role, I hope to make strong connections across UW-Madison and the community to optimally support the SMPH.

What have you experienced since you joined the SMPH?

The collegiality is strong here, and everyone is focused on the school’s mission and vision. We have a dedicated leadership team. This makes for a great environment to tackle the issues facing our industry. With teamwork, faculty can advance science, provide exceptional quality patient care and train the next generation of caregivers with state-of-the-art technology, evidence-based

medicine and care models that meet the needs of patients today and in the years to come. I’m excited to create strong partnerships so the fiscal team can best serve the system.

On a personal level, it’s been inspiring to learn about the amazing research being done here. I can’t wait to share the return on investment for our donors because without their support, much of this wouldn’t happen.

What do you envision on the horizon?

As I get acquainted with the organization, I am seeing strong support across campus, the SMPH and UW Health to drive growth and innovation. The investments being made in research, education and patient care will accelerate our progress toward our mission.

Describe the school’s team effort surrounding financial matters.

The financial environment here is very complex. I see everyone trying hard to be great stewards of our resources while working to advance our mission. I also see thoughtful investments being made to enhance our programs and intentional work to ensure we drive efficiency in administration. This allows us to focus our resources on research, education and patient care.

What are your personal goals?

I want to build on an already strong fiscal team, enhancing our services to surprise and delight our partners. I want to create transparent, efficient financial processes, analysis and reporting. I also want the team to be an invaluable partner with the faculty.

What should we know that we can’t find on your resume?

I’m the mother of two men (they’ll always be my boys), and that’s my most beloved role. I love to travel, read and cook. And it’s no secret that I’m a huge Badger sports fan!

Do you have a hobby that helps you be a better leader?

I’m a regular exerciser, which supports my mental health and well-being. I invest time in my own growth so I can bring my

whole person to work. I also love to volunteer to support the communities we serve.

Why did you move from the private sector to academic administration?

I made this shift because I want to help influence the future. I love the non-profit, integrated system for which I worked for more than 20 years. They are in the thick of advancing care in a rapidly changing health care industry. As hard as it was to

leave, by moving further upstream into academics, I hope to elevate research and clinician training to support health systems like the one I came from. By advancing science, driving out health disparities and teaching clinicians in new care models and protocols, we can help not only the SMPH, but health systems across the country and, most importantly, the patients and the communities we serve.

Nationally, what's being done to increase funding for research and medical education?

Not enough. Funding for health care services, education and research are all challenged, and major reform is likely stuck in our current political climate. This climate makes philanthropy even more critical as a source of funding.

Honoring Mount's Decades of Service

In August 1999, when society was speculating about the fate of computer systems as Y2K drew near, the unflappable Ken Mount joined the University of Wisconsin School of Medicine and Public Health (SMPH) as the assistant dean for fiscal affairs. He quickly climbed the ranks to associate and senior associate dean for fiscal affairs, a title he held until his retirement in July 2022.

A native of New York City, Mount earned an undergraduate degree in accounting at Valparaiso University in Indiana and a master of arts in public administration degree at Northern Illinois University. He worked as a certified public accountant in Elkhart, Indiana, and Rockford, Illinois—where he and his wife, Jane, started raising their two kids.

Mount moved his career to the University of Illinois College of Medicine in Rockford and to the Medical College of Wisconsin in Milwaukee, where he became the school's assistant vice president for finance. Thus, he brought to UW-Madison ample experience with medical school finances.

At the SMPH, Mount “has worn several hats,” says SMPH Dean Robert N. Golden, MD. For instance, for 15 months, Mount split his time between the SMPH on central campus and an office on Madison's far west side, where he served as the interim chief financial officer for the UW Medical Foundation. He also fulfilled interim roles in human resources and information systems. Mount helped guide several major

developments, including the roll out of the Wisconsin Partnership Program and the SMPH's transformation into the nation's first integrated school of medicine and public health. He also served on many UW-Madison and UW Health working groups.

“Ken is incredibly well respected across campus and at UW Health,” Golden notes. “He always made financial reports colorful, often using humor and analogies to make complex information understandable.”

Among his major accomplishments, Mount developed and implemented an innovative funds-flow system and oversaw a mission-based budget that is crucial to the school's work devoted to wellness, health equity and anti-racism.

“I like to know what we're doing in research, the curriculum and the community because understanding these things helps us get a better handle on finances, rather than just looking at spreadsheets,” says Mount, who also finds value in peer interactions through the Association of American Medical Colleges' Group on Business Affairs.

Noting that Mount also contributed to the school's academic mission from 2003 to 2013 as a lecturer and small-group leader in the Master of Public Health Program, Golden says, “This role reflected Ken's grasp of all aspects of health care and public health. It is a distinction that he participated in this way.”

Outside of work, Mount loves to scuba dive and do underwater photography. He



Ken Mount (right) talks with a colleague.

and his wife relished participating in their kids' many school activities and hobbies. In retirement, the couple plans to stay in Madison, near their grown children. Mount is becoming certified as a master gardener and is consulting part time in financial roles for other academic organizations as he takes time to ponder his retirement plans.

Reflecting on the many people who partnered with him at UW-Madison—including Golden and former SMPH Dean Philip M. Farrell, MD, PhD (PG '72)—Mount concludes, “I worked with so many wonderful people over the years, and I deeply appreciate their help and collegiality.”

Lifelong Passions *Continued from page 19*

a friend, Rolf Lulloff knew she had recently broken up with her boyfriend. He worked up the courage to ask her for a date.

“Ann gave me an angry look at first, wondering how I knew she was no longer seeing someone,” he says. “Fortunately, the angry face quickly turned to a smile, and just 51 weeks later, we were married.”

After earning his bachelor’s degree from UW-Madison in 1964 and his medical degree from the UW School of Medicine and Public Health (SMPH) in 1967, Rolf Lulloff completed a one-year internship at Utah Medical Center in Salt Lake City before the couple returned to Madison. He specialized in orthopedics, completing a four-year surgical residency at UW Hospital (now UW Health) in 1972.

“I owed Uncle Sam two years, which Ann and I spent at Fort Dix, New Jersey,” says Rolf Lulloff, adding that his service in the Army provided housing and enough money to sustain them, and was a great experience.

In 1974, Rolf Lulloff joined a multi-specialty medical clinic in Green Bay. He says he and his wife had a wonderful life in

Packerland, but Madison always remained a special place in their hearts.

