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By Erin Post

The Greatest Good
A sharp mind and a love of learning brought Robert Larner, M.D.’42, from the Old North End to UVM, and opened the way to a successful practice across the continent.

In his own words, Dr. Larner tells of his upbringing and the birth of the loan and scholarship fund that bears his name.

By Edward Neuert

Ideas with a Future
Discoveries at the College of Medicine don’t just stay at the College. With careful cultivation and guidance through the complicated patent and fundraising process, new technologies are transferred to the wider world to improve health care and spark new businesses.

By Jennifer Nachbur

Scholarship Support Makes It Possible
From the Vermont Integrated Curriculum to “Dr. Moo,” our first-year medical students this fall will find UVM to be the perfect match for their dreams of becoming physicians. Your help makes those dreams come true.

By giving a financial leg up to today’s talented, motivated, and diverse students, generous donors like you carry on the legacy of giving that characterizes UVM and help ensure that today’s students get the same high quality education you received with less debt than they would otherwise incur.

To encourage even more scholarship support, the Medical Alumni Association will provide a 50 percent match for new gifts of $50,000 to $100,000 that support endowed scholarships. Now that’s a match!

For more information about how you can support medical students today, contact:

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WebXtras in this issue:
• 2014 UVM Research Report
• The Given Building 50 years ago
• Full Match Day coverage
• Graduation 2014
• New student Schweitzer Fellows projects
• Larner Legacy video
• Dallas Branching in his own words

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That feeling was underscored for me by a message sent by 50th anniversary reunion attendee John Gould, M.D.’64, a few days after he returned home. Dr. Gould wrote about how meaningful it was to catch up with his old friends and classmates, and also to reflect on the mix of people from across six decades made for a wonderful weekend of memories and learning about the state of the College today.

From the Dean

Seeing alumni of the College of Medicine return to campus for medical reunion is always enjoyable, but I must say that this summer’s reunion seemed to me to hit a high point for enthusiasm for the seven reunions I’ve been fortunate to attend. Something about the mix of people from across six decades made for a wonderful weekend of memories and learning about the state of the College today.

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Reunion was the culmination of what was a truly successful year for the College in so many ways. Our Class of 2014 scored a perfect 100 percent success rate in the match for their residencies. Our researchers secured an impressive amount of funding in an increasingly competitive environment. And our faculty continue to refine and improve the education of our students; the latest evidence of this will be seen this fall in the new Larner Classroom, where active learning by groups large and small will better prepare students for the clinical teams they join in clerkships.

This issue of Vermont Medicine showcases several of our students in their clerkships at our academic medical center partner. I’m pleased that, later this fall, the strength of that affiliation and shared mission will be recognized with the renaming of Fletcher Allen Health Care as the University of Vermont Health Network.

Fletcher Allen Health Care to Change Name This Fall

Fletcher Allen Partners and The University of Vermont announced June 19 that Fletcher Allen Partners is changing its name to The University of Vermont Health Network, with the names of the affiliated hospital organizations also changing. Fletcher Allen Health Care will be renamed The University of Vermont Medical Center. Plattsburgh, N.Y.’s CVPH Medical Center will adopt the name “Champlain Valley Physicians Hospital” and will use that name together with “The University of Vermont Health Network” in all communications to express its participation in the Network. Barre, Vt.-based Central Vermont Medical Center and Elizabethtown (N.Y.) Community Hospital will use their names with “The University of Vermont Health Network” in the same manner to express their affiliation in all communications.

This change — planned to take effect this fall — aims to signal to people in the region that the hospitals are part of an top academic health network, aligned with one of the top academic medical centers in the country.

“This new name reflects our teamwork — today and for the months and years to come,” says John Brumsted, M.D., president and chief executive officer, Fletcher Allen Partners and Fletcher Allen Health Care.

Norotsky Appointed Physician Leader and Chair of Surgery

Longtime faculty member and College of Medicine alumnus Mitchell Norotsky, M.D.’89, interim chair of the Department of Surgery, was appointed health care service leader and chair of the Department of Surgery. Dean Rick Morin and Fletcher Allen President and CEO John R. Brumsted, M.D., announced the appointment in mid-July.

Norotsky is an associate professor of surgery who has served as interim chair of the department since March 2014. After receiving his medical degree he completed his residency in general surgery at the former Medical Center Hospital of Vermont, followed by a fellowship in cardiothoracic surgery at Yale-New Haven Hospital. Before joining the faculty at UVM/Fletcher Allen in October 1997, he held a position on the medical staff at St. Vincent’s Medical Center in New York. He served as president of the Fletcher Allen Medical Staff and was associate vice president of operations for the UVM Medical Group from 2007 to 2011. He also served on the Board of Directors for Vermont Managed Care.

“Dr. Norotsky is an exemplary teacher of medical students and residents and we are grateful for his willingness to serve in this important role at our academic medical center,” says Morin. A national search for physician leader and chair will begin in approximately 18 months. Norotsky will serve until that search is completed.

Radiology Leadership Transition Announced

Dean Frederick Morin, M.D., and Fletcher Allen CEO John Brumsted, M.D., announced in mid-June that Steven Braff, M.D., was stepping down from his role as UVM chair of radiology and as leader of the Radiology Health Care Service at Fletcher Allen. Kristen DeStigter, M.D., the John F. and Kathryn F. Tamps Green and Gold Professor and vice chair of radiology at UVM/Fletcher Allen, has agreed to serve as the department’s interim chair and physician leader.

Braff served as chair and physician leader of radiology since 2004. DeStigter joined the UVM/Fletcher Allen faculty in 2001 as assistant professor and attending radiologist and was named vice chair in 2004 and promoted to full professor in 2013. Inducted as a fellow in the American College of Radiology (ACR) in 2013, she has served as president of the Vermont Chapter of the ACR, serves on the ACR Council Steering Committee, and is co-founder of Imaging the World, a nonprofit organization that developed and uses a new sustainable model for ultrasound imaging, making basic life-saving diagnosis accessible in the poorest regions of the world. She holds a medical degree from Case Western Reserve University School of Medicine and completed a residency in diagnostic radiology and a body imaging fellowship at University Hospitals of Cleveland, Ohio.

“Collective decision will enhance the local, regional and national reputations and quality of all of the entities that will bear The University of Vermont name, and makes more visible to the general public and to patients the important work that the University and these hospitals are doing together,” said UVM President Tom Sullivan.

Fletcher Allen Health Care, shown here, will be renamed The University of Vermont Medical Center in October.

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College of Medicine Faculty Tapped for Leadership Roles

In mid-May, Cynthia Forehand, Ph.D., professor of neurological sciences at the College of Medicine, was appointed dean of the University’s Graduate College. A member of the faculty since 1987, Forehand served for the past year as the Graduate College’s interim dean, and served as its associate dean from 2010 until 2013. UVM President Tom Sullivan and Provost David Rosowsky noted that Forehand has taken significant steps to improve and streamline policies and procedures related to graduate education and support in her role as interim dean. She also has been an advocate for enhancing interdisciplinary graduate programs and other student opportunities under the University’s new Incentive Based Budgeting model.

