April 2024
FRIDAY, APRIL 19
Spring WMAA Board of Directors Meeting, SMPH Scholarship Reception, and WMAA Awards Banquet

May 2024
FRIDAY, MAY 10
MD Graduate Recognition Ceremony
Memorial Union and livestream

June 2024
WEDNESDAY, JUNE 5
Wausau Alumni Dinner and Presentation by Howard Bailey, MD (PG ’91)
Tebo & Tilly, Wausau, Wisconsin
FRIDAY, JUNE 7
Medical Alumni Day for the MD Classes of 1959, ’64, ’69, ’74, and ’79, and the Half-Century Society
Health Sciences Learning Center and Park Hotel

August 2024
FRIDAY, AUGUST 23
White Coat Ceremony
Memorial Union and livestream

September 2024
FRIDAY, SEPTEMBER 20
Middleton Society Dinner
Details to be announced

October 2024
FRIDAY AND SATURDAY, OCTOBER 25-26
See wmaa.med.wisc.edu/homecoming-weekend/
To register, visit wmaa.med.wisc.edu/events/

CONNECT WITH WMAA AND ALUMNI ON SOCIAL MEDIA

Please search for @uwmedalum on Facebook and Instagram. Follow us for fun updates!
LISTENING TO THE COMMUNITY
Through community projects, generations of TRIUMPH students and their mentors support Spanish-speaking youth and parents.

FIREARM SAFETY
Training increases health care providers’ confidence for communicating with patients about firearm safety measures.

MATCH DAY
With the theme of “Mooving Forward,” MD students celebrate the news about where they will head for residency training.

ON THE COVER
Left to right: Michelle Buelow, MD ’11, MPH; M3 Rodrigo De La Torre; Melissa Waldo, LCSW; and M4 Andrea Niño de Guzman Ramirez at Sixteenth Street Community Health Centers, where they participate in a community health project in the Training in Urban Medicine and Public Health Program; missing from photo: M3 Alejandra Torres Díaz
In this issue of Quarterly, we highlight several longstanding traditions that define our University of Wisconsin School of Medicine and Public Health (SMPH). The cover article, “Listening to the Community,” describes longitudinal, community-based, service-learning projects conducted by multiple “generations” of medical students in our Training in Urban Medicine and Public Health (TRIUMPH) Program. We applaud TRIUMPH — including its physician leaders, who all earned their medical degrees in our school’s urban track — for advancing its mission of training physicians to serve disadvantaged, urban populations. We also celebrate the tradition of Match Day. This year’s graduating medical students selected the bovine theme “Mooving Forward,” paying homage to an iconic symbol of our state while setting the stage for multiple puns, some of which were true groaners. I know our graduates — like Wisconsin cows in the springtime — will be “out standing” in their fields. Another article focuses on a relatively new effort among dedicated faculty and staff members from the SMPH and UW Health to increase health care providers’ cultural competency about firearms. Their goal of boosting clinician effectiveness in educating patients about ways to prevent firearm-related injuries will become a tradition.

One of our deeply held traditions is the development of women leaders in medicine and public health. In the Alumni Profile, we showcase the pioneering career of Jeannette Munro, MD ’27, one of the first women medical students from our school to complete her clinical training at Lutheran Hospital in La Crosse, which has evolved into our Gundersen Health System/Western Academic Campus. The article — co-authored by Elizabeth Petty, MD ’86 (PG ’89), and Sharon-Rose Nartey, MD ’23 — also recounts how Dr. Munro became the first pediatrician and first female physician in Princeton, New Jersey.

We are extremely proud of Patricia Téllez-Girón, MD (PG ’00), who received the government of Mexico’s highest honor for a Mexican leader living outside of that country, in recognition of her stellar role in providing care, education, and advocacy for underserved populations while mentoring and teaching minority and non-minority students. We also applaud Andrea Gilmore-Bykovskyi, RN, PhD, and Tiffany Green, PhD, who received Outstanding Women of Color Awards, and Sonam Dolma, who exemplifies our success in recruiting remarkably talented medical students who add to our school’s diverse community. Special thanks go out to Harry Brickley, MD, for his gracious support of our Native American medical students through his scholarship fund.

It is a pleasure to share the success story of our Physician Assistant (PA) Program’s newest distant campus, known as wisPACT@UW–Platteville, which welcomed its first 10 students in May 2023. The PA Program’s director, Virginia “Ginny” Snyder, PhD, PA ’01, is leaving big shoes to fill as she retires this spring after a long, highly impactful career here.

I want to share news about another upcoming transition. I recently asked UW–Madison Chancellor Jennifer Mnookin, PhD, JD, to begin the search for my successor. I cannot begin to express what an amazing honor and privilege it has been to serve as your dean and as UW–Madison’s vice chancellor for medical affairs over the past 18 years. As we get closer to passing the proverbial baton in about a year, I will embrace more opportunities to thank the SMPH community for its incredible support and to celebrate all that our school has accomplished in advancing our vision. In the meantime, it is full speed ahead in my role as dean. In the words of the immortal Sherlock Holmes, “Come, Watson! The game is afoot!”

ROBERT N. GOLDEN, MD
Dean, University of Wisconsin School of Medicine and Public Health
Vice chancellor for medical affairs, UW–Madison
Match Day. There is nothing else quite like it. Even for those of us who are experiencing secondhand emotions, learning in the span of minutes where our soon-to-be MD alumni will head is an electric experience. As you will read on page 8, our fourth-year class selected the theme “Mooving Forward” and incorporated many beloved traditions of what it means to be a medical student at the University of Wisconsin School of Medicine and Public Health (SMPH). Never have you seen so many smiles nor so many cow spots.

The Wisconsin Medical Alumni Association (WMAA) exists to build enduring relationships with alumni and to nurture the next generation of Badger physicians. The WMAA staff and I reflect on this every Match Day, as we thank medical students who donate to their class fund that will eventually become a scholarship. We also share with them the names of alumni around the country who – through the Student-Alumni Partnership Program – have volunteered to be resources for graduates as they get settled into residencies. This is a heartwarming cycle of Badgers helping Badgers.

In recent months, medical alumni have demonstrated their commitment to their alma mater in myriad ways, from joining the first Career Advice from Badgers virtual event for third-year medical students, to participating in online communities to support students with whom they have shared experiences. The recent WMAA e-newsletter included details about a student organization dedicated to providing a sense of community, mentorship, and resources to medical students who identify as the first generation in their families to get an undergraduate education and/or who come from backgrounds at or below 150 percent of the poverty line. Many alumni immediately signed up to become listening ears and helping hands for these students. If you are interested in serving as a mentor for this or other student organizations, please contact us at wmaa@med.wisc.edu. You can find a full list of medical student organizations in Quarterly, Volume 25, Number 4 (wmaa.med.wisc.edu/quarterly/issue/).

Looking forward, we will soon welcome the Classes of ’59, ’64, ’69, ’74, and ’79, plus members of the Half-Century Society who graduated 50 or more years ago, for Medical Alumni Day on Friday, June 7, 2024. If you are celebrating a reunion in June or as part of Homecoming weekend in October, I encourage you to participate. The WMAA has been hosting reunions for nearly seven decades, and alumni tell us there are good reasons to continue this time-honored tradition — they find it special to reunite with classmates and reconnect with the SMPH. You can learn more at wmaa.med.wisc.edu.

The WMAA team also savors opportunities to create new programs and events based on ideas from alumni and students. For instance, we have started exploring the idea to host a panel for students to hear from alumni who have built careers working in community health centers and other places that serve medically underserved populations. If you are interested in participating on the panel or have ideas for future programs, please contact our team at wmaa@med.wisc.edu or (608) 263-4915.

Do you have news to share, such as a new position or a professional honor? Please submit your updates at wmaa.med.wisc.edu/share. You can read about your classmates and your alma mater on our website, at wmaa.med.wisc.edu/quarterly, and on Facebook and Instagram (@uwmedalum). As always, we are humbled by your contributions to the world and hope to celebrate alongside you.
Left to right: Michelle Buelow, MD ’11, MPH; M3 Rodrigo De La Torre; Melissa Waldo, LCSW; and M4 Andrea Niño de Guzman Ramirez at Sixteenth Street Community Health Centers; missing from photo: M3 Alejandra Torres Diaz
In the words of Coretta Scott King: “The greatness of a community is most accurately measured by the compassionate actions of its members.”

Compassion abounds in a community project facilitated since 2012 by “generations” of medical students in the University of Wisconsin School of Medicine and Public Health’s (SMPH) Training in Urban Medicine and Public Health (TRIUMPH) Program. The art of listening is the heart of the Raíces project at the Sixteenth Street Community Health Centers (SSCHC), where medical students support parents whose Latina daughters are receiving mental health care, says Melissa Waldo, LCSW, an SSCHC psychotherapist and the project founder and mentor.

The SMPH developed TRIUMPH to promote health and health equity in medically underserved urban communities. Following a year and a half of medical education in Madison, medical students in TRIUMPH move to Milwaukee, Wisconsin, where they complete a core curriculum, required clinical rotations, and community projects that delve into historical, contextual, and social determinants of health.

TRIUMPH students who are matched with Raíces at the SSCHC — a federally qualified health center that serves mostly Spanish-speaking patients — commit to leading weekly, two-hour, group sessions for parents. Presenting in Spanish, Raíces facilitators aim to increase understanding and reduce stigma surrounding mental illness and empower parents to support their children suffering from mental illness in a culturally sensitive way.

Raíces is run simultaneously with the 16-week Self-Esteem, Empathy, Empowerment, Discovery of Self (SEEDS) Program, in which 13- to 16-year-old Latinas attend small-group mental health therapy. Statistics show that Latina adolescents are disproportionately impacted by mental illness, including suicide, yet they are less likely to receive mental health treatment compared to non-Hispanic white peers, partly due to stigma in the community.

Medical students are coached by Waldo and by TRIUMPH Associate Director Michelle Buelow, MD ’11, MPH, who has served as the faculty advisor for SEEDS and Raíces since 2014, after she completed a family medicine residency at Allina Health in St. Paul, Minnesota, and returned to Milwaukee. Buelow was among the first TRIUMPH graduates and one of the first TRIUMPH alumni to establish a practice at SSCHC.

“Melissa Waldo and Dr. Buelow have been the ‘glue’ for SEEDS, which Melissa started and involved TRIUMPH students in 2012, and for Raíces, which the medical students started with her guidance a few years later,” says TRIUMPH Director Kjersti Knox, MD ’11 (PG ’14), who also earned her medical degree from the SMPH’s urban program followed by an SMPH-affiliated family medicine residency at Advocate Aurora Health in Milwaukee.

Waldo recalls that Kayla Flores, MD ’12 — now a family medicine physician at Aurora Health Care who mentors a TRIUMPH student on a community-based, health-improvement project that serves Spanish-speaking patients — was the first TRIUMPH student to help with SEEDS when it was a free social-support

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“Subsequent TRIUMPH students realized that the parents, who were dropping off their daughters every week for two hours, had little or no knowledge of the topics we were addressing, such as depression, self-harming behaviors, peer pressure, bullying, dating violence, and more,” says Waldo. “Initially, the medical students developed handouts about the topic of each week’s SEEDS session.”

Nearly every year since 2012, one or more TRIUMPH students have helped facilitate SEEDS and/or build and run Raíces, which means “roots” in Spanish.

Jenny Giang-Griesser, MD ’18, a TRIUMPH graduate who is now a family medicine physician with obstetrics at Sea Mar Community Health Centers in Seattle, recalls, “The parents requested a group to learn more about mental health and how to better support their children through this process.”

TRIUMPH Program Manager Melissa Lemke, says, “The students really listened to the community and helped fill a gap.”

Giang-Griesser recalls, “I worked with Melissa Waldo to design the parent aspect of the curriculum, and the following year, Paloma [Reinoso-Vazquez, MD ’19] joined the project and helped me co-pilot the curriculum.”

Reinoso-Vazquez — who is completing a child and adolescent psychiatry fellowship at University of Illinois Chicago (UIC) — says her experiences with TRIUMPH helped shape her career as a leader in medicine. In September 2024, she will enter a woman’s health and child psychiatry faculty position at UIC and will become the associate program director for that university’s Psychiatry Residency Program.

Subsequent medical students have helped adapt Raíces. During the pandemic, they temporarily turned SEEDS into a virtual program, while Raíces took a break for logistical reasons.