“We met in Madison and had all three children there. We fondly returned for many Badger football games and state high school basketball tournaments,” recalls Rolf Lulloff, a native of Dodgeville, Wisconsin.

Running for a Reason

An avid runner for much of his life, Rolf Lulloff ran his first of four Boston Marathons in 1974. His most recent finish was in 2014 at age 72. He intended to race again in 2022, but he pulled a hamstring while training. Yet, in spite of his injury, at age 80, Rolf Lulloff walked almost half the course.

Back in 1974, cheering Rolf Lulloff on at the Boston Marathon was none other than Dennis Maki, MD ’67, an SMPH emeritus professor of infectious diseases. Friends for more than 60 years, the two met as undergraduates living in Tripp Residence Hall and attended medical school together.

“Rolf is an iconic alum of UW-Madison and the UW School of Medicine and Public Health,” says Maki. “He is one of the most



Rolf Lulloff, MD ’67 (PG ’72), and Ann Lulloff

honest and caring people I have ever met. Rolf and Ann’s children—who also graduated from UW-Madison—are wonderful people. Today, Rolf’s work to educate the public about brain disease is a great tribute to Ann.”

Chris Vanden Hoogen, executive director of the Brain Center of Green Bay, says Rolf Lulloff connects well with those affected by brain diseases because of the decades he spent at his wife’s side during her battle.

“It’s a really tremendous love story,” Vanden Hoogen says. “What makes it more beautiful is that even with Ann gone, Dr. Lulloff keeps her legacy alive by helping so many others. He’d be doing this 24/7 every day of the year if we let him.”

Moss Receives Folkert Belzer Award *Continued from page 21*

which has played critical roles as the school became the nation’s first integrated school of medicine and public health. As the long-standing chair of the program’s Partnership Education and Research Committee (PERC), he has been involved in awarding competitive grants that have funded a range of research and educational projects led by new and seasoned faculty and by collaborative teams.

In 2002, with Gail Robertson, PhD, professor of neuroscience, Moss envisioned the SMPH Master of Science in Biotechnology Program and served as its inaugural director. The workforce-development initiative has been extraordinarily successful in serving the needs of the university and the biotechnology industry. Now, under the leadership of Kurt Zimmerman, senior director of biohealth industry partnerships, the program

fosters valuable collaboration in research and development, and educational and community engagement initiatives.

Moss also led the reorganization of basic science departments by research themes rather than traditional disciplines to best support the interdisciplinary nature of research and education.

For Moss—now the emeritus senior associate dean for basic research, biotechnology and graduate studies—slowing down in retirement does not come naturally. Although family, including “three irresistible grandchildren,” has lured him and his wife, Susan, to live in California, Moss still devotes time to work at the SMPH. He continues to chair the PERC, and he’s helping to develop philanthropic resources aligned with the school’s research priorities. He

also collaborates in research with J. Carter Ralphe, MD, professor, Departments of Pediatrics and Medicine, and chief, Division of Pediatric Cardiology.

Since his early days in his MSC lab, Moss often steered waves of change that have led to innovative facilities and research programs with collaboration as a goal. And now, SMPH strategic planning and funding models acknowledge the foundational importance of the full spectrum of research, community engagement and public health priorities. Moss considers it his good fortune to have contributed to these transitions in the school.

In presenting the Belzer Award, Golden expressed profound gratitude for the many ways in which Moss shared his energy, intellect and collegiality in advancing the missions of the SMPH.

Monato Best Rural Health Essay

The Monato Best Rural Health Essay Prize, established in 1993, is open to anyone who has been a student in any program or campus of the University of Wisconsin within the preceding year. It honors the memory of Hermes Monato Jr., a December 1990 graduate of the UW-Madison College of Engineering, and highlights the importance of rural health. Monato worked at the Rural Wisconsin Health Cooperative for only a few years, but his infectious spirit and creative mind left an enduring legacy. Information about the contest—including the prize fund, past winners and future dates—is available at <https://www.rwhc.com/Awards/Annual-Monato-Essay>.

BULLS AND HIPPOS: Listening to Rural Voices in Health Care



by *Andrea Kratzke Nelson, MD*

We had lived in Baraboo, Wisconsin, for about a year when we were invited out to lunch with a few older members of our church. They began speaking of a man who had cancer years before.

"In the end, the bull got him." Thinking that he was speaking metaphorically, we nodded solemnly at this statement. Then another man spoke up.

"Yeah, bulls are mean animals. My cousin was killed by one as well."

It was at that moment that it really hit home. We certainly were not living in the city anymore.

My husband and I were both trained in Chicago, but ended up taking jobs in rural Wisconsin. It was a stark transition, but one that many professionals who work in rural communities have to go through,

simply because there are few large learning institutions outside major metropolitan areas. This creates an unfortunate myopia where trainees are not exposed to the unique challenges of rural health care until they are in practice faced directly with the bull. Or, for those who never work in a rural area, a complete disconnect from these communities entirely. And while logically many can comprehend that there might be some differences between rural and urban environments, during a practical lecture about community organizations, it can be easy to gloss over the differences when you are unaware of them. My husband's instructors would say "they are basically the same" whenever he would ask about how lessons designed for urban settings were to be used for rural ones, and I was never told anything.

For most of my life, I have lived in urban centers, and that was part of the problem. It was not until I decided to go into family medicine (and in some ways, it was decided for me), and chose a rural track, that I was forced to leave that comfort zone of urbanization. Although I was not raised on a farm, it did not take long to see how blatantly wrongly the urban health care community spoke about rural medicine.

As I was driving back from Madison to Baraboo, I was listening to a podcast on updates in medical practice to pass the time. One of the speakers was discussing telehealth as the key to bringing better health care to rural communities. As I racked my brain trying to remember where the speaker practices medicine, she answered it for me: She is at a tertiary care center in a large city. Since starting residency during the COVID-19 pandemic, many of my Madison-based

colleagues have days dedicated to telehealth. I, on the other hand, had had three telehealth appointments total, and two of them turned into phone calls due to technical problems. The truth was that many people in my area do not have the technology to have successful telehealth encounters. Including many of the doctors!

It is a common fallacy to think that other people have the same wants and needs as yourself, and that if you would benefit from something, then others would, as well. And while this can create a sense of connectedness between people, it causes a great deal of judgment, frustration and anger when you perceive other people as acting irrationally based on what you see as right.