Forehand completed her Ph.D. in neurobiology at the University of North Carolina Chapel Hill, followed by a postdoctoral fellowship at Washington University in St. Louis. In June, Richard Galbraith, M.D., Ph.D., was appointed vice president for research at UVM. Galbraith was most recently senior associate dean for research and professor of medicine at the College of Medicine. Galbraith, who joined the UVM/Fletcher Allen faculty in 1993 as professor of medicine, program director of the General Clinical Research Center, and associate dean for patient-oriented research, has served as director of the Center for Clinical and Translational Science at UVM since 2007. In 2012, he was named senior associate dean for research at the College, and was officially appointed senior associate dean for research in February 2014. Galbraith received his M.D. and completed training as an internist at King’s College, London. He received a multidisciplinary Ph.D in molecular and cellular biology from the Medical University of South Carolina and served on its faculty prior to relocating to Rockefeller University in New York. There he served as the director of the General Clinical Research Center and Rockefeller University Hospital. Galbraith replaces John N. Evans, Ph.D., professor of molecular physiology and biophysics and former dean of the College of Medicine, who served as interim vice president for research since August 2013, and who retired June 30.

Russell Tracy, Ph.D., professor of pathology and biochemistry and director of the Laboratory for Clinical Biochemistry Research, has taken on the senior associate dean for research position on an interim basis. Tracy served as the inaugural senior associate dean for research from 2001 to 2009, when he stepped down to focus exclusively on his science. He currently serves as vice chair for research in the department of pathology, as director of translational technologies for the Center for Clinical and Translational Sciences, and as chair of the Faculty Strategic Planning Committee.

Gift Establishes Professorship and First Full-Tuition Scholarship

Virginia Donaldson, M.D. ’51 was a pioneer woman in medicine, and her groundbreaking contributions continue even after her 2013 death with her bequest to the College of Medicine that establishes the first full-tuition scholarship at the school, as well as a new professorship in her name.

Dr. Donaldson was one of only three female graduates in her medical school class. She went on to a distinguished career as a prolific and accomplished pediatric hematologist who was particularly known for her work in identifying a key, inherited deficiency involved in the cause of hereditary angioneurotic edema — a potentially fatal disease that causes swelling of the face and airways. At the time of her death she was professor emerita of pediatrics and medicine at the University of Rochester (N.Y.) School of Medicine, where she was chief resident from 1982 to 1983. Prior to joining the UVM/Fletcher Allen faculty in 1993, she was a clinician-educator at Geisinger Medical Center in Danville, Pa., and Thomas Jefferson Medical College.

Levine Appointed Associate Dean for Graduate Medical Education

This March, Mark A. Levine, M.D., professor of medicine, was appointed associate dean for graduate medical education at the College and designated institutional official at Fletcher Allen Health Care. Levine has served as director of the Internal Medicine Residency Program since 1992 and is also associate chair for education in the Department of Medicine. He succeeds David Adams, M.D., professor and interim chair of anesthesiology. During his tenure at UVM/Fletcher Allen, Levine has played a leadership role in transforming the internal medicine residency into a curriculum-driven competency-focused training program, instituting a research component into residency, and creating a competency-based required Acting Internship in Medicine course for fourth-year medical students. In 2003, he was honored with the E.J. Amidon Award for Teaching Excellence in the Department of Medicine for the second time, and in 2003 was named Clinical Teacher of the Year and was also elected to the Alpha Omega Alpha Honor Society.

King Receives Clark Award

Associate Professor of Medicine Patricia King, M.D. ’96, Ph.D., received the John H. Clark, M.D. Leadership Award at the Federation of State Medical Boards Annual Meeting in Denver, Colo., in April. The award recognizes outstanding and exemplary leadership, commitment and contributions in advancing the public good at the state medical board level. King has been a member of the Vermont Medical Practice Board since 2003, and has served as chair of the board since 2010.

ATS Recognizes Stapleton’s Research

Renee Stapleton, M.D., Ph.D., assistant professor of medicine in the division of pulmonary and critical care medicine and a critical care specialist at Fletcher Allen Health Care, received the Alan Jass Wight Award for Outstanding Scholarship at the American Thoracic Society’s (ATS) annual meeting in San Diego, Calif., in May. The award recognizes Stapleton’s role as a leading researcher in clinical studies in the intensive care unit and her related publications in prominent national medical journals, including the New England Journal of Medicine.

New Change for Pathology Department

In late June, the University approved a request to change the name of the Department of Pathology at the College of Medicine to the Department of Pathology and Laboratory Medicine. The change was announced to the College community by department chair Debra G.B. Leonard, M.D., Ph.D. “We now have one name for our department across all our locations,” noted Leonard. “This name change was one of the steps planned for our strategic goal of moving toward one Department.”
First Presented with Top Award in Pediatrics

The Federation of Pediatric Organizations (FOPO), during the Opening General Session of the Pediatric Academic Societies Meeting in Vancouver, Canada in May, presented Lewis R. First, M.D., M.S., F.A.A.P., professor and chair of pediatrics at the College of Medicine and chief of pediatrics at Vermont Children’s Hospital at Fletcher Allen Health Care, with the 2014 Joseph W. St. Germe, Jr. Leadership Award — considered the highest honor in the field of pediatrics.

FOPO, a coalition of the nation’s seven major pediatric organizations, recognizes one physician per year for broad and sustained contributions to pediatrics that have had or will have a major impact on child health. Most important, the award recognizes those individuals who have “created a future.” “Dr. First is the perfect recipient,” said Theodore Socolitch, M.D., executive director of FOPO and professor of pediatrics, vice-chair for education and program director of the pediatric residency training program at Boston Children’s Hospital. “He is an outstanding educator and clinician, an influential national leader for educational policy and professional certification, editor of the highest impact pediatric peer-reviewed journal and one of the top-selling pediatric textbooks.”

Editor-in-chief of the journal Pediatrics since 2009 (the peer-reviewed journal of the American Academy of Pediatrics) First is currently in his second term as chair of the executive board of the National Board of Medical Examiners, also serving as chair of the Education Committee of the Association of Medical School Pediatric Department Chairs, and is co-editor of the 22nd Edition of Rudolph’s Textbook of Pediatrics. In addition, for more than 17 years, he has offered medical and developmental advice to parents through his “First with Kids” weekly radio and television segments and Vermont community newspaper columns. First, who joined UVM/Fletcher Allen in 1994, is currently one of the longest-standing pediatric department chairs in the U.S.

Greenblatt Study Provides Clearer Picture of Cancer Risk

Marc Greenblatt, M.D., associate professor of medicine, Fletcher Allen oncologist, and faculty member at the Vermont Cancer Center’s Familial Cancer Program, has co-led a collaborative global effort to interpret genetic data related to hereditary colon cancer. The team’s findings published in Nature Genetics, will both allow doctors to access publicly-available data to more effectively interpret risks and give patients a more accurate picture of familial risk for colon and other cancers. “The team of researchers, working through the International Society for Gastrointestinal Hereditary Cancers, pooled the knowledge and collective data of more than 45 researchers and clinicians across the world.”