As of March 2024, Raíces is being run by a fourth-year medical student, Andrea Niño de Guzman Ramirez; two third-year medical students, Rodrigo De La Torre and Alejandra Torres Diaz; and a second-year medical student, Gabriella Geiger. Having at least two students working on Raíces allows them to cover for each other at busy times and makes sure mentoring happens.

“I enjoyed my work, but I was craving the human aspect of helping people,” reflects Niño, who next volunteered to work with immigrant families at the Latino Health Council and at a free health clinic. “This helped me combine my love for helping immigrants and my passion for psychiatry.”

She continues, “I met a wonderful mentor, Dr. Patricia Téllez-Girón, who helped me decide to go to medical school. I was accepted to the UW School of Medicine and Public Health — where my sister [Mariana Niño de Guzman Ramirez, MD ’21, MPH ’21] was attending in TRIUMPH and working on Raíces. I was drawn to TRIUMPH because there are a lot of Latino people in Milwaukee.”

Like several students on the Raíces project, Niño can relate to the families served. Before she was born, her father immigrated from Bolivia to Mexico so he could safely study engineering and start a career; he then met her mom, and they had children in Guadalajara, Mexico. When her father’s job transferred to Hartland, Wisconsin, the family relocated.

“I immigrated at about the age of the teens we see in SEEDS. It has been an

TRIUMPH at a Glance

The Training in Urban Medicine and Public Health (TRIUMPH) Program of the University of Wisconsin School of Medicine and Public Health (SMPH) has enrolled more than 225 students since its inception in 2008. The program’s four physician leaders (see photo caption) earned their medical degrees from the SMPH through TRIUMPH.

Graduates report that TRIUMPH has influenced their residency selections and career plans, helping the SMPH address urban physician shortages.

COMMUNITY ORGANIZATIONS PARTNER WITH TRIUMPH STUDENTS ON PUBLIC HEALTH PROJECTS
An eye-opening experience to talk to their parents and learn what they are going through as they navigate two cultures, including the American culture they had never experienced, but their children are growing up with, “says Niño. “It is healing to sit with parents who are doing all they can, especially when their children have depression or have attempted suicide, and the family has been impacted.”

Waldo adds, “We realized the importance of understanding and addressing perceptions around mental health through the cultural lens and the importance of parents learning how to talk to their children about these things. Otherwise, when they find out that their child is self-harming, for instance, their natural response may look like anger or disappointment when it’s really fear or anxiety related to not understanding it.”

Decreasing the stigma related to mental health is among De La Torre’s motivations for participating in Raíces. When applying to medical schools, he was drawn to TRIUMPH by its “focus on centering community assets and voices to help us serve our communities more effectively and adapt to their evolving needs.”

As an undergraduate majoring in neurobiology at New York University, he helped teach health workshops for high school students. That experience, “drew me into helping improve health literacy in areas where it’s most needed,” says De La Torre, who speaks Spanish and enjoys helping others in that language.

Hailing from Tucson, Arizona, with parents who grew up in Mexico, De La Torre was struck by seeing his extended family members struggle with cancer diagnoses and care.

“Seeing how health literacy influenced my family’s and community’s relationship with medicine and overall health has driven me to continue sharing evidence-based medical knowledge with my patients and community to empower them to make informed decisions about their health,” he says, adding that his background in neurobiology research, interest in the mechanisms underlying neurodegeneration, and goals to help prevent and mitigate its progression are shaping his future plans.

“The brain has a remarkable ability to adapt. I look forward to taking part in research that will improve the quality of life of patients and families,” notes De La Torre.

He admires the way TRIUMPH and Raíces make sure the direction of change comes from the community.

Niño says, “By seeing family members weekly, we can really listen to their needs and connect them to resources that will improve their quality of life and family structure. A traditional medical approach is not going to solve a lot of their issues or stressors, including poverty. TRIUMPH and Raíces take a holistic approach, and I really appreciate that.”

Torres Diaz adds, “TRIUMPH emphasizes the importance of looking at the assets of your community and having the mindset that you are there to incorporate yourself into the community.”

She continues, “I have always had an interest in health disparities, and the Latino community faces many

—Continued on page 33
Match Day
BADGER PRIDE IS STRONG AMONG MD GRADUATES
The student-selected theme of “Mooving Forward” provided fodder for photos and bovine-inspired clothing as University of Wisconsin School of Medicine and Public Health (SMPH) MD students celebrated Match Day in March 2024.

As medical students awaited news about where they would head for their residencies, Cathy Lee-Miller, MD (PG ’12), assistant professor of pediatrics, and Sam Lubner, MD ’03 (PG ’10), associate professor of medicine, performed a humorous skit about cultural and linguistic customs of the Upper Midwest. “You should always greet your patients with a ‘hello’ and ‘how ‘bout them Packers’ to show them you care,” Lubner quipped.

Dean Robert N. Golden, MD, shared wisdom interwoven with Wisconsin-inspired puns. “Rest assured this class is the cream of the crop; individually you have matched into top-quality programs, and collectively you are embarking on careers that span the entire continuum of primary care, specialty practice, and subspecialty fields,” Golden said.

“We are proud of all you have achieved during your years here. Your energy and idealism have made us a better place. And we know the best is yet to come. So, as you prepare to moo-ve into the next phase of your professional development, rest assured that I am confident each of you will be ‘out standing in your field.’”

This year, 172 medical students matched into residencies in 29 states. Among the graduates of the Class of 2024, 100 percent matched into a residency program. One third will enter a family medicine, internal medicine, or pediatrics residency. Nearly 40 percent will complete residencies in Wisconsin — the highest percentage of students matching in the state in the last decade.
James Bigham, MD 08, MPH 12 (PG '12), a clinical professor at the UW School of Medicine and Public Health (left), and Steve D’Orazio, owner of the Max Creek Outdoors gun shop in Oregon, Wisconsin
Whether you are a highly experienced physician, a resident about to venture into your own practice, or a medical student, you likely spend much of your time in a hospital or clinic setting.

A small but growing number of health care providers affiliated with the University of Wisconsin School of Medicine and Public Health (SMPH) and UW Health spend a few hours of their medical education at a more unconventional venue — a gun shop.

Spearheaded by James Bigham, MD ’08, MPH ’12 (PG ’12), a clinical professor in the Department of Family Medicine and Community Health (DFMCH), firearm-safety training offers learners the chance to become familiar with firearms, with the goal of building cultural competency around discussing firearms. In turn, Bigham says, health care providers can speak more confidently with their patients about firearm-related responsibilities and ways to prevent injuries that can be caused by firearms. A little nudge from the doctor, physician assistant, or nurse may be enough to encourage someone to ensure their firearms are safely stored and inaccessible to at-risk individuals or children. That, notes Bigham, means fewer people needlessly dying or suffering disabling injuries from a gunshot.

Bigham formally advocated for patient firearm screening in a June 2022 essay — published in the Wisconsin Medical Journal — that he co-authored with Melissa Stiles, MD (PG ’91), professor emeritus, DFMCH, SMPH; Stephen Hargarten, MD, MPH, professor, Department of Emergency Medicine, Medical College of Wisconsin; Mary Lauby, adult trauma injury prevention coordinator, UW Health; and Nan Peterson, retired director of child health advocacy, UW Health. (See go.wisc.edu/7K2453)

“To save the lives of hundreds of Wisconsinites per year,” the authors wrote, “Wisconsin’s health care systems should encourage primary care providers and other physicians and clinicians to perform brief screening for firearm ownership, followed by counseling on firearm-injury prevention. This intervention is crucial for patients at risk for self-harm and intimate partner violence and patients with mental illness (including dementia and depression), as well as homes with children or adolescents.”

Bigham — who earned his medical and master of public health degrees from the SMPH, completed a family medicine residency at the DFMCH, and practices at the UW Health Odana Road Clinic in Madison — says statistics are sobering.

“More than 800 people die from gunshot wounds each year in Wisconsin, and the majority of those deaths are suicides. Firearms are the top cause of death for children in the United States, more than motor vehicle fatalities, drownings, and childhood cancers,” he states.

With guns present in nearly half of Wisconsin homes, Bigham says, the time is long overdue for health care providers to address firearm safety while conversing with their patients.

“We already talk about responsible use of car seats, bicycle helmets, and life jackets,” he shares. “We should do the same when it comes to firearm safety.”

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Judgment-Free Approach

Essential to Bigham’s attitude when bringing up a topic that he characterizes as “politicized” is his ability to stay focused on injury prevention. No judgment; no politics.

“Guns are among the most highly charged issues in the political arena, but we’ll leave gun rights to the politicians,” Bigham says. “I am not here to glorify or vilify gun owners or their firearms. My goal is simply to reduce the number of people who are killed or injured, often inadvertently.”

Aided by an introduction by Jean Papalia, a community partner working at Safe Communities Madison–Dane County, Bigham connected with Steve D’Orazio, owner of Max Creek Outdoors gun shop in Oregon, Wisconsin, just south of Madison.

Bigham asked D’Orazio, “How would you feel if you and I started a gun safety talk at your shop and invited faculty, residents, staff, and students affiliated with the UW School of Medicine and Public Health and UW Health?”

D’Orazio agreed, and by early 2023, the class was running. Each month, about a dozen learners attend a two-hour training session held in a private room in D’Orazio’s shop. Bigham begins by declaring the room a “safe space” where questions or comments are welcome, and judgment is suspended.

Participants get a hands-on, up-close look at semiautomatic handguns, rifles, and types of ammunition. They see how safety devices — such as cable locks, trigger locks, and gun safes — can prevent a firearm from discharging. And they learn that some gun shops offer safe storage of firearms for individuals experiencing mental health crises.

D’Orazio ends the session by cutting the chase. “Guns don’t have brains,” he says. “That’s why we need your help.”

Following the classroom-style presentation, participants are offered an optional, hands-on opportunity to fire a gun at Max Creek’s indoor shooting range. For some, it’s the first time they have fired or even touched a firearm. For most, it is the first time they recognize that a gun shop can serve as a partner in firearm-injury prevention.

“We hope this gives health care providers a better sense of what it means to fire a weapon, so their patients are more receptive to keeping these things locked up,” D’Orazio states.

Benefits for Participants

Mario Giacobassi, MD ’23, an SMPH alumnus and first-year family medicine resident in the DFMCH who attended the training in 2023, applauds Bigham and D’Orazio for offering an out-of-the-box learning opportunity.

“What really appeals to me is that these are steps we can take with our patients right now,” Giacobassi says. “We don’t have to wait for laws or regulations to be changed. Having the chance to see, touch, and shoot a gun also makes me feel like I know what I’m talking about with my patients.”

Another first-year family medicine resident, Julie Vaughan, MD, appreciates how Bigham’s non-judgmental approach lightens the tension surrounding what could be a highly controversial subject.

“I grew up around guns in rural Indiana,” Vaughan recalls. “While I did not become a hunter myself, guns were just part of the landscape. Today, we know how prevalent untreated mental health conditions are in rural areas, so the training is timely for people like me who plan to practice in rural communities.”

Surprisingly, Bigham says, fewer than five patients have shown even the slightest objection to being asked about the presence of guns at home.

“Most people get it, especially when we put it in the larger context of keeping people safe,” he observes. “For the sake of optimizing wellness, we talk about tobacco and drug use; we talk about not drinking and driving; we talk about safer sexual activity. Safe gun storage should be part of this conversation.”

For those patients who say ‘yes’ when asked if they have guns at home, Bigham asks whether the firearms are safely stored — ideally unloaded and locked.

If they say ‘no’ to the second question, Bigham and his colleagues offer cable or trigger locks that patients can take home on the spot, for free. The locks are provided through UW Health’s Injury Prevention Program, which is managed by Mary Lauby and Rishelle Eithun. More than 300 free gun locks were distributed to UW Health clinics and community partners in 2023.

In addition, when a firearm-owning patient experiences a mental health crisis, they are encouraged to voluntarily transfer their firearms to a loved one who can safely store them or to a gun shop that will hold them in a safe until the owner feels well enough to have them back.

Surgeons’ Experiences

Few can speak more authoritatively about the consequences of gun violence than a surgeon who operates on gunshot victims. Adam Brinkman, MD (PG ’15),
associate professor, Department of Surgery, and trauma medical director, UW Health Kids, says the pediatric surgery team he leads has — since 2016 — operated on more than 40 children, including a 9-month-old infant, who have been injured or killed by a gunshot.

