

Quarterly



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School of Medicine
and Public Health
UNIVERSITY OF WISCONSIN-MADISON



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QUARTERLY

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

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CALENDAR

December 2025

TUESDAY, DECEMBER 16

Unfazed: The Real-Life Survival Guide to Phase 2
Health Sciences Learning Center

January 2026

THURSDAY, JANUARY 15

Operation: Education
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March 2026

FRIDAY, MARCH 20

Match Day
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May 2026

FRIDAY, MAY 1

Spring WMAA Board of Directors Meeting
Health Sciences Learning Center

June 2026

FRIDAY, JUNE 5

Medical Alumni Day and Reunions for the Classes of
1961, '66, '76, and '81
Watch for details, as registration will open in April 2026

Quarterly Evolves

This is the final printed issue of *Quarterly* magazine for 2025. Beginning in 2026, this publication will appear in print twice per year. Medical alumni also will receive a bimonthly e-newsletter.

To ensure you receive our digital communications, please make sure we have your current email address by going to wmaa.med.wisc.edu/update or contacting us via the information on the back cover.

We look forward to staying in touch. Thank you!

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Badger fans watch fireworks over Lake Mendota during the Homecoming Block Party at Memorial Union at University of Wisconsin-Madison in October 2025. —Photo by Taylor Wolfram/UW-Madison

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NITA AHUJA, MD, MBA

Dean, University of Wisconsin School of Medicine and Public Health
Vice chancellor for medical affairs,
UW-Madison

I am thrilled to be writing my first column for *Quarterly* magazine. As I reach the six-month mark as dean, I am reflecting on my many "firsts." I spoke to new medical students at the White Coat Investiture Ceremony, welcomed new faculty members at New Faculty Orientation, and thanked supporters and engaged with alumni at events like the Middleton Society Donor Appreciation Dinner and Homecoming. I have loved every minute of being a Badger!

Badger ideals such as tenacity, ingenuity, and being driven by discovery are what make our academic medical center unique. We continue to press on, finding ways for our work in research, clinical care, and education to transform health and change lives.

"Badger ideals such as tenacity, ingenuity, and being driven by discovery are what make our academic medical center unique."

It is a privilege and a gift to train the next generation of leaders in science and medicine. And while much has been written about the headwinds facing higher education at this moment in time, I see tremendous opportunities ahead for us to partner with our alumni and others to support our students and researchers. This support is important and meaningful because it accelerates the incredible trajectory of researchers – among the stars at our school – who are on the brink of tomorrow's innovations.

"Our commitment to translating research from the bench to the bedside – and building bridges to make the trip easier and faster – will transform us into a beacon for health care."

The first feature story in this issue focuses on an example of cancer research excellence. Our school is proud to lead National Cancer Institute-funded Specialized Programs of Research Excellence (SPORE) grants in prostate cancer and head and neck cancers; these large grants propel translational research from lab to patient care. Our commitment to translating research from the bench to the bedside – and building bridges to make the trip easier and faster – will transform us into a beacon for health care. Strong partnership with our academic health system, UW Health, is key to this translation.

At the heart of all we do are the people who make this possible, including our faculty, staff, students, and each of you as loyal alumni and donors who are our deeply valued supporters and champions of the University of Wisconsin School of Medicine and Public Health. I feel very fortunate to have each of you in our corner, and I look forward to meeting and partnering with as many of you as I can.

On, Wisconsin!

As the saying goes, "The only constant in life is change." That feels especially true as we look ahead to how we will continue connecting with our alumni community in new ways.

Beginning in 2026, we will transition to printing and mailing *Quarterly* magazine twice per year. While the print schedule is changing, our commitment to sharing meaningful stories and celebrating our alumni remains just as strong. Between issues, we will keep in touch through digital channels – sharing alumni news and features, event invitations, volunteer opportunities, and updates from the University of Wisconsin School of Medicine and Public Health via email, social media (@UWMedAlum), and our website (wmaa.med.wisc.edu).

We are excited about this new rhythm, which allows us to balance thoughtful storytelling in print with more frequent touchpoints online. No matter the format, our goal is the same: focus on celebrating alumni and strengthening our community.

In the spirit of connection, I am pleased to share some recent highlights. In August 2025, we welcomed 176 new medical students and presented each of them with a 3M Littmann Cardiology IV Diagnostic Stethoscope – a meaningful tradition made possible by the generosity of alumni.

We also gathered with alumni and friends for our annual Middleton Society

Donor Appreciation Dinner, which was defined by gratitude and inspiration. That evening, as well as Homecoming weekend, provided wonderful opportunities for our new dean, Nita Ahuja, MD, MBA, to meet many alumni and donors in person. We are excited about the energy and vision she brings to the school's future.

On the back cover of this issue, you will see an invitation to give to the WMAA Fund. Every gift – no matter the size – helps us support students, keep alumni connected, and fund other important initiatives that strengthen our community, including the production of this magazine. Thank you to everyone who gives so generously – we are deeply grateful.

As always, we invite you to get involved; here are some suggested ways:

- volunteer as a preceptor or join our Student Alumni Partnership Program: wmaa.med.wisc.edu/connect/volunteer
- send us a Class Note: wmaa.med.wisc.edu/share
- provide a story idea: wmaa.med.wisc.edu/submit-quarterly-story-ideas
- and please be sure to keep your contact information up to date: wmaa.med.wisc.edu/connect/update-contact-information

We are proud of what we have built together and excited about what is ahead. Thank you!



TODD BROWN/MEDIA SOLUTIONS

SARAH B. ROTHSCHILD

Executive director, Wisconsin Medical Alumni Association

WILL YOU CONSIDER SHARING YOUR IRA'S REQUIRED MINIMUM DISTRIBUTION?

If you are at least 70-1/2 years old, you may be obligated to take a required minimum distribution (RMD) from your individual retirement account (IRA). By making a qualified charitable distribution to the Wisconsin Medical Alumni Association (WMAA), you can satisfy your RMD while excluding the amount from your gross income for tax purposes. Thus, this is a tax-wise way to support the

WMAA or University of Wisconsin School of Medicine and Public Health.

If you are interested in this giving opportunity, please contact Jill Watson, associate vice president of development, Wisconsin Foundation and Alumni Association, at jill.watson@supportuw.org or (608) 262-4632 by early December 2025.



Denis Lee, a researcher in the Lambert laboratory in the Wisconsin Institutes for Medical Research, conducts an assay related to the Head and Neck Cancer Specialized Program of Research Excellence grant.

Research Excellence

TWO HIGHLY COMPETITIVE, FEDERAL SPORE GRANTS BOLSTER RESEARCH ON PROSTATE CANCER AND HEAD AND NECK CANCERS

The University of Wisconsin Carbone Cancer Center seldom takes a back seat to other institutions when it comes to producing transformative research breakthroughs. Designated in 1973 by the National Cancer Institute (NCI) as one of the nation's original comprehensive cancer centers – and still the only one in Wisconsin – UW Carbone remains an unwavering reservoir of highly collaborative, cutting-edge researchers across the UW–Madison campus.

This preeminence played a significant role when the NCI awarded UW Carbone two prestigious Specialized Programs of Research Excellence (SPORE) grants in 2016 and 2023. Since established in 1992, SPOREs have served as the NCI's premier translational research program, significantly boosting the impact of bench-to-bedside cancer research at select U.S. cancer centers.

"Receiving a SPORE grant, let alone two, is a real feather in the cap for an organization like ours," says Christian Capitini, MD, acting director, UW Carbone. "The NCI awards these grants to just a handful of centers with highly

reputed researchers from basic science to clinical care. In addition to funding research, the grants help us train the next generation of cancer researchers. Having two SPOREs is a great recruitment tool for prospective faculty."

Especially striking to those involved in the SPORE grants at UW–Madison is the highly collaborative research culture that permeates the campus.

Jacques Nor, DDS, PhD, external advisor for UW Carbone's head and neck cancer SPORE and dean of the School of Dentistry at the University of Michigan, adds, "A SPORE grant is a very prestigious recognition of the quality of the investigators and the environment in which they work."

UW Carbone's first SPORE grant was awarded for head and neck cancer; it was

successfully renewed for a second five-year term in 2022. Then, in 2023, the center received a second SPORE grant, with this one aimed at prostate cancer. Each five-year cycle for original grants or renewals provides approximately \$11.5 million plus matching funds provided by UW Carbone, UW School of Medicine and Public Health, the UW–Madison Graduate School, and several departments.

David Jarrard, MD, a professor in the Department of Urology and leader of the urologic oncology team at the UW School of Medicine and Public Health, notes that UW–Madison's long history of high-caliber, multidisciplinary, translational research boosted the success when UW Carbone faculty and staff submitted SPORE applications.

"This grant allows us to amplify our bench-to-bedside efforts," says Jarrard, principal investigator (PI) of the prostate cancer SPORE grant.

Paul Harari, MD, professor and former chair of the Department of Human Oncology and PI of the head and neck cancer SPORE, says much needs to be done to make cancer more curable



Left to right: Douglas McNeel, MD, PhD, David Jarrard, MD, Paul F. Lambert, PhD '85, Paul Harari, MD

and its treatments more comfortable for patients.

"Over my 35 years as a radiation oncologist at UW-Madison, we have come a long way," Harari observes. "Yet, today's worldwide cure rate for head and neck cancers remains 50 to 55 percent. We need to push that higher. We also need to make treatments even more precise and tolerable to reduce unpleasant side effects, such as dry mouth and throat or swallowing problems. Ideally, future patients will be cured with a higher quality of life."

UW Carbone's prostate SPORE grant focuses on metastatic disease, for which cure rates are far lower than for a locally confined disease.

"If you look across the country, Wisconsin has the 8th or 9th highest rate of prostate cancer mortality," says Jarrard. "Thanks in part to the research being funded by our SPORE grant, we see incredible promise for increasing the cure rate for men with prostate cancer."

HEAD AND NECK SPORE GRANT

Harari and Paul F. Lambert, PhD '85 (basic science co-leader), direct the head and neck SPORE grant. Lambert is the director of McArdle Laboratory for Cancer Research and chair of the Department of Oncology. Approximately 35 faculty members and 120 staff members are involved in the head and neck SPORE grant, which includes the following scientific projects:



PROJECT 1: TARGETED RADIONUCLIDE

THERAPY. LEADERS: ZACH MORRIS, MD, PhD (PG '16); JAMEY WEICHERT, PhD; PAUL HARARI, MD

Researchers are testing a targeted form of radiation therapy (NM600) that, ideally, will result in greater patient survival. The project combines the most common form of immunotherapy with NM600, which is given via injection. One of the excellent features of this type of radionuclides is they can be given diagnostically and therapeutically, meaning they can both image and treat tumors.

"We call it a theranostic agent," Morris says. "With the help of PET [positron emission tomography] scans, we first determine whether the patient's tumor will absorb the agent before we inject a therapeutic dose. This process lets us create a personalized prescription to deliver the desired amount of radiation for each patient."

PROJECT 2: BIOMARKER PREDICTION OF TREATMENT OUTCOMES. LEADERS: DAVID BEEBE, PhD '94; PAUL HARARI, MD

Health care professionals need better tools to predict whether a treatment will increase survival for head and neck cancer patients. This project advances a powerful, patient-specific bioengineered model – developed at UW-Madison – built from individual patient tumor cells to predict tumor response and investigate biomarkers of response in tumor tissue. A clinical study will be performed to test the feasibility of using response data from the

model to guide head and neck cancer treatments for individual patients based on specific tumor characteristics. This project combines patient-specific data, such as single-cell RNA sequencing, to identify patterns that predict how well treatments work. The result will improve decision-making.

PROJECT 3: PROTEIN-BLOCKER TO ENHANCE THE BODY'S IMMUNE SYSTEM.

LEADERS: DERICK WHEELER, PhD '04; JUSTINE YANG BRUCE, MD

Researchers hope to show that a new drug can block the unwanted impact of two proteins found on tumor cells – Axl and MerTK. When these proteins work in tandem, they prevent the immune system from fighting cancer in patients who have been given immunotherapy. Mouse model research demonstrates that reprogramming the microenvironment that feeds a tumor in a way that reignites the immune system results in a more powerful anti-cancer response. If similar results are found in humans, immunotherapy could more effectively treat patients with specific head and neck cancers.

PROSTATE SPORE GRANT

Jarrard and Douglas McNeel, MD, PhD (co-PI), professor, Department of Medicine, and genitourinary oncologist, UW Health, are overseeing UW Carbone's prostate SPORE work, in which more than 50 faculty and staff members are contributing. This grant is supporting numerous developmental ideas and three main research projects:

PROJECT 1: ENHANCING UNDERSTANDING OF HOW PROSTATE CANCER SPREADS.

LEADERS: JOSHUA LANG, MD (PG '08, '11); SHEENA KERR, PHD; MELISSA SKALA, PHD; DAVID JARRARD, MD

Researchers know that prostate cancer cells do not act alone; they can "trick" nearby cells in the microenvironment that helps feed the cancer. This makes blood and lymph vessels "leakier," giving cancer cells a new pathway to the rest of the body. This project recreates a patient's tumor and its microenvironment on a chip, allowing researchers to examine how genetic and cellular changes cause the cancer to spread. A better understanding of which cancers are most lethal would position researchers to test treatments that could prevent metastasis.

"There are many new therapies being developed that target these other cell types in the tumor environment. We are studying how and for whom these therapies will be most effective," says Lang.

PROJECT 2: AN ANTI-CANCER VACCINE TO PREVENT METASTASIS IN HIGH-RISK

PATIENTS. LEADERS: DOUGLAS MCNEEL, MD, PhD; CHRISTOS KYRIAKOPOULOS, MD; DAVID JARRARD, MD

For more than 20 years, UW-Madison researchers have been working to develop a DNA vaccine that, when given in conjunction with testosterone-reducing hormone therapy and immunotherapy, makes cancer cells more "visible" to the body's immune system. Because hormone therapy causes cancer cells to over-express their androgen-receptor protein, the vaccine appears to more easily recognize that protein, signaling the immunotherapy treatment to kill more cancer cells. Early clinical trials have shown that high-risk patients who received the vaccine are living longer than unvaccinated individuals; however large-scale, Phase III trials are still to come.

"If we can clearly demonstrate that our vaccine is triggering cancer-destroying, tumor-specific immune responses, we could see transformative increases in survival times," says McNeel.

One of the prostate SPORE team's external advisors, Howard Soule, PhD, executive vice president and chief science officer of the Prostate Cancer Foundation,

—Continued on page 37



Left to right: Shari Piaskowski, BS, Renee Zook, MBA, Lauren Weeth-Feinstein, MPH '13

Running Like Clockwork

by Kris Whitman

Stately clocks stand the test of time. Often revered by members of a community, many such clocks include actions beyond timekeeping, such as marking the lunar cycle and chiming to alert people at pre-set intervals.

Some such tasks — tracking months, quarters, and years, and communicating about milestones — are among the responsibilities of administrators who are integral to two National Cancer Institute-funded Specialized Programs of Research Excellence (SPORE) grants at the University of Wisconsin Carbone Cancer Center (see main article). For the head and neck cancer SPORE grant, Shari Piaskowski, BS, is the administrator; and for the prostate cancer SPORE grant, Lauren Weeth-Feinstein, MPH '13, and Renee Zook, MBA, share that responsibility along with other work at the center.