There is an allegory I was told when I first started working in global health about some relief workers who came to an area to help a starving farming village. They looked around and saw a lush patch of land that had never been cultivated. "How could the locals not make use of this perfect land," they wondered, and set about planting the area. A few weeks later, the relief workers woke up to find that their farm was trampled by hippopotamuses. Someone from the local village told them that the hippos always travel through that area, and that is why it was never farmed. The allegory is meant to illustrate why it is important for an outsider to not impose their ideas on a community without first listening. Because while it seemed obvious to the relief workers to use all available farmland to help the starving community, it was obvious to the community that it would fail.

The importance of listening is prominent in global health, and is picking up speed in some nonprofit circles working with marginalized populations. But it is absent from the conversations surrounding rural health care and rural needs in general. That is because it can only exist after those with power—in this case urban medical education—see that there is, in fact, a difference between the communities.

The disconnect between rural and urban communities is hardly a new

phenomenon. Nor is it necessarily an inevitable "us vs. them" situation. But it became a road to hell paved with good intentions, especially when it came to the COVID-19 pandemic and the future post-COVID world. Early in the pandemic, when states started instituting lockdown rules, one concern from rural communities was that they were being held to the same standards as large cities, despite small towns not yet having any cases of COVID-19. While the argument could be made that this was not necessarily the wrong policy, it led to many rural community members feeling as though their needs were not being taken seriously, and laid further groundwork for distrust of medical recommendations for masks and vaccines. Obviously, these issues had other instigating factors, including political and media pressure; however, this ongoing narrative that urban individuals simply do not know or care about what is happening in rural communities continues to be a powerful force that no one seems to be attempting to mitigate.

So, what will actually bring change? While I do not think I have the answers to end the divide between rural and urban communities, I can speak for myself and say that my views of rural medicine have changed dramatically by being part of a rural community. It has come from listening to both the health care providers around me and my patients to understand what their needs are. But that is not enough.

Right now, one of the biggest galvanizing causes for providers in Wisconsin, and in the country as a whole, is how much autonomy mid-level providers should have. A bill to reduce the amount of physician oversight for nurse practitioners was proposed in Wisconsin by a rural nurse practitioner, who said she was struggling to find physicians in the area to support her so she could continue to practice. As expected, there has been a great deal of physician push back against this proposal, mostly from urban physicians who see mid-level providers as encroaching on the care they provide. While that may be true in urban centers, in Baraboo, we would

not have running clinics, nor certain specialty care, nor any anesthesia for surgery, if it were not for our mid-level providers. I am willing to bet that we are not the only area in this situation.

In order for rural health care to improve and thrive, we need to encourage rural voices to be heard in personal, educational and political spheres. That means actively creating space for these voices to be heard like we do in other areas of diversity interactions. Only through creating that space and listening can we prevent the hippos, or bulls, from catching us off guard.

About the author:

Andrea Kratzke Nelson, MD, is from Edina, Minnesota. After she earned her undergraduate degree in biology from St. Olaf College in Minnesota, she volunteered with the Federal Emergency Management Agency in disaster relief from hurricanes and floods, an experience through which she developed a passion for helping survivors of natural disasters and recognized the importance of community resilience. While earning her medical degree from Rush Medical College in Chicago, Kratzke Nelson helped lead a homeless shelter clinic, where she saw the importance of partnering with her colleagues across the allied health professions. Later, as a fellow at the Centers for Disease Control and Prevention (CDC), she learned how research can impact communities. In the CDC Office on Smoking and Health, she discovered that people succeed best in their health goals when they receive support from their community. Now, while completing a residency in the University of Wisconsin Baraboo Family Medicine Residency's Rural Training Track (expected completion in June 2023), she contributes to direct patient care and community health. Kratzke Nelson also has an interest in health improvement and epidemiology, and she has worked with a CDC international task force on the response to the COVID-19 pandemic. In addition, she has interests in emergency medicine and psychiatry, especially mood disorders. She relaxes by baking, knitting, painting, writing, sewing, hiking and reading.

Career-Defining Experiences in Guinea

SYLLA'S SHAPIRO
SUMMER RESEARCH
OUTLINES THE
WEST AFRICAN
NATION'S HEALTH
CARE CHALLENGES

Kaissa Sylla

by Beth Pinkerton

As a child in the Republic of Guinea, West Africa, Kaïssa Sylla always knew she wanted to be a doctor. She moved to the United States for college when she was 18 and lived with her older siblings. Sylla graduated with a bachelor's degree from the University of Delaware in spring 2015 and got married that summer. She intended to apply to medical school right away, but an extraordinary series of events deferred her plans.

Ten days after celebrating Sylla's wedding in Guinea, her mother passed away, and two months later, in Delaware, Sylla had a stroke. She was hospitalized for 10 days and doubted she would have the stamina for medical school, so she decided to focus on starting a family; she now has a daughter and a son.

Although she was incredibly busy, Sylla still dreamed of becoming a physician, so she tested her readiness to withstand the rigors of medical school by attending graduate school. As she earned a master's degree in medical sciences from the University of Vermont, she got her confidence back and started applying to medical schools, including the University of Wisconsin School of Medicine and Public Health (SMPH).

She feels like she received "a sign" related to a profound date. On February 21, 2018, her father had passed away in Guinea. On that date in 2021, she received a call from an SMPH admissions officer telling her she had been accepted to the school.

"My last few conversations with my dad were about not abandoning my dreams to go to medical school! The call totally took my sadness away," says Sylla, who now is a second-year medical student at the SMPH and is considering neurosurgery as one of her options for a career.

The tragic circumstances surrounding her parents' deaths gave Sylla clarity about the kind of physician she wants to be and fuel her passion to do all she can to improve medical care for the Guinean people.

She had watched her mother suffer and decline because there was no oxygen available at the hospital. Despite Sylla's valiant efforts to seek help, she recalls

TODD BROWN/MEDIA SOLUTIONS



At the November 2022 SMPH Medical Student Research Forum, M2 Kaïssa Sylla describes her research in the Shapiro Summer Research Program.

staff appearing apathetic during her mom's medical crisis.

"That traumatic experience marked me the most. I thought, 'This is not right,' and it defined the type of doctor I want to be," she says. "Experiencing the way the doctors and nurses were so attentive and listened to me after I had a stroke was so different from my mom's experience. It redefined my motivation to go to medical school and my end goal, which includes working in medical education."

Medical system limitations and power outages in Guinea's capital city, Conakry, also played a role in her father's death because his much-needed oxygen required electricity. Being in the United States at the time left Sylla feeling helpless, but the COVID-19 pandemic provided her first opportunity to see how she might support the Guinean community.