“I have cried with more families than I care to admit while telling them that their child has passed away or sustained a serious injury,” Brinkman shares. “I wholeheartedly support what our colleagues are doing to encourage safe firearm storage.”

A father of two young children, Brinkman advises parents to ask about guns at home before allowing their child to visit a friend’s house for the first time, because unintentional firearm incidents often occur at a family residence.

“Kids are curious by nature, and they always should be curious,” Brinkman says. “It’s how they learn. Unfortunately, it doesn’t take long for a curious child to stumble upon an unlocked gun and pull the trigger. Telling a child not to touch a gun if they see one simply doesn’t work.”

Ann O’Rourke, MD ’02, MPH ’06 (PG ’09), associate professor, Department of Surgery, and medical director for adult trauma, UW Health, says that saving the life of a gunshot victim in the operating room is rewarding, but too many survivors still face a life filled with multiple surgeries, lengthy hospital stays, and permanent disabilities. Throw in the endless emotional and financial tolls incurred by these patients, and seldom does O’Rourke witness an entirely happy ending.

“The best patient,” she says, “is the one we never see.”

As for Bigham, he is grateful for the support he has received in his quest to make conversations about safe firearm storage.

“Defusing Emotional Trauma”

When a victim of gun violence is rushed to the UW Health Emergency Department, saving the patient’s life is paramount. Helping them come to terms with the ensuing emotional trauma while finding a way back to a better place in society are typically not resource capabilities offered by a health system.

A Madison, Wisconsin-based non-profit organization, Focused Interruption, helps fill this void by defusing traumatic situations in the minutes and hours following a shooting victim’s arrival at the hospital. With tensions high, these situations can be ripe for escalation and further violence.

“After a violent crime involving a shooting or stabbing, we dive in to help the family of the victim. The hospital contacts us, and we send one or more outreach specialists there to support the family. Our goal is to interrupt a cycle of violence that we know can happen after someone is shot or stabbed,” says Anthony “Coop” Cooper, the CEO and president of Focused Interruption. Because Cooper and his team are active members of the community — several have experienced gun violence themselves — family members of shooting victims typically feel a sense of trust when they start the conversation.

“Families appreciate having someone show up who comes from a similar place of understanding,” Cooper says. “It’s not unusual for the victim’s relative or friend to talk about retaliating. That’s when we say, ‘Let’s go for a walk.’ We have better conversations when things calm down, and that can prevent things from getting deeper.”

Founded by Cooper about 15 years after he served prison time for drug-related offenses, Focused Interruption is financially supported by more than a dozen community partners. As one of the original sponsors, UW Health relies on the indispensable service the organization provides to patients, family members, and the community.

“Their work does not stop after the victim leaves the hospital,” says Shiva Bidar-Sielaff, the SMPH associate dean for diversity and equity transformation and UW Health vice president for diversity, equity, and inclusion. “Coop has helped these patients find a job, get into apprenticeship programs, and get out of a cycle of violence. It shows the value of a partnership between a community-based organization and a health system. This is health equity in action.”

Chris Corrigan, director, UW Health Security Services Department, adds, “Having Focused Interruption on site when a shooting victim arrives supports the family, as well as our clinical staff, who can focus on providing the patient with the best possible care.”

Cooper has gone from a self-described “young knucklehead” to a proud father of two grown sons and recipient of the 2019 Madison-Dane County Humanitarian Award for his community work. He also applied for and in 2021 received a pardon from Governor Tony Evers for his 1999 drug crimes. Further, Evers appointed Cooper to the Governor’s Pardon Advisory Board in 2022.

“Coop is one of the most important, most loved community members and role models in Madison,” says Bidar-Sielaff.
From the looks of three recent alumni gatherings hosted by the Wisconsin Medical Alumni Association (WMAA), one could hypothesize that medical school graduates from the University of Wisconsin School of Medicine and Public Health (SMPH) are drawn to cities near big bodies of water. Having trained near the picturesque Lake Mendota in Madison, many alumni now make their homes in the Twin Cities of Minneapolis and St. Paul, Minnesota, centered around the confluence of the Mississippi, Minnesota, and St. Croix Rivers; Seattle, Washington, surrounded by Puget Sound and inland lakes; and Milwaukee, Wisconsin, along the western shore of Lake Michigan.

Testing that hypothesis may be challenging, but proving that Badgers are drawn to each other is easy. Indeed, when representatives of the WMAA and Wisconsin Foundation and Alumni Association traveled to the Twin Cities in September 2023, Seattle in November 2023, and Milwaukee in March 2024, they were greeted by alumni who were eager to swap stories about goings-on in their regions, as well as updates about their careers since medical school.

About the “road trips,” WMAA Executive Director Sarah B. Rothschild notes, “The WMAA strives to meet alumni where they are. In some cases, that is metaphorical — such as online gatherings for those who cannot travel to Madison. But with these regional events, it is literal, giving us an opportunity to build a sense of community among medical alumni of the SMPH, some of whom have worked together for decades without knowing they shared a connection to the school.”
Matthew Stiles, MD ’03, helped plan the event in the Twin Cities, where he is a cardiac anesthesiologist in a private practice group. The luncheon at Graze Provisions + Libations drew alumni and their families from throughout Minneapolis and St. Paul.

"After such a long hiatus because of the COVID-19 pandemic, it was great to reconnect face-to-face with Twin Cities alumni and their families," says Stiles, who serves on the WMAA Board of Directors.

Because the Seattle reception coincided with the Association of American Medical Colleges annual meeting, several SMPH faculty members — who themselves are MD alumni — and medical students were on hand to gather with alumni from that region. The WMAA reception at Dockside at Duke’s featured a view of Lake Union as a fitting backdrop for the lively conversations.

The Milwaukee event, held at the Italian Community Center, honored the 175th anniversary of UW–Madison. In addition, keynote speaker Amy J.H. Kind, MD ’01 (PG ’07), PhD ’11, associate dean for social health sciences and programs at the SMPH, focused on the theme "Partnering to Advance Health Equity in Milwaukee." She described many of the school’s programs aimed at advancing health and health equity through remarkable service to patients and communities, outstanding education, and innovative research.

Kind concluded, "I am a 2001 graduate of the UW School of Medicine and Public Health, and I am so proud of the work that our school does to move forward health and health equity across Wisconsin and beyond. I hope you all feel proud of your alma mater’s groundbreaking service in this area too."
My primary clinical role at Children’s Wisconsin/Medical College of Wisconsin in Milwaukee is managing the health of children, teens, and young adults who have solid cancers and vascular anomalies. I also co-direct our multidisciplinary, precision Pediatric Oncology Clinic, COMPASS, where I provide molecularly targeted treatments for patients with relapsed and refractory cancers. Additionally, I am working to bring clinical trials to our patients and to develop and implement early-phase clinical trials utilizing cellular therapies.

I am involved in the Children’s Oncology Group’s Ewing Sarcoma Biology and Soft Tissue Sarcoma Steering Committees, which are working to develop rhabdomyosarcoma trials; the site primary and national scientific committees for the Beat Childhood Cancer Consortium, which is developing and implementing early-phase treatment protocols; and the site primary for the Consortium of Investigators of Vascular Anomalies, which is planning one of the first national, molecularly targeted trials for children and young adults with vascular and lymphatic anomalies.

During my pediatrics residency at RUSH University in Chicago, I found that oncology patients and families impacted me the most. Next, while I was working in pediatric critical care, I decided to enter a pediatric hematology/oncology fellowship. I am so happy that I gained that training for my current career. I have been fortunate to see patients overcome incredible challenges and go on to graduate from high school, attend college, sometimes attend medical school, and walk down the aisle at their weddings. Unfortunately, some of my patients have passed away from their diseases, but I know I have made a difference in their lives when their families invite me to memorials or run/walks, or send me a Dairy Queen Dilly Bar at Christmas.

In this field, we support and guide patients and families through the most challenging times of their lives. While some situations can be devastating, I cannot think of a more rewarding, impactful career.
JULIE RIVERS, MD ’11, MS

I am a clinical associate professor of pediatrics at the University of Washington and a pediatric oncologist at Seattle Children’s Hospital, where I treat children and young adults with leukemias and lymphomas. I have interests in pediatric non-Hodgkin lymphoma (NHL) and post-transplant lymphoproliferative disorder (PTLD).

One of my first patients was a toddler with trisomy 21 and a new diagnosis of acute lymphoblastic leukemia. She developed an invasive fungal infection with mucormycosis that penetrated her central nervous system. We could not give her the intensive phases of therapy because she needed her immune system to fight the fungal infection, and her anti-fungal medications interfered with most of the maintenance chemotherapy we would have given her. We told the family that she would either die from her leukemia or her infection, but she beat both, and she is a joyful, loving adolescent. It is always good to be reminded that we have no crystal ball.

Despite having an interest in pediatric oncology since high school, I was a kayak guide in Alaska and an emergency medical technician in Colorado before I entered medical school. During my pediatric rotation, I enjoyed caring for the whole patient and family. I moved to Seattle for my pediatric residency, and I discovered that caring for pediatric oncology patients was the right fit. Building long-term relationships with patients and families is important to me, and I love managing critically ill patients. I also find all organ systems interesting.

I stayed in Seattle for my pediatric hematology/oncology fellowship and conducted research related to pediatric chimeric antigen receptor T-cell trials for pediatric leukemias. I have continued on this clinical research team, which is interesting and fulfilling. Also, as the director of our Pediatric Hematology-Oncology Fellowship Program and the education and training representative for our division’s senior leadership team, I love seeing trainees grow and succeed. Further, I am a member of the Children’s Oncology Group’s NHL Committee and PTLD Sub-committee.

Pediatric oncology is advancing rapidly, and I love being challenged and learning something new every day.

MICHAEL RECHT, MD ’92, PHD ’90

I am a professor of clinical pediatrics at Yale University School of Medicine/Yale New Haven Hospital, and a member of the Section of Pediatric Hematology-Oncology and the Center for Bleeding and Clotting Disorders. My patients range from infants to young adults with inherited bleeding and clotting disorders. After a long career leading an inpatient pediatric hematology consult service, I work solely in the outpatient setting. I also am involved in gene-therapy trials and set up the delivery of commercial hemophilia gene therapy.

Further, I am the chief medical and scientific officer for the National Bleeding Disorders Foundation, where my work helps define, develop, and implement its science and research strategies.

My career began when HIV was devastating the hemophilia community. During my fellowship, I cared for approximately 40 children who died from AIDS after receiving tainted clotting-factor concentrate. We now can deliver potentially curative gene therapy. I feel privileged to have been involved in clinical trials that led to the approval of these life-changing medications.

Many remarkable individuals have greatly impacted my career. I chose my specialty due to the mentorship of University of Wisconsin School of Medicine and Public Health (SMPH) Professor Paul Sondel, MD, PhD ’75 (PG ’80). Dr. Sondel and I discussed the potential of me taking time off from medical school to pursue a doctorate in cancer immunology. His example of patient-centered, state-of-the-art care deeply influenced the direction I took. Following my pediatric residency at Yale New Haven Hospital and during my fellowship at Yale, I worked closely with Diana Beardsley, MD, PhD. Her excitement around caring for children with inherited bleeding and clotting disorders was infectious. Her influence also helped shape my career.

I am active in the American Society of Pediatric Hematology-Oncology, the American Society of Hematology, the International Society of Thrombosis and Hemostasis, and the Foundation for Women and Girls with Blood Disorders.

Despite the incredible advances in our field, there are so many unanswered questions waiting to be explored. I have had an amazing career, and graduating from the SMPH was the first stepping stone!
Jeannette Munro, MD ’27

A PRECEPTORSHIP IN LA CROSSE INSPIRED THIS PIONEERING ALUMNA

by Sharon-Rose Nartey, MD ’23, and Elizabeth M. Petty, MD ’86 (PG ’89)

This article was edited for publication in Quarterly; the entire article, including references, is available at wmaa.med.wisc.edu/munro.

At a time when female physicians were rare and when many general practitioners questioned the necessity of specialists, Jeannette Munro, MD ’27, who earned her medical degree in the University of Wisconsin Medical School [now the UW School of Medicine and Public Health (SMPH)] Class of 1927, became the first pediatrician and first female physician in Princeton, New Jersey. Munro was also one of the first women in medical school to do her clinical training at the newly identified statewide site at Lutheran Hospital in La Crosse, Wisconsin, where she was inspired by members of the all-male physician group, most of whom were part of the Gundersen family, who shaped her clinical education. During her career, Munro rose as a force to be reckoned with and shattered countless glass ceilings.