According to Paul Harari, MD, a professor of human oncology and the principal investigator of the head and neck SPORE, "These behind-the-scenes team members keep the projects running like clockwork." Noting that the grants involve large numbers of people across many departments, he says the administrators "keep us all moving in the same direction using magic touches."

Piaskowski, Zook, and Weeth-Feinstein say they take a high-level view to gather and share background materials, coordinate small and large meetings, and track deliverables to stay on top of the many milestones in each five-year grant cycle.

Each grant administrator gained research experience through their education and prior work. All say they are grateful for the dedication and time commitment of the principal investigators, project leaders, and other faculty and staff members.

"Everyone cares deeply about the research missions," says Zook. "I don't think you can find a person who has not been affected in some way by cancer."

Piaskowski adds that active involvement of patient advocates, as required for SPORE grants, serves as a reminder to the team of the ultimate goal of each SPORE to improve options and quality of life for patients with cancer. About the advocates for the head and neck SPORE, she shares, "Hearing our head and neck cancer patient advocates' voices still greatly impacted by their treatment delivered years ago keeps us grounded to our mission."

Despite the dry mouth and other lasting side effects of their treatment, these patient advocates are eager to bring positive and inspiring energy to SPORE meetings and community events.

The programs' interdisciplinary nature appeals to Weeth-Feinstein; she says, "I love being able to interact with and learn from experts in so many disciplines. I like seeing them make connections that bring new approaches to bear on research problems."

In agreement, Zook comments, "It is beautiful how their expertise from various areas comes together and moves our strategic goals forward toward finding a cure for cancer."

PHOTOS BY TODD BROWN AND SIRTAJ GREWAL

Celebrating a Milestone

THE SCHOOL COMMUNITY WELCOMES
FUTURE BADGER PHYSICIANS





Opposite page, top (left to right): Nathan Mortensen, Max Molot, Mohamed Mohamed. Bottom row: Mazen Razzaq, Priya Ahuja, Esha Kapoor, Sirtaj Arora; Emily Liu. This page, clockwise from upper left: inductees to the Gold Humanism Honor Society; Sophia Schoenfeld; Bucky Badger and Lynda Huang; Aryana Rita, Matthew Collins, Grace Spiegelhoff; Jaskiran Sandhu, Greer Wittenberg, Simrah Ahmed.

by Kris Whitman

Through a series of August 2025 events – the White Coat Investiture Ceremony and a Wisconsin Medical Alumni Association (WMAA)-hosted celebration to share alumni-gifted stethoscopes followed by its Badger Cookout – the University of Wisconsin School of Medicine and Public Health community welcomed 176 incoming medical students. They are the first to begin their medical school journey with Nita Ahuja, MD, MBA, as their dean.

At the annual White Coat Investiture Ceremony in the Memorial Union, Ahuja told students, "Today reflects many years

of intentional dedication and tenacious commitment, so take a pause to acknowledge all you have accomplished and enjoy this moment."

At the event, Shobhina Chheda, MD, MPH, led the Declaration of Geneva, a modern version of the Hippocratic Oath.

Chheda, the associate dean for medical education, shared, "Learning to care for and work with patients, peers, and health professionals is a vital part of medical education. As students, you entered medical school on Monday and started seeing patients with your peers right away. Caring for patients comes with high expectations

and responsibilities that our school takes seriously."

Last, addressing the students, WMAA President Peggy Scallon, MD '92 (PG '97), said, "As you begin this next chapter, one of the most important things to remember is that you are not doing it alone. You will be surrounded by support starting with your family and friends, many of whom helped get you here today. Over the next four years, that support system will grow: your classmates will become close friends, faculty will become mentors, and alumni – more than 8,000 of us – will stand behind you, ready to guide and encourage you along the way."



*Left to right: David Zopf, MD, MS, Tony Kille, MD '01,
Jessica Van Beek-King, MD*

A Breath of Fresh Air

PEDIATRIC OTOLARYNGOLOGISTS OFFER SOLUTIONS FOR DIFFICULT-TO-TREAT SLEEP APNEA

Upon bringing a newborn home, new parents often are bombarded with advice and counseled to “sleep when the baby sleeps.” However, that advice can go out the window if an infant develops sleep apnea, a condition that disrupts rest not only for the infant but for the entire household.

“When the baby is not sleeping, nobody is sleeping, and that anxiety affects the whole family,” says David Zopf, MD, MS, associate professor and chief of the Division of Pediatric Otolaryngology, Department of Otolaryngology–Head and Neck Surgery, University of Wisconsin School of Medicine and Public Health (SMPH). “Parents have told us they were checking on their child every 30 minutes throughout the night to make sure they were still breathing.”

While sleep apnea is often associated with adults, it affects an estimated 5 to 8 percent of otherwise healthy children, and the prevalence is even higher among children with complex medical conditions such as cerebral palsy, Down syndrome, and craniofacial abnormalities.

“Sleep apnea in children is incredibly common, and yet it is often overlooked,” says Zopf. “In healthy kids, the condition is usually caused by enlarged tonsils and adenoids, and removal of these structures can help. But in children with neuromuscular or genetic conditions, the airway itself may be structurally weak or compromised, so traditional approaches do not work as well.”

Consequences can be profound. Interrupted sleep affects not only a child’s mood, behavior, and academic performance, but also their cardiovascular health, growth, and brain development. It is imperative to find a solution for the child’s health and for the ripple effects throughout the family.

Improving care for pediatric sleep apnea is one component in the growth and evolution of the SMPH’s Otolaryngology Program. On July 1, 2025, the school officially launched the Department of Otolaryngology–Head and Neck Surgery, marking the culmination of nearly a century of innovation and excellence. Formerly a division within the Department of Surgery, the new department is the



David Zopf, MD, MS (left), consults with Lennon Rodgers, PhD, MS, director of the Grainger Engineering Design Innovation Lab at UW–Madison.

Lin's Pride in the 28th Department

by Kris Whitman

"This is a monumental moment in our history, and I want to ... reflect on how far we've come and express my gratitude for everyone who has played a role in making this achievement possible." Those words, from Sandra Lin, MD, praised the faculty and staff of the new Department of Otolaryngology–Head and Neck Surgery on July 1, 2025 – the day it evolved from being a division in the Department of Surgery at the University of Wisconsin School of Medicine and Public Health (SMPH).

As chair of the new department and the Charles N. Ford Professor, as well as the former division chief, Lin says the faculty and staff have excelled since the 1930s in research, education, and clinical care, establishing the foundation for becoming a stand-alone department. She credits Rebecca Minter, MD, MBA, chair, Department of Surgery, Robert N. Golden, MD, emeritus dean, SMPH, and Nita Ahuja, MD, MBA, dean, SMPH, for their support of the new department.

Lin, who grew up in Chicago, earned her medical degree from Northwestern Feinberg School of Medicine in Chicago and completed an otolaryngology residency at Medical College of Wisconsin in Milwaukee. She spent 20 years in the Maryland-based Johns Hopkins Department of Otolaryngology before she joined the SMPH faculty in 2022.

"I like building and moving forward, and there are plenty of opportunities and talent for that in this department," says Lin. "We live out the Wisconsin Idea by improving lives, pushing the boundaries of scientific discovery, and training the next generation of otolaryngologists and other care providers. For patients with complicated conditions that others cannot treat, we provide exceptional care and give them hope."

Noting that some parts of the country have a shortage of otolaryngologists, Lin says the Department of Otolaryngology–Head and Neck Surgery recently expanded its residency program and offers two fellowships, as well as training for speech and language pathologists.



Sandra Lin, MD

SIRTAJ GREWAL/MEDIA SOLUTIONS

"The department's missions of education, patient care, and research function synergistically," notes Lin, who has recruited additional clinician-scientists and plans to build upon the department's already robust programs.

"Our research is well developed in everything from basic to clinical and translational investigations," says Lin. "We are planning to diversify the areas in which we conduct research, including related to our strong voice research and further building our hearing, cancer, and pediatric otolaryngology research programs."

The department is a regional leader in many areas, Lin notes, including multidisciplinary head and neck cancer and medical and radiation oncology. Faculty members are establishing collaborative approaches with other SMPH programs, such as thoracic surgery and interventional pulmonology, and with other UW–Madison areas, such as biomedical engineering, as well as with partners at other academic medical centers. Some experts have been developing and using innovative devices in clinical applications (see main article).

"There are so many career paths in this field, and we want our trainees to see firsthand many role models," says Lin.

She adds, "I find joy in helping people – including our surgeons, research leaders, and trainees – elevate their success. And I am really proud to work with this incredible team!"

school's 28th, reflecting its national reputation for cutting-edge clinical care; world-class, pioneering research; and exceptional training in ear, nose, and throat (ENT) medicine.

Led by Sandra Lin, MD, professor and chair of the Department of Otolaryngology–Head and Neck Surgery and former chief of the division, the department brings together 30 faculty members across subspecialties, including facial plastic surgery, head and neck oncology, laryngology, otology, neurotology, pediatric ENT, and rhinology. The department's structure fosters collaboration across these specialties, recognizing that disorders of the ears, nose, throat, head, and neck often are deeply interconnected.

"Department status gives us a stronger voice than before and a seat at the table," observes Tony Kille, MD '01, associate professor, Department of Otolaryngology–Head and Neck Surgery. "It allows us to showcase our accomplishments, attract top-tier talent, and expand our programs to meet the growing needs of our patients."

In December 2024, the SMPH and UW Health made history when Kille performed Wisconsin's first pediatric hypoglossal nerve stimulator implant using a device that stimulates the tongue muscle to prevent airway collapse during sleep. The patient, a teenager with Down syndrome and severe sleep apnea, had undergone multiple surgeries without success.

"This was a game-changer for this teen," says Kille, adding that repeated sleep studies on the patient indicate significant improvement. "We are now preparing for additional implants and working toward establishing a dedicated clinic for complex pediatric sleep apnea."

Kille, who has a special interest in airway disorders and emphasizes the importance of team-based care, explains, "These conditions are multifactorial. We work closely with pediatric sleep medicine specialists, pulmonologists, orthodontists, and primary care and developmental pediatricians, as well as others to get a full picture of the patient's needs and develop the most appropriate treatment plan."

Kille adds that the skill and expertise of anesthesiologists, surgical technologists, respiratory therapists, and perioperative nursing teams are vital to assure safe, successful upper airway surgeries for high-risk patients with complex conditions.

For him, the moments of greatest reward often come from the simplest procedures.

"Even something like a tonsillectomy can be life-changing," says Kille. "When a child starts sleeping better, their mood, behavior, and learning improve. I have had parents tell me their child is 'a brand-new kid.' That is incredibly fulfilling."

He also sees his role as helping to ease parental anxiety.

"We all worry about our kids – it's our job. But when a child is sick, that worry becomes overwhelming. Even if we cannot promise a perfect outcome, having a plan and showing families that we care can make a huge difference," notes Kille.

With similar goals and calling on his vast experience, Zopf developed a nasopharyngeal/oropharyngeal stent, a soft, flexible device that helps keep the airway open in children with cerebral palsy and similar, complex conditions. The device, currently in the final year of an approximately \$4 million, National Institutes of Health-funded clinical trial, already has been used for more than 30 children and is showing transformative results.

"This device is helping many children avoid a tracheostomy, which is a major surgery with lifelong implications," says Zopf. "The new approach is simple, non-surgical, and well-tolerated, and it could be transformative for how we care for children with complex, hypotonic airway conditions in patients with cerebral palsy and Down syndrome."

The device-related clinical trial will likely expand into a multisite study involving the SMPH and UW Health, University of Michigan, Texas Children's, and Colorado Children's Hospital. Meanwhile, UW Health is preparing to launch a multidisciplinary, complex Pediatric Sleep Apnea Clinic, bringing together experts in ENT, sleep medicine, pulmonology, and other specialties in the Department of Otolaryngology-Head

and Neck Surgery and Department of Pediatrics to provide coordinated, comprehensive patient care.

Lin notes, "It is very important to build bridges and collaboration as we look into new opportunities. For instance, Dr. Zopf is collaborating with biomedical engineers and professionals in a variety of fields at Georgia Institute of Technology and other academic medical centers, in addition to those in SMPH and UW-Madison departments."

As a key part of the team with Zopf and Kille, Jessica Van Beek-King, MD, associate professor, Department of Otolaryngology-Head and Neck Surgery, brings a broad skill set and deep compassion to her work. From cochlear implants to airway reconstruction, she treats a wide range of conditions and is passionate about education and mentorship.

Lin says the department helps train about 60 SMPH medical students per year, and those who are interested in going into otolaryngology can spend a month gaining experience.

"Our medical students say they can tell our faculty members, residents, and fellows are truly dedicated to education in clinical medicine as well as research," says Lin.

Van Beek-King adds, "I have medical students or residents with me almost every day. I believe in letting them do as much as they can safely do, with supervision and support. That is how I learned, and I promised myself I would do the same for the next generation."

Noting that she is especially excited about advances in minimally invasive airway surgery, such as using coblation to open collapsed cartilage rings, Van Beek-King says, "We were able to avoid a major open surgery and avoid a stay in the intensive care unit for one of our patients. That kind of innovation changes lives."

Van Beek-King also collaborates across specialties for complex cases like vascular anomalies and congenital neck masses, working with teams from plastic surgery, hematology/oncology, dermatology, and genetics.

"This type of care takes a team, and that team includes the family. We are all in this together," she says.



David Zopf, MD, MS, and Tony Kille, MD '01, discuss a research project.

Calling Van Beek-King "a strong patient advocate who always strives to ensure the clinical offerings are efficient and impactful," Lin says, "We know patients are waiting a long time to get into our clinics because we do not have enough doctors for everyone who needs our care. Dr. Van Beek-King always thinks about how we can provide impactful care in our current situation."

As the department grows, the pediatric team hopes to expand in size and scope.

"We already provide world-class care," says Kille, "but there is room to develop more organized, multidisciplinary programs for complex sleep apnea, airway issues, and hearing loss."

Zopf, who also leads a medical device innovation laboratory, sees the department's new status as a springboard for even greater impact.

"It gives us the infrastructure and visibility to secure funding and scale our innovations," he explains.

As advances in the field progress, the pediatric ENT team is united in a shared commitment to providing compassionate, family-centered care within a complex array of medical, social, and human factors. And as the Department of Otolaryngology-Head and Neck Surgery enters this new chapter, its Pediatric Otolaryngology Division is not just treating children, it is transforming lives, one breath at a time.

Alma Mater Memories

MD ALUMNI UNITE ON HOMECOMING WEEKEND



Clockwise from left (left to right): Victor M. Gonzalez, Jr., MD '15, Bucky Badger, Krystal Gonzalez; Julia Kyle, MD '95, and Thomas Meyer, MD '95; Brenda Satchie, MD '00 (PG '05), Sacha Ramirez, MD '00 (PG '03), Vivian Chao, MD '00, Jane Lorelie Cueto, MD '01.

by Kris Whitman

In October 2025, Julia Kyle, MD '95, excitedly drove from Eau Claire to Madison, Wisconsin, with the goal of reconnecting with fellow alumni from her Class of 1995 at the University of Wisconsin School of Medicine and Public Health (SMPH). This reunion marked 30 years since she and her classmates earned their medical degrees.