Teuscher and Colleagues Identify Lyme Arthritis Susceptibility Gene

A genetic “hunt” begun nearly a quarter century ago by UVM immunogeneticist Cory Teuscher, Ph.D., and University of Utah microbiologist Jane Wei, Ph.D., has led to a “buried treasure” in the field of Lyme disease research: confirmation that a hypomorphic allele of the beta-gamma-aminobutyric acid (GABA) gene is independently responsible for more severe forms of Lyme arthritis in a mouse model. These findings were published in December in the online-first edition of the Journal of Clinical Investigation and are also featured in the January 2014 issue of JCI Impact. The researchers found that six different genetic regions were linked to disease severity, and through an iterative process of physical mapping using congenic mice, proceeded to identify the principal gene responsible for more severe arthritis in their model.

Garavan Study ID’s Predictors for Teen Binge-Drinking

In a study that appeared in the journal Nature in July, senior author Hugh Garavan, Ph.D., UVM associate professor of psychiatry and his fellow Neuroscientists reported on findings that indicated predicting teenage binge-drinking is possible. Their conclusion is the result of the largest longitudinal adolescent brain imaging study to date. First author on the study is Robert Whelan, Ph.D., a former UVM postdoctoral fellow in psychiatry and current lecturer at University College Dublin. The researchers find that a number of factors — genetics, education level and about 40 different variables — can help scientists predict with about 70 percent accuracy which teens will become binge drinkers.
One hundred percent of the Class of 2014 matched to one of their choices this year—a significant achievement in an increasingly competitive residency landscape.
New MPH Program Announced

A new Master of Public Health program, a collaborative graduate program between the College of the Medicine, the Graduate College at UVM, and Continuing and Distance Education, was announced this spring. The new 42-credit master’s degree program, the first graduate public health program in Vermont, was approved by the UVM Board of Trustees in February.

“UVM’s leadership in interdisciplinary and health care education, along with our close affiliation with Fletcher Allen Health Care, make the University a strong choice for public health students,” said Jan K. Carpenter, M.D., M.P.H., associate dean for public health at the College of Medicine and program director for public health graduate programs. “Our faculty have depth of knowledge and experience in public health, and this new graduate program offered online will appeal to a diverse cohort of public health students from around the globe—including medical and nursing students, researchers and health care professionals.”

Graduate students accepted into the program, which starts this fall, can complete the degree requirements within two years as a full-time student, and five years as a part-time student. The program is designed for medical and graduate students, health professionals in all disciplines, public health professionals, researchers, and others who wish to increase their knowledge in public health.

Paradiso to Receive Distinguished Graduate Alumni Award

The UVM Medical Alumni Association’s Graduate Alumni Awards Committee has selected Peter R. Paradiso, Ph.D.’77 to receive the 2014 UVM Medical Alumni Association’s Distinguished Graduate Alumni Award. This award is presented to alumni from the College of Medicine, Ph.D. or M.S. programs who have demonstrated outstanding achievement in basic, clinical or applied research, education, industry, public service/humanitarianism, and/ or outstanding commitment to the College of Medicine community.

Dr. Paradiso recently retired as Vice President, new business and scientific affairs for Pfizer Vaccines, a Division of Pfizer Inc. Prior to this position, he was responsible for global scientific affairs and strategic planning within the vaccine research and development group and for commercial oversight of products in development. He has worked in the field of vaccine development for the past 28 years. Dr. Paradiso has published broadly in the field of pediatric vaccines, especially in the areas of glycoconjugates, combination vaccines and respiratory viral vaccines. He has been involved in the development and the global registration of many major vaccines.

Prior to his graduate degree, he earned a B.S. in chemistry from St. Lawrence University. Dr. Paradiso will formally receive his award at a ceremony in June.

Class of 2016’s Chavez Honored with AMA Foundation Minority Scholars Award

The American Medical Association (AMA) Foundation Honored College of Medicine student Karla Chavez with a Minority Scholars Award at the AMA’s Annual Meeting in Chicago, Ill., on June 7. Chavez, a member of the College’s Class of 2016, was one of only ten medical students in the country selected to receive this award. The AMA Minority Scholars Award recognizes academic achievement and commitment to the elimination of health care disparities. Scholars receive a $10,000 scholarship.

Chavez, who is originally from Lima, Peru, received her bachelor’s degree in public health with honors distinction from Lima University. As an MPH student, she organized a 200-hour service project designed to have a demonstrable impact on that need. The projects address not only clinical issues, but also the social determinants of health. The 2014–15 Schweitzer Fellows “teams” are: Lisa Cipri and Matthew Shear, Jia Xin “Jessica” Huang and Alejandro Velez; Mary Lodulous and Laura Leonard; Christopher Mayhew and Carl Nunzio; Erin Pichitinos; Amy Schomer and Syed “Samin” Shabah.

2014–15 Schweitzer Fellows Announced

Eleven members of the College’s Class of 2015 have been named 2014–15 fellows of the New Hampshire/Vermont Schweitzer Fellows Program. As Schweitzer Fellows, students usually work in teams of two, and work in partnership with community-based organizations to identify an unmet health need and then carry out a year-long, 200-hour service project designed to have significantly lower in recently treated breast cancer patients, potentially making them more susceptible to cardiovascular risk. Among the study’s co-authors were Susan Lakoski, M.D., M.S., UVM assistant professor of medicine and director of the Cardiovascular Prevention Program for Cancer Patients, and Kim Dittus, M.D., Ph.D., assistant professor of medicine.

Amy Schumer and Mayhew

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Though he is now a physician, beginning a demanding surgery residency this summer, ADAM ACKERMAN, M.D. ’14, had neither surgery nor science as a part of his professional repertoire less than a decade ago. A jazz and classical composer trained at Boston’s Berklee College of Music and New England Conservatory, Ackerman composed a special processional March which replaced the traditional “Pomp and Circumstance,” at the start of the College of Medicine Class of 2014’s Commencement Ceremony on May 18 in Ira Allen Chapel.

A total of 199 STUDENTS received medical degrees this year. The new doctors, who have headed into over 20 specialties (see the Match List on page 9), selected LEWIS FIRST, M.D., UVM professor and chair of pediatrics, Vermont Children’s Hospital chief, and editor-in-chief of the Journal Pediatrics, as their Commencement speaker.
On any given day at clinical affiliate Danbury Hospital, clerkship students from the UVM College of Medicine generally agree: It can sometimes feel like the United Nations. When David Harari ’15 ticks off the number of different nationalities represented by his internal medicine team, he needs two hands to do it.

“India, Jamaica, Taiwan, Sri Lanka, Argentina, Sweden: It’s definitely an eclectic group around here,” he says. “There’s a freshness to the place; it’s nice to have that diversity.”

This cultural mix also leads to impromptu teaching moments, says Laurel Wickberg ’15. One day as she chatted with another student about malaria and sleuthed out sources for more information, a resident sitting nearby chimed in with first-hand information about symptoms and treatment options. The resident explained that she was from Nigeria and had battled the disease herself, as did members of her family.