Munro was born in Pennsylvania in 1894 to Alice Gardner Munro and Dana Carleton Munro, LHD, professor of European History at UW–Madison until 1915, and professor of history and chair of the Department of History at Princeton University for 12 years. As a child, Munro was an ardent writer and published award-winning poems, including “The Promise,” a poem about the perfect autumn day. At age 21, she received her bachelor of arts degree at UW–Madison (1915) and went on to volunteer at the New York Charity Organization Society from 1915 to 1917. During this time, she furthered her studies as a student in the New York School of Social Work (1917) and as a research assistant (1918).

In the early 1920s, Munro returned to Wisconsin to pursue her medical education at the SMPH. During her fourth year at the SMPH, Munro went to Lutheran Hospital, operated by the Gundersen family, to complete her clerkship training. Lutheran Hospital was one of 30 new statewide preceptor sites that were created when the SMPH transitioned from a two-year to a four-year medical school in 1926. Lutheran Hospital’s name changed, and the SMPH’s preceptorship program evolved. In 1996, this site became an academic campus, now known as Gundersen Health System/Western Academic Campus. It remains part of the SMPH statewide academic campus.

Despite being one of the first two female medical students at Lutheran Hospital, Munro was welcomed into the Gundersen medical community and immediately immersed into her role as a student doctor. Soon after arrival, she was shown how to inject contrast dye into a patient for gallbladder radiographs and asked to do the procedure under direct supervision on the next patient. Although initially hesitant, she was able to perform the procedure and was given increased autonomy to perform subsequent procedures by herself.

Munro has noted that her time in La Crosse was marked by many rich lessons in life and medicine. A particularly salient one was that as a doctor,
even one in training, an individual was regarded in a position of authority that they must be careful to never abuse. On one occasion, Munro was called into the room of a 7-month-old baby who was having a seizure. While she had read about seizures, she had never seen one — yet she was expected to take charge. She knew this was out of her scope, so she asked her attending physician for help. However, she soon understood there was little that could be done. Serendipitously, the little girl regained consciousness, and the mother exclaimed to her, “Doctor, I’m so grateful. The minute I saw you, I knew you would know what to do.” Despite being equally as confused as the patient’s mother, Munro was perceived as knowledgeable, as though she “knew” what to do. Munro also learned hard lessons about death and the importance of empathy and physician presence in patient care. On another afternoon, she followed her attending into a dying patient’s room. The attending spoke gently and sympathetically to the patient’s daughter. There was no hope. Munro stayed in the room and sat in silence with the daughter as the patient took his last breath. She knew that there was nothing she could say in that moment that would ease the pain. All that she could do was provide her presence. These and many other lessons from La Crosse remained after medical school graduation.

About her learning experiences during her time in La Crosse, Munro noted in her writings, “The short (three month) preceptorship at La Crosse in the spring of 1927 is engraved on my memory as one of the most fertile learning experiences of my whole medical career. It was a transition period and time of maturation. At last, I was beginning to learn to be a doctor.”

Lessons learned while in La Crosse shaped her approach throughout her pediatric residency at Worcester Memorial Hospital and Massachusetts General Hospital. After her residency, Munro joined the staff at Babies Hospital in New York, and in 1933, moved to Princeton, New Jersey, to establish a well-baby clinic. This move was met with much resistance, as at the time, the Princeton hospital staff comprised eight male physicians, and they were determined to keep the staff to those eight men. This did not last, and the need for specialists became clear as it was recognized that general practitioners were not equipped to handle all the dermatological, ophthalmological, or pediatric cases. Still, many denied the need for her expertise. The dean of staff, for example, was asked whether Princeton needed two pediatricians, and he stated, “It doesn’t need one.” Despite these obstacles, Munro became the town’s first practicing pediatrician and female physician.

Munro chronicled her humble beginnings as a new practitioner during the Great Depression. Her office was out of a spare bedroom, she stored pharmaceuticals in the family icebox, and she boiled syringes on her kitchen stove. Still, her fame quickly spread, and her services were requested all around Princeton. Mothers brought their children in for well-child checks, and if any of the children were sick, she performed home visits and used her car as an ambulance. House calls were $3.00, and office calls were $2.00. However, this was at the depth of the Depression, and many of these visits were never paid for.

In 1934, Munro became the school doctor of Princeton’s Nursery School, an integrated school with children from varying socioeconomic classes. The school was equipped with a cook, housekeeper, and head teacher, and it functioned as a “Head Start” of the 1930s, providing all-day day care for children of working mothers. This experience was very formative and provided important lessons, including the necessity of structure, social engagement, and nap time for young children. It also served as a training ground for diagnoses such as measles, scarlet fever, diphtheria, chickenpox, whooping cough, and ringworm. Later in her career, Munro partnered with various community organizations, including those that led polio-eradication vaccination campaigns.

Munro retired from the Princeton Hospital staff after three decades of practice in 1964 and resigned from the Princeton Nursery School in 1966. After retirement, she continued to work part time for several years in the local schools and donated services to the nursery school. Finally, in 1975, Munro fully retired from medicine and turned her energy to her childhood passion — writing. She wrote many “prolific and popular” memoirs for the Princeton Recollector and eventually decided to amplify her recollections in a full-length memoir, The Making of a Pediatrician: A GrassRoots Chronicle. Munro was a pioneer whose life was marked by firsts. She was a trailblazer as one of two first female medical students at the SMPH and the first pediatrician in Princeton. The SMPH and its statewide campuses celebrate the legacy of this exemplary physician.

About the Authors

Sharon-Rose Nartey, MD ’23 (left), is completing an internal medicine-pediatrics residency at University of Pennsylvania and Children’s Hospital of Philadelphia. She earned her medical degree from the SMPH. Her interests include advocacy, medical education reform, health disparity research, and mentoring students who are underrepresented in medicine.

Elizabeth M. Petty, MD ’86 (PG ’89) (right), is the SMPH senior associate dean for academic affairs. She earned her medical degree from the SMPH and completed a pediatrics residency at UW Health. She completed medical genetics and clinical molecular genetics fellowships and research training at the Yale School of Medicine. She was on the University of Michigan faculty prior to joining the SMPH faculty. Her interests include the professional and scholarly development of health professions learners.

They share interests in advancing inclusion and equity in medicine for women and other historically marginalized groups.
CLASS OF 2018
Daryl Fields was recently appointed as a trustee to Point Park University in Pittsburgh, Pennsylvania. Fields is a neurosurgery resident at the University of Pittsburgh School of Medicine, where he conducts research aimed at overcoming paralysis in those with brain injuries.

CLASS OF 2014
Laurel Bessey, assistant professor of psychiatry at the University of Wisconsin School of Medicine and Public Health, received the Early-Career Development Award from the Association for Academic Psychiatry. The award recognizes promising early-career faculty members and provides an opportunity to learn and share teaching techniques, skills, and innovations and to network with other junior faculty members from across the United States.

Matthew Swedlund (MD '11), Alexis Eastman (MD '10), Amber Shada (MD '07), and John McCartney (MD '97) — all members of the UW School of Medicine and Public Health faculty — were selected for the 2024 cohort of the UW Health Physician Leadership Development Program. The program’s goal is to develop the leaders needed to implement institutional strategies and meet future challenges in academic medicine. Swedlund is an assistant professor in the Department of Family Medicine and Community Health. Eastman is an associate professor in the Division of Geriatrics and Gerontology of the Department of Medicine. Shada is an assistant professor in the Department of Surgery. And McCartney is a professor in the Division of Allergy, Pulmonary, and Critical Care Medicine within the Department of Medicine.

CLASS OF 2007
Amy Fowler was appointed to a three-year term on the Radiological Society of North America’s Quantitative Imaging Committee. She is an associate professor in the Breast Imaging Section of the Department of Radiology at the UW School of Medicine and Public Health.

CLASS OF 2008
Rebekah Jakel was named a 2024 distinguished fellow by the American Psychiatric Association. This award is the highest honor bestowed on psychiatrists who have made outstanding contributions to the field. Jakel is the chief of psychiatry at the Durham Veterans Affairs Health Care System and a practicing psychiatrist with a focus on psychiatric care for patients with movement disorders. She is an assistant professor of psychiatry at Duke University, where she co-leads a novel biological psychiatry course focusing on identifying key neuroscience concepts and pathways in psychiatric disorders.

CLASS OF 2003
Jeniel Nett has been appointed deputy editor for Open Forum Infectious Diseases, an official journal of the Infectious Diseases Society of America. At the UW School of Medicine and Public Health, she is an associate professor in the Division of Infectious Disease of the Department of Medicine and an associate professor in the Department of Medical Microbiology and Immunology.

SHARE YOUR NEWS!
Please send information about your honors, appointments, career advancements, publications, volunteer work, and other activities. We’ll include your news in Quarterly as space allows. Please include names, dates, and locations. Photos are encouraged.
Please enter updates online at wmaa.med.wisc.edu/share or email quarterly@med.wisc.edu.
Kimberly Stepien received the McPherson Eye Research Institute’s 2023 Retinitis Pigmentosa Research Award for her project, “Comparison of Clarus and Optos Ultrawide Field Imaging for Retinitis Pigmentosa.” She is a professor in the Department of Ophthalmology and Visual Sciences at the UW School of Medicine and Public Health. She also is the director of the Adult Inherited Retinal Disease Clinic at UW Health.

Chris Dale, an orthopedic surgeon at Mercyhealth East in Janesville, Wisconsin, spent three months in France over the summer of 2023. He completed an intensive French language-immersion course in Antibes, France, an experience that allowed him to interact with staff and patients in the hospital and clinic setting. Dale also spent one month in Annecy, France, at the Alps Surgery Institute, with Laurent Lafosse, MD, learning tendon transfers of the shoulder and other advanced shoulder techniques. He subsequently spent one month at the Nice Shoulder Institute with Pascal Boileau, MD, in Nice, France. There, he practiced additional advanced techniques, including the arthroscopic Latarjet procedure. He also learned advanced knee techniques, including trochleoplasty, with Daniel Dejour, MD, in Lyon, France.

Wendy Molaska was appointed by Governor Tony Evers to the 25-person Wisconsin Task Force on the Healthcare Workforce. The task force is charged with studying the workforce challenges facing the state’s health care system, including enhancing recruitment and retention; identifying ways to improve patient care and alleviate burdens on the health care workforce; exploring educational and training pathways to grow a sustainable health care workforce; and creating an action plan with solutions related to workforce development, industry innovation, education, and training for consideration in the governor’s 2025-27 executive budget.

John Babalola recently started in new roles in advanced laparoscopic general surgery, advanced laparoscopic colorectal surgery, and minimally invasive vein intervention. He is a professor of surgery at Zucker School of Medicine at Hofstra University/Northwell Health in Uniondale, New York.

Ruth Etzel has been named editor-in-chief of Environmental Health, a peer-reviewed journal that publishes manuscripts related to environmental and occupational medicine. She is the senior advisor in the Office of Water at the U.S. Environmental Protection Agency and teaches at the Milken Institute School of Public Health at George Washington University in Washington, D.C.

Felix Yip was appointed in December 2023 to the Medical Board of California, on which he served in 2003 and from 2013 to 2022. He believes he may be the only board member who has served under three governors (Governors Davis, Brown, and Newsom). Yip is a board-certified urologist in private practice. He has served as a clinical professor of urology at the University of Southern California’s Keck School of Medicine since 2013 and at the University of California, Irvine School of Medicine since 2023. He is a member of the American Board of Urology and the American Urological Association.
And the WMAA Awards Go To ...

YOU CAN HELP DECIDE THE WINNERS!

The Wisconsin Medical Alumni Association (WMAA) Awards Committee invites you to nominate colleagues and alumni for consideration in the 2025 WMAA Awards. Please use the QR code or visit wmaa.med.wisc.edu/awards to find a simple nomination form and descriptions of each award. Categories are:

- Early-Career Achievement Award
- Emeriti Faculty Award – Basic Science
- Emeriti Faculty Award – Clinical Science
- Honorary Life Membership Award
- Medical Alumni Citation – Distinguished Alumni Award
- Resident/Fellow Citation – Distinguished Resident Award
- Medical Alumni Service Award
- Ralph Hawley Distinguished Community Service Award

Nominations are due on September 30, 2024, and must include:
- a nomination form completed online (see web link or QR code);
- a letter of nomination that includes a brief statement of the nominee’s accomplishments (the form also has fields to copy/paste specific types of accomplishments); and
- the nominee’s current curriculum vitae.