"I am so privileged to have gone through the medical school experience with a group of such kind, caring, and fun individuals," said Kyle, who now has a solo

internal medicine and pediatrics practice in Eau Claire. "It was great to catch up with everyone and solve the world's problems. We wondered how 30 years could possibly pass so quickly!"

Hearing people like Kyle say, "Our reunion was a delight," is music to the ears of Wisconsin Medical Alumni Association (WMAA) staff, who make sure each class has the opportunity to come together at five-year intervals.

Such was the case on UW-Madison's Homecoming weekend, October 10-11, when the WMAA hosted reunions for the Classes of 1985, '90, '95, 2000, '05,

'10, and '15 (see group photos starting on page 16).

Friday evening's alumni reception at the Monona Terrace Community and Convention Center began with opening remarks by Nita Ahuja, MD, MBA, who noted it was her first Homecoming as dean of the school.

"I have been here just shy of five months and have loved every minute of being a Badger. And I knew I would," said Ahuja. "Back when I was in consideration for this role, I started to look for people who could tell me more about UW-Madison. And I didn't have to



Clockwise from top left (left to right): Augustine Saiz, Jr., MD '15, Allison Saiz, MD '15; Ian Kang, MD '00, Sara Dovichi, MD '00, Toni Peters, MD '00, Shannon Gritzenbach, MD '00, Deb Dryer, MD '00, Eric Erickson, MD '00 (PG '05); Sara Lorenz Taki, MD '05, Layth Taki, Samip Kothari, MD '05, Steve Tuschy; Stefanie Sippl, MD '20 (PG '23), and family; Tom Jaeger, MD '85, Daniel Ripp, MD '85, Debra Markwardt, MD '85 (PG '90), Paul Regnier.

search long. People started to come up to me at meetings and conferences to say they are Badgers, too. The pride in our school and its future was palpable – and contagious!"

Similarly proud alumni enjoyed a visit from the always-photogenic Bucky Badger. Next, at individual class dinners, conversations among former classmates brought out memories, laughter, and chances to talk shop.

Kyle reflected, "It is a difficult time to be a physician. And our reunion was a great reminder of why we do what we do,

and there are a lot of wonderful people in medicine."

Alumni and their guests had additional chances to reconnect on Saturday afternoon. The high-energy WMAA Tailgate Party at Union South included a Student Organization Showcase at which participants could learn about ways SMPH students engage with each other, with faculty, and with the community.

While many alumni headed to Camp Randall Saturday evening to watch the Wisconsin Badgers play the Iowa Hawkeyes, others remained at Union

South to catch the football and marching band on a big screen during the WMAA's game-watch party.

"Some alumni prefer the stadium seats, while others choose to continue their celebration at Union South," said WMAA Executive Director Sarah B. Rothschild. "In either case, we were happy to have so many alumni enjoy the game-day excitement with their friends and families."

CLASS OF 1985



SIRTAJ GREWAL/MEDIA SOLUTIONS (7)

MD Class Reunions

CLASS OF 1990



Front row (left to right): Meriel Rongstad, Cari Ullrich, Catherine Whitehouse, Shirley Handley, Cheryl Zuccaro, June Sigman, Terri Marty, Martha Sommers. Back row: Kurt Rongstad, James Oh, Thomas Puetz, Jack Handley, Scott Sell, Pam Heilman, John Daley, Robert Wilke, Thomas Knickelbine.

CLASS OF 1995



Front row (left to right): Michelle Gigot Puent, Sue Davids, Amy Servais, Julie Mitchell, Sarah Naik, Vicki Jackson, Barry Seltz, Wade Woelfle, Tangee Sinclair, Julia Kyle, Brian Hirsch. Back row: Suzanne Norby, Matthew Viernes, John McCarley, Mark Domroese, Thomas Meyer, Dave Kuntsman, Jeffrey Jones, Eric Boie, Steve Kolpak, Rajiv Naik, Timothy LeSage, Christopher Roberts, Peter Newcomer, Sara Cannon, Patricia Deffner-Valley, Courtney Scaife.

CLASS OF 2000



Front row (left to right): Eric Erickson, Kathryn Bylow, Tanya Hoerneman, Molly Hinshaw, Tiffany Rebella, Deanna Plant, Michelle Karsten, Deb Dryer, Nicholas Siebers, Mara Pheister, Shannon Gritzenbach. Back row: Michael Bryant, Greg Rebella, Brian Hoerneman, J. Louis Hinshaw, Chris Taylor, Wayne Lee, John Hutto, Dan Hale, Ian Kang, Antoinette Peters, Sara Dovichi, Job Chacko, Christopher Mjaanes, Greg Matzke.

CLASS OF 2005



Front row (left to right): Amy Kenny, Ahteri Forcada-Lowrie, Danita Tom, Kimberly Arndt, Brian Branchford, Sara Taki, Sabrina Guse, Meghan Oujiri, Kelly Carter, Katharine Nelson, Liz Woods. Back row: Jennifer Krupp, Brian Haugen, Jessica Scott Schwoerer, Scott Parrish, Bradley Erickson, Brian Arndt, Cody Nikolai, Mark Reischel, Eric Dvorak, Timothy Enright, Scott Anderson, Samip Kothari, Doug Salm, Mike Woods, Andrew Braun, Stacey Sperlingas, Gregory Heideman.

CLASS OF 2010



Front row (left to right): Eric Yanke, Lisa Shen, Jennifer Karnowski. Back row: Sarah Yanke, Sarah Tevis, Helena Chang, Anjali Tannan.

CLASS OF 2015



Front row (left to right): Victor M. Gonzalez, Jr., Dianna Howard, Kathleen Penzenstadler, Matthew Bobel, Nicole Kamps, Nayeli Spahr, Allison Saiz. Back row: Mathew Herbst, Jamie Goehner, Matthew Fischer, Paul Stevens, Thomas Cassini, Augustine Saiz, Maggie Moses.

New WMAA Board Members

CARR, GONZALEZ, LEE, LUBNER, MITCHELL, POWELL-ALEXANDER, AND SALUJA SHARE THEIR TIME

Compiled by Kris Whitman

As of July 1, 2025, seven University of Wisconsin School of Medicine and Public Health (SMPH) MD alumni have joined the Wisconsin Medical Alumni Association (WMAA) Board of Directors for their initial three-year terms.

Sarah B. Rothschild, executive director of the association, comments, "We are delighted to welcome our largest cohort in recent years to the WMAA Board of Directors. These seven outstanding alumni represent a broad range of generations, specialties, and professional paths. Coming from across the United States, they share a deep connection to the UW School of Medicine and Public Health and a strong heartbeat for its missions and future."

JASON CARR, MD '14 (PG '21)

Your practice?

I practice pulmonary and critical care medicine in Salt Lake City, Utah.



What moment made you certain that medicine was your calling?

Before I entered medical school, I had opportunities to shadow physicians and volunteer in settings where I was able to see the relationships they had built with patients.

Is there a lesson from medical school that shapes your work life?

From my patients and colleagues, I have learned the importance of a sense of community to health.

What drew you to serve on the WMAA Board of Directors?

I am excited to give back to the SMPH community that contributed to my success. Building these kinds of communities takes constant effort and

investment, and I am happy to be part of a team that does that work.

What medical innovation or trend are you most excited about?

Two such things appeal to me: leveraging large systems and practical questions for pragmatic trials; and pursuing innovations that help patients stay at home or in their communities rather than in a hospital.

What's something you are passionate about?

Outside of medicine, I am passionate about skiing and outdoor recreation.

Other updates?

My wife and I have a 2-year-old and a newborn. Both have worn Badger gear home from the hospital.

VICTOR M. GONZALEZ, JR., MD '15

Your practice?

I am a double-board-certified adult and geriatric psychiatrist based in San Antonio, Texas.



What moment made you certain that medicine was your calling?

For me, it was a series of events that nudged me toward medicine. I had decided as an adolescent that I wanted to be a physician, but I was determined to explore my interests along the way. That led me into graduate studies in organic chemistry, and later into business consulting. Both were rewarding, but neither felt quite right. Eventually, I realized that medicine uniquely allowed me to combine my love of science with the social and humane, interpersonal side of working with people. In many ways, it brought all the threads together.

Is there a lesson from medical school that shapes your work life?

An attending physician in the Veteran's Administration encouraged me to spend time getting to know patients. That experience reminded me that beyond every diagnosis lies a human story that deserves dignity and attention. Taking time to listen often proves just as important as any treatment plan.

What drew you to serve on the WMAA Board of Directors?

I was drawn to the WMAA Board of Directors because of its role in fostering lifelong connections among alumni and supporting the next generation of physicians. I hope to continue building strong bridges among alumni, students, and the communities we serve. I would like my legacy to reflect advocacy for students and a commitment to improving mental health care at the systems level.

What medical innovation or trend are you most excited about?

I am most excited about the continued growth of telehealth and its potential to expand access to high-quality care. The challenge is to do this without compromising personal connections that define good medicine. Telehealth has proven it can reach patients who might otherwise remain unseen due to geography, mobility, or stigma. The real innovation lies in refining these systems so accessibility and excellence go hand in hand.

What's something you are passionate about?

Over the past few years, I have developed a real interest in pets. My family now includes two dogs, two cats, and, most surprisingly, a bearded dragon. I never thought I would enjoy reptiles, but I have become genuinely invested in learning about and caring for bearded dragons. They have far more personality than I ever expected!

**PATRICK LEE,
MD '16, PhD '14
(PG '22)**

Your practice?

I returned to UW Health in Madison just over one year ago, and I am an assistant professor in the SMPH Department of Surgery. I practice acute care surgery, which encompasses trauma, emergency general surgery, and surgical critical care.



What moment made you certain that medicine was your calling?

I knew I wanted to become a doctor after I broke my wrist and required surgery in high school. Before that, I wanted to be an Air Force pilot. The fracture changed the course of my life as I watched doctors treat people in the emergency department and watched the orthopedic surgeons tend to my wrist. I decided to pursue medicine with the intent to affect lives in the same way physicians had affected mine.

Is there a lesson from medical school that shapes your work life?

I became a doctor to make a difference in people's lives when it is needed the most. Book knowledge and tests are important, but patient interactions should not be taken for granted. Every interaction with the medical system shapes a patient's feelings regarding their diagnosis. Sometimes just taking time to listen goes further for patients' overall mental health than we realize. I learned that during some of my first patient interactions in medical school, and I remember it with every patient interaction I have.

What drew you to serve on the WMAA Board of Directors?

I participated in many WMAA events in the past and was featured in a *Quarterly* article, which was a great honor. I always enjoyed my interactions, and I hope to continue to serve the medical school and leave a lasting impression for students.

What medical innovation or trend are you most excited about?

Personally, I am excited about my upcoming robotic training. As robotic

surgery continues to advance, it is becoming more prevalent in acute care. I look forward to being part of that movement and developing those skills.

What's something you are passionate about?

For years, I have enjoyed playing the piano and saxophone. I wish I were a better musician, and I think back to missed opportunities when I was younger that I did not appreciate at the time. There is still so much more to learn. I always enjoy playing with other musicians. I hope to add additional instruments to my skill set.

**SAM LUBNER,
MD '03 (PG '10)
(EX OFFICIO
MEMBER)**

Your practice?

As an oncologist at the UW Carbone Cancer Center, I specialize in gastrointestinal cancers. I also am the SMPH's assistant dean for students and a professor in the Division of Hematology, Medical Oncology, and Palliative Care in the Department of Medicine. I direct the school's hematology/oncology fellowship.



What moment made you certain that medicine was your calling?

Growing up in Green Bay, Wisconsin, I loved the idea of being on a team, but I was never good enough to be on an athletic team. I learned how to tape ankles and wrists, and I was able to be the team trainer. In college, I loved sports radio as another way to be on the team, but I realized there were few good jobs in that field. When I looked at other fields that relied on teamwork, medicine felt like a good fit. Once I got into medical school, I never looked back!

Is there a lesson from medical school that shapes your work life?

I remember vividly, for our second anatomy exam, complaining that I hated the pterygopalatine fossa because it was so hard to figure out all the important things that run near and through it. A friend looked me in the eyes and said, "You have one week to make it your friend. Put in the work." Every time I run

into a problem that feels frustrating, I am reminded of his advice to show up and put in the work.

What drew you to serve on the WMAA Board of Directors?

I am so grateful to the SMPH. On the first day of medical school, I met my wife! This school gave me incredible training and the start to a fulfilling career. I saw serving on the WMAA board as a way to give back to this institution. I hope to maintain the tradition of training outstanding doctors who go out and change the world.

What medical innovation or trend are you most excited about?

I have seen cancer care transform from a field in which the goal was to maximize dose intensity and hope the toxicities were not life-threatening, to delivering tailored therapy to each patient. I think with continued work by creative, compassionate thinkers who have the patient's best interests at heart, we will continue to improve the lives of patients with cancer.

What's something you are passionate about?

For the past few years, I have coached my kids in soccer and basketball. While I am not particularly gifted athletically, I have a loud voice and can keep 9-year-old youth engaged and entertained.

**JULIE
MITCHELL,
MD '95, MS '01
(PG '01)**

Your practice?

I am a general internist, practicing as a resident-preceptor in the Milwaukee, Wisconsin, area.



Is there a lesson from medical school that shapes your work life?

Good physicians are community advocates! While health may be forged in the doctor's office, more likely, health is determined by social support, education, resources, and agency free of prejudice.

—Continued on next page

What drew you to serve on the WMAA Board of Directors?

I am most thankful for my well-rounded education and the dedication of the SMPH faculty. I hope to help medical students leave my alma mater with the same gratitude.

What medical innovation or trend are you most excited about?

Electronic communication across health care systems, within a secure electronic health record. Patients move and travel, and everyone benefits when records can easily transfer. Now physicians can chat about patient care with colleagues in other health systems.

What's something you are passionate about?

I hate waste. A few examples are inefficient processes; duplicated tests; tossed food; and purchases of brand-name products when generic will do. Our earth, our pocketbooks, and our attention all have limits. Physicians need to be good stewards of resources.

DORRIS POWELL-ALEXANDER, MD '94

Your practice?

I am an emergency physician and an associate professor with Vanderbilt University Medical Center in Nashville, Tennessee. I have worked at Vanderbilt for the past 22 years.



What moment made you certain that medicine was your calling?

I have always been drawn to science and thought I wanted to pursue veterinary medicine. But, during my first year as an animal science major, some hands-on experiences with livestock led me to pursue human medicine instead.

Is there a lesson from medical school that shapes your work life?

I often see resiliency and the infallible human spirit in my patients, and I also see adversities that human beings must work through to hold on to something meaningful. I value the investment of human connections and never underestimate the power of love!

What drew you to serve on the WMAA Board of Directors?