“Malaria is a huge problem in many parts of the world,” Wickberg says. “We were able to learn more from someone who has seen it.”

The diverse Danbury community is one of four locations where College of Medicine students expand their experience practicing medicine — and interacting with patients. After completing the Foundations level of the Vermont Integrated Curriculum, students enter the clinical clerkship level, comprising a series of six or seven-week long rotations at the clinical sites: Family Medicine, Inpatient Internal Medicine, Outpatient Medicine, and the Community Health Center.

CLERKSHIP STUDENTS FIND A ROBUST AND DIVERSE LEARNING EXPERIENCE AT CLINICAL AFFILIATE DANBURY HOSPITAL

UVM medical student Michael Ma ’15 listens to a patient at Seifert & Ford Family Community Health Center in Danbury during his outpatient medicine clerkship. With him is Assistant Professor of Medicine Dino Messina, M.D.
“Greater Danbury is a melting pot of many cultures and socio-economic backgrounds,” says John M. Murphy, M.D., president and CEO of the WCHN. “As a result, it is an extraordinary place to live, work and learn medicine. Our relationship with the University of Vermont promotes a prolific learning environment for students and clinical staff that will continue to serve the diverse needs of our community in important and innovative ways.”

“UVM is a top-notch medical school,” says Ramtin Ahmadi, M.D., M.P.H., chair of the Department of Medical Education and Research at Danbury Hospital/WCHN, noting in particular the “quality of the curriculum and quality of students,” as well as the College’s commitment to primary care and leading-edge research. Designation of a branch campus involves layers of careful planning and review and accreditation by the Liaison Committee on Medical Education (LCME), but the process is moving forward. An 8,000-square-foot clinical simulation lab — designed by the same architect who created the UVM/Fletcher Allen sim lab, opened this spring at Danbury. The hospital is also creating a standardized patient program, again modeled after the UVM on-campus program that has been part of the medical curriculum for the last decade.

The goal is a “seamless transfer of the educational experience,” Ahmadi says. The global health program, spearheaded by Majid Sadigh, M.D., site director and an infectious disease specialist and director of global health at Danbury Hospital/WCHN, brings the two institutions into even closer collaboration. At the foundation of all of these developments are the experiences students have while studying and working in Danbury.

“Greater Danbury is a melding of two much newer relationships with St. Mary’s Medical Center in West Palm Beach, Fla.; and Eastern Maine Medical Center in Bangor allow for clerkship training as well. The 371-bed Danbury Hospital was established as a clinical affiliate in 2010. Danbury Hospital, together with New Milford Hospital and Norwalk Hospital, form the Western Connecticut Health Network (WCHN), the third largest hospital network in the state. College of Medicine students doing a clerkship in Danbury get a sense of what it’s like to practice medicine in a more urban setting, about a two-hour train ride to New York City. The city’s roughly 80,000 residents reflect both socioeconomic and ethnic diversity. About 25 percent of the population is Hispanic, with just over seven percent identified as Black or African American and six percent as Asian, according to the recent census data. Forty-two languages are spoken in Danbury public schools. About 10 percent of residents live below the poverty line, and 25 percent of the population has public health insurance. Nineteen percent of residents have no insurance at all.

“GREATER DANBURY... IS AN EXTRAORDINARY PLACE TO LIVE, WORK, AND LEARN MEDICINE.”
— John M. Murphy, M.D., President and CEO
of Western Connecticut Health Network

Medical, Neurology/Outpatient Internal Medicine, Obstetrics & Gynecology, Pediatrics, Psychiatry, and Surgery. In between clerkships are Bridge Weeks, where students return to Vermont for skills assessments and for sessions that focus on topics including nutrition, pharmacology, palliative care, and health care finance.

The clerkship year is a transitional time for students, says Tania Bertsch, M.D., associate dean for clinical education at the College of Medicine. “Students work in small teams, and they continue to develop their professional identity,” she says. “They have the opportunity to see different practice styles and specialties,” with one goal for the year being the narrowing down of a specialty selection. After clerkships, residency interviews begin, culminating in Match Day, when medical students across the country find out where they will be headed for the next phase of their medical education.

All students perform clerkships at the College’s academic medical center partner Fletcher Allen Health Care in Burlington, which has had a teaching relationship with UVM stretching back to the founding of the Mary Fletcher Hospital in the 19th century. Two much newer relationships with St. Mary’s Medical Center in West Palm Beach, Fla.; and Eastern Maine Medical Center in Bangor allow for clerkship training as well. The 371-bed Danbury Hospital was established as a clinical affiliate in 2010. Danbury Hospital, together with New Milford Hospital and Norwalk Hospital, form the Western Connecticut Health Network (WCHN), the third largest hospital network in the state. College of Medicine students doing a clerkship in Danbury get a sense of what it’s like to practice medicine in a more urban setting, about a two-hour train ride to New York City. The city’s roughly 80,000 residents reflect both socioeconomic and ethnic diversity. About 25 percent of the population is Hispanic, with just over seven percent identified as Black or African American and six percent as Asian, according to the recent census data. Forty-two languages are spoken in Danbury public schools. About 10 percent of residents live below the poverty line, and 25 percent of the population has public health insurance. Nineteen percent of residents have no insurance at all.
A DAY IN THE LIFE

The Seifert and Ford Family Community Health Clinic at 70 Main Street sits across the street from the Fairfield County Courthouse and next to the Old Fairfield County Jail (an 1870s era building now used for senior housing and a small museum) in the heart of Danbury’s downtown. Once a thriving industrial area spurred by the railroad and over 30 hat factories, earning Danbury the nickname “Hat Capital of the World” in the 1880s, the city went through tough times after factories, earning Danbury the nickname “The Seifert and Ford Family Community Health Clinic in recent years, although retailers still use for senior housing and a small museum) in the heart of Danbury’s downtown. Once a thriving industrial area spurred by the railroad and over 30 hat factories, earning Danbury the nickname “Hat Capital of the World” in the 1880s, the city went through tough times after factories, earning Danbury the nickname “Danbury”.

changes the way you are medicine,” he says, in part because the complexity of patients’ lives is brought into such stark relief. Culture, religion, financial resources: They all contribute to a person’s health and well-being. Clinics devoted to specific topics — including rheumatology, HIV, dermatology and emergency medicine — are also part of the outpatient experience and give students exposure to a variety of specialties.

In addition to outpatient/medicine, Ma completed his family medicine clerkship at Brookfield Family Medicine, a practice affiliated with Danbury Hospital located in a nearby town. “We saw pretty much everything,” he says. “It was the front lines.” Ma was also at the forefront of meeting local public health needs. Every Family Medicine clerkship student completes a community project in collaboration with a local agency or non-profit. Ma worked on a project focused on smoking cessation. Other students have worked on childhood obesity initiatives, diabetes education, and other outreach.

For Laurel Wickberg, ’15, her clerkship year has provided a chance to experience how different hospitals are managed. She’s spent several rotations in Danbury — including neurology/ outpatient, internal medicine and surgery — and through this extended time there has gotten to know more about the values inherent to the institution. This has been helpful as she starts to consider residency programs for pediatrics.