The WMAA Awards Committee will meet in November 2024 to review all nominations, which then will go to the WMAA Board of Directors for approval. Awards will be made at the WMAA Awards Banquet in April 2025. Please note that recipients of the two categories of Citation Awards are selected one year in advance, so nominations for these awards will be for 2026.

For more information, please contact Andrea Larson via email at andrea.larson@wisc.edu or by phone at (608) 262-7335.

In Memoriam

Eugene J. Nordby, MD ’43
January 18, 2024
Madison, Wisconsin

Phillip J. Schoenbeck, MD ’57
March 4, 2024
Lake Wales, Florida

Arlan L. Rosenbloom, MD ’58
January 20, 2024
Gainesville, Florida

Clarence M. Scott, Jr., MD ’62
October 30, 2023
Superior, Wisconsin

Adolph M. “Dolph” Hutter, Jr., MD ’63
December 5, 2023
Needham, Massachusetts

Larry R. Denius, MD ’64
December 31, 2023
Clifton Forge, Virginia

David E. Enerson, MD ’68
January 11, 2024
Stevens Point, Wisconsin

Joanne A. Selkurt-Martin, MD ’68
December 24, 2023
Whitehall, Wisconsin

Sara A. Cuene Watson, MD ’69
October 26, 2023
Everson, Washington

Robert W. Walker, MD ’70
August 21, 2023
Shell Lake, Wisconsin

Jeffrey L. Moore, MD ’80
January 12, 2024
Merrill, Wisconsin

Former Faculty Members

Mark A. Albanese, PhD
December 31, 2023
Madison, Wisconsin

Edward N. Ehrlich, MD
February 6, 2024
Middleton, Wisconsin
Brickley’s awareness of the severe shortage of Native American physicians and of health care for Native populations emerged when he traveled to the northernmost reaches of Canada for two hunting expeditions led by Inuit people.

“They took me on wooden dog sleds over the ice. We slept on the ice in canvas tents without floors. They loaned me seal skins to put under my sleeping bag. And, at night, they kept their dogs out front to watch for polar bears,” Brickley recalls about the “exhausting” trips in his late 60s and early 70s.

During his stay in Resolute Bay, an Inuit community in Nunavut, Canada, Brickley met a hotel owner, who did nearly all the work to run a small lodging facility.

“She shared with me that her son had died recently. He was just 20 years old and had no access to medical care,” Brickley says, noting that the emotional conversation remains fresh in his mind.

“I also remember meeting an older doctor, who went to another village up there once a month to check on the Inuit people.”

Since then, he explains, “I have been creating scholarships each year for Native American medical students. I am very happy to help the Indigenous people because I believe they are sorely neglected.”

Brickley, who hails from Bluffton, Indiana, also supports scholarships at Ivy Tech, a community college in his home state. With gratitude, he recalls the mentorship he received from several people throughout the years of his education, which included a medical degree from the University of Indiana; service in the U.S. Navy during World War II; and post-graduate work in Chicago at Cook County Hospital (five years for his internship, residency, and a year as a night surgeon) and Northwestern University (one year).

—Continued on page 27
Assuring Equity for Patients and Learners

TÉLLEZ-GIRÓN’S DEDICATION KNOWS NO BOUNDS

Patricia Téllez-Girón, MD (PG ’00), mentors medical students.
Patricia Téllez-Girón, MD (PG '00), remembers her childhood in Mexico as being filled with sports, art, dance, and nurturing family members who supported her desire to learn and serve her community. Their help and guidance gave her the chance to attend medical school, and she now dedicates her career to giving others a chance to live their best lives and achieve their goals.

In recognition of her efforts to open pathways for younger generations of Mexicans, in fall 2023, she received Mexico’s Ohtli Award, the highest honor for a Mexican leader living outside of that country. It highlights a career dedicated to providing care, education, and advocacy for underserved populations while mentoring and teaching minority and non-minority students.

In her 27 years with the University of Wisconsin School of Medicine and Public Health’s (SMPH) Department of Family Medicine and Community Health (DFMCH) — first as a resident and now as an associate professor — Téllez-Girón has become the voice for not only the Latine community in the Madison area but other marginalized groups fighting for equitable care and services. She also is dedicated to teaching by drawing from the challenges she faced as an immigrant starting over in the United States.

A New Beginning
The youngest of three siblings raised in Mexico City, Téllez-Girón saw the sacrifices her parents made to send their children to school, yet her parents always modeled kindness and compassion for others. Her mother worked and attended school while caring for the children, and her father, a lawyer, always found a way to help those in need. According to Téllez-Girón, attending medical school never felt like a choice, it was a calling.

“From an early age, I saw the importance of hard work and service, and I always felt inspired to help others,” she explains.

While she was earning her medical degree at the National University of Mexico, her family moved to the United States, and Téllez-Girón soon followed. The move was difficult. She faced the challenges of learning a new language; validating her degree and herself in society; learning new customs; and experiencing discrimination and racism. She found her footing by leaning on family and joining the nationally touring Mexican Folklórico Dance Company, which helped her gain a sense of belonging. It was a challenging time that ultimately shaped her career path.

“The experience gave me an even deeper understanding of the barriers that existed in underserved communities in the United States,” notes Téllez-Girón. “It laid the foundation for my clinical and community work with not only the Latine community but with other underserved populations in need of a voice.”

Change Through Collaboration and Trust
Through her work with colleagues and communities to provide direct services, advocacy, and education to Latine people in need, Téllez-Girón found herself mentoring minority students to be the advocates, teachers, and health care providers of the future. She points out that underserved populations need direct services but also advocacy, and both tasks would be better accomplished with more people contributing.

“Ideally, we should have more minority health care providers giving the best, culturally appropriate care available, including language. In the meantime, we must educate others about the importance of equity and diversity as we start the process of preparing more minority providers,” she says.

Téllez-Girón’s career at the SMPH and UW Health is devoted to these two approaches, and her efforts are paying off. Today, her base clinic — the Access Community Health Centers Wingra Family Medical Center — has a social worker and several providers, receptionists, nurses, and behavioral health consultants who are bilingual. Téllez-Girón believes that diversifying the clinic’s personnel means better care and better health outcomes for patients.

DFMCH Chair David Rakel, MD, calls Téllez-Girón the ideal community-engaged physician leader.

“The trust she has developed with our Latine communities and our Latine learners has had a tremendously positive impact,” shares Rakel. “Her kind smile, warm heart, and medical expertise has provided patients with the confidence to make healthier choices and for learners to pursue a challenging career to become physicians. Her influence will persist for generations.”

Téllez-Girón’s colleagues note that her willingness to be a collaborative partner is one reason she has gained the trust of the communities she serves. Her work with groups like the Latino Health Council has led to programs including the Latine Health Fair, an event that for 30 years has offered opportunities for uninsured people to receive preventive screening tests and services. The fair is a resource for people of all ages and gender identities, and the attendance has increased from less than 30 participants to nearly 150. She also started the first monthly radio health education program on Madison’s Spanish-language radio station.

—Continued on page 27
Outstanding Women of Color

GILMORE-BYKOVSKYI AND GREEN HONORED FOR THEIR CONTRIBUTIONS

Andrea Gilmore-Bykovskyi, RN, PhD, and Tiffany Green, PhD, from the University of Wisconsin School of Medicine and Public Health (SMPH), are among six women at UW–Madison to earn 2023 Outstanding Women of Color Awards. Presented in March 2024, the annual awards honor women of color among faculty, staff, and/or students who are deeply rooted in the UW–Madison and Madison communities through their work in social justice, activism, and advocacy on behalf of disadvantaged, marginalized populations; community service; scholarly research, writing, speaking, and/or teaching on race, ethnicity, and indigeneity in U.S. society; and/or community-building to create an inclusive and respectful environment for all.

Gilmore-Bykovskyi is the associate vice chair of research and an associate professor in the BerbeeWalsh Department of Emergency Medicine. As a geriatric nurse, she leads a National Institutes of Health (NIH)-funded program focused on promoting effective, equitable care for people with dementia. After earning her doctoral degree through an accelerated BSN-to-PhD degree program at UW–Madison, Gilmore-Bykovskyi completed an advanced fellowship at the William S. Middleton Memorial Veterans Hospital and a Claire M. Fagin Hartford Foundation Postdoctoral Fellowship. She and her team have studied care-delivery patterns and patient-centered outcomes for people living with dementia and their caregivers. Her research lab has developed novel approaches to collecting data and assessing clinical research outcomes related to prioritizing and incorporating real-life perspectives.

Gilmore-Bykovskyi is leading the first longitudinal observational study to examine episodes of lucidity near the end of life in people with dementia. She was selected to co-chair the third National Institute on Aging/NIH National Dementia Care and Caregiving Research Summit in 2023.

Green is an associate professor in the Department of Population Health Sciences and Department of Obstetrics and Gynecology. She is among the country’s leading health economists working in reproductive health equity. She serves as a co-principal investigator of the Reproductive Health Experiences and Access Survey, a large national study to assess reproductive health care access and outcomes. She also is leading the first evaluation of birth cost recovery, a Wisconsin policy allowing counties to recoup Medicaid birthing costs from unwed fathers, on birth outcomes. Green is partnering with Black women-led community organizations and the UW Survey Center to develop, validate, and pilot test a novel survey among the low-income Black birthing parents disproportionately affected by this policy.

As the inaugural co-chair of the Black Maternal Child Health Alliance (2020-2023), Green’s goal is to advance policy, practice, and investment in the health and wellbeing of Black birthing people and their families in Dane County, Wisconsin. She also serves on the Wisconsin Department of Health Services’ Maternal Mortality Review Team, which seeks to reduce and address inequities in pregnancy-related mortality across Wisconsin.
**Brickley’s Vision** Continued from page 23

“When you get older, you think about your experiences and the people who have been nice to you, so I started paying back,” says Brickley.

At the SMPH, the $100,000 Harry D. Brickley Scholarship Fund — matched by an anonymous donor — will provide $9,000 every year for medical students who are members of state or federally recognized tribes, explains Danielle Yancey, Menominee/Santee, director of the school’s Native American Center for Health Professions (NACHP). Yancey says, “We are extremely grateful to have the SMPH among the medical schools that Dr. Brickley has generously supported. American Indians and Alaska Natives remain significantly underrepresented in medicine, and there are significant workforce shortages in Tribal health systems. People like Dr. Brickley, and this kind of support, truly make a difference for our students and communities.”

NACHP’s missions include enhancing the recruitment, retention, and graduation rates of Native American health professions students, and promoting health education, research, and community–academic partnerships with Native communities. The center provides a supportive mentoring environment for Indigenous health professions students, with the goal of improving the health and well-being of Native people and communities.

Since its inception in 2012, NACHP has graduated 91 health professions students (including medical, nursing, pharmacy, social work, and other health professions students), with a 99 percent graduation rate across all health professions programs, as well as a 100 percent match rate for medical students who participated in the match. The SMPH consistently ranks in the top 10 among U.S. medical schools for graduating American Indian and Alaska Natives, according to the Association of American Medical Colleges (AAMC).

SMPH Dean Robert N. Golden, MD, adds that, according to the AAMC, the school is ranked fifth in the United States for its number of Native medical students, with 32 enrolled as of fall 2023. “Dr. Brickley is a remarkably impressive, altruistic person who has a vision and values that overlap well with our school’s vision and values,” says Golden.

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**Téllez-Girón** Continued from page 25

La Movida. The program educates the Latine community about health issues and addresses access-to-care issues as it gives the audience information about community resources. It has been an important source of information for the past 20 years. Now available online, the program reaches up to 50,000 listeners at any given time.

“The Spanish broadcast program was invaluable during the initial stages of the COVID-19 pandemic, as I was able to give accurate information to our Spanish-speaking community with the help of a panel of experts. Our efforts helped get more than 56 percent of Madison’s Latine population vaccinated by July 2021. The statewide average in the Latine population at that time was 37 percent,” adds Téllez-Girón.

Other collaborations include her work with the SMPH. She was the faculty advisor and first course director for the Health Care and Diverse Communities course launched in 2004, and she continues to serve as a guest speaker. She currently serves on the SMPH Non-Resident Recruitment Committee and as a mentor for underrepresented minority students through the Building Equitable Access to Mentorship (BEAM) Program. Though she has been a part of BEAM since 2018, Téllez-Girón has mentored more than 60 students throughout her time at UW–Madison. She proudly shares that many of the students she has mentored, including three of the Latine students, have been accepted to medical school; several are now completing residencies, and others have begun practicing medicine.