When I had the privilege of meeting Sarah Rothschild through our reunions, I had a conversation with her about wanting to do more – beyond my donations to the Stethoscope Program – to give back, and she mentioned a unique opportunity to speak with medical students. This was transformative, enjoyable, and satisfying. I then learned about the alumni board and expressed an interest in serving. I hope to leave a legacy of service, networking, and inspiring others to champion students, especially those who have been underrepresented in medicine, to ensure that a variety of voices are heard at the SMPH. I look forward to working with our board to advance the school's missions through leadership, scholarship, and examples of legacy distinction.

What medical innovation or trend are you most excited about?

I am excited about gene and stem cell technology to treat genetic disorders and to change outcomes of chronic illness, as well as telemedicine to improve access to care for those in underserved areas.

What's something you are passionate about?

I am enthusiastic about medical education and bringing the passion and excitement of practicing medicine to children everywhere as a noble dedication of service to humanity.

RAJIT SALUJA, MD '88

Your practice?

As an orthopedic surgeon at the Orthopedic Institute of Wisconsin, I perform adult reconstructive surgery of the hip and knee at the Midwest Orthopedic Specialty Hospital in Milwaukee, Wisconsin.



What moment made you certain that medicine was your calling?

During college, I worked in housekeeping on the orthopedic floor at Children's Wisconsin in Milwaukee. Seeing medical students and residents put on casts and set up traction for the

young patients left a strong impression. Watching those children start their rehabilitation and gradually regain the ability to walk and run was genuinely inspiring. That was when I first saw a future for myself in medicine, with orthopedics capturing my interest.

Is there a lesson from medical school that shapes your work life?

One lesson from medical school that has shaped my work life is the importance of thoughtful time management and balance. In adapting to the hectic studying of medical school, I found refuge in running out to Picnic Point and back during lunch every day. Soon, I found myself training for and running two marathons per year, an activity that continued for many years. Orthopedic surgery demands long hours and constant attention, but learning early to organize priorities and carve out time for running and rejuvenation has helped me sustain my commitment to my patients and my well-being.

What drew you to serve on the WMAA Board of Directors?

I am grateful for the opportunity the UW School of Medicine and Public Health gave me and how that opened the door to an exciting, gratifying career. I look forward to sharing my experiences and helping students discover the same types of opportunities in their future.

What medical innovation or trend are you most excited about?

Biological treatments and robotic-assisted surgeries are just getting started in orthopedics. With these, along with exponential innovations with artificial intelligence in health care, this is an exciting time in medicine.

What's something you are passionate about?

I am passionate about tennis and coached my two sons, who played tennis at Division 1 and Division 3 colleges. It has been exciting to watch them pursue careers in medicine, as my older son started medical school, and my younger son is going through the application process.

Class Notes

Compiled by Andrea Larson

CLASS OF 2025

Nakul Aggarwal

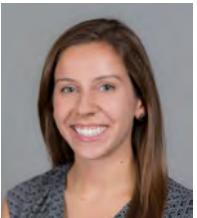
is the 2024-25 Americans for Medical Progress/American College of Neuropsychopharmacology Biomedical Research Awareness Day Fellow. He recently earned his medical and doctoral degrees from the University of Wisconsin School of Medicine and Public Health's (SMPH) Medical Scientist Training Program. He earned his doctorate in neuroscience under the mentorship of Ned Kalin, MD, chair, SMPH Department of Psychiatry. Aggarwal's graduate work in translational research focused on elucidating the neurobiological correlates of early-life anxiety. He has started a research-track psychiatry residency at Stanford University in California and plans to specialize in child and adolescent psychiatry.



CLASS OF 2022

Elizabeth

Stoeckl, along with five co-residents in the SMPH Department of Radiology, proposed a resolution, Radiation Protection Apparel for Healthcare Workers, at the American College of Radiology's annual meeting. The resolution was accepted, making it potentially the first resolution to be completely resident-written and accepted as policy.



CLASS OF 2020

Trevor Schell,

a gastroenterology and hepatology fellow in the SMPH Department of Medicine, received a Poster of Distinction Award at Digestive Disease Week 2025. His poster was titled, "Incidence of Herpes Zoster in Pediatric Patients with Inflammatory Bowel Disease."



CLASS OF 2019

Erin Theisen

received a 2025 Women's Health Career Development Award from the Dermatology Foundation for her work studying granzyme K in autoimmune skin disease. Theisen is a dermatology instructor at Harvard Medical School and a postdoctoral fellow at Brigham and Women's Hospital in Boston.



CLASS OF 2017

Adam Bailey,

assistant professor, SMPH Department of Pathology and Laboratory Medicine, received the Ann Palmenberg Junior Investigator Award from the American Society for Virology in July 2025. Named for the former director of the UW Institute for Molecular Virology, the award recognizes junior investigators who have made significant



contributions to virology and display exceptional promise.

James Ircink

serves as medical director of Madison Street Medicine, a nonprofit dedicated to addressing homelessness through health care. Since the organization began in 2015, it has expanded to offer multiple health clinics throughout the week. Ircink is a clinical assistant professor in the SMPH Department of Family Medicine and Community Health.



Jeffrey Jensen,

an instructor in the University of North Carolina (UNC) School of Medicine's Department of Medicine, received a UNC School of Medicine Physician Scientist Training Program Resident/Fellowship Award. It will provide funding for two years of Jensen's research, which aims to identify and enhance novel immunotherapeutic targets in NUT carcinoma.



CLASS OF 2015

Augustine

Saiz, Jr., was named the 2024-25 Outstanding Faculty of the Year by the University of California, Davis, Department of Orthopaedic Surgery, where he is an assistant professor. Saiz also was awarded a National Institutes of Health K08 grant for his proposal titled "Systemic and Local Immunomodulation of Fracture Healing in Polytrauma." He conducts basic science research and has a clinical practice in orthopedic trauma.



CLASS OF 2012

Farah Kaiksow

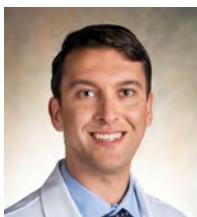
is the governor-elect for the American College of Physicians (ACP) Wisconsin Chapter. She will complete training in that role before she begins a four-year term as governor in spring 2026. As governor, she will serve as the ACP's representative for the Wisconsin Chapter, providing a link between local members and national leaders. Kaiksow is an associate professor in the SMPH Department of Medicine's Division of Hospital Medicine.



CLASS OF 2010

Dejan

Micic was appointed chief of the Division of Gastroenterology and Nutrition at Loyola Medicine in the Chicago



Highlighting Alumni Authors



Knowing that many University of Wisconsin School of Medicine and Public Health alumni have published books, the Wisconsin Medical Alumni Association (WMAA) created an Alumni Authors page on its web site: go.wisc.edu/medalumauthors

That page links to a WMAA-curated list on Goodreads – the world's largest site for readers and book recommendations – featuring books authored by the school's medical alumni. From research and memoirs to fiction and wellness guides, this collection showcases the diverse voices and expertise of graduates. Please check out the WMAA Goodreads page and contact the WMAA (see back cover) to have your book added to the list.

area. He brings extensive experience in gastroenterology and nutrition support to the position. Prior to joining Loyola Medicine, he was an associate professor in the Section of Gastroenterology, Hepatology, and Nutrition at the University of Chicago.

CLASS OF 2009

Brian Williams,

associate professor, Division of Hospital Medicine and Complex Care, SMPH Department of Pediatrics, is serving on the executive committee for the American Academy of Pediatrics Section on Nicotine and Tobacco Prevention and Treatment. Williams' term will continue through October 2026. The section aims to raise awareness about the importance of preventing tobacco-product initiation and exposure; treating dependence; and eliminating children's exposure to tobacco, nicotine, and their emissions. Further, it aims to create support for pediatricians and other health care providers in this goal.



Brittany (Britt) Allen will receive the 2025 Richard B. Heyman Award from the American Academy of Pediatrics' Council on Adolescents



and Young Adults. This award honors a member who has made significant contributions to improving health outcomes for adolescents or to educating pediatricians about the unique health care needs of this population locally, regionally, and nationally. Allen is an associate professor in the SMPH Department of Pediatrics' Division of General Pediatrics and Adolescent Medicine.

CLASS OF 2008

James Bigham

was named Family Physician of the Year by the Wisconsin Academy of Family Physicians. His innovative approach to preventive care and dedication to the community have set him apart as a leader. His work on firearm injury prevention emphasizes the importance of integrating public health initiatives into practice. His course on this topic for medical students, residents, and health care providers illustrates the power of working with the community to create a safer, more inclusive space for all. He is a clinical professor in the SMPH Department of Family Medicine and Community Health.



CLASS OF 2003

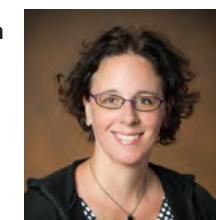
Meghan Lubner, professor, SMPH Department of Radiology, was inducted as a Fellow of the American College of Radiology at its 2025 Convocation.



CLASS OF 2002

Lori Rosenstein

was appointed chair of the Oncology Training Committee of the American Society of Clinical Oncology. In this role, she will help guide and educate directors of hematology/oncology fellowship programs. She practices hematology at Emplify by Gundersen in La Crosse, Wisconsin.



CLASS OF 2001

Wendy Molaska

was named the Direct Primary Care (DPC) Physician of the Year by the American Academy of Family Physicians and the DPC Alliance. This national honor recognizes Molaska's exceptional contributions to DPC and unwavering commitment to patient-centered health care. A family medicine physician, she owns a DPC clinic in Fitchburg, Wisconsin.



Colorado. She will continue as the department's vice chair for clinical and translational research.

CLASS OF 1995

Vicki Jackson

recently became chief and chair of the Department of Medicine at Boston Medical Center and Boston University Chobanian and Avedisian School of Medicine. A nationally recognized leader in palliative care, Jackson served at Massachusetts General Hospital for more than 20 years.



CLASS OF 1998

Kristen Nadeau

was appointed as head of the Section of Endocrinology, Department of Pediatrics, Children's Hospital



CLASS OF 1980

Arthur R. Derse (MD '80, JD '87) is a new member of the Association of American Medical Colleges (AAMC) Board of Directors, for which SMPH Dean Nita Ahuja, MD, MBA, is serving

CLASS OF 1973

Reginald Bruskewitz,

professor emeritus of urology, SMPH, received the Lifetime Achievement Award from the Society of Benign Prostate Disease. The award recognizes individuals who have made outstanding contributions to the field of benign prostatic diseases.



In Memoriam

John B. Toussaint, MD '51
Madison, Wisconsin

August 2025

Carlyn M. Kline, MD '56
Saint Joseph, Missouri
December 16, 2024

Donald I. Van Giesen,
MD '58
Santa Rosa, California
June 15, 2025

Eugene Krohn, MD '59
Black River Falls, Wisconsin
August 26, 2025

Timothy K. Henke, MD '63
Ann Arbor, Michigan
May 6, 2025

Ray E. Shenefelt, MD '63
Madison, Mississippi
July 3, 2025

Donald A. Spring, MD '63
Reno, Nevada
July 14, 2025

Lawrence W. Margolis,
MD '64
Hillsborough, California
July 11, 2025

Donald M. Nowinski, MD '66
Waunakee, Wisconsin
October 20, 2025

Thomas O. Larson, MD '69
Jeffersonville, Indiana
January 1, 2025

Dennis D. Ela, MD '73
Austin, Texas
July 5, 2025

Daniel T. Field, MD '73
Okemos, Michigan
April 24, 2025

Robert J. Lowe, MD '74
Albuquerque, New Mexico
June 4, 2025

Robert E. Stader, MD '75
Lancaster, Wisconsin
September 8, 2025

Landy F. Sparr, MD '76
Beaverton, Oregon
April 13, 2025

James R. Whitman, MD '77
Longboat Key, Florida
September 7, 2025

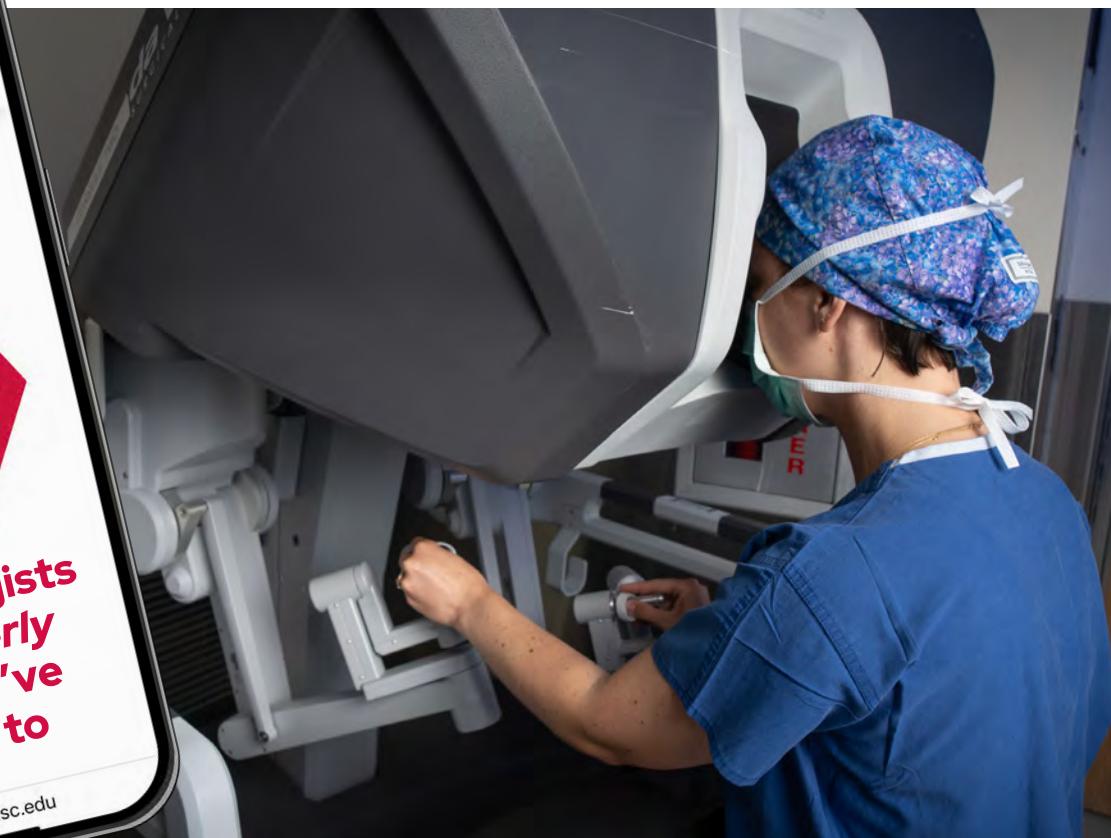
Barbara Gutschenritter,
MD '81
Kalispell, Montana
January 1, 2025

Kathy M. Carbone, MD '83
Nashville, Tennessee
July 23, 2025

Mark E. De Check, MD '83
Racine, Wisconsin
July 11, 2025

Ann M. Waldron, MD '85
Reno, Nevada
April 4, 2025

Andrew H. Nelson, MD '07
Middleton, Wisconsin
June 1, 2025



A urologist performs robotic surgery at UW Health.