“It’s giving me insight into what I want from a program,” she says. “What does it look like when residents are happy?”

Some insights may be less lofty, but equally useful. Soon after starting his internal medicine clerkship in Danbury, David Harari ’15 found the importance of comfort zones. He often starts his day around 7 a.m., with his first task to check in on the two to three patients he is assigned. After Morning Report, he meets up with his team to start patient rounds, which may take anywhere from a few hours to the bulk of the day. The comfortable shoes become important here as the team — which includes several medical students, interns, and an attending physician — does much of its consulting walking down the hallway or gathered around the bed in a patient’s room. But it’s during this time that academic knowledge coalesces with clinical cases.

“There are many ‘on-the-job’ teaching moments,” he says. Sometimes this means looking up information, chiming in to answer questions, or presenting his patients to the team. And then there are other opportunities for learning, including EKG sessions, virtual conferences with UVM faculty in Burlington, and many other conferences and activities. His team is on call every fifth day, which means a longer day and admitting privileges. The pace for the six-week clerkship is brisk, but rewarding.

“The amount of teaching built into the program is intensive,” he says, “and it magnifies what we do when we see our patients. There’s a smooth transition between didactic and clinical.”

And residents at Danbury are exceptional teachers and a welcoming presence, adds Wickberg.

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“(Danbury residents) really accept us as part of the team and they make us feel at home,” she says. “That makes all the difference in the world.”

GLOBAL HEALTH & FUTURE COLLABORATIONS

During a recent global health presentation at Danbury Hospital, Tamar Goldberg ’15 had the chance to meet her future “family.” Visiting from Uganda were Sam Luboga, M.Med., Ph.D., and his wife, Christine, host family and mentors to UVM med students who visit there for a global health elective. Goldberg, in Danbury at the time for the obstetrics-gynecology clerkship, will be heading to Kampala, Uganda, during the 2014–15 academic year for a six-week elective. Majid Sadigh, M.D., introduced the three- some at a break in the session.

“She is going to be your new daughter,” Sadigh laughed as the couple chatted with Goldberg at the front of the room. Goldberg and seven other College of Medicine students will be studying in Russia or Uganda in 2014–2015 through the global health program. Student interest has been high: 23 applications were received for the eight available student slots. First-year students are eligible for a summer research elective, while fourth-year students complete a six-week or longer elective that combines clinical work with optional research. Two slots are offered to faculty. Plane tickets, tuition, and accommodations are paid for by the program.

The opportunities literally span the globe: Sadigh has been building partnerships with sites including the Uganda Cancer Institute in Kampala; Kazan State Medical University in Kazan, Russia; Zimbabwe University College of Health Sciences in Harare, Zimbabwe, and Cho Ray Hospital in Ho Chi Minh City in Vietnam. A partnership with Hospital PAP in Paraiso, Dominican Republic, is also in the works. Several medical students and one UVM faculty student from the global health program at Danbury.

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In addition to an extensive orientation at the start of clerkship, and ongoing support from several key staff members, the living and learning environments are integrated in several ways.

The students’ apartment complex is just minutes away from Danbury Hospital, and even closer to one of the clinics where students work. In the warmer months, the complex offers an outdoor swimming pool and a barbecue popular for evening and weekend get-togethers. Wickberg and one of her roommates, Avanti Golikeri ’15, make it a habit at the end of the day to visit the Greenknoll branch of the YMCA — where all College of Medicine students receive a free membership, to run on the track or treadmill and play a game of racquetball. This same YMCA is a partner for a current student community health improvement project (see sidebar).

Dinner together at home is also usually part of the evening for the two women; conversation can turn from ideas for future knitting projects to debriefing on difficult parts of the day. Although time outside of the hospital or the clinic is at a premium, Danbury’s proximity to New York City makes it easy to hop on a train, says Ma, who grew up in New York and appreciates the opportunities to visit. For groceries and the odd diversion there’s always Stew Leonard’s, a Connecticut landmark that’s just a short drive from the apartments. Deemed the “Disneyland” of grocery stores, shoppers combine picking up food and other staples with stopping to watch animatronic characters.

“They have amazing prepared meals, a great cheese department, and a ton of seafood,” says Sarah Gardiner ’15. “It was a dangerous place to be when I was starving after a long day at work. Most of my meals in Danbury ended up either being prepared by my friends at Stew Leonard’s or consisted of fresh salmon or lobster meat. I was not exactly roughing it!”

The goal for the Danbury clerkship is to give students an experience that is challenging and supportive.

“Students need a warm and accepting community,” Ahmadi says. “We want them to feel at home.”

As the connections between the two institutions continue to grow, Bertsch says the partnership is proving to be a chance to evolve in positive ways for both the UVM College of Medicine and Danbury Hospital.

“We’re better because of them and they’re better because of us,” she says. “We bring structure to the teaching program. They’ve brought to us the global health program and a diversity of clinical experiences for our students.”

For students, it’s an opportunity to be part of a clerkship partnership imbued with energy and enthusiasm.

“It’s interesting to be involved at the beginning of something,” Wickberg says. “[The partnership is] so young — I’ll be excited to see what it brings!”

STUDENTS WORK THE NUMBERS WITH THE REGIONAL YMCA

Many College of Medicine students doing their family medicine clerkship in Danbury have become familiar with four numbers: 5, 1, 0, 1. These digits are at the core of a campaign to combat childhood obesity, by one that students have played a key role in sharing with parents, kids, and the medical establishment in Danbury.

The goal of the community health improvement project — a requirement of the family medicine clerkship — is to immerse students in same aspect of the local community while giving them experience on the front lines of public health. In the last few years about a dozen students have worked with the Regional YMCA of Western Connecticut for their community health project, says Maureen Farrell, director of community wellness, bringing energy and enthusiasm to the cause.

The message at the heart of the nationwide YMCA campaign is simple: five servings of fruits and vegetables, two hours or less of screen time, one hour or more of exercise, and zero sugar-sweetened drinks. The Coalition for Healthy Kids, a group of 12 organizations in the Danbury area working on childhood obesity, adapted this message for their community, organizing physical fitness and education activities, as well as creating a brochure with the YMCA guidelines. Parents and caregivers looking for action items were one audience, Farrell says, but the coalition also wanted the “medical community to buy into this too.”

“Many families get health information from their doctors,” she says. “And we felt that the message needs to be face-to-face.”

Enter the College of Medicine students. The first wave to partner with the YMCA and the Coalition for Healthy Kids in 2011 became the conduit to primary care physicians and pediatricians, not only distributing the brochures, but helping to educate physicians about the message. To date, over 6,000 brochures have gone out to pediatricians and family practice offices in the greater Danbury area. It has also been translated into Spanish and Portuguese. Students have conducted surveys to gauge the effectiveness of the message, while others have helped out with additional childhood obesity-related programs.