Sylla connected online with several doctors and nurse practitioners from Guinea who practice in the United States. Via radio and online platforms, she and these health care providers shared U.S. Centers for Disease Control and Prevention (CDC) recommendations to French-speaking Guinean people living in the United States. The team also raised money to send materials to Guinea to support care for COVID-19 patients in the country's only intensive care unit (ICU), which has 14 beds.

The summer before medical school, Sylla visited Guinea to shadow a neurosurgeon she met through the COVID-19 volunteer group. The next year, she returned to Guinea as a scholar in the SMPH's Shapiro Summer Research Program, through which the school's medical students can participate in full-time summer research projects under the mentorship of faculty members.

Sylla's abstract, "Guinea: Barriers to Achieve a Comprehensive National Neurosurgical Care Delivery System in a Sub-Saharan Country," outlines some of the medical system's challenges. For instance, in Guinea, neuro-trauma from motor vehicle and motorcycle accidents is the second major cause of disability in young males. However, the country has only seven practicing neurosurgeons, one magnetic resonance imaging scanner and two computed tomography scanners, so neurosurgical interventions can be performed on less than 10 percent of reported accidents. The nation also has no neurosurgical training program, and intern doctors wait up to 10 years post-graduation to obtain a scholarship for training abroad.

Sylla was impressed with Guinean neurosurgeons whose sophisticated technical skills and knowledge of anatomy compensate for the lack of equipment. She was especially inspired by the interns who work without pay.

"Even though you're not getting formally trained in neurosurgery, you still wake up every day and go to the hospital because you hope to make someone feel better, and you want to learn. That was amazing to me, that's dedication," she reflects.

Sylla's mentor from the SMPH, Robert Dempsey, MD, the Manucher J. Javid Professor and Chair, Department of Neurological Surgery, says, "This study carefully defines the resources available, but more importantly, brings together the personnel necessary to design a national neurosurgical care delivery system. Such research is the basis of education-based improvements in health care in low- and middle-income countries, giving us the greatest hope for future improvement."

Young Earns Award from Women in Ophthalmology Organization

Terri L. Young, MD, MBA, has devoted her career to advancing the voices of women and underserved minorities in ophthalmology.



She was honored for this work by the Women in Ophthalmology, Inc., during the American Academy of Ophthalmology (AAO) annual meeting in fall 2022.

Chair of the Department of Ophthalmology and Visual Sciences at the University of Wisconsin School of Medicine and Public Health, Young recently completed an appointment as chair of the AAO's Diversity, Equity and Inclusion (DEI) Task Force. She and colleagues developed an unconscious-bias training program for AAO committee members and leaders. Because of her work, for the first time the AAO is systematically requesting and tabulating demographic data on all aspects of the organization. And based on task force recommendations, the AAO added a web bookmark for DEI-related materials and tools.

Young also served as the chair of the Compensation Survey Committee of the Association of University Professors of Ophthalmology (AUPO). She led efforts to modify AUPO's survey sent to all academic ophthalmology departments to determine benchmarks for subspecialty salary thresholds. The survey, which now requests demographic data, revealed gender-related compensation inequities that begin at the onset of academic careers.

"Dr. Young's ability to . . . serve as a role model is notable and marked by her uncommon graciousness, intellectual curiosity and analytical clarity," wrote Natalie Afshari, MD, professor of ophthalmology and cornea service chief, Shiley Eye Institute, University of San Diego, California.

Fiore Receives Second NIH R35 Outstanding Investigator Award

Michael Fiore, MD, MPH, MBA, is the principal investigator for a seven-year National Institutes of Health (NIH)



Outstanding Investigator Award worth \$6.5 million, which will help the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) identify and disseminate effective ways to help cancer patients quit smoking.

A Hilldale Professor in the UW School of Medicine and Public Health's Department of Medicine, Fiore will lead a UW-CTRI research team including Danielle McCarthy, PhD, professor of medicine, to further evaluate innovative approaches that help cancer patients who smoke to quit. This will build on the national Cancer Center Cessation Initiative, led by UW-Madison. As part of the National Cancer Institute's Cancer Moonshot Initiative, UW-CTRI has partnered with 52 cancer centers to systematically help more than 76,000 cancer patients quit smoking.

This R35 Outstanding Investigator Award, the second for Fiore, will advance knowledge and help identify effective interventions that help people with cancer achieve lasting tobacco abstinence, as well as efficient and equitable ways to connect cancer patients with treatments.

"Smoking is common among adult patients with cancer and is under-treated, despite strong evidence that quitting smoking markedly improves the health outcomes of cancer patients," Fiore states. "Too few patients with cancer who smoke are offered effective smoking treatment by their cancer care teams. We're delighted this new award will help us do even more."

Klein Granted Second NIH MERIT Award to Study Pathological Fungus

In 1984, as an infectious disease fellow at the University of Wisconsin School of Medicine and Public Health, Bruce Klein, MD (PG '89), first led



a team investigating a mysterious respiratory disease that had sickened dozens of children in Eagle River, Wisconsin. Two years later, Klein and Jeffrey Davis, MD '74, an adjunct professor of pediatrics and Wisconsin state epidemiologist, published a landmark paper in the *New England Journal of Medicine* that uncovered the fungus' environmental niche and the origin of the 1984 outbreak: blastomycosis, caused by potentially deadly airborne spores of *Blastomyces dermatitidis*.

Today, Klein is a professor of pediatrics, medicine, and medical microbiology and immunology, and chief of the Division of Infectious Diseases in the Department of Pediatrics. His research group has followed inquiries into *Blastomyces dermatitidis*—the fungus that causes blastomycosis—which is found far more often in northern and central Wisconsin than any other state.

Several years ago, Klein received a National Institutes of Health (NIH) R37 Method Extending Research in Time (MERIT) Award that provided \$4.2 million of support over 10 years. Recipients cannot apply for a MERIT Award, but researchers submitting grants whose research is distinctly superior are considered for the award. In July 2022, in support of his research on blastomycosis, Klein received his second MERIT award, the only identifiable instance of a UW-Madison investigator being granted a second MERIT award in recent decades. Klein is now investigating the genetic underpinnings in people more susceptible to blastomycosis.