GREG HORWITZ, MD '03

I practice general urology in Kansas City, Missouri, as part of Kansas City Urology Care, which we call KCUC – a large, private-practice group that specializes in urology and cancer care. We have urologists, medical oncologists, and radiation oncologists.

My most common surgeries are for kidney stones and benign prostatic hyperplasia (BPH) (enlarged prostate). Frequent cases are ureteroscopy with laser lithotripsy for stones and Aquablation® for BPH.

One of my most memorable patients required removal of a bladder stone

the size of a softball and a couple of stones the size of golf balls.

I discovered the field of urology in my third year of medical school, when I completed the rotation and enjoyed the fun people and surgeries. It is hard to take yourself too seriously as a urologist, and the people I met on the rotation all seemed to enjoy their jobs. After I earned my medical degree from the University of Wisconsin School of Medicine and Public Health, I completed a urology residency at University of Kansas Medical Center.

The field is rewarding because patients feel a lot better after surgeries, and I love doing surgeries.

At the hospital, I spend most of my time on multiple administrative boards. I am a member of the executive committee of North Kansas City Hospital and recently switched from being the chair of surgery to being the head of the Surgery Advisory Committee. Running the hospital's monthly morbidity and mortality case reviews keeps me busy.

Diverse opportunities in urology mean a practice could range from clinic and small-scope procedures to



complex robotic surgeries and large, open cancer surgeries. Providers can practice everything or focus on one thing depending on what fits their interests. It never gets boring.

KIMBERLY MACIOLEK, MD '18

As an endourologist at the University of Virginia in Charlottesville, I mostly perform endoscopic surgery, including the treatment of kidney stones and benign prostatic hyperplasia (enlarged prostate).

A memorable patient was an older man who had urinary retention secondary to a massive prostate. He underwent transurethral laser enucleation of the prostate to remove the obstructing inner portion. He happily proclaimed he was able to pee as well as when he was a teenager! It is easy to take something as simple as voiding for granted until it does not work properly. To

deliver this degree of life-changing surgery is one of the best parts of my job.

When I first stepped into an operating room, I knew I wanted to be a surgeon. My urology rotation in my third year of medical school brought out the happiest version of me. I fell in love with a wide range of technology from robots to implants to scopes with broad applications, including oncology, reconstruction, and infertility. To confirm my career choice before my fourth year of medical school, I completed a research year in University of Wisconsin School of Medicine and Public Health's Department of Urology. This invaluable

experience opened my eyes to the wonders and complexities of treatments for kidney stones.

After I earned my medical degree from the University of Wisconsin School of Medicine and Public Health, I completed a general surgery internship and urology residency at the University of Virginia followed by a fellowship in endourology and minimally invasive surgery at Vanderbilt University Medical Center.

I think urology is the best. It is a small community of surgeons with a good sense of humor – it comes with the territory! Often, the treatment goal is to improve the patient's quality of life. Some



aspects of urology focus on men's health, but both male and female patients present with kidney or bladder tumors, kidney stones, and incontinence.

RASHID SIDDIQUI, MD '18

In November 2025, I joined Texas Oncology, a large urology and oncology private practice in Dallas. In addition to devoting some time to general urology, I am particularly interested in prostate and kidney cancers. As such, I perform minimally invasive surgery; robot-assisted laparoscopic radical prostatectomies; focal therapy; and robot-assisted partial and radical nephrectomies.

My journey into urology began during a research year at the National Institutes of Health, after my third year of medical school. There, I was studying bladder cancer, which allowed me to attend

national meetings and interact with urologists – experiences that sparked my lasting interest in the specialty. After earning my medical degree from the University of Wisconsin School of Medicine and Public Health, I completed a urology residency at Northwestern University in Chicago. Most recently, I completed a robotic urologic oncology fellowship at University of Southern California in Los Angeles before I joined my new practice.

I consider urology to be a total hidden gem in surgery. You can do the whole gamut – from a five-minute procedure to a 12-hour open

surgery, and everything in between. In fact, often, a small procedure can have as much of an impact on a patient as a long surgery.

I vividly remember an elderly patient whom I saw when I was a junior resident. He came to the emergency room after not having voided in more than 10 hours. Of course, he was miserable. Urology was called for catheter help. After some advanced maneuvers, I was able to place a catheter, and both the patient and I jumped for joy! He then proceeded to give me the biggest hug. It was a happy ending to his long day of misery! It is moments like these that



remind us why we chose to go into medicine – or, in my case, medicine and urology.

All in all, I find urology to be a great specialty with great people and patients. It truly has something for everyone!



Faculty members at the Investiture Celebration in June 2025

Faculty Investiture Celebration

HONORING FACULTY MEMBERS AND DONORS

The University of Wisconsin School of Medicine and Public Health (SMPH) community came together in June 2025 to honor faculty members who have received endowed professorships, chairs, or fellowships, which are supported through philanthropy, and the generous individuals who make pioneering work possible by establishing faculty support funds.

Honorees, donors, and school leaders gathered at UW-Madison's Fluno Center for the fourth-annual SMPH Faculty Investiture Celebration. A donor-funded faculty position is the highest honor the school can bestow on its faculty members. This investment pushes forward the school's mission of advancing health and health equity through remarkable service to patients and communities, outstanding education, and innovative research.

Endowed positions enable the school to recognize and advance faculty members' passionate pursuits to understand, treat, and eventually cure

devastating diseases. At the event, a chair, director, or other representative talked about each faculty member's accomplishments and about the donor behind the endowed position. Art Walaszek, MD, associate dean for faculty affairs and development, presented each faculty member with a medallion.

"I have seen firsthand how [endowed positions] support our national trailblazers who advance clinical care, education, and research," Walaszek said. "They help us bring the best and brightest to UW-Madison and help them thrive. This critical support would not be possible without our donors' generosity."

The event is part of Wisconsin Medicine, the philanthropic partnership between UW Health and the SMPH.

2025 FACULTY HONOREES (alphabetically by recipient's last name)

Lions Eye Bank of Wisconsin Professorship*

Cat N. Burkat, MD (PG '05), professor, Department of Ophthalmology and Visual Sciences

David A. Bluemke, MD, PhD, Professorship in Radiology

Nicholas Burris, MD, associate professor, Department of Radiology

Chair in Sleep Research

Chiara Cirelli, MD, PhD, professor, Department of Psychiatry

Virginia F. Harrison-Elliott Bascom Professorship in Anatomy

Elise C. Davis, PhD, teaching professor, anatomy and academic affairs

Patsy Harrison Chair of Mood Disorders

Steven Garlow, MD, PhD, professor, Department of Psychiatry

Paul Davis Community Professorship*

Angela Gibson, MD '09, PhD '07 (PG '14, '15), associate professor, Department of Surgery

Retina Research Foundation M.D. Matthews Research Professorship

Timothy Gomez, PhD, professor, Department of Neuroscience

Gloria E. Sarto, MD, PhD, Chair in Women's Health and Health Equity Research*

Tiffany Green, PhD, associate professor, Departments of Obstetrics and Gynecology and Population Health Sciences

Jan and Kathryn Ver Hagen Professor of Translational Research in Medicine

Hasmeena Kathuria, MD, professor, Department of Medicine

Andrew B. Crummy Professorship in Radiology

Erica M. Knavel Koepsel, MD '11 (PG '16, '17), associate professor, Department of Radiology

O. Sydney Orth, MD, PhD, Chair

Richard Lennertz, MD, PhD, associate professor, Department of Anesthesiology

Charles N. Ford Professorship in Otolaryngology*

Sandra Y. Lin, MD, chair, Department of Otolaryngology–Head and Neck Surgery

Retina Research Foundation

Daniel M. Albert Chair

Bikash Pattnaik, PhD, associate professor, Departments of Pediatrics and Ophthalmology and Visual Sciences

Robert Turell UWMF Professor in Pathology and Laboratory Medicine

Erik Ranheim, MD, PhD, chair, Department of Pathology and Laboratory Medicine

Jack and Margo Edl Professorship in Cardiovascular Medicine

Amish Raval, MD, professor, Department of Medicine

Department of Urology Research Professorship

William A. Ricke, PhD, professor, Department of Urology

Linda Banov and Howard Stern Faculty Fellowship in Dysphagia

Nicole Rogus-Pulia, PhD (PG '15), associate professor, Department of Medicine

Jean Manchester Biddick Bascom Professorship

Sarina Schrager, MD, MS (PG '06), professor, Department of Family Medicine and Community Health

Dr. Herb Chen Professorship in Endocrine Surgery

Rebecca Sippel, MD (PG '06), professor, Department of Surgery

Ginny Wolfe Faculty Fellowship in Ovarian Cancer Research

Janelle N. Sobecki, MD (PG '21), assistant professor, Department of Obstetrics and Gynecology

Oros Family Professorship in Rare Skin Diseases**

Andrew South, PhD, professor, Department of Dermatology

Dr. William G. Clancy, Jr., Professorship in Sports Medicine **

Andrea M. Spiker, MD, assistant professor, Department of Orthopedics and Rehabilitation

Mohs Family Faculty Fellowship

Annika Weinhammer, MD, assistant professor, Department of Dermatology

John E. Jr. and Louise A. Goncze Chair in Pediatrics

John V. Williams, MD, chair, Department of Pediatrics

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

** Matching gift support was provided through the generosity of the Herman and Gwen Shapiro Foundation.

Stevens Receives Luminary Award

Rom Stevens, MD '82, received the Wisconsin Foundation and Alumni Association's (WFAA) Luminary Award in November 2025. The award recognizes alumni who serve as aspirational examples through their accomplishments in leadership, discovery, progress, and service.



Stevens' call to serve and commitment to medical education have led him, since 2022, to Ukraine, where he trains physicians in trauma care and life-saving diagnostic skills.

While Ukrainian clinicians care for casualties, despite war-related threats, Stevens teaches medical

educators through lectures, workshops, and webinars. His point-of-care ultrasonography training has reached more than 700 doctors across the country. He has partnered with Ukrainian medical universities and nongovernmental organizations to teach bedside diagnostic ultrasonography and lecture on topics relevant to war casualty care.

Stevens' connection to Ukraine dates to 2011-12, when – after a military tour in Afghanistan – he led medical support for a multinational naval exercise in Odesa.

A retired U.S. Navy captain, Stevens served 36 years as a health care professional, commanding officer of a Marine Corps medical battalion, and senior staff officer in peacetime and

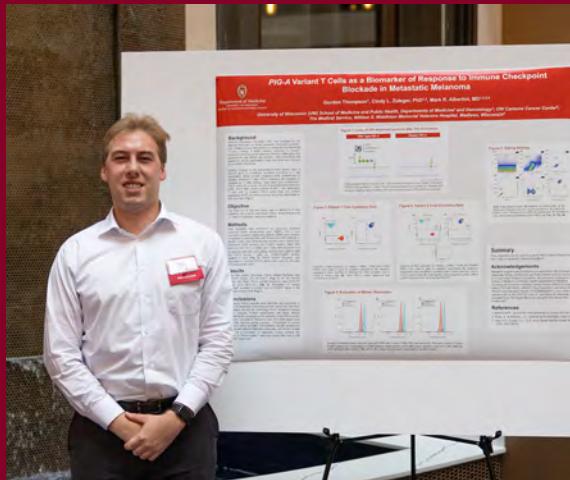
in war. He has held faculty positions at several academic institutions. For his service in Ukraine, he is taking a leave of absence from his role as a professor of anesthesiology and medicine at Rosalind Franklin University of Medicine and Sciences in Chicago.

Stevens earned his medical degree from the University of Wisconsin School of Medicine and Public Health through a Navy scholarship program. He has served on the Wisconsin Medical Alumni Association (WMAA) Board of Directors since 2019 and led efforts to endow the Class of 1982 scholarship.

"Professor Stevens embodies the Wisconsin Idea by extending the reach of UW-Madison's values – knowledge, service, and public good," says Sarah B. Rothschild, executive director, WMAA.

Middleton Society

ADVANCES IN CANCER RESEARCH, IMMUNOLOGY, AND THERANOSTICS
HIGHLIGHT AN EVENING THAT HONORS SUPPORTERS



S/RTAJ GREWAL/MEDIA SOLUTIONS (7)

by Kris Whitman

Gratitude permeated the fall 2025 Middleton Society Donor Appreciation Dinner hosted by the Wisconsin Medical Alumni Association and University of Wisconsin School of Medicine and Public Health. Speakers Nita Ahuja, MD, MBA, dean of the school, and Zach Morris, MD, PhD (PG '16), chair of the Department of Human Oncology, shared myriad examples of ways the gifts from society members are making a difference.

Addressing the school's ardent supporters who traveled from eight states and across Wisconsin, Ahuja said, "Through the Middleton Society, we honor you – our alumni, faculty, and friends of the school

– whose altruism supports the dreams and discoveries of our faculty, students, and staff. Thanks to your investments and support, we have accelerated our progress to change lives through service to patients and communities, innovative research, and outstanding education."

She added that members' motivations for giving are inspirational, and "each is special, unique, and meaningful."

When introducing the keynote speaker, Ahuja called Morris "the champion that every cancer patient wants in their corner" and said, "He is never satisfied with the care we provide today, but always striving for the care we can provide tomorrow."

For a specific couple of dinner guests, Morris has indeed been "in their corner." Bill and Signe Buchholz, both UW-Madison alumni, credit the expert care they received from Morris and others at



Zach Morris, MD, PhD (PG '16)

UW Carbone Cancer Center with saving their lives following cancer diagnoses – twice for him and once for her. The couple's gratitude following successful treatments inspired them to share monetary gifts with UW Carbone, with a strong focus on Morris' research, and led to membership in the Middleton Society.

Now in remission, Bill Buchholz explained that he was first diagnosed two decades ago with metastatic, stage 4 prostate cancer and was undergoing treatment when his wife developed breast cancer. Following several difficult and uncomfortable months of treatment, both recovered well. But in late 2017, Bill Buchholz was diagnosed with melanoma on the side of his head.

"Doctors removed the cancer and thought it was gone, but two years later, melanoma reappeared in my brain, lungs, and other parts of my body," he recalled, crediting highly specific immunotherapy treatments with again helping him overcome the odds and remain cancer-free for the past six years.

"Having cancer was frightening, but it helped me get my priorities straight. I prayed for peace of mind and courage, and I was able to develop a positive attitude," says Bill Buchholz, who received "below the neck" care from Mark Albertini, MD (PG '87, '91), professor of medicine, and "above the neck" care from Morris, along with their teams.

Through Bill Buchholz's career in life and disability insurance sales and brokerage, he learned a great deal about health care. He says he deeply respects the way UW Carbone researchers are approaching individualized, molecular-level treatments for cancer. In line with this, he enjoyed learning more through Morris' talk at the Middleton Society dinner.

Top row (left to right): Ed Peirick, Judy Peirick, David Schroedel, Kathie Schroedel, Linda Kloosterboer, Thomas Kloosterboer, MD '82 (PG '86); Dean Nita Ahuja, MD, MBA, visits with M2 Priya Mathur, MPH, whose Shapiro Project focused on caregiver perspectives on preventing future hospitalizations for children with medical complexity. Middle row: Deborah Wishau, James Wishau, MD '78; M2 Gordy Thompson with his poster titled PIG-A Mutant T-Cells as a Biomarker of Response to Immune Checkpoint Blockade in Metastatic Melanoma; William Scheibel, MD '74 (PG '77), Pamela Scheibel, MS '77. Bottom row: Erin Fain, MD '88, M4 Asha Jain, Jonathan Fain, MD '87; Jud Kindschi, MD '68, Jane Wagner, BS '67, Beth Kindschi, BS '67, Paul Wagner, MD '68 (PG '74).