In the fall of 2013, Hunk Ng ’15 presented information about the YMCA message at a physicians’ conference, part of an ongoing physician assessment at area schools, and talked to parents about the YMCA message. He says he learned firsthand how complex the childhood obesity issue is, especially when parents are dealing with so many competing demands.

As a medical student, Ng says he was able to share his perspective on the importance of physical activity, using examples from his own life that show how being active actually helps his concentration and focus.

“This is an example of how a clerkship experience with patients can be directly translated into our work with patients,” says Farrell. “While there is a lot of research on how physical activity translates into better cognitive function, this is an example of how we’re using our own personal experiences.”

“Students need a warm and accepting community,” Ahmadi says. “We want them to feel at home.”

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**WE BRING STRUCTURE TO THE TEACHING PROGRAM. THEY’VE BROUGHT TO US THE GLOBAL HEALTH PROGRAM AND A DIVERSITY OF CLINICAL EXPERIENCES FOR OUR STUDENTS.**

— Tania Bertech, M.D., UVM Associate Dean for Clinical Education

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When ROBERT LARNER, M.D.’42, was born in Burlington’s Old North End in 1918, the road ahead was anything but a sure thing for this seventh child of a roofer. Ten decades, and thousands of patients later, Dr. Larner stands as one of the most dedicated and generous alumni of the University and its College of Medicine. ALONG WITH HIS WIFE, HELEN, he has assisted hundreds of medical students over the last 25 years through the Larner Scholars Program, and has help to foster the “culture of giving back” among his fellow alumni with the idea that grateful recipients would give back to the fund when they became successful in their own professional lives. This past year the Larners committed $1 million to build an innovative Team-Based Learning Classroom in the Larner Medical Education Center, which was named for Dr. Larner in 2013. The Larners also contributed $300,000 in 2012 to the UVM/Fletcher Allen Clinical Simulation Laboratory. Dr. Larner’s generosity has significantly advanced UVM’s educational mission, which was recognized with the 2013 UVM Lifetime Achievement in Philanthropy Award, and an Honorary Doctor of Science degree that was awarded at the 2014 Commencement Ceremonies. Vermont Medicine sat down with Dr. Larner to hear from him about his youth in Burlington, his early years as a physician in wartime and the California of the 1940s, and the fateful morning’s swim that gave birth to the Larner Scholars Program.

VERMONT MEDICINE: You grew up in what was the Jewish neighborhood of Burlington. Where did your family come from originally?

ROBERT LARNER: From Russia. My father came from Brest-Litovsk on the border with Poland. He was very active in the Jewish community — especially in the old Ohavi Zedek synagogue. The family name was Likovsky — like many people in my family I changed it to Larner in my 20s. We lived on the poor side of town: North Winooski and Union Street, near Archibald Street. My father bought that brick house on the corner and we grew up there, my six siblings and I. I was the seventh child.

My father originally came to Burlington through his connection with his family; he had an uncle who lived in Burlington and was also a roofer. His uncle had a job with Blodgett’s roofing business, and got my father a job there. He worked there for years, until they laid everyone off in the Depression, and then he did roofing on his own. When I was in high school I remember working in the summer with him on the roofs, and that’s when we both decided this wasn’t going to be my career, and that I’d better go find something else!

I went to grammar school on Archibald Street. I always was more adept at science and math than I was at writing. When I got into UVM I didn’t really know what to concentrate on so I signed up for general science course, because that seemed to come naturally for me. Then after a year or so I focused on medicine — pre-med. I had a lot of incentive, I can tell you. After all those years roofing my father was making something like $32 dollars a week and bringing up seven of us on that. I could see that I’d better do something, because I certainly couldn’t be a roofer, and I’d starve. Fortunately I liked studying and learning.

VERMONT MEDICINE: Was going to UVM a natural step for you?

ROBERT LARNER: I was the only one in my family to go to college. They couldn’t afford anything — haircuts, or a nickel for the movies! So I got into college by virtue of winning some scholarships. I had a year-and-a-half of scholarships for winning the state championship in debating one year, and being runner-up the next. Then I entered, and surprisingly, won an essay contest and that gave me another one-semester scholarship. I finished my undergraduate studies in three years.

VERMONT MEDICINE: Where did you head for residency?

ROBERT LARNER: I had to take my internship first — at Maine General in Portland. There were six of us — two or three of us from Burlington in the one-year program. We worked every day and every other night for 24 hours. Did our own laboratory work, our own slides, our own blood work. It was a lot of free labor. They paid us zero — they did give us a room and some meals. That was it. I had an interesting experience near the end of that time. After a few months I didn’t have any money, and several of the other interns came from families who also had little. We got together and decided we would ask the administration for some small income. A group of us six interns took a vote and...
VM: And you had a successful practice for 40 years. Now let’s fast-forward a few decades: what, in the mid-1980s, brought about the founding of the Larner Fund?

RL: We had been doing some investing and were successful. I was thinking during one swim in my backyard pool — the whole thing came out in one swim, this whole scenario — that I’d been very fortunate to come from nothing, just a small-town kid, and it was time to start thinking about giving back. I wanted to do the greatest good, and I wanted it to be done in a way that would be lasting and permanent and grow indeﬁnitely. I thought to myself: but for the College of Medicine I wouldn’t be in this position, so I decided to concentrate my efforts where I could make a dent. I wanted to help other medical students have the kind of stimulating, gratifying practice of medicine that I’d had.

VM: What was it about Los Angeles that appealed to you?

RL: It was like a small town at that time — like a larger Burlington. There were no freeways. It was clean, friendly — you’d stop at a light and you’d get in a conversation with the person in the car sitting next to you. It had that atmosphere, which I liked, and it had three medical schools, so I thought there’d be good professional stimulus.

When I started here, there really wasn’t any San Fernando Valley community — it was an agricultural area. At that time Wilshire Boulevard started downtown, but went only to Beverly Hills, which was a small town with only eight or ten doctors. The Valley had no doctors. But this was a young, growing area where I could ﬁt in and grow. I felt comfortable here. You could set yourself up and make a place for yourself. And the weather, of course, was always delightful.

VM: It was a big response from my fellow alumni. I've discussed priorities with Dean Morin and we talked about where I could do the most good. The Harvey simulators seemed like an eminently good idea for medical education. When you want to teach, say, on Wednesday morning on rheumatic heart disease, where are you going to get patients for the students to see? The Harvey simulator can make 30 different heart sounds, and you can use it at any time to refresh your knowledge. And the residents at the medical center and the nursing school and ﬁrst responders can all use them too. I’m also excited about the new classroom. I like to help build things that last for years and can help a lot of people learn. I expect to continue this program of putting in seed money where it will help improve the medical school, and particularly have an impact on the medical students. My preference has always been to support medical education and whatever improves it.

Above: Workers install new signage in the Given Courtyard last year as the educational facilities at the College of Medicine were renamed in honor of Robert Larner, M.D. At left: Dr. Larner in his home ofﬁce with a photo-montage of the ﬁrst 100 Larner Scholars that hangs over his desk.

made me the spokesman. The faculty had a meeting once a month, and we asked for permission to appear. I went there with him in hand and said “would you please be good enough to consider giving us a stipend of $15 a month?” It took them about ﬁve seconds to answer, and issue an invitation to never come back to any more meetings. That was the end of that subject.