Pulia Named a National Academy of Medicine Scholar

The National Academies of Sciences, Engineering and Medicine have called for systemwide improvements in diagnostic



excellence in health care. To address this need, the National Academy of Medicine (NAM), in partnership with the Council of Medical Specialty Societies, developed the NAM Scholars in Diagnostic Excellence Program, funded by the Gordon and Betty Moore Foundation with support from The John A. Hartford Foundation.

Michael Pulia, MD, PhD '22, director, Emergency Care for Infectious Diseases Research Program, BerbeeWalsh Department of Emergency Medicine, and assistant professor of emergency medicine, University of Wisconsin School of Medicine and Public Health, has been named a NAM Scholar in Diagnostic Excellence for 2022-2023. This highly prestigious, collaborative opportunity aims to enhance scholars' knowledge and skills in diagnostic quality and safety, and accelerate their career development.

NAM Scholars partake in a year-long program with the goals of advancing diagnostic excellence and equity, and driving the implementation of programs that will improve diagnosis and reduce diagnostic errors nationally. Each scholar also receives a flexible research grant and is matched with renowned mentors in their field.

Pulia's proposed program will focus on improving diagnostic accuracy for older adults who present to the emergency department with suspected pneumonia. He notes that the program will advance ongoing work to improve diagnostic accuracy and antibiotic stewardship.

Faculty Members Serving as President and President-Elect for National and International Professional Organizations



As of mid-December 2022, the following University of Wisconsin School of Medicine and Public Health faculty members are serving as president or president-elect for national or international professional organizations. The names below correlate with the photos above in the order of top row, left to right, and bottom row, left to right.

Steven Barczi, MD (PG '96), is the president-elect of the Association of Specialty Professors, a consortium member of the Alliance for Academic Internal Medicine; he is a professor in the Department of Medicine.

Donna Blankenbaker, MD, FACR (PG '00, '01), is the president of the Society of Skeletal Radiology; she is a professor in the Department of Radiology.

Allan Brasier, MD, is the president-elect of the Association for Clinical and Translational Sciences; he is a professor in the Department of Medicine and the senior associate dean for clinical and translational research.

Thomas Grist, MD, FACR, is the president of the Society of Chairs of Academic Radiology Departments; he is a professor and chair of the Department of Radiology.

Paul Harari, MD, is the president-elect of the American Radium Society; he is a professor and chair of the Department of Human Oncology.

Scott Reeder, MD, PhD, is the president of the International Society for Magnetic Resonance in Medicine; he is a professor in the Department of Radiology.

Manish N. Shah, MD, MPH, is the president-elect of the Society for Academic Emergency Medicine Foundation Board of Trustees; he is a professor and chair of the BerbeeWalsh Department of Emergency Medicine.

Oliver Wieben, PhD, is the president-elect for the Society for Magnetic Resonance Angiography; he is a professor in the Departments of Medical Physics and Radiology.

Faculty Investiture Celebration

HONORING THE TALENT OF FACULTY MEMBERS AND THE
GENEROSITY OF DONORS FOR NAMED FACULTY POSITIONS



During the inaugural Faculty Investiture Celebration, faculty member honorees (listed on the next page) posed with department chairs and other school leaders, including Dean Robert N. Golden, MD.

On Wednesday, October 12, 2022, University of Wisconsin School of Medicine and Public Health (SMPH) faculty honorees, donors and leaders gathered for the school's inaugural Faculty Investiture Celebration. The event honored the accomplishments of inspiring and innovative faculty members and recognized the school's philanthropic partners who are leading the charge to usher in a new era of medicine.

The investiture ceremony signified that a faculty member has received an endowed professorship, chairship or fellowship supported through philanthropy. (See list of honorees on the next page.) An endowed faculty position is among the highest honors the school can bestow on its faculty members. It represents an investment in talent and the future, pushing forward the

school's mission of advancing health and health equity through remarkable service to patients and communities, outstanding education and innovative research.

Endowed positions enable the SMPH to advance faculty members' passionate pursuit to understand, treat and eventually cure devastating diseases.

At the event, a chair, director or other department representative shared comments about the faculty member's accomplishments and about the donor and meaning behind the endowed position. Dean Robert N. Golden, MD, presented each faculty member with a medallion, which represents all that person and the donors have achieved so far, with a nod to what they will accomplish in the future. Each recipient also received a plaque to display the medallion.

"Our faculty members represent harmonious notes, who join together within and across our departments, centers and institutes, creating the beautiful sonata that is our UW School of Medicine and Public Health," Golden said during his opening remarks at the event. "And we are fortunate to have such charitable patrons who are so dedicated to advancing our missions. You fuel our academic and clinical engines with your altruism and encouragement."

The event is part of Wisconsin Medicine, the philanthropic partnership between UW Health and the UW School of Medicine and Public Health. Together, these organizations are championing patient care, research and education.

2022 RECIPIENTS OF ENDOWED FACULTY POSITIONS

DANIEL M. ALBERT CHAIR RETINA RESEARCH FOUNDATION

Melissa Skala, PhD, professor,
Department of Medical Physics

ANTHONY J. ARENAS PROFESSORSHIP IN LUNG TRANSPLANTATION*

James Maloney, MD (PG '01), professor,
Department of Surgery

SUSAN BEHRENS, MD, (CLASS OF 1975) SURGERY EDUCATION CHAIR*

John Rectenwald, MD, MS, professor,
Department of Surgery

JEANNE BISSELL PROFESSOR IN REPRODUCTIVE JUSTICE

Jennifer Higgins, PhD, MPH, professor,
Department of Obstetrics and Gynecology

JOHN W. DOOLITTLE AND HELEN DOOLITTLE PROFESSORSHIP

Melanie Schmitt, MD '09, assistant
professor, Department of Ophthalmology
and Visual Sciences

JOHN W. DOOLITTLE AND HELEN DOOLITTLE PROFESSORSHIP

Kimberly Stepien, MD '02, professor,
Department of Ophthalmology and
Visual Sciences

ENDOWED PROFESSOR OF HEMATOLOGY AND ONCOLOGY

Kari Wisinski, MD, professor,
Department of Medicine

JEAN R. FINLEY PROFESSORSHIP IN PEDIATRIC HEMATOLOGY AND ONCOLOGY

Christian Capitini, MD, associate professor,
Department of Pediatrics

FREDERICK GAENSLER PROFESSORSHIP IN ORTHOPEDICS

Bryan Heiderscheid, PT, PhD,
professor, Department of Orthopedics
and Rehabilitation