She also serves as the faculty leader for the Enhancing Representation to Improve Our Communities Health (EnRICH) Program in the DFMCH. Building on ideas from the BEAM Program, EnRICH was created to increase the number of underrepresented minority students who choose to enter primary care. Téllez-Girón is hopeful these programs and other services will give underserved community members the type of support she received from family members and colleagues when she was in a new country as a minority woman.

**Family in Her Corner**

The strong family that supported her through medical school includes relatives who continue to be her biggest cheerleaders. Though her father passed away, her mother lives with Téllez-Girón, her husband, and their two sons in Madison. Living nearby are her sister and brother, a respected community leader and an engineer for the National Aeronautics and Space Administration through a local company, respectively. These family members often travel back to Mexico to visit their large extended family.

“I feel blessed to have such a close, supportive family, and I hope I bring that same feeling of belonging and care to the communities I serve,” she says.
From Northern India to Southern Wisconsin

DOLMA REFLECTS ON HER JOURNEY AND HER DRIVE TO HELP OTHERS

Third-year medical student Sonam Dolma (left) and her dad, Gyurmey Namgyal, at Deer Park Buddhist Center in Oregon, Wisconsin
Sonam Dolma’s journey to medical school began in Bir Tibetan Colony, a Tibetan refugee settlement in Northern India, where she was born in 1997. Her father, Gyurme Namgyal, and his brother, when they were teenagers, had fled on foot from Eastern Tibet to Bir to escape the Chinese Communist regime. Dolma spent the first decade of her life in Bir and attended Tibetan Children’s Village, a boarding school two-and-a-half hours away in Dharamsala, India. That school had been established in 1960 by The Dalai Lama and his sister, originally as a nursery school for orphaned children.

In 2009, Dolma and her sister, with their father, relocated to Madison, Wisconsin, as part of the U.S.-Tibetan Resettlement Project. Passed in 1990, the immigration bill allowed 1,000 Tibetans selected by lottery to come to the United States at their own expense and on the condition of pre-arranged employment. Madison was one of 21 cluster sites around the country and is home to more than 600 Tibetans today.

Dolma found the change overwhelming; she describes, “I didn’t really know what was going on. I didn’t understand the gravity of the situation nor why I had been uprooted. I have vivid memories of being an English-as-a-second-language learner and not knowing where I fit in.”

Dolma and her sister became translators for their father at parent-teacher conferences and doctor’s appointments — a grow-up task for the young girls. “The initial years were difficult, and it felt unfair. I was hurt and bitter that I wasn’t near my mom and was in this foreign land,” Dolma reflects, adding that her mom is still in Bir.

A trip to India during her sophomore year of high school — when Dolma volunteered to teach English to young Buddhist monks — changed her outlook. Some of the monks, ranging in age from 5 to 15 years old, became part of the monastery to have access to food and education because their families lacked the resources to care for them.

“The little monks were so excited and happy to learn, and their enthusiasm opened my eyes. I thought, ‘Wow, I am taking everything for granted. I live in the United States, and I have had this awesome learning opportunity that many kids do not have. It helped me see a new reality — that my parents had sacrificed their dreams so I could actualize mine.’”

With that shift in perspective, Dolma began to harness her experience as a strength rather than a weakness. And with memories of her life in India, she soon realized medicine was her desired career path.

“I remember returning home from school one day to a strange stillness as my parents wept. My grandfather had passed away from an unknown lung condition with persistent fever and bloody coughs. We now know it was tuberculosis (TB),” she shares.

Dolma continues, “Illnesses and premature deaths were common in Bir because the sole clinic had only one Tibetan physician to provide care for the entire refugee settlement, and the nearest hospital was two hours away. Witnessing the affliction of my family and community members with manageable diseases like TB ignited my desire to eliminate and prevent such diseases in underserved communities.”

She admired the volunteer physicians from the United States who provided aid in Bir, and she was intrigued by their knowledge of the human body. “Despite language barriers, I recall the physicians’ humanistic care and respect for our culture and autonomy while they worked to improve the health of our refugee settlement,” she says.

While Dolma was volunteering at a medical clinic in Bir in 2017, she truly understood the impact she could have. “I was surprised to see my mother’s friend Kunsang. This vivacious lady who owned the local vegetable stall now looked timid and defeated, unable to convey her symptoms to the volunteer doctors. Because I speak Tibetan, Hindi, and English, I understood the nuances of her language and translated for her and the American doctors,” she shares. “The look of relief on Kunsang’s face filled me with a sense of purpose.”

With her sights set on medical school, Dolma earned a bachelor of science degree in biochemistry with honors from University of Wisconsin–Madison in 2020. Before that, as an undergraduate, she completed several pre-medical internships with the Summer Health Professions Education Program in California and the Summer Medical Leadership Program at the University of Virginia School of Medicine.

Dolma was accepted to the UW School of Medicine and Public Health and elected by her peers to be a co-president of the Class of 2025. This was a dream come true for Dolma and for her father, who is a nursing assistant and has worked for UW Health for more than 15 years.

“Even when I was in high school, my father would always say, ‘I wonder when I’m going to see you walking down the halls of the UW School of Medicine and Public Health in your white coat,’” she recalls.

Tears flow easily as Dolma describes how her father worked two and three jobs so that she and her sister would

—Continued on page 33
Physician Assistant

A PROGRAM AT UW–PLATTEVILLE HELPS EASE THE SHORTAGE OF HEALTH CARE PROVIDERS IN RURAL WISCONSIN

Distant Campus

Virginia “Ginny” Snyder, PhD, PA ’01 (in red), gathers with the 2023-2024 cohort of physician assistant students in the wisPACT@UW-Platteville Program.
by Lisa Brunette

Virginia “Ginny” Snyder, PhD, PA ’01, wasn’t seeking another major professional challenge when she attended the Tri-State Regional Health Care Summit at University of Wisconsin–Platteville in 2017. Just three years earlier, the inaugural class of four UW School of Medicine and Public Health (SMPH) students had begun their studies in the Physician Assistant (PA) Program’s first distant campus outside of Madison, established at UW–Stevens Point at Wausau (now known as wisPACT@UW–Stevens Point at Wausau). Snyder and colleagues built the program from the ground up to help address a continuing shortfall of primary care providers in the northern part of Wisconsin.

And that wasn’t even the first significant undertaking she faced after becoming the director of the SMPH’s Physician Assistant Program in 2008. Given the rapid growth of medical information and increasing pressure for PAs to have master’s-level preparation for licensure, Snyder had been charged with transforming the existing bachelor’s degree program into a master’s-level program. She oversaw a comprehensive adjustment of the curriculum and the degree change with UW–Madison by 2010.

The purpose of the 2017 regional summit was to explore the health care needs of southwestern Wisconsin, northern Iowa, and northern Illinois. The tri-state area had a shortage of physicians, PAs, and many other health care professionals.

“We started a dialogue,” Snyder recalls. And from those discussions grew the idea of a second SMPH distant campus for students pursuing the Master of Physician Assistant Studies Degree. The wisPACT@UW–Stevens Point at Wausau program had taken off; by 2017, it was accepting 12 students per year. Thus, it provided a strong template for a program at UW–Platteville.

So, Snyder again went to work. As she had with the Wausau campus, she procured grants from the Health Resources and Services Administration, which supports a range of efforts to expand health care access. The structure of the academic program would be the same: a 24-month course of study, with classroom instruction via videoconference from Madison and laboratory work in Platteville during the first year, followed by clinical placements in rural settings within a 100-mile radius of Platteville. A baccalaureate degree would be required, and students would need to have completed 1,000 hours of direct patient care experience before admission.

UW–Platteville renovated the first floor of historic Ullrich Hall, the oldest building on campus, to house laboratory, exam, and dedicated lecture space for PA students. And in May 2023, the first class of 10 students began their pursuit of the Master of Physician Assistant Studies Degree in Platteville, to be granted from UW–Madison.

The composition of the student body is in line with the program’s mission. Eight of the 10 students are from Wisconsin, and five are from the southwestern part of the state. They are between 21 and 30 years of age. Their direct patient care experiences include work as certified nursing assistants, rehabilitation aides, phlebotomists, emergency medical technicians, and medical assistants. Enrollment will grow gradually to an expected total of 14 students matriculating per year.

In light of a projected 26.5 percent employment growth for physician assistants from 2022-2032, Snyder believes current and future students are likely to have many opportunities to practice almost anywhere they’d like after graduation. But the philosophy that has successfully guided the SMPH’s Wisconsin Academy for Rural Medicine — recruiting and training medical students who aim to practice medicine in medically underserved rural areas — is at play here too. Students who come from, understand, and love rural settings are more likely to practice in those areas. That has played out with wisPACT@UW–Stevens Point at Wausau; approximately 70 percent of PA graduates have remained to practice in that area of the state. The wisPACT programs at both campuses are carefully designed to expose students to the broad scope of practice that rural physicians and PAs experience.

Snyder notes that PA education is in the midst of a significant growth spurt. The number of programs is expanding, and the number of students in existing programs is growing. Wisconsin alone has five PA programs, and the United States has 287 accredited programs.

In addition, the profile of PA education is evolving.

—Continued on next page
“Advancement of technology and active learning strategies help PA students learn the critical-thinking skills necessary for application of course material,” Snyder points out. “PA education has become true competency-based education. It is now very data-driven.”

The SMPH’s overall emphasis on scholarship, service, and public health positions students in the Master of Physician Assistant Studies for success in their professional practices. Among many measures, the PA Program’s ranking in the nation’s top 30 in the most recent U.S. News & World Report analysis speaks to its success in preparing students.

And for Snyder, the successful launch of wisPACT@UW–Platteville represents a milestone. “With the launch of the program at UW–Platteville, I feel I have come full circle because I joined the faculty of the UW–Platteville Biology Department right after I earned my graduate degree,” she reflects. She left Platteville when she moved to Madison for her PA studies. Later, when she was practicing in Janesville, Wisconsin, she was invited to teach neuroanatomy, neurophysiology, and neurology in the SMPH’s PA Program, so she moved back to Madison. Now, her extensive academic and leadership experiences have contributed to a new option for students in Platteville. “It’s a big circle,” Snyder notes, “but it has been a full one.”

Celebrating Snyder’s Contributions

“Ginny Snyder’s innovative leadership has transformed physician assistant (PA) education, bringing national prominence to our program.”

That’s how Elizabeth Petty, MD ‘86 (PG ’89), the University of Wisconsin School of Medicine and Public Health’s (SMPH) senior associate dean for academic affairs, summarizes the long, productive career of Virginia “Ginny” Snyder, PhD, PA ’01, at the school. Serving the SMPH in one capacity or another for 21 years, as Snyder approaches retirement in spring 2024, she leaves a legacy that will be hard to top.

A native of the tiny town of Fort Recovery, Ohio, Snyder earned her doctorate in medical science from the Medical College of Ohio while she worked as a medical technologist. She then headed to UW–Platteville, where she taught biology and advised pre-professional students, rising to professor and chair of the department. In 1999, her career path turned toward clinical practice when she enrolled in the Physician Assistant Program at the SMPH.

After receiving her physician assistant bachelor’s degree, Snyder began practicing at Mercyhealth in Janesville, Wisconsin, where she helped develop and then directed the Mercy Institute of Neuroscience. Next, she was invited to become a faculty associate and teach in the SMPH Physician Assistant Program in Madison. Three years later, she was named interim director of the PA Program, and in 2008, she became the program director.

Her top-notch pedagogical skills have been recognized time and again. She received the Faculty Excellence Award from the SMPH Department of Family Medicine and Community Health in 2010; the Master Faculty Award from the Physician Assistant Education Association in 2013; and the SMPH Dean’s Teaching Award in 2016 for her “excellence and innovation in education; extraordinary, sustained dedication and effort on behalf of student education; and high level of teaching effectiveness.”

Of her many accomplishments, Snyder is most proud of spearheading the transition, in 2010, from the bachelor’s degree program in physician assistant studies to the current master’s program and of envisioning and establishing the distant campuses at UW–Stevens Point at Wausau and at UW–Platteville. The programs have made a measurable dent in the shortage of health care professionals in northern and southwestern Wisconsin, respectively.