VM: But you weren’t there long…

RL: Shortly thereafter I was in uniform. I spent nine months down in Carolina at a station hospital and then shipped overseas to a station hospital and spent the ﬁrst year on Guadalcanal and the second year on Okinawa. Saw a lot of battle injuries on Guadalcanal, as the ﬁghting was going on there. I could stand in the natural caves on Guadalcanal and watch as the Kamikaze planes came swooping down on our battleships in the harbor. It was quite an experience. Okinawa was tame after that. It was a year after the ﬁghting, and it was secure.

VM: When did postwar life begin for you?

RL: I got out in ’46, and I went to Baltimore. I was cast out into the world in June, when all the residencies had already been ﬁlled for the next year, so it was rough ﬁnding an opening. I was accepted to a residency in Baltimore in internal medicine. I was there for a couple of years as a resident in internal medicine, then I stayed another year doing a residency in radiology. Then I went out into the world of self-employment, and looked around the country and picked out a place to live, and came to Los Angeles.

VM: What excites you about what is going on now at the College of Medicine?

RL: I’ve discussed priorities with Dean Morin and we talked about where I could do the most good. The Harvey simulators seemed like an eminently good idea for medical education. When you want to teach, say, on Wednesday morning on rheumatic heart disease, where are you going to get patients for the students to see? The Harvey simulator can make 30 different heart sounds, and you can use it at any time to refresh your knowledge. And the residents at the medical center and the nursing school and ﬁrst responders can all use them too. I’m also excited about the new classroom. I like to help build things that last for years and can help a lot of people learn. I expect to continue this program of putting in seed money where it will help improve the medical school, and particularly have an impact on the medical students. My preference has always been to support medical education and whatever improves it.

The Dana Medical Library will be the site of the new Larner Classroom, accommodating 150 students with ﬂexibility for both small and large group functions. Funded by a generous donation from alumnus Robert Larner, M.D. ’42, and his wife, Helen, also the benefactors of the Larner Medical Education Center, the $1.25 million renovation will feature advanced educational technology including large display monitors, audience response system, advanced video and sound system and capacity to interface with existing learning management systems.

This project coincides with an initiative for the transformation of the Dana Medical Library into a Health Sciences Learning Commons, providing a unique opportunity to partner on a multi-phased approach to support a dynamic, integrated learning environment. To support this initiative, the classroom is being constructed this summer in the southwest portion of the library. Work began in mid-May with anticipated completion for use beginning this fall.

See a video about Robert Larner’s life and philanthropic work at uvm.edu/medicine/mtmedicined
In the center of the laptop screen lies the main attraction: an image of the human heart that rotates as colored waves of blue, green, yellow and red flow over it. Added to the neon display — pinpricks of light illuminate different regions. Across a segment of the right side of the screen run the familiar peaks and valleys of EKG lines. Guided by the computer’s backdrop, a bright blue “wand” appears at the left of the screen, emitting a water ripple of color from each location on the heart that it touches. This is a representation of the heart, not the real, three-quarters-of-a-pound of muscle that beats relentlessly, one hopes, within your chest; but this image behaves exactly like the real thing.

With laptop open, cardiologist Peter Spector, M.D., demonstrates this new interactive teaching tool, a three-dimensional computational model called Visible EP (for “electrophysiology”), which he co-developed with Professor of Medicine and engineer Jason Bates, Ph.D. Their collaboration was a fortuitous mixture of knowledge and skillsets. “Jason didn’t know what he was programming and I didn’t know how to program what we needed to make it do,” says Spector. He likens their working relationship to two people riding on a unicycle, with one — Bates — blindfolded and pedaling, while the other — Spector — perched on the pedaler’s shoulders, telling him which way to go.

A number of College of Medicine faculty have cultivated discoveries like Spector’s, each at a different point along their innovation journeys. While some products now sit discoveries to light in the commercial marketplace. While some products now sit on the shelf as laboratory prototypes, others have been transformed into new and expanded inventions. Over the past several years, Vermont has gained national recognition for its innovative pursuits. An October 2012 CNN Money article listed Vermont among top states with the most patent activity, with 3.5 patents per thousand residents. In early 2013, a Brookings Institute report ranked Burlington number two in the nation among the “20 most innovative cities in the U.S.”

 Often, the innovation first occurs in the lab, where a research discovery takes place. At that point, explains Corinne Farewell, director of the OTC, the inventor, be they one person or a group, completes an Invention Disclosure Form and consults with the OTC on intellectual property (IP) strategies.

“Our goal is to steward the technology through the necessary intellectual property channels to make the product or service available for the public good,” Farewell says.

Professor of Medicine Mercedes Rincon, Ph.D., has been on the OTC radar — and in their offices in the Given building — many times over the past seven years. She holds one patent and two licenses related to her work with MCJ, a protein that can help predict a cancer cell’s responsiveness to chemotherapy.

Rincon’s work has evolved from that initial discovery to broader applications that are drawing a lot of excitement. “There seems to be a connection between metabolism and cancer, and maybe MCJ is the missing link,” says Rincon.

**Streamlining systems to link disadvantaged populations to appropriate care**

Individuals suffering from substance abuse and mental health challenges often end up in the criminal justice system without ever having accessed the treatment that might have prevented their entry in the first place. That issue is at the heart of a novel web-based system, called MHISSION (Mental Health Intergovernmental Service System Interactive Online Network) that Professor of Psychiatry Thomas Simpatico, M.D., a former Metro Chicago Bureau Chief for the Illinois State Mental Health Authority, brought to UVM and Vermont in 2004.

A number of funding streams — including grants from the Vermont Department of Health, the Veteran’s Administration (VA), and the U.S. Health and Human Services’ Substance Abuse and Mental Service Administration — facilitated MHISSION’s evolution to a system targeting the veteran population, focusing particularly on veteran jail diversion, in addition to other criminal justice-related populations.

Sometimes, Farewell says, “The technology is so new that licensing to a startup company is the most desirable way to bring the invention to the market.” Such was the case with MHISSION. With the OTC’s support, Simpatico established MHISSION Translational Systems (MTS) in 2012. “Having a spinoff allows us to be more agile in responding to the needs of a growing array of clients, while still maintaining a connection to UVM,” says Simpatico.

Hailed by Vermont Governor Peter Shumlin as “a model for more effective and humane approach to drug-related crime,” Simpatico’s most active current project is a pilot program with Chittenden County’s Rapid Intervention Community Court (RICC). Developed in partnership with Chittenden County’s State’s Attorney T.J. Donovan, RICC’s original aim was to reduce recidivism; with MHISSION’s support, offenders with untreated addiction or mental illness get help, eliminating the need for incarceration.

“The MHISSION system effectively links populations to a wide array of...
services,” Simpatico says. “That can apply to the homeless population, persons with mental illness and/or substance abuse, veterans, etc. Providing a connection with health care and human service delivery is really the essence of what it does.”