GLAXO WELLCOME CHAIR FOR THE STUDY OF TOBACCO DEPENDENCE

Timothy Baker, PhD, professor,
Department of Medicine

CAPRICE C. GREENBERG PROFESSORSHIP IN HEALTH SERVICES RESEARCH*

Heather Neuman, MD, MS, associate
professor, Department of Surgery

GROSSMAN CHAIR IN HEALTHCARE LEADERSHIP

Peter Newcomer, MD '95, clinical professor,
Department of Medicine

NELSON M. HAGAN CLASS OF 1929 CHAIR

Juliet Aylward, MD '00, clinical professor,
Department of Dermatology

DR. BRUCE AND JUDITH HARMS SURGERY PROFESSORSHIP*

Charles Heise, MD (PG '00), professor,
Department of Surgery

EVAN P. AND MARION HELFAER PROFESSORSHIP OF DERMATOLOGICAL CANCER

Vijay Setaluri, PhD, professor, Department
of Dermatology

PHILLIP AUGUST AND SARAH NEELY HERRMANN PROFESSORSHIP IN GENERAL INTERNAL MEDICINE

Kelly Lavin, MD '11 (PG '14), associate
clinical professor, Department of Medicine

HUMAN ONCOLOGY PROFESSORSHIP*

Zachary Morris, MD (PG '16), PhD,
associate professor, Department of
Human Oncology

FRED LEE, SR., MD, CHAIR*

Scott Reeder, MD, PhD, professor,
Department of Radiology

ESTHER LOUND MILLARD PROFESSORSHIP IN COMMUNITY HEALTH

David Rakel, MD, chair, Department of
Family Medicine and Community Health

MORGRIDGE DISTINGUISHED CHAIR IN HEALTH SERVICES RESEARCH*

Corrine Voils, PhD, professor,
Department of Surgery

O'CONNOR FAMILY PROFESSORSHIP IN PEDIATRICS*

Mary Ehlenbach, MD '02 (PG '05),
associate professor, Department
of Pediatrics

RENNEBOHM RESEARCH PROFESSORSHIP

Anjon Audhya, PhD, professor,
Department of Biomolecular Chemistry

KENNETH D. SKAAR, MD, CHAIR OF PRIMARY CARE

Elizabeth Trowbridge, MD '91 (PG '94),
clinical professor, Department of Medicine

STEM CELL AND REGENERATIVE MEDICINE RESEARCH PROFESSORSHIP*

Timothy Kamp, MD, PhD, professor,
Department of Medicine

JUDY AND SAL TROIA FACULTY FELLOW IN IBD LEADERSHIP*

Sumona Saha, MD '12, MS, associate
professor, Department of Medicine

MONROE E. TROUT CHAIR IN VISION RESEARCH*

Michael Altaweel, MD (PG '00), professor,
Department of Ophthalmology and
Visual Sciences

TIMOTHY WILLIAM TROUT CHAIR IN EYE RESEARCH*

Akihiro Ikeda, DVM, PhD, professor,
Department of Medical Genetics

DR. HERMAN AND AILENE TUCHMAN CHAIR IN CLINICAL CARDIOLOGY

Anne O'Connor, MD, associate professor,
Department of Medicine

UW CENTER FOR TOBACCO RESEARCH AND INTERVENTION RESEARCH PROFESSOR

Danielle McCarthy, PhD, professor,
Department of Medicine

UW CENTER FOR TOBACCO RESEARCH AND INTERVENTION RESEARCH PROFESSOR

Megan Piper, PhD (PG '07), professor,
Department of Medicine

UW MEDICAL FOUNDATION PROFESSOR OF PATHOLOGY AND LABORATORY MEDICINE

David Evans, PhD, professor, Department of
Pathology and Laboratory Medicine

ENID AND JERRY WEYGANDT PROFESSORSHIP IN PEDIATRIC CRITICAL CARE*

Peter Ferrazzano, MD, professor,
Department of Pediatrics

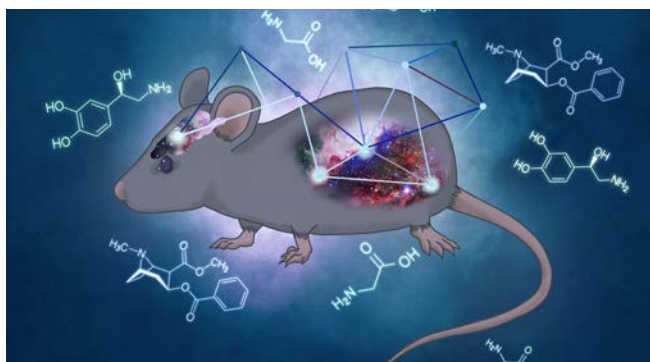
** Matching gift support was provided
through the generosity of John and
Tashia Morgridge.*

Brain-Gut Connection May Reveal Way to Prevent Cocaine Addiction

Cocaine disrupts the microbe balance in the guts of mice, part of a cycle of neurochemicals that can enhance the drug's effects in the brain. But the same chemicals also may be harnessed to prevent addiction, according to research at the University of Wisconsin School of Medicine and Public Health.

Cocaine increases levels of norepinephrine in users' intestines, triggering an explosion of growth of proteobacteria, including *E. coli*.

"*E. coli* needs nitrogen to grow, and its preferred food is glycine, which works in the brain as a neurotransmitter," says Vanessa Sperandio, PhD,



professor and chair, Department of Medical Microbiology and Immunology, and co-author of the National Institutes of Health-funded study published in *Cell Host and Microbe*. "So, an overgrowth of *E. coli* reduces glycine levels around the body, including in a pathway in the brain where glycine manages the response to cocaine."

Researchers administered cocaine to a group of mice infected with proteobacteria and found that the injected mice experienced more cocaine-induced movement and cocaine-seeking behavior than mice without the proteobacteria in their guts. Glycine-depleted mice were more responsive to cocaine

and prone to addiction than those with normal gut microbiota.

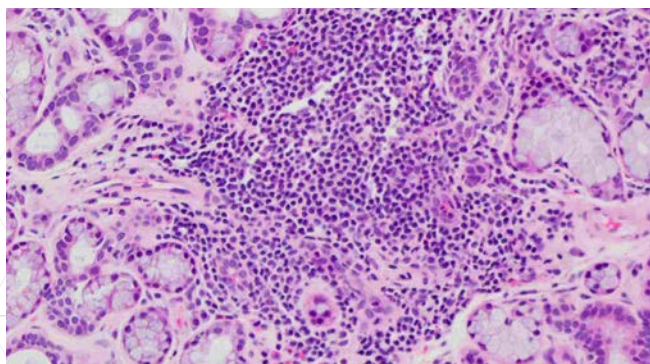
The researchers then introduced to another group of mice a strain of *E. coli* lacking genes that allow the bacteria to eat glycine. Those mice were less affected by cocaine.