Snyder’s retirement plans sound as though she will keep up an intense pace — but perhaps in more relaxed activities. She and her wife and son share their home in Madison with two cats and two dogs, including a golden retriever named Red, who “wears his Badger bandana with pride.” They love to camp, watch sports, and enjoy the sunshine in Florida. More time with family members in Ohio is on her post-retirement list, too. And she intends to keep up her strong ties to friends and colleagues in the PA Program.

“I know leaving will be harder than I thought. I never imagined I would have so many wonderful opportunities and be able to work with so many outstanding, amazing people,” Snyder acknowledges. “I am incredibly grateful!”
DISPERSARIES, especially in mental health care. I think Raices is doing a good job of incorporating Latino values, such as family connections and community support.”

At age 4, Torres Diaz moved from El Salvador to Maryland, where she lived until she entered UW–Madison through the Posse Program, which identifies public high school students with extraordinary academic and leadership potential and supports them as undergraduates. She earned a bachelor’s degree in Spanish and biology before she entered the SMPH.

“I chose medicine because I wanted to see more people like me in the field. Through Raices, I am helping my community members in a way that I would not be able to do without going to medical school,” she says.

Torres Diaz says, “Every generation comes true, and it’s very special for me to see my dad that happy,” says Dolma. “I love how intertwined my culture is with Tibetan Buddhism,” she says. “It’s the perfect amalgamation of culture and religion, and these days, more and more studies are coming out in support of mindfulness and compassion practices.”

Dolma is grateful for the way her mentor – Richard Davidson, PhD, founding director of the UW Center for Healthy Minds and professor of psychology and psychiatry at UW–Madison – elevates mindfulness and compassion as keys to wellbeing.

“It’s something we can all incorporate into our daily lives, no matter where we come from or what language we speak,” observes Dolma.

Noting that compassion is the guiding principle in her life, she says, “UW Health physicians personify compassion.”

She has seen this compassion modeled in the ways they have treated her father at work and how they have embraced her family. And it’s something she feels as a medical student and envisions in her career as a physician.

Dolma concludes, “Despite language and cultural barriers, the uniting factor is that we are all human. That someone from another country can see when a person is suffering and, through human compassion, can decide to help them, this surpasses cultural differences and goes beyond language barriers.”
Byars-Winston and Smith Named Among Wisconsin’s Most Influential Black Leaders

Angela Byars-Winston, PhD, and Afra Smith, MBA, were named among Wisconsin’s 51 Most Influential Black Leaders for 2023 by Madison365, a journalistic organization focused on issues of concern to communities of color and their allies.

Byars-Winston is a professor of medicine at the University of Wisconsin School of Medicine and Public Health (SMPH) and the inaugural chair of the Institute for Diversity Science; in 2017, she became the first Black tenure-track, full-professor in the Department of Medicine. She previously served as director of research and evaluation in the UW Center for Women’s Health Research and associate director of the UW Collaborative Center for Health Equity. In 2018, she earned the John Holland Award for Outstanding Achievement in Career or Personality Research by the Society of Counseling Psychology. She earned a doctoral degree in counseling psychology from Arizona State University.

Smith is the manager of diversity, equity, and inclusion at the SMPH and UW Health. She also is the founder and CEO of The Melanin Project, which aims to eradicate wealth disparities for women of the Black and African diaspora through programs that support building generational wealth through advocacy, personal empowerment, and financial wellness coaching. She earned a master of business administration degree from the University of Phoenix.

Golden and Sorkness Earn Slesinger Awards for Excellence in Mentoring

Robert N. Golden, MD, and Christine Sorkness, RPh, PharmD, received University of Wisconsin–Madison’s Slesinger Award for Excellence in Mentoring in November 2023. Named after Doris Peyser Slesinger, the accolade recognizes outstanding efforts by mentors who support women, trans, and non-binary assistant professors, guiding them on the path to tenure and fostering their career success.

Golden is the dean of the UW School of Medicine and Public Health (SMPH) and the vice chancellor for medical affairs at UW–Madison. Sorkness is the senior associate executive director for workforce development in the Institute for Clinical and Translational Research and a distinguished professor in the UW School of Pharmacy and SMPH.

Sorkness and Golden were nominated for their contributions to evidence-based mentorship; their roles as mentors; and their state, national, and international leadership.

Nominators credited Golden with mentoring, promoting, and recruiting qualified women to the highest levels of leadership within the SMPH; they referred to Sorkness as “a tireless advocate with all mentees, especially those historically underrepresented in medicine.”

Kathuria to Direct UW Center for Tobacco Research and Intervention

Hasmeena Kathuria, MD, will be the director of the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) at the UW School of Medicine and Public Health (SMPH) as of July 1, 2024. UW-CTRI is nationally recognized for its work in tobacco research and its commitment to translating findings into patient care, outreach programs, and policy education.

A pulmonary, critical care, and sleep medicine physician with expertise in research and policy regarding tobacco dependence, Kathuria earned her medical degree from Loyola University Chicago’s Stritch School of Medicine. She completed an internal medicine residency and chief residency at Indiana University and a pulmonary and critical care fellowship at Boston University Chobanian and Avedisian School of Medicine (BUSM). Since 2004, she served on the BUSM faculty and was the founding director of Boston Medical Center’s Tobacco Treatment Center.

“UW-CTRI has been the impetus for the development of our program at Boston Medical Center and my work thus far. I am dedicated to continuing its legacy and fostering exemplary leaders in the field,” Kathuria says.

SMPH Dean Robert N. Golden, MD, comments, “Dr. Kathuria’s outstanding leadership and skills make her the perfect individual to lead UW-CTRI. I am excited for the continued flourishing of this incredibly vital center.”

Kathuria will succeed Michael Fiore, MD, MPH, MBA, professor emeriti of medicine, who co-founded UW-CTRI in 1992; he will continue to serve as the center’s inaugural director until Kathuria becomes the director in July.
McLester-Davis Becomes First Director of Indigenous Science Advocacy

Lauren W. Yowelunh
McLester-Davis, PhD, a neuroscientist and researcher, has joined the Native American Center for Health Professions (NACHP) in the University of Wisconsin School of Medicine and Public Health (SMPH) as its first director of Indigenous science advocacy.

In this position, she will weave together science addressing Alzheimer’s disease and other dementias, metabolism, and cognitive aging among Wisconsin’s Indigenous populations and other groups often underrepresented in research. She will ensure that Tribal data sovereignty is at the forefront of research partnerships.

“We are thrilled to welcome Dr. McLester-Davis to this role,” says NACHP Director Danielle Yancey. “She brings valuable expertise that is key for ensuring that research practices honor the community’s priorities, values, and protocols.”

McLester-Davis, a member of the Oneida Nation of Wisconsin and Turtle Clan, notes, “Indigenous science addresses research questions from very different perspectives. Part of my goal is to highlight how beneficial it can be to everyone if we think about things and ask questions a little bit differently.”

Her work at NACHP will complement her research as a member of the laboratories of Carey Gleason, MS ’09, PhD, professor of medicine at the SMPH, and Judith Simcox, PhD, professor of biochemistry in the UW College of Agricultural and Life Sciences. McLester-Davis’s research focuses on biological markers and increased risks for Alzheimer’s disease and related dementias in minoritized populations.

Johnson to Lead Nationwide Alzheimer’s Disease Study

The University of Wisconsin School of Medicine and Public Health (SMPH) has been awarded National Institutes of Health (NIH) funding — up to $150 million over five years — for a nationwide initiative to investigate the neurobiology of Alzheimer’s disease and related dementias.

The study will provide state-of-the-art imaging and biomarkers for researchers around the world to shed light on dementias, including in patients with more than one type of dementia and related brain changes. Mixed dementia is more common than originally thought, and without knowing the cause of a patient’s dementia, physicians cannot properly treat them, notes Sterling Johnson, PhD, co-study leader and an SMPH professor of medicine.

“By collaborating across our Alzheimer’s Disease Research Centers (ADRC) network, we can increase our understanding about the interplay of multiple dementia-related pathologies,” he says.

The new study — Clarity in Alzheimer’s Disease and Related Dementias Research Through Imaging (CLARITI) — will involve all 37 ADRCs in the United States to gather data showing the presence, absence, or change in disease biomarkers and neurodegeneration in people who have dementia or are at risk of developing it.

Participating centers will enroll 2,000 individuals nationwide to collect brain scans and advanced blood biomarkers, and to correlate changes to diagnoses, genetics, and symptoms over time in the CLARITI collaboration.

Shah to Lead Grant Aimed at Transforming Alzheimer’s and Dementia Care

University of Wisconsin School of Medicine and Public Health (SMPH) researchers led by Manish Shah, MD, MPH, are part of a national effort to improve health outcomes for people living with dementia by investigating strategies to advance health care delivery during and after visits to an emergency department (ED). Through a $55 million grant funded by the National Institutes of Health, researchers will implement a large, nationwide trial that will provide insight as to how standard-of-care interventions found to be beneficial in smaller, single-site trials may be effective in more diverse settings.

The chair and a professor in the SMPH’s BerbeeWalsh Department of Emergency Medicine and an emergency physician at UW Health, Shah is co-leading a five-year, 80-site clinical trial evaluating emergency and post-emergency care interventions for patients living with dementia and their care partners.

The Emergency Departments Leading the Transformation of Alzheimer’s and Dementia Care study is jointly led by the SMPH; New York University’s College of Nursing and Grossman School of Medicine; and Memorial Sloan Kettering Hospital. It will test three interventions: redesigning the ED experience; nurse-led, telephone-based care; and transitional care delivered by paramedics. Interventions are designed to reduce ED visits and hospital admissions and to improve care quality and care coordination.

Shah will lead the paramedic-led transition intervention, which he developed — building upon approaches used in other settings — and tested.
We arrived in Madison the same fall; both relocating from the Pacific Northwest. It was 1983. I was moving out of a marine mammal graduate program at Oregon State University to attend medical school at University of Wisconsin–Madison; she was on loan from the Point Defiance Zoo and Aquarium in Tacoma, Washington. I arrived in mid-August and she in early October.

Our paths had crossed once before. I had arranged to draw blood from the harbor seals at Point Defiance as part of my research on reproductive timing of pinnipeds. She would have been there when we drained the pool and drew samples from the seals.

The harbor seals at Henry Vilas Zoo were a comfort to me during the early uncertainties of medical school. Their serene loops in the nicely shaded waters of the seal enclosure were familiar from my days in the field; wild seals often cruise with their bellies to the sky; predators come from below, never above. I quickly noted the yellow flipper tags on one seal, the blue on another. They were likely placed by an acquaintance of mine from the Washington Department of Fish and Wildlife. Yellowtag, as she was known then, had been recovered as an abandoned pup on the Washington Coast in 1970, along with Boston Blackie – the seal with blue flipper tags. Many trips were made to the zoo in my first year in Madison, as I lived only a few blocks away.

I received an MD/PhD scholarship during my second year of medical school and drifted from medicine for a time. My research continued on the reproductive timing of seals and sea lions; but my base of operations changed from Oregon State University to the Department of Zoology at UW–Madison. Yellowtag became a subject in one of my papers in 1991 on precision and heritability of birth timing, and again in a 1994 paper on photoperiod control of birth timing in harbor seals.

Over the years, the locust-tree-shaded seal pool was a refuge from the demands of career and medical practice. My wife served as a zoo education volunteer for years; our kids grew up with frequent visits to see the seals and the other denizens of Henry Vilas Zoo. My oldest daughter was enough of a fixture in her early years that she earned the name “Zoo Baby.” During this time, my guilty pleasure was to sneak over from my nearby departmental office to indulge in a chili dog and a bag of chips for lunch, an impromptu picnic on one of the benches near the seal enclosure.

Yellowtag became Betty; she continued to loop gracefully through the water. The years passed by as we both aged. Then, on May 16, 2012, at the advanced age of 42, Betty gave birth to Lucille, becoming the oldest known harbor seal to have a pup (they rarely live past 12 years in the wild). Three years later, Betty – by then, the oldest of her kind in the world – moved to new surroundings in the recently completed Arctic Passage exhibit.
where she preferred the quietness of an interior salt-water tank to the bright, exposed outside pool. But, on occasion, she still graced those waters. I, 11 years her senior, continued to drop by from time to time and, if lucky, caught those graceful loops and wandered back across the years.