Morris shared details about research into several types of cancer diagnostic and treatment techniques, such as boron-neutron therapy – which calls upon neutron beams to locate cancer cells and kill them. He stressed that advances have come "not through one individual or one department, but because of the highly collaborative, collegial spirit that permeates the halls at this place. This makes it possible for us to take strides in something like theranostics and particle therapy."

He described theranostics – a field in which UW-Madison is leading the pack – as a combination of therapeutic and diagnostic measures, and he shared his excitement about the Proton Therapy Center that will open in 2026 at UW Health Eastpark Medical Center.

"A lot of partnerships between industry partners and the university help take campus research and drive improvements to cancer care, as well as education improvements for the workforce and economic gains for the whole state," said Morris.

Reflecting on these and other examples, Bill Buchholz said, "These types of advancements give us reason for more hope. Signe and I make donations because we want our kids, grandkids, and others to have more hope that they can survive cancer and thrive."

How to Join the Middleton Society

Membership in the Middleton Society begins at \$25,000 in cumulative household giving to any area in the University of Wisconsin School of Medicine and Public Health. The giving can be a one-time donation, a signed pledge, or a documented estate gift.

If you are interested in joining and discussing how you would like to direct your gift, please contact Jill Watson, associate vice president of development, Wisconsin Foundation and Alumni Association, at jill.watson@supportuw.org or (608) 262-4632.



supportuw.org/middleton

From Suriname to Small-Town Wisconsin

MACNACK EARNS THE MAX FOX PRECEPTORSHIP AWARD

by Beth Pinkerton

When Robert Macnack, MD, MS, describes his journey from Suriname – a small country in South America – to becoming a family physician in New Glarus, Wisconsin, one theme shines through: service.

"My dad was a minister, and my mom was a teacher, and I grew up with the desire to serve others," he recalls. "By the time I was in high school, I knew I wanted to become a doctor."

That calling carried Macnack across continents. After he earned a medical degree from St. Martinus University in Willemstad, Curaçao, clinical rotations and family ties brought him to the United States, where he discovered a passion for family medicine. A Southern Illinois University residency in a rural area proved an ideal place to learn.

"I love the variety of work in family medicine," he explains. "You lead people throughout the stages of their lives, from birth to grave. Being there for people in that way drew me to family medicine."

After Macnack practiced for several years in rural Oklahoma, he and his wife moved to Wisconsin to be closer to his sister, a professor at University of Wisconsin-Madison. Since 2018, Macnack has practiced in the SSM Health Monroe Clinic Medical Group in New Glarus, while he and his wife raised three children in nearby Belleville, a community that he says feels like home.

Macnack is one of 50 physicians from 35 communities across Wisconsin who teach in the UW School of Medicine and Public Health's (SMPH) Ambulatory Acting Internship (AAI). The school aims to increase the number of physicians who practice in underserved settings.

According to Paul Hunter, MD '89, AAI director and a professor of family



Robert Macnack, MD, MS (center), and his family at the Max Fox Award Ceremony

medicine and community health, "Community-based preceptors have important roles. Because of their one-to-one supervision of medical students over several weeks, they are better qualified than almost any other teacher to judge whether students have the clinical skills and professional behavior needed for competent patient care."

In June 2025, Macnack received the 2024 Max Fox Preceptorship Award, which is given annually by the Wisconsin Medical Alumni Association and SMPH to a Wisconsin preceptor whose effective service has helped guide the school's medical students. The award honors the legacy of Max Fox, MD, who taught for more than 40 years and served as a preceptor for thousands of students.

Hunter states, "Behind every Max Fox award recipient is a team of physicians, nurses, administrators, and many others who hold students to high standards of professional behavior. This same team supports students as they face difficult clinical questions and stressful interpersonal interactions with patients."

Since 2019, Macnack and his colleagues have taught 27 SMPH

medical students. This team has created a rich learning environment. Students are welcomed into the workflow, see patients, present cases, and develop care plans under guidance.

"I have always enjoyed teaching. I love being with patients. And to me, it's all about being there for others," says Macnack, who emphasizes the art of listening. "I always tell students it's not about how much you know; I want to see how you interact with patients and whether they feel comfortable with you."

He continues, "Even though students are here for only four weeks, they see a small-town practice at its best. They see different members of the same family – one of the special things about family medicine."

Hunter says medical students admire Macnack and appreciate the learning environment he creates.

"He is known for delivering effective feedback and encouraging students to think from the patient's perspective," says Hunter.

Macnack says receiving the Max Fox Award reflects his joy in guiding the next generation.

Gold Humanism Honor Society

MEDICAL STUDENTS, FACULTY MEMBERS, AND A RESIDENT ARE HONORED FOR THEIR PROFESSIONALISM

TOOD BROWN/MEDIA SOLUTIONS



The Arnold P. Gold Foundation is devoted to elevating the principles of humanism, compassion, integrity, respect, and service in medicine. Each year, the organization – through its Gold Humanism Honor Society (GHHS) – recognizes rising fourth-year medical students who are selected for induction by their classmates. These inductees then elect two faculty members and one resident to join them in the GHHS.

At a ceremony in August 2025, several University of Wisconsin School of Medicine and Public Health faculty and staff members lauded the new GHHS inductees for this honor. Among them was Annie Jacobson, assistant director of student success and co-advisor of the school's chapter of the GHHS. Jacobson noted that the Arnold P. Gold Foundation includes, as part of the induction, a formal gift of a GHHS pin to symbolize inductees' commitment to providing compassionate and excellent patient care.

Christine Seibert, MD, associate dean for medical student education and services, noted that the school couples its GHHS ceremony with its White Coat Ceremony because students in the more senior years set an example for those just starting their medical school journey.

In congratulating the 2025 GHHS inductees, Seibert said, "You serve as incredible role models for our new students as they begin their studies with us."

2025 FOURTH-YEAR MEDICAL STUDENT INDUCTEES

- Andrea Lucia Alfonso
- Alec Anderson
- Delaine Anderson
- Ian Arthur
- Amelia Baltes
- Michael Bartley
- Megan Baughman
- Johanna Ellefson
- Elizabeth Fasbender
- Amy Frenkel
- Sarah Stephanie Hahn
- Ly Hoang

- Alexander Idrogo
- Dema Jaber
- Robert Lauer
- Zoe Mandel
- Beth Merkel
- Jarod Moyer
- Gwendolyn Nytes
- Obiageli Oniah
- Jennifer Panackal
- Alexa Rose
- Aiman Shafiq
- Barnabas Shiferaw
- Thomas Staniszewski

2025 RESIDENT AND FACULTY INDUCTEES

- Michael Gui, MD '24, resident, Department of Dermatology
- Jonathan Takahashi, MD (PG '15, '17), associate professor, Department of Family Medicine and Community Health
- Patricia Téllez-Girón, MD (PG '00), associate professor, Department of Family Medicine and Community Health (Leonard Tow Humanism in Medicine Award; pictured at podium)

Celebrating 75 and 50 Years

THE DEPARTMENT OF MEDICAL HISTORY AND BIOETHICS

TODD BROWN/MEDIA SOLUTIONS; SHALICIA JOHNSON/ARROWSTAR



In October 2025, the University of Wisconsin School of Medicine and Public Health's Department of Medical History and Bioethics celebrated 75 years as a world leader in the history of medicine and 50 years of excellence in bioethics.

Established in 1950 when Dean William S. Middleton, MD, appointed Erwin H. Ackerknecht, MD, PhD, as chair, the Department of the History of Medicine was the second such department in the United States. In 1973, the department added the world's first medical school-based bioethics program under the direction of Norman C. Fost, MD, MPH, now a professor emeritus. Since then, the Department of Medical History and Bioethics has been the home of social medicine and medical humanities at UW-Madison, where faculty are committed to advancing the Wisconsin Idea through research excellence, innovative teaching, and extensive service.

"Although there have been many changes in our department's long history, what remains consistent is our tradition of interdisciplinary collaboration to advance understanding of some of the most important human dimensions of health and health care," says Richard C. Keller, PhD, professor of medical history and bioethics, who joined the department in 2002 and has served as department chair since 2023.

Anniversary events began at the Pyle Center with a reception and keynote lecture attended by dozens of faculty, students, alumni, and friends of the department. After welcoming remarks by Dean Nita Ahuja, MD, MBA, alumna Leslie Reagan, PhD '91, professor emerita of history at the University of Illinois Urbana-Champaign, reflected in her address about how her graduate work helped ground her commitment to social justice in a scholarly foundation.

The next day's program focused on the department's past, present, and future. Keller shared a historical

reflection, noting that Ackerknecht had become a U.S. citizen after being forced into exile from his native Germany due to the rise of the Nazi Party. In Ackerknecht's first lecture at UW-Madison, Keller recounted, he spoke of disease as at least as much a social phenomenon as a biological one, setting the department's tone for decades.

Next, a panel of recent alumni, who serve as faculty and postdoctoral fellows across the United States, described how formative experiences during graduate work in the Department of Medical History and Bioethics prepared them to embrace difficult but important research in reproductive health, weight, nutrition, disabilities, global health, and more.

Additional panels highlighted faculty collaboration across UW-Madison. Nicole C. Nelson, PhD, associate professor, Department of Medical History and Bioethics, discussed the importance of teaching the history of medicine, and Elizabeth Fleming, MD (PG '14), assistant professor of family medicine



Page 32, top row (left to right): Front: Linda Hogle, PhD, Keely Mruk, MA, Nita Ahuja, MD, MBA, Judith W. Leavitt, PhD, Nicole Nelson, PhD, Pilar Ossorio, PhD, JD, Sadie Bergen, PhD, Nicole Senter, MS; back: Rob Streiffer, PhD, Richard C. Keller, PhD, Dana Landress, PhD, Pablo Gómez, MD, PhD; Landress, Ayodeji Adegbite, PhD '25, Emer Lucey, PhD '21, Katie Robinson, MD, PhD '14. Bottom row: Ahuja; Leavitt; Leslie Reagan, PhD '91; Gómez, Ossorio, Streiffer, Gretchen Schwarze, MD. Above, top row: Keller, Nelson, J. Paul Kelleher, PhD, Elizabeth Fleming, MD (PG '14), Apoorva Dhawan. Bottom row: Bruce Fye, MD, Norman C. Fost, MD, MPH, Arthur R. Derse, MD '80, JD '87; Travis Weisse, PhD '20, Ayodeji Adegbite, PhD '25.

and community health, spoke of her work with the Collective for Humanism, Arts, and Storytelling in Medicine, which connects clinicians, scholars, and students who share an interest in the medical humanities. J. Paul Kelleher, PhD, professor of medical history and bioethics, discussed the establishment of the Path of Distinction in Bioethics, and medical students Apoorva Dhawan and Madison Harris described how that path of distinction has enriched their studies.

The concluding panel focused on research. Pablo Gómez, MD, PhD, professor of history and medical history, discussed his new book on the crucial role of medicine in the Atlantic slave trade, and Rob Streiffer, PhD, professor of bioethics and philosophy, described his work on animal research ethics. Gretchen Schwarze, MD, professor of surgery and medical history and bioethics, presented her new research on patient-surgeon conversations and informed consent, while Pilar Ossorio, PhD, JD, professor of law and bioethics, shed light on her work

on human subjects research. The day concluded with an open house hosted by Ebling Library's Special Collections Department; participants viewed an exhibit about the history of medicine.

Throughout the Department of Medical History and Bioethics' rich history, its faculty have served in executive roles in professional societies, participated on and chaired state and federal advisory committees, and received national and international honors, including from the National Academy of Medicine.

"The 75/50 celebration provided a remarkable opportunity to reflect on our history and to imagine our future," Keller notes. "It was heartwarming to reconnect as our alumni and colleagues shared their fascinating work into the human dimensions of medicine and health."

From a one-person entity in 1950, Keller adds, the department has become a vibrant and interdisciplinary space for enhancing the understanding of medicine and health as extraordinary sources of human meaning.

Department History

1909: William Snow Miller, MD, organizes a Medical History Seminar for UW–Madison.

1950: Dean William S. Middleton, MD, creates the Department of the History of Medicine, appointing Erwin H. Ackerknecht, MD, PhD, as chair.

1965: Nicholas Mani, MD, becomes chair.

1971: Guenter B. Risse, MD, PhD, becomes chair.

1972: Maurice L. Richardson Fellowship in the History of Medicine is established.

1973: Norman C. Fost, MD, MPH, establishes the Program in Medical Ethics, the world's first bioethics program in a medical school.

1975: Judith W. Leavitt, PhD, becomes the department's first woman faculty member.

1977: Ronald L. Numbers, PhD, becomes chair.

1981: Leavitt becomes chair.

1989: Vanessa N. Gamble, MD, PhD, becomes the department's first Black faculty member.

1993: Harold J. Cook, PhD, becomes chair.

2000: The department celebrates its 50th anniversary.

2002: Department renamed to Medical History and Bioethics.

2003: Warwick Anderson, MD, PhD, becomes chair.

2008: Susan Lederer, PhD '87, becomes chair.

2009: The first-annual Bioethics Symposium takes place.

2020: At the height of the COVID-19 pandemic, Fost and Karola Kreitmair, PhD, serve on a state committee to establish a ventilator allocation policy.

2022: The Path of Distinction in Bioethics (PoD-B) is established by Kreitmair and J. Paul Kelleher, PhD.

2023: Richard C. Keller, PhD, becomes chair; PoD-B graduates its first student.

2024: Nicole C. Nelson, PhD, co-founds CHASM, the Collective for Humanism, Arts, and Storytelling in Medicine.

2025: The department celebrates its 75th anniversary, as well as the 50th anniversary of the Program in Medical Ethics.

Ahuja Serving as Chair-Elect of AAMC Board of Directors

Nita Ahuja, MD, MBA, is the chair-elect of the Association of American Medical Colleges (AAMC) Board of Directors. Her one-year

term will run until November 2026, when she will become chair. Immediately before becoming chair-elect, she served as chair of the AAMC's Council of Faculty and Academic Societies, which represents the interests of medical school faculty nationwide.

Ahuja is the dean of the University of Wisconsin School of Medicine and Public Health and vice chancellor for medical affairs at UW-Madison. She alternates between serving as chair or vice chair on the UW Hospitals and Clinics Authority Board. Before she joined UW-Madison, Ahuja's roles were chair, Department of Surgery, Yale School of Medicine; surgeon-in-chief, Yale New Haven Health System; and associate cancer center director, Surgical Services, Yale Cancer Center. Additionally, she serves on the Wake Forest University Baptist Medical Center Board.