"*E. coli* were responding to norepinephrine and colonizing the mouse gut, but had to find a different food source. This shows us it is the glycine depletion affecting the brain. Prevent the glycine depletion, and the mice don't respond by trying to get more cocaine," Sperandio says, adding that findings may present a way to keep humans from getting hooked.

Study Opens Door for More Effective Research and Treatment of Sjögren's Disease

Sjögren's disease is a systemic autoimmune disease typified by three cardinal symptoms—dryness (including but not limited to mouth and eyes), pain and fatigue. Symptom severity can range from mild to debilitating, and frequently does not have a clear correlation to objective clinical measurements. The variability of patients' symptoms often makes timely diagnosis and effective treatment challenging, especially in the presence of co-morbidities. It also impairs the development of effective therapy.

A study published in *Arthritis and Rheumatology*—led by Sara McCoy, MD, PhD '21, associate professor, Division of



Rheumatology, Department of Medicine, University of Wisconsin School of Medicine and Public Health—establishes a crucial foundation for research and treatment of Sjögren's. The study aimed to stratify the disease by its cardinal symptoms to provide better guideposts for diagnosis, treatment and clinical trials.

McCoy and co-authors analyzed the symptoms of patients from major Sjögren's disease registries and generated four primary symptom clusters based on severity. Within the clusters, they found patterns of disconnect between patient experience, objective disease activity and prescribed treatments. For example,

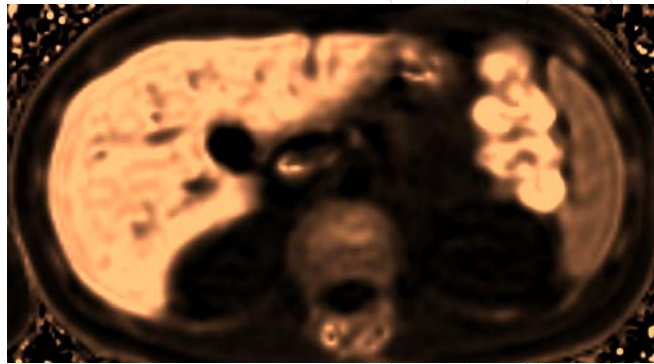
patients in one cluster reported a higher number of symptoms than other clusters, despite having lower levels of objective disease activity than patients in other clusters. Patients in the cluster also received more treatments than clusters with higher levels of lab abnormalities. Further, these patients had medical costs up to double the costs reported in other clusters.

These and other insights affirm the need for a more tailored approach to treatment, as well as the usefulness of symptom clustering as a map to treatment optimization. Such a map allows for earlier, more accurate treatments, in turn helping to cut costs and improve patient-provider relationships.

Multicenter Study Focuses on Liver Iron Concentrations

For more than a decade, Diego Hernando, PhD, and Scott Reeder, MD, PhD, have been researching an innovative method of measuring liver iron concentration. They recently published their findings, “Multicenter Reproducibility of Liver Iron Quantification with 1.5-T and 3.0-T MRI,” in *Radiology*. The results have implications for the detection and treatment monitoring of iron overload, which afflicts patients with certain genetic conditions and cancer survivors.

In 2010, when Hernando became an assistant scientist in the University of Wisconsin School of Medicine and Public Health’s (SMPH) Department of



Radiology, he began working with Reeder, professor of radiology, researching diffuse liver disease.

Hernando and Reeder were curious whether there was a correlation between liver iron concentration and $R2^*$, the rate of MRI signal decay. They also believed it was important to measure liver fat and $R2^*$ jointly

because measuring one without the other would lead to errors in the results. Thus, they measure $R2^*$ using both the magnitude and phase of the MRI signal, and these $R2^*$ measurements are insensitive to noise- and fat-related errors. Older $R2^*$ methods lead to bias in estimates of liver iron concentration.

In 2012, they performed a small study funded by the Wisconsin Alumni Research Foundation to evaluate their hypothesis, which they confirmed using a single vendor, General Electric, at 1.5-T and 3.0-T. These data were key to securing National Institutes of Health funding for a multicenter study.

For the new study, they collaborated with several centers with different MRI vendors and patient populations. Findings demonstrated a reproducible calibration of $R2^*$ -based iron quantification across vendors and protocols, at 1.5-T and 3.0-T. This means researchers and clinicians can compare results for patients scanned anywhere.

ACA Navigators Boost Insurance Enrollment in Underserved Communities

Funding for the Affordable Care Act (ACA) Navigator Program positively impacted enrollment, and the private health insurance industry did not pick up the slack when program funding was reduced, according to two studies at the University of Wisconsin School of Medicine and Public Health (SMPH).

The federally funded program provides free, one-on-one assistance to help people understand and sign up for health insurance, including from Medicaid or marketplaces established under the ACA.

In 2022, the program’s funding is at a record high. However, from 2017 to 2019, the government cut funding by about 80 percent. To measure



the impact of funding the program, a team led by Rebecca Myerson, MPH, PhD, assistant professor, SMPH Department of Population Health Sciences, compared changes in coverage in counties that were more versus less exposed to the cuts.

The paper, published in the *American Journal of Health Economics*, indicated that when

funding was reduced, enrollment in health insurance coverage decreased among lower-income adults. Cuts to the Navigator Program also significantly decreased insurance coverage among adults younger than age 45, Hispanic adults and adults who speak a language other than English at home.

“Our research showed that the Navigator Program impacted

coverage among the same underserved communities that many Navigator Programs said they would target,” Myerson says.

Next, the team wanted to understand if the private insurance industry would increase advertising as a response to the loss of government-funded outreach when funding was cut. As published in *JAMA Network Open*, this research did not detect evidence of increased advertising spending to offset funding cuts in the affected counties.

Myerson says these papers can help policymakers understand the potential impact of government-funded and community-based outreach on equity in access to coverage.