Betty died on July 15, 2019, in her 50th year, far surpassing the life expectancy of harbor seals, wild or captive. Through the years, she served as a bridge not only to my past, but to the hope of the future. I often include her photo as I teach about public health — a testament to what clean water, a dependable food supply, the lack of predation and parasites, and — perhaps — a little veterinary care can do. Godspeed my friend ....

Jonathan Temte, MD ’87, PhD (PG ’93), and Jo Temte after they completed a Henry Vilas Zoo 10k run

About the Author
Jonathan Temte, MD ’87, PhD (PG ’93), is the associate dean for public health and community engagement at the University of Wisconsin School of Medicine and Public Health (SMPH) and a professor in the school’s Department of Family Medicine and Community Health (DFMCH).

He earned a master’s degree in biological oceanography from Oregon State University in 1986 and his medical degree from the SMPH in 1987. He completed a family practice residency in the DFMCH in 1993; the same year, he earned a doctoral degree in zoology with a minor in epidemiology from UW–Madison, and he joined the faculty of the DFMCH.

Temte has dedicated his career to creating connections between primary care medicine and public health practice. He has an extensive array of research and teaching experience, and he has received numerous awards.

He also has held leadership roles in the American Academy of Family Physicians and the U.S. Advisory Committee on Immunization Practices; he chairs the Wisconsin Council on Immunization Practices. Temte has been active on pandemic influenza, bioterrorism, and COVID-19 working groups for the state of Wisconsin. His research interests include viral disease surveillance in primary care, schools, and long-term care facilities; seasonality and epidemiology of influenza; and attitudes toward immunization.
**First 3D-Printed Human Brain Tissue Functions Like Normal Brain Tissue**

A team of University of Wisconsin-Madison scientists has developed the first 3D-printed brain tissue that can grow and function like typical brain tissue. This has important implications for scientists studying the brain and working on treatments for a broad range of neurological and neurodevelopmental disorders, such as Alzheimer’s and Parkinson’s diseases and Down syndrome, and drug development.

“This could be a hugely powerful model to help us understand how brain cells and parts of the brain communicate in humans,” says Su-Chun Zhang, MD, PhD, professor of neuroscience and neurology at the UW School of Medicine and Public Health and Waisman Center.

Instead of using the traditional 3D-printing of vertically stacked layers, the researchers situated neurons grown from induced pluripotent stem cells horizontally in a soft gel. The tissue has enough structure to hold together, but it is soft enough to get enough oxygen and nutrients from the media and allow the neurons to form networks comparable to human brains. The neurons communicate, send signals, interact with each other through neurotransmitters, and form proper networks with support cells.

“Our lab is able to produce pretty much any type of neurons. Then we can piece them together at almost any time and in whatever way we like,” Zhang says. “Thus, we can have a defined system to look at how our human brain network operates.”

Published in *Cell Stem Cell*, the new technique should be accessible to many labs because it does not require special equipment or culturing methods to keep the tissue healthy nor to study it.

**Inner Workings of an Essential Protein-Trafficking Complex Discovered**

Like mail carriers who deliver parcels in all types of weather, a critical group of mammalian proteins helps cells function properly even under less-than-ideal conditions. University of Wisconsin School of Medicine and Public Health scientists have begun to unravel how these proteins perform the essential service. The discovery could help researchers develop treatments for diseases like cancer and diabetes.

Led by Anjon Audhya, PhD, the senior associate dean for basic research, biotechnology, and graduate studies and a professor of biomolecular chemistry, the team sought to better understand how the Coat Protein Complex II, or COPII, functions. COPII is an important group of proteins responsible for transporting roughly a third of proteins that function in mammalian cells and was a subject of the 2013 Nobel Prize in Physiology or Medicine, awarded to scientists who defined how proteins are sorted and transported. This new research builds on some of those discoveries.

Cells must ensure that proteins move precisely and efficiently to their final destinations to perform their duties. COPII is essential to this process.

Audhya and colleagues used genome editing and live-cell imaging to track individual proteins involved in controlling cellular traffic flow, a process that sometimes gets disrupted in disease. The team identified Sec23 as a central player in regulating the function of the COPII complex, facilitating trafficking even when cells were starved of nutrients.

Identifying what triggers Sec23 to promote COPII function has implications for several diseases, and understanding the underlying molecular mechanisms could identify new therapies.

The team members described their advances in *Nature Communications*. 
Type 2 Diabetes May Contribute to Racial Disparities in Colorectal Cancer

Research at the University of Wisconsin School of Medicine and Public Health shows that persistent racial and socioeconomic disparities in Americans’ risk of developing colorectal cancer could be related to differences in the occurrence of Type 2 diabetes. The study also found that changes in the modified mouse beta cells are present in human beta cells that survive the widespread cell death that characterizes Type 1 diabetes.

The researchers hope their findings, published in *Cell Metabolism*, may point to a new treatment that could be administered early in the development of diabetes.

"Induction of a low level of stress stimulates stress adaptation and renders cells resilient to a subsequent and more severe stress," says senior author Feyza Engin, PhD, professor, Department of Biomolecular Chemistry. "By removing ATF6 from mouse beta cells, we were able to trigger an adaptative mechanism that was protective against beta cell death and Type 1 diabetes."

In the study, diabetes-predisposed mice without ATF6 unexpectedly showed senescence — a state in which cellular growth stops and cells secrete various types of proteins, facilitating interaction with the immune system.

Engin says, “ATF6-deficient beta cells exhibit transient senescence and start releasing the proteins that recruit protective M2 macrophages.”

In the ATF6-knockout mice, the M2 macrophages appeared to relieve inflammation and limit the accumulation of detrimental senescent cells that could cause chronic inflammation and disease.

Engin says the study’s results in mice appear to be reflected in human cells, indicating an area of future research.

Pancreatic Beta Cell Transient Senescence Protects Against Type 1 Diabetes

Removing a stress-response gene in insulin-producing beta cells draws helpful attention from the immune system, protecting mice predisposed to Type 1 diabetes from developing the disease, according to a University of Wisconsin School of Medicine and Public Health study. The study also found that changes in the modified mouse beta cells are present in human beta cells that survive the widespread cell death that characterizes Type 1 diabetes.

The researchers hope their findings, published in *Cell Metabolism*, may point to a new treatment that could be administered early in the development of diabetes.

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Partnerships Bolster Biotechnology Research and Training

In October 2023, President Joe Biden announced Wisconsin’s selection among 31 Regional Technology Hubs designated by the Economic Development Administration under the 2021 Creating Helpful Incentives to Produce Semiconductors (CHIPS) and Science Act. The Madison and Milwaukee regions were recognized for their potential to grow into global leaders in biohealth and personalized medicine. The University of Wisconsin School of Medicine and Public Health (SMPH) proudly joined a coalition of academic institutions and industry leaders led by BioForward – a Wisconsin-based biohealth advocacy organization – to achieve this breakthrough.

Gina Raimondo, PhD, JD, the U.S. secretary of commerce, described the Technology Hubs Program as “supercharging our existing innovation foundations, bringing together our premier research institutions with world-class companies to create good-paying jobs in these communities, and ensuring the technological advances that define the next century are made in communities across America.” Our selection from nearly 400 regions allows us to compete for $70 million in federal funding to support technology, commercialization, and workforce projects that will bolster Wisconsin as a leader in medical innovation.

Following the announcement, Technology Hubs Program Director Eric Smith, JD, shared Wisconsin’s grade of “A++” for the collaborations noted in our proposal. This reflects a spirit among SMPH faculty and staff that drives innovation, commits to health equity, and demonstrates the impact of collaboration with industry partners.

Notable is the 40 years of groundbreaking work by our Departments of Radiology and Medical Physics with GE HealthCare (GEHC). In November 2023, the SMPH and GEHC renewed their partnership for another decade to cover nearly $30 million in research. This is the Wisconsin idea in action – brainstorming patient-centered solutions to be pioneered at UW Health, and then rapidly deployed to health systems around the world. Today, innovative theranostics work is building off this collaborative history and paving the way for future treatments.

Another example dates to 2000, when Richard Moss, PhD, emeritus senior associate dean for basic research, biotechnology, and graduate studies, and Gail Robertson, PhD, professor of neuroscience, realized the local biotechnology industry’s significant need for skilled scientists. Conversations with industry leaders and then-Governor Tommy G. Thompson, JD, resulted in the founding of the SMPH’s Master of Science in Biotechnology Program, which offers a unique curriculum taught to diverse working professionals. The impact of the program’s nearly 500 graduates amazes me. Further, relationships formed with biotechnology industry representatives through this program led to the creation of our school’s Office of Biohealth Industry Partnerships, which I lead.

The SMPH has responded to growing demands from industry partners with initiatives that bolster clinical research and translational innovation. For instance, through the UW Clinical Trials Institute – led by Elizabeth “Betsy” Nugent, MSPH, CCRP, director, clinical trials development and accreditation, and Nasia Safdar, MD, PhD (PG ’00), associate dean for clinical trials – the SMPH has more than doubled its portfolio of industry-sponsored trials. Further, the soon-to-open UW Health Eastpark Medical Center will increase patients’ access to clinical trials.

UW Health and the SMPH partnered to launch the academic medical center’s first medical innovation hub, the Isthmus Project. Led by medical physics entrepreneur Thomas “Rock” Mackie, PhD, and Chief Innovation Officer Elizabeth Hagerman, PhD, the project provides mentoring and capital investment in novel ideas. It has served more than 160 innovators, representing 32 specialties and 54 subspecialties.

Within the SMPH, I believe the most influential factor in collaborations is the world-class work being done to support health equity. With the formation of the Center for Health Disparities Research in 2019, under the leadership of Amy J.H. Kind, MD ‘01 (PG ‘07), PhD ‘11, associate dean for social health sciences and programs, we offer an unprecedented, accessible tool: the Area Deprivation Index (ADI), which puts data about social determinants of health in the hands of physicians and researchers across the United States. For instance, Epic Systems has employed the ADI within its software.

Having Wisconsin recognized among the nation’s most promising, technology-driven economies was an achievement made possible by countless professionals whose vision and commitment to excellence are part of our school’s history. I welcome thoughts on how to broaden our portfolio of research and innovation services, and I look forward to sharing even more success!

KURT J. ZIMMERMAN, MS
Senior director, Office of Biohealth Industry Partnerships; director, Master of Science in Biotechnology Program, University of Wisconsin School of Medicine and Public Health
kjzimmerman@wisc.edu
I Know YOU

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.

ABOUT LAST ISSUE’S PHOTO:
Mary Beth Plane, PhD, MSSW, won the prize drawing and will receive a gift from the Wisconsin Medical Alumni Association!

Eglash is the medical director of the DFMCH’s Outpatient Breastfeeding and Lactation Medicine Clinic and practices breastfeeding and lactation medicine at two UW Health clinics. She has a special interest in lactation education for health professionals as a means of supporting lactating dyads. In 2013, she created the UW Health Outpatient Breastfeeding Champion Program, which trains nurses in nearly every UW Health primary care clinic to provide education, support, and clinical assessments for families experiencing breastfeeding challenges. Through this program, UW Health became the first medical system in the country to develop a strategy and extensive network for outpatient breastfeeding support. The program addresses a nationally recognized need to better support breastfeeding in outpatient settings.

Eglash’s teaching and research also have largely centered around breastfeeding and human lactation. Further, the board-certified breastfeeding and lactation medicine specialist cofounded the Academy of Breastfeeding Medicine and the Mothers’ Milk Bank of the Western Great Lakes, which provides donor human milk for neonatal intensive care units in Illinois and Wisconsin. She is the founding president of the Institute for the Advancement of Breastfeeding and Lactation Education, and a cofounder and inaugural president of the North American Board of Breastfeeding and Lactation Medicine.

Anne Weiss, DO, referred to Eglash as “a fantastic physician, patient advocate, and colleague.”

Stephanie Lumpkin, MD ’14, wrote, “Dr. Eglash was my continuity clinic mentor. She inspired me to breastfeed my own babies!”

And Mary McGrath, MD ’86, shared, “We were medical school classmates and spent two months together during our fourth-year preceptorship in Rice Lake, Wisconsin, with every other night call. Somehow, she managed to have her wedding in the middle of that busy time!”

HINT ABOUT PHOTO ABOVE:
A four-decade career finds him in a Dream Team.
Please send information about your honors, appointments, career advancements, publications, volunteer work, and other activities. We’ll include your news in Quarterly as space allows. Please include names, dates, and locations. Photos are encouraged.

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