The nonprofit AAMC is dedicated to improving the health of people everywhere through medical education, clinical care, biomedical research, and community collaborations. Its members are in all 160 U.S. medical schools accredited by the Liaison Committee on Medical Education; 13 Canadian medical schools accredited by the Committee on Accreditation of Canadian Medical Schools; nearly 500 academic health systems and teaching hospitals; and more than 70 academic societies. Through the Alliance of Academic Health Centers International, AAMC membership reaches more than 60 international academic health centers throughout five regional offices.



Golden Earns School's Folkert O. Belzer Award

Robert N. Golden, MD, received the University of Wisconsin School of Medicine and Public Health's (SMPH) highest honor: the Folkert O. Belzer Award. Nita Ahuja, MD, MBA, SMPH dean and UW-Madison vice chancellor for medical affairs, presented the award at the Fall Faculty and Staff Meeting in October 2025.

From July 2006 to May 2025, Golden served as the SMPH dean and UW-Madison vice chancellor for medical affairs. He is emeritus in those roles and is a professor of psychiatry.

The Belzer Award recognizes faculty members for their lifetime achievements. As dean, Golden led the school's transformation into the nation's first school of medicine and public health and catalyzed the integration of the SMPH faculty practice plan and UW Health. New programs, centers, and departments were created and partnerships developed throughout Wisconsin. He was a staunch defender of academic freedom and women's reproductive health.

Golden's national leadership roles have included service as chair of the board, Association of Academic Health Centers; board vice chair, American Board of Psychiatry and Neurology; and president, American College of Psychiatrists (ACP). He received distinguished alumnus awards from Boston University School of Medicine and University of North Carolina School of Medicine; the ACP Mood Disorders Research Award; the Slesinger Award for Excellence in Mentoring Women Faculty; and an honorary doctor of medical sciences degree from the Medical College of Wisconsin.



Grist to Receive Gold Medal from Radiological Society

Thomas Grist, MD, will receive the Radiological Society of North America's Gold Medal Award in late November 2025. This is the organization's highest honor, given to leaders who have "rendered unusual service to the science of radiology."



A professor in the Department of Radiology at the University of Wisconsin School of Medicine and Public Health (SMPH), Grist joined that department in 1991 and served as chair from 2005 to 2023 – a period of significant growth. Together with colleagues in the Departments of Medical Physics and Radiology, Grist established the state-of-the-art Imaging Sciences Center in the Wisconsin Institutes for Medical Research.

Grist's work has resulted in more than 200 publications and 16 patents. His interests include the development and application of advanced magnetic resonance imaging (MRI) techniques, primarily for the evaluation of cardiovascular disorders. His multidisciplinary research goes from the bench to the bedside.

Early in Grist's career, he worked at GE Medical Systems (now GE HealthCare), where he was among the first several engineers to work on technology now called MRI. Then, as a medical student at the Medical College of Wisconsin, he played a pivotal role in the development of multiple MRI technologies. At the SMPH, Grist worked closely with colleagues to develop novel magnetic resonance angiography techniques that are used globally.

Among his national and international leadership roles, Grist is now serving as president of the International Society for Strategic Studies in Radiology.

Schnapp Presented with Distinguished Achievement Award

Lynn M. Schnapp, MD, the chair and George R. and Elaine Love Professor of the Department of Medicine at the University of Wisconsin School of Medicine and Public Health, received the American Thoracic Society's (ATS) Distinguished Achievement Award in spring 2025. The prestigious award celebrates her substantial, career-spanning contributions to advancing respiratory health. The ATS is the world's leading medical society dedicated to accelerating the advancement of global respiratory health through multidisciplinary collaboration, education, and advocacy.

Individuals who are honored with the Distinguished Achievement Award have made outstanding, major contributions that advance the missions of the ATS. They have made substantial contributions to the prevention, diagnosis, and treatment of lung disease, critical illness, or sleep disorders through advocacy, training, and mentorship.

Schnapp is internationally recognized for her work in lung injury and repair, and as a leader in mentorship, career development, and efforts to foster diversity, equity, and inclusion in pulmonary and critical care medicine. She is an established National Institutes of Health-funded investigator in cell and molecular biology, with clinical and research expertise in acute respiratory distress syndrome. Her national leadership experience includes numerous positions in the ATS, including past president, and she currently serves as a member of the National Heart, Lung, and Blood Institute's Advisory Council.



Bartels Joins 2025-2026 Class of ELAM Fellows

Christie Bartels, MD, MS '09 (PG '04, '05), was accepted as a member of the 2025-2026 class of Fellows in the Hedwig van Ameringen Executive Leadership in Academic Medicine® (ELAM) Program. This distinctive program is dedicated to preparing health sciences professionals for senior leadership roles in schools of medicine, dentistry, public health, and pharmacy.

A professor and chief of the Division of Rheumatology, Department of Medicine, University of Wisconsin School of Medicine and Public Health (SMPH), Bartels began – in June 2025 – the intensive one-year fellowship, which includes extensive coaching, networking, and mentoring opportunities.

The ELAM Program, established in 1995 and now hosted at Drexel University College of Medicine, began as a national fellowship that aimed to increase and sustain the number and impact of women in health sciences leadership positions. In 2025, the program has more than 1,600 alumni in high-level leadership positions at 300 health institutions around the country. The program began accepting all qualified individuals in spring 2025, regardless of gender. To be accepted, each fellow must be nominated and supported by the dean or another senior official of their institution.

Bartels' interests include rheumatoid arthritis and systemic lupus erythematosus. She seeks to reduce disparities and improve the cardiovascular health and longevity of patients with inflammatory diseases. At the SMPH, she also teaches and serves as a research mentor.



MEDiC Achieves the Silver Seal of Excellence

The Wisconsin Association of Free & Charitable Clinics (WAFCC)



bestowed its Silver Seal of Excellence on MEDiC, a student-led organization that runs four free health clinics and partners with three other free clinics throughout the Madison, Wisconsin, area.

WAFCC awards this honor to clinics that demonstrate measurable progress toward quality care and best practices, and that help maximize access to quality health care for the most vulnerable. The seal of excellence highlights MEDiC's dedication to quality improvement in its student-run free clinics and its commitment to providing compassionate care to underserved patients.

Established in 1991 at the University of Wisconsin School of Medicine and Public Health (SMPH), the MEDiC Program provides a unique opportunity for students to work with peers from several UW-Madison health professions education programs, including the SMPH (medical, physical therapy, and physician assistant students) and Schools of Pharmacy and Nursing. Through MEDiC, student volunteers put their knowledge and skills into practice, faculty engage in a unique and rewarding teaching experience, and individuals without access to health care receive free services.

The MEDiC Program has continued to grow through the dedication of students, physician volunteers, administrative support, and community partners, explains Christine Seibert, MD, associate dean for medical student education and services at the SMPH. Seibert is the MEDiC medical director, and Kristi F. Jones, MPH, directs the SMPH Community Services Program.

Pacemaker

by Aynsley Hartney, MD '25

"Oh, boy," the electrophysiologist remarks in the dictation room. Eighty-six years old. SA node dysfunction, post-AV node ablation. Dual-chamber pacemaker. RA lead placed in coronary sinus in 2016. EF 25 percent. As a fourth-year medical student reaching the end of my second to last semester of medical school, I know an ejection fraction of 25 percent is not good. "Well, we will just need to see how she's doing and go from there," the doctor remarks. I grab my stethoscope and prepare to find a patient who appears fatigued, short of breath, and overall rundown. Is she on GDMT for HFrEF? We knock and enter.

Instead, I find a perky, older woman in a red sweater with a cable behind her neck; the cable is attached to an O-shaped interrogator resting over her shoulder like a scarf. She has a warm smile and says hello. Several centimeters beneath the interrogator, after bypassing wool and skin, sits a generator reaching the end of its life. After setting the agenda for the visit, the doctor proceeds to get information from the tech about the parameters of the pacemaker and then asks the standard questions to elicit any heart failure symptoms that would likely correspond to such a low ejection fraction. She says "no" to the long list of symptoms, and "life is good."

My eyes wander from the somewhat outdated-appearing machine with its screen depicting graphs and electrical waveforms back to the patient. The O-shaped interrogator caught my eye when we first entered the room; now, it's her eyes that catch mine. She has kind blue eyes that are surrounded by wrinkles, a sign of a life well-lived. She lives independently in a single-family home with a laundry room in the basement. She reassures us that she has had two handrails installed. She runs a bed-and-breakfast inn but feels it might be time to let that go. Her joints slow her



down more than her heart, she reports. She is not a candidate for any joint replacements due to her soft bones.

The doctor begins discussing options to add an additional lead during the procedure to replace the pacemaker battery in six months, as that would help her heart pump more efficiently. After describing a venogram and why it would help to plan for the revision procedure, she quietly says, "What if I decide to let the battery die?" The mood in the room plummets. "Tell me more about that," inquires the doctor after a pregnant pause. The patient wonders whether her heart would simply stop once the battery runs out. Upon reading our faces, she quickly assures us that she enjoys living, but she has no desire of ending up in a nursing home without her independence, unable to do the things she enjoys. She is doing well now, but the average pacemaker battery can last up to 10 years – where will she be in half that time? A few more pauses. She wipes her eyes and says, "I just don't want to be a burden."

Not changing the battery wasn't a branch in the algorithm. In this scenario, medicine indignantly asks: Why in the world would someone not want their

battery changed? The better question, however, might be why would someone want it replaced? A pacemaker sends electric signals to help the heart pump, but what is the pumping for if not for relieving burdensome symptoms and enabling patients to live the lives they desire. But doing less when there is a safe, effective way to do more is a dilemma that medicine often faces. A dilemma I will face as a future family medicine doctor. We find out that she discussed this with her family prior to the appointment; they would like her to get the battery replaced, but they will support and respect her decision if that is not what she wishes. It's a big decision, a heavy decision. And one that needn't be made entirely today.

I see her at the check-out counter on my way to the parking garage. "Take care," I say. She smiles back. I feel tears welling up in my eyes as I descend the stairs in the parking garage to reach my car. The heaviness of the conversation makes me sad, especially after I recall her remarking that her family is gathering at her home to celebrate Christmas next week. Possibly her last Christmas. Although I've only known this woman for 30 minutes, the act of her sharing her

hesitation about replacing the battery was profound and reminds me of the immense vulnerability and trust that patients share with us as their doctors, and this is not something that should be taken for granted. Throughout medical school, I have met hundreds of patients, a dozen of whom – much like this patient – have stories with endings unbeknownst to me, which is difficult. Whatever her decision will be, I hope it will be hers and hers alone and that she will come to peace with it.

ABOUT THE AUTHOR

Aynsley Hartney, MD '25, wrote this essay before she earned her medical degree from the University of Wisconsin School of Medicine and Public Health (SMPH). She has begun a family medicine internship and residency in Colorado.



Originally from Memphis, Tennessee, Hartney chose the SMPH due to its emphasis on community and public health. She appreciated the way the school supports and values primary care. She also enjoyed the school's statewide campus model, through which she had rotations around Wisconsin.

Hartney completed six months of her clerkship year in Marshfield, Wausau, and Weston, Wisconsin.

"I am grateful to my mentor, Dr. Elizabeth Fleming. She was a huge support and advocate for me during my time in Madison, and she is a huge reason why I began to write during medical school and continue to do so," says Hartney.

For example, during medical school, Hartney participated in the Medical Writing Interest Group, for which she served as editor in chief for a year. She also participated in the Healer's Art course as a first-year medical student and again as a co-facilitator the following year. She notes, "This was a fantastic

course that looks at the important humanistic components of medicine and the importance of mystery, awe, grief, and uncertainty."

Hartney coordinated and served as emcee of the Alpha Omega Alpha's annual Night of Storytelling for students, residents, and faculty members. She also led a workshop that discussed narrative medicine strategies at the Family Medicine Midwest Conference in 2024 and helped plan the inaugural Midwest Physician Writers Retreat.

"Narrative medicine was a huge thread during my time in medical school," exclaims Hartney.

She says, when not in a library or a clinic, she enjoyed two summers of gardening in the Eagle Heights community garden. She also took in many Wisconsin traditions: spending evenings on the Memorial Union Terrace, bicycling around Lake Monona, and visiting Door County in the fall.

"Madison will always have a special place in my heart," concludes Hartney.

SPORE GRANTS *Continued from page 7*

says this vaccine project could be a tremendous breakthrough.

"Having a project included in the SPORE grant typically means that the NCI thinks you are on to something," says Soule. "Other cancer vaccines have been tried, but what makes this unique is that it is targeted to the central activity that leads to progression and death. Once tested on a larger scale, this vaccine could be off to the races."

PROJECT 3: USING LESION-RESPONSE TECHNOLOGY TO TREAT PATIENTS WITH GREATER PRECISION. LEADERS: GLENN LIU, MD (PG '00, '02); ROBERT JERAJ, PhD; JOHN FLOBERG, MD '14, MS '10, PhD '12

This project seeks to extend survival time for patients with advanced prostate cancer – namely cancer that has already spread elsewhere and no longer responds to testosterone-reducing hormone therapy. UW-Madison researchers believe that even though these patients' conditions are not curable, conventional clinical decision-making is too dichotomous; the patient

is classified as either "responding" or "progressing."

By examining how each lesion – not just a subset – responds to treatment, physicians can make decisions about care that improve patient outcomes.

"Our work shows that patient outcome is driven by resistant lesions," Liu says. "Identifying and targeting that resistance with lesion-tracking software can improve patient care by optimizing benefit from existing therapy options."

A PATIENT'S PERSPECTIVE

SPORE-recipient institutions must include patient advocates on their teams. In this capacity, Marshall Flax is among those who advise the head and neck SPORE team; others similarly advise the prostate SPORE team.

When he was diagnosed with stage 4 tonsil cancer in 2003, Flax was treated with radiation and chemotherapy that saved his life but left him susceptible to swallowing problems. He says having patient advocates on SPORE teams

helps remind researchers that their work has a real-world impact on people's lives.

"When they start talking about something like dry mouth, that is when we pipe up and keep them focused on the side effects that may come with life-saving treatment. It is wonderful to know that this research may help future patients avoid things like dry mouth or swallowing difficulties."

FUTURE OUTLOOK

Especially striking to those involved in the SPORE grants at UW-Madison is the highly collaborative research culture that permeates the campus.

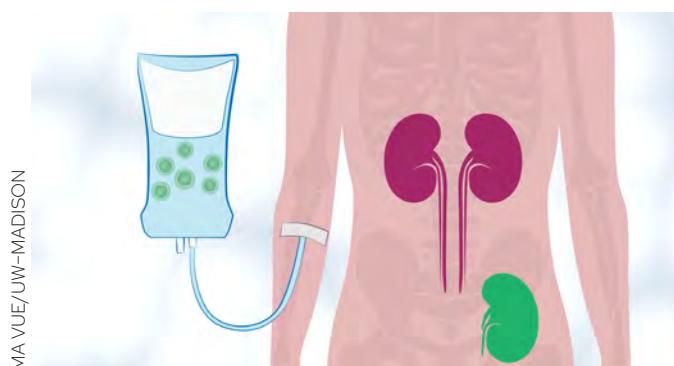
"We have a unique ecosystem here that is excellent for our SPORE researchers," says Capitini. "We can leverage resources across the campus – from basic sciences to biomedical engineering, and from medical physics to medical and radiation oncology. It is fulfilling to see everyone come together and build something greater than the sum of the parts."