ENHANCING THE SMPH'S ROLE OF

Addressing Cancer in Wisconsin

A large team at the University of Wisconsin Carbone Cancer Center recently orchestrated another successful five-year competitive renewal related to our National Cancer Institute (NCI) Comprehensive Cancer Center designation, a special status we have maintained for 49 consecutive years. To retain this designation, we must document ongoing excellence in cancer care, research, education and community benefit. This evaluation—especially pertaining to our many programs that help improve health in the communities we serve—reaffirms the Wisconsin Idea, the concept that the great work done at UW-Madison should provide value beyond the borders of the campus. This vision shapes our missions at the UW School of Medicine and Public Health (SMPH) and UW Carbone.

The SMPH and cancer center serve our state and region in many ways, including:

- providing training and career opportunities to state residents, and providing well-trained biomedical professionals for state businesses to hire;
- fostering research that impacts our communities and beyond; and
- building the foundation for biomedical services, such as health care and medical interventions, that directly benefit the people of Wisconsin.

While all of these factors are important, it is paramount for us to continue providing tangible evidence of how our activities directly help the people of the region we serve. In my almost 30 years on the SMPH faculty, I have traveled the state and spoken with countless health care providers and community members about their perceptions of UW-Madison. Not surprisingly, the greater their perception that the university directly benefits the community where they

live, the greater they perceive the value of UW-Madison and the SMPH.

UW Carbone has embraced an ever-expanding approach to serving the needs of patients and communities throughout our state. Our programs help reduce cancer risk and provide state-of-the-art cancer diagnosis and treatment. Long-standing programs include the Center for Tobacco Research and Intervention (UW-CTRI) and the Wisconsin Cancer Collaborative.

The latter started 40 years ago through the efforts of Paul P. Carbone, MD, director of the Carbone Cancer Center, and Gerald Doelle, executive vice president of the American Cancer Society in Wisconsin. This collaborative is funded through the Centers for Disease Control and Prevention, Wisconsin Department of Health Services and UW-Madison, with staff of UW Carbone and member organizations in almost every county in Wisconsin. It provides wide-ranging guidance on health equity, cancer-risk reduction, screening, treatment, survivorship, end-of-life care and access to cancer data throughout Wisconsin. UW-CTRI, founded 30 years ago, provides ground-breaking research on tobacco dependence and broadly disseminates smoking-prevention measures and methods to help people quit smoking. With its outstanding outreach program and the Wisconsin Tobacco Quit Line, UW-CTRI is an example of combining the university's missions of advancing societal knowledge (research) with direct community benefit.

These are just a few examples of the many campus units that provide immediate, direct help to people and communities throughout Wisconsin. Additionally, starting more than 25 years ago, based on the outstanding health care systems and physicians providing cancer care throughout Wisconsin, UW Carbone founded the

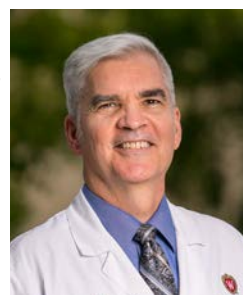
Wisconsin Oncology Network to provide patients with greater access to cutting-edge clinical trials. This network has enrolled more than 1,000 cancer patients at more than 20 clinical sites throughout Wisconsin.

From these origins have risen two more statewide efforts. First, about 10 years ago, UW Carbone developed the Wisconsin Oncology Network for Imaging Excellence to allow more communities across the state to participate in innovative imaging and nuclear medicine-based therapies in cancer; and second, five years ago, UW Carbone created the Precision Medicine Molecular Tumor Board to serve the growing needs of cancer providers and their patients relative to genomically driven therapies. As mentioned, programs like these incorporate multiple components of our mission, directly serving the residents of our state and contributing to developing and applying knowledge beyond the confines of our university—the Wisconsin Idea.

As UW Carbone moves forward with greater than 50 years as an NCI-designated Comprehensive Cancer Center—something only a handful of cancer centers can claim—I have observed that the SMPH and UW Carbone are at our best when we work with the outstanding providers throughout Wisconsin to improve the lives of all, regardless of where they live or seek their health care.

**Howard Bailey,
MD (PG '91)**

*Associate Dean for
Oncology, SMPH
Director,
UW Carbone
Cancer Center
Professor,
Department of
Medicine*





**I Know
YOU**

... OR DO I?

If you think you can identify the person in the photograph at right, send your guess to quarterly@med.wisc.edu. We'll draw one of the correct responses and announce the winner in the next issue of *Quarterly*.



HINT ABOUT PHOTO ABOVE:

This woman experienced many firsts in her career.

ABOUT LAST ISSUE'S PHOTO:

April Zehm, MD '11 (PG '14), won the prize drawing and will receive a gift from the Wisconsin Medical Alumni Association!



In the last issue of *Quarterly*, three people correctly identified Shaun K. Yang, MD '10, MPH. After earning his medical degree from the University of Wisconsin

School of Medicine and Public Health (SMPH)—where he was inducted into the Alpha Omega Alpha Honor Society—he completed an internal medicine residency at New York University School of Medicine and a point-of-care ultrasound mini-fellowship at Massachusetts General Hospital. He practices internal medicine at Mayo Clinic Hospital in Phoenix.

At the SMPH, Yang, Benjamin Weston, MD '10, MPH '11, and others established the Healthy Classrooms Foundation.

Yang penned an article for the summer 2008 *Quarterly*, in which he said medical students were influenced by the SMPH's transformation into the nation's first integrated school of medicine and public health. He wrote: "This idea of putting 'public health' into the school's name was the inspiration for UW medical students to organize Healthy Classrooms: A Public Health in Education Symposium. ... From all the classroom time studying population health, it was clear to us that we needed to focus our efforts

'upstream' on preventive measures, promoting healthy lifestyle behaviors at an early age."

Upon recognizing Yang's photo, April Zehm, MD '11 (PG '14), recalled working on the effort with Yang, Weston, and Lindsay Griffin, MD '12 (PG '18); Zehm noted, "We planned a massive symposium for local K-12 educators and parents. It was so much work, but a success!"

In April 2008, more than 300 participants attended the first student-organized Healthy Classrooms Symposium, at which teachers, parents, principals, physicians and community members discussed the effects of public health issues on children in school.

Yang's article stated, "We envisioned a ripple effect. Reaching out to one teacher meant reaching out to 30 students. And if we reached out to one principal, then we could reach out to 30 teachers."

The Healthy Classrooms Foundation continues to host symposiums and provide grants to educators.

**PLEASE SHARE
YOUR NEWS!**

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

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For more info, visit: med.wisc.edu/alumniweekend