Clinical Trial Helps Kidney Transplant Recipients Avoid Anti-Rejection Drugs

Thanks to a cutting-edge clinical trial at University of Wisconsin School of Medicine and Public Health, transplant patients are returning to a healthy life without anti-rejection drugs.

Among them is Shawn Wiederhoeft, who is healthy today due to a new kidney he received in 2020 from his sister. Because they participated in the clinical trial, Wiederhoeft is able to live without the need for anti-rejection medications. He says he sometimes almost forgets he has had a transplant.

Wiederhoeft's journey from serious illness to a medication-free recovery is among several living kidney transplant success stories



that an international team of physicians and researchers reported in the *American Journal of Transplantation*.

Led by Dixon Kaufman, MD, PhD, the Ray D. Owen Professor in the school's Department of Surgery and director of the UW Health Transplant Center, the team shared results of a Phase III

clinical trial that evaluated the effectiveness and safety of a living kidney transplant tolerance protocol, which includes the transplantation of certain stem cells from the kidney donor to the recipient.

The donor stem cells are injected into the recipient several days after transplantation. They migrate

to bone marrow, where they divide and multiply into immune cells that share the genes of the donated organ. The goal is to keep the immune system from attacking the new organ. The method removes the need for anti-rejection medications that cause side effects.

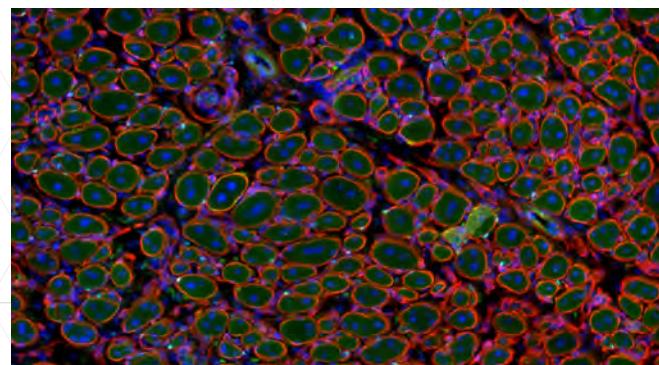
Kaufman says the success of the initial trial exceeded expectations. The current trial required donors and recipients to be siblings and an identical match. Future plans are to expand eligibility to living donor transplants of non-identical matches and eventually to recipients of organs from deceased donors.

Study Shows How Muscle Stem Cells Rust to Death with Age

University of Wisconsin School of Medicine and Public Health researchers have discovered how inflammation makes genetic instructions in muscle stem cells (MuSCs) unreadable and can lead to ferroptosis, in which cells rust to death.

The study, published in *Nature Aging*, has implications for understanding and potentially treating age-related sarcopenia (loss of muscle mass and strength in humans) which contributes to disability and mortality.

"Right now, there's no real way to prevent the decline of muscle mass with aging," notes the study leader, Roméo Blanc, PhD, assistant professor, Department of Cell and Regenerative



Biology, whose team aims to change that.

Explaining that stem cells start to disappear as people age, Blanc says, "Iron is very helpful for your body, but old stem cells hoard so much of it that it becomes toxic. We found a way to help them do their job again."

Researchers analyzed blood and tissue from young

and aged mice to determine changes over time. Aged muscle exhibited signs of inflammation. Data showed the CCR2 receptor that interprets inflammatory signals was more active than usual, and scientists observed a lack of activity by a key gene during inflammation and aging; that gene normally helps organize genetic

instructions. They also observed that genes that protect against iron-related cell death were silenced, and others remained active when they should have been resting. Ultimately, these factors cause MuSCs to die from iron toxicity.

Ferroptosis and iron accumulation within the brain are connected to neurodegenerative diseases.

"We have a paradox where when you age, an iron deficit leads to anemia and higher inflammation. But you also have chronic accumulation of iron inside other tissues," says Blanc, whose team is conducting additional research on this topic.

Gene Signature Helps Personalize Radiation Doses for Prostate Cancer

Two randomized clinical trials showed that analyzing a gene expression signature in tumors may help doctors customize radiation treatment for prostate cancer patients, improving outcomes while avoiding side effects.

The gene expression signature – PrOstate Radiation Therapy Outcomes Score (PORTOS) – was first reported in 2016 by a research team led by Shuang (George) Zhao, MD, assistant professor, Department of Human Oncology, University of Wisconsin School of Medicine and Public Health. Researchers used a machine learning model to analyze gene expression patterns in tumors and correlated data



with patients' responses to radiation therapy. They identified 24 genes which, when combined, predicted a response to radiation, resulting in PORTOS.

Oncologists may treat prostate cancer with surgery or radiation therapy; the latter

is a life-saving treatment, but it can cause toxic effects.

Zhao says the ability to determine the radiation level based on an individual's tumor, rather than a population average, means you can "potentially improve outcomes or reduce the side

effects for specific groups of patients."

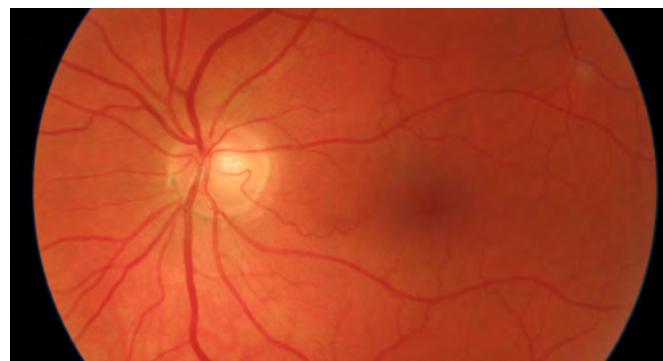
The results, published in *Annals of Oncology*, indicate PORTOS can help oncologists tailor radiotherapy strategies for prostate cancer patients, making it the first tool of its kind to be validated in randomized clinical trials. In two large, Phase III clinical trials, researchers examined tumor samples to determine the outcomes of higher or lower doses of radiation to treat prostate cancer. Both trials showed that patients with high PORTOS benefited from higher doses of radiation and patients with low PORTOS did not. The team plans further investigation.

Detecting Diabetic Eye Disease Early Helps Prevent Vision Loss

A Mauston, Wisconsin, resident knew something was wrong when his vision became blurry throughout a day-long visit to Madison. An eye doctor helped discover the man's previously unknown diabetes. In 2016, he started diabetes treatment and regular eye screenings at Mile Bluff Medical Center, a UW Health affiliate in Mauston.

Diabetes remains the top cause of blindness in working-age U.S. adults, but fewer than 70,000 Wisconsinites with diabetes receive yearly eye screening. Early diagnosis of diabetic eye disease substantially decreases risks.

Researchers in the University of Wisconsin School of Medicine and Public Health's Department of Ophthalmology and Visual



Sciences aim to help. Among them is Associate Professor Yao Liu, MD, MS, who started a screening program at the Mile Bluff Medical Center, an "area of great need." She worked with the center's chief medical officer, Timothy Bjelland, DO, to help primary care personnel learn to take retina photographs during routine diabetes checkups

and send the images to UW Health eye specialists, who recommend follow-up care when they detect signs of vision-threatening disease. This teleophthalmology technology is critical for patients with limited access to eye care specialists. More than 2,000 patients have received eye care through Mile Bluff's program.

Liu has conducted research to study the impact, barriers, and opportunities related to teleophthalmology. She developed a coaching program to help primary care clinics better integrate diabetic eye screening into their workflow. She also set up a Diabetes Patient Advisory Council in Mauston to partner with the community to increase the effectiveness of these programs.

In 2021, Liu launched a National Eye Institute-funded clinical trial at 12 other rural clinics around the United States to determine whether the success in Mauston could be replicated. Her team now works with six health care systems in Wisconsin and seven health care systems in other states.

Quarterly Magazine: Linking an Extended Community While Evolving

I like words, individually and collectively, in poetry and song and essay, in journalism and scientific tomes, and in sermons and debates. I am intrigued by etymology – the origin stories of these building blocks. Words have the power to evoke images, thoughts, emotions, and remembrances. Mind you, words, as ignited by a pen, are “mightier than the sword” (Edward Bulwer-Lytton. 1839. *Richelieu; Or the Conspiracy*). Artificial intelligence – on the cusp of surpassing our own – is based on large language models, a collective of words. And “With the right words, you can change the world” (E.B. White. 1952. *Charlotte’s Web*).

I also like stories and the sheer power of stories. In the words of Samwise Gamgee, “Those were the stories that stayed with you. That meant something, even if you were too small to understand why. But I think, Mr. Frodo, I do understand” (J.R.R. Tolkien. 1954. *The Two Towers*). The poet will reflect on the permanence of narrative and say that “Death steals everything except our stories” (Jim Harrison. 2009. *Larson’s Holstein Bull, In Search of Small Gods*). The novelist may quip, “But this too is true: stories can save us ... in a story, which is a kind of dreaming, the dead sometimes smile and sit up and return to the world” (Tim O’Brien. 1990. *The Things They Carried*). And they can uplift us, “Stories are light. Light is precious in a world so dark” (Kate DeCamillo. 2003. *The Tale of Despereaux*). Powerful stuff.

We can dissect and disarticulate *Quarterly* magazine and reduce it to merely a static collection of words tied together into stories, augmented by images, placed onto a glossy paper, and distributed to several thousand doorsteps four times a year. But that belies the true nature of the *Quarterly*, a

dynamic and living entity, rich in tradition, and linking an extended community bound together by the University of Wisconsin School of Medicine and Public Health and the Wisconsin Medical Alumni Association (WMAA). And as a dynamic and living thing, evolution is a fundamental and unavoidable feature.

Here is today’s main story: Budget challenges are emerging at the school, and as a result, changes are in store for *Quarterly*. Some things, however, will not change. This magazine is centered on our school’s medical alumni, who will receive a combination of *Quarterly* in the mail and e-newsletters in their inboxes.

In the spirit of good stewardship, and following careful, thoughtful discussions with the WMAA Board of Directors and Dean Nita Ahuja, MD, MBA, the frequency and format of *Quarterly* has begun a transition from four printed issues annually to three this calendar year. Beginning in 2026, we will adjust to two printed issues per year: spring and fall, complemented with WMAA’s e-newsletter, which is produced bimonthly. In addition, we will introduce a modest redesign of the print magazine in spring 2026 to enhance readability and ensure the print publication meets accessibility standards.

Although the format is changing, we remain steadfast in our commitment to connecting with alumni and donors while maintaining the historic fidelity and storytelling that define *Quarterly*. As we evolve, we will seek your feedback and guidance to ensure the magazine continues to reflect your interests and needs.

This brings me back to the etymology of words, six words to be exact: evolve, fiscal, stewardship, transition, complement, and fidelity. **Evolve** emerged in the early 1600s as “an

opening of what was rolled up.” **Fiscal** comes from the Latin word “fiscus,” meaning “basket,” which in turn referred to the emperor’s treasury or public treasury. **Stewardship** comes from the Old English, meaning “house-keeper” combined with the suffix “-ship” denoting the office or skill of a steward.

Transition combines Latin roots of *trans* (“across”) and *ire* (“to go”).

Complement comes from the Latin “complēmentum,” meaning “that which fills up or completes.” **Fidelity** entered English in the 15th century meaning “faithfulness” or “trustiness.”

And drawing these words into a final story: *Quarterly* is evolving to meet current and future fiscal challenges. As good stewards at the school, we will face these challenges by transitioning to fewer printed issues, complemented with easily accessible digital content, while maintaining our long-established fidelity to the purpose, history, and people of the UW School of Medicine and Public Health.

We look forward to your responses and invite your feedback (email quarterly@med.wisc.edu) as we move into this new era.



JONATHAN TEMTE, MD '87, PhD

Associate dean for public health and community engagement, University of Wisconsin School of Medicine and Public Health; member, *Quarterly* Editorial Board



I Know YOU

... Or do I?

Hint about photo above:
The man on the right has received at least five teaching awards.

If you think you can identify the person in the photograph at left, 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*.

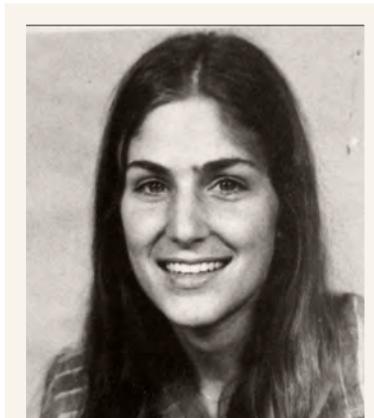
About last issue's photo:

Al B. Benson, III, MD (PG '79, '84), won the drawing and will receive a gift from the Wisconsin Medical Alumni Association!

In the last issue of *Quarterly*, 17 people identified Molly Carnes, MD, MS '01 (PG '81), emerita professor of medicine, University of Wisconsin School of Medicine and Public Health (SMPH). She retired after more than three decades at the school.

When she earned tenure in 1990, Carnes was the only woman tenured physician in the Department of Medicine. Setting out to change that, Carnes devoted her career to developing programs aimed at recruiting and retaining women in science and medicine; studying women's health and gender differences; and integrating research, education, and clinical care.

Carnes earned her medical degree from the State University of New York at Buffalo and completed an internal



medicine residency and geriatrics and gerontology fellowship at UW Health, as well as a master's degree in epidemiology from the SMPH.

At the SMPH, she helped establish the Geriatric Research, Education, and Clinical Center, which is home to internationally renowned research programs on aging, Alzheimer's disease, and the health of older women; and the UW Center for Women's Health Research, among the first 12 federally funded National Centers of Excellence in Women's Health Research. At UW-Madison,

with colleagues and a substantial federal grant, she co-founded the Women in Science and Engineering Leadership Institute.

Lynda Siewert, MD '94 (PG '97), wrote, "Dr. Molly Carnes was a pioneer for female physicians and was also part of a physician-physician partnership with Dr. Bennett Vogelman." Carnes is married to Bennett Vogelman, MD (PG '81, '85), emeritus professor of medicine, who directed the Internal Medicine Residency Program for 31 years.

Paul Grossberg, MD (PG '78), stated, "Dr. Carnes has been an extraordinary physician, teacher, researcher, and role model whose academic work has helped make the world – not just the medical world – a better place. Tirelessly breaking through biases and modestly presenting her findings and the evidence, Dr. Carnes truly has made unique and enduring contributions to UW-Madison and the UW School of Medicine and Public Health."

PLEASE 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.

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HELP SMOOTH THEIR WAY

The path to becoming a doctor is never easy — but no Badger walks it alone.

At the University of Wisconsin School of Medicine and Public Health, the bond between alumni and students is a powerful, lifelong connection. It is a community built on shared experiences, resilience, and the commitment to lift others as they climb.

When you give to the Wisconsin Medical Alumni Association (WMAA) Fund, you strengthen this lifeline — and the WMAA is here to help our alumni smooth the path for the next generation. Your support fuels mentoring programs, career networking, student engagement, and other programs that help today's students thrive in school and in life.

Please make your gift to the WMAA Fund using the enclosed envelope or by scanning this QR code or going to supportuw.org/giveto/Quarterly25



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