According to Donovan, the time is ripe for criminal justice system reform, and a web-based technological tool like MISSION is just the ticket to facilitate that change. “We have traditionally looked to address substance abuse and mental illness issues through the lens of public safety with a focus on punishment,” he says. “In the partnership I have developed with Dr. Simpatico, we believe we can enhance our public safety by addressing the issues through the lens of public health.”

Improving outcomes through personalized care pathways

The process of choosing a disease treatment option can often overwhelm a patient already dealing with the shock of a diagnosis. Having to consider length of hospital stay, invasiveness and recovery time, along with potential risks and cost issues, can be overwhelming.

Health economist Christopher Jones, Ph.D., says his methodology — called “Simpatico” — for determining which treatment is most efficient and most optimized pathway for their unique circumstances.

ForMyOdds uses data from patients and published study results — including individual circumstances, diagnoses, treatments, and outcomes — and applies a variety of mathematically-based analytical techniques that feed into each patient’s optimal pathway determination.

“We take great care to scour the literature and test our models,” says Jones, who has several collaborators on the project at UVM.

Insurance plans are Jones’ target market. He envisions a ForMyOdds “package” for physicians and patients that insurance companies pay for on a per-member, per-month basis. In a take-home friendly portable form — think iPad, laptop or even Google Glass — a patient could engage via a portal to test what Jones calls “altema-queries” — alternatives based on consequences — for their particular medical treatment circumstances.

As one of several investigators funded through the Vermont Center on Behavior and Health’s Center of Biomedical Research Excellence award, a major effort over the next five years will be incentivizing patients using the ForMyOdds platform.

“For now that we know what the optimal care pathways will be, how can we incentivize those patients to, for example, give up smoking around the time of surgery?” asks Jones, who aims to build an algorithm that identifies not only the optimal incentive for a given patient to stop smoking, but the best means to alert that patient regarding their receipt of that modeling.

Simpatico, a cardiologist and assistant professor of medicine, worked with the arhythmia research team at the University of Vermont Medical Center to develop and test a computer model to predict the likelihood of developing atrial fibrillation, a condition that affects about 2.7 million Americans.

ForMyOdds was created by the University of Vermont’s Center for Clinical and Translational Science (CCTS) and was recently awarded a SPARKVT pilot grant program.

“Our goal is to steward the technology through the necessary intellectual property channels to make the product or service available for the public good.” — Corine Farewell, Director of the University’s Office of Technology Commercialization (OTC)

ForMyOdds is all about predictive analytics, improving outcomes, reducing costs, and creating personalized care pathways,” says Jones, an assistant professor of surgery and director of the global health economics in the College of Medicine’s Center for Clinical and Translational Science (CCTS).

“Take the example of a patient with an unruptured aortic aneurysm,” says Jones, who is collaborating with vascular surgeon Andrew Stanley, M.D., on developing the ForMyOdds algorithm for that condition. “Relying on data we’ve analyzed, we can tell a patient — to a very granular level of detail — the most efficient and most optimized pathway for their unique circumstances.

ForMyOdds uses data from patients and published study results — including individual circumstances, diagnoses, treatments, and outcomes — and applies a variety of mathematically-based analytical techniques that feed into each patient’s optimal pathway determination.

“We take great care to scour the literature and test our models,” says Jones, who has several collaborators on the project at UVM.

Insurance plans are Jones’ target market. He envisions a ForMyOdds “package” for physicians and patients that insurance companies pay for on a per-member, per-month basis. In a take-home friendly portable form — think iPad, laptop or even Google Glass — a patient could engage via a portal to test what Jones calls “altema-queries” — alternatives based on consequences — for their particular medical treatment circumstances.

As one of several investigators funded through the Vermont Center on Behavior and Health’s Center of Biomedical Research Excellence award, a major effort over the next five years will be incentivizing patients using the ForMyOdds platform.

“For now that we know what the optimal care pathways will be, how can we incentivize those patients to, for example, give up smoking around the time of surgery?” asks Jones, who aims to build an algorithm that identifies not only the optimal incentive for a given patient to stop smoking, but the best means to alert that patient regarding their receipt of that modeling.

Simpatico, a cardiologist and assistant professor of medicine, worked with the arhythmia research team at the University of Vermont Medical Center to develop and test a computer model to predict the likelihood of developing atrial fibrillation, a condition that affects about 2.7 million Americans.

ForMyOdds was created by the University of Vermont’s Center for Clinical and Translational Science (CCTS) and was recently awarded a SPARKVT pilot grant program.

“Our goal is to steward the technology through the necessary intellectual property channels to make the product or service available for the public good.” — Corine Farewell, Director of the University’s Office of Technology Commercialization (OTC)
Repeating the expert decision-making process

The field of psychiatry contains a highly regulated environment that can shift attention from patient care to paperwork. One requirement in particular — The Joint Commission-mandated suicide risk assessment for hospital-based patients — provided an excellent opportunity for a research project to determine a solution to a system severely lacking in uniformity. Fourth-year psychiatry resident Sanchit Maruti, M.D.’10, and his mentor Isabelle Desjardins, M.D., associate professor of psychiatry, launched the project in 2011.

“There are 800 suicides in hospitals in the U.S. each year,” says Maruti. “This requirement came out of a necessity to address an issue,” adds Desjardins.

He and Desjardins discussed the issue with experts in the field, reviewed literature and though they found a number of tools that are utilized, none of them could replicate the “gold standard” for suicide risk assessment — the psychiatrist’s evaluation of the patient. However, says Maruti, “The resources just do not exist to make that possible.”

Desjardins describes the psychiatrist’s critical thinking process as multidimensional. Suicide risk assessments, she says, evaluate risk in different timeframes — from immediate, to a few days out, to over a lifetime. She and Maruti more closely surveyed the literature on the cognitive process that leads the psychiatrist to determine a patient’s level of risk, but nothing had been published.

Aiming to co-develop a tool that could replicate expert decision-making, be clinically beneficial, meet regulatory requirements, and could interface with the electronic medical record, Maruti and Desjardins reached out to a wide range of experts for advice, helped by William Cuts-Baril, Ph.D., of UVM’s School of Business Administration.

Among the questions considered, says Desjardins, were “What is really happening in your mind when you are evaluating suicide risk? How do you weigh these factors? What do you take into consideration?”

The information gathered during this process was distilled into a list of the tool’s primary features: questions, levels of risk, and levels of intervention. This process would be directed by an electronic algorithm similar to the one Jones employs in his ForMyODds model, and accessed on an electronic platform — an iPad.

Fletcher Allen’s Jaffords Institute for Quality and Operational Effectiveness considers, “What drives us is that it’s ultimately about the patient. If there’s a process that can help improve the care of the patients, address an unmet need, anything that can have a positive effect on their health, that’s our goal.”

— Sanchit Maruti, M.D.’10, Fourth-year psychiatry resident

In 2011 and following a demonstration of the prototype, Desjardins received a $50,000 Investigator-Initiated Research Award from the UVM Medical Group in late 2012.

Collaborators have been key to shuffling the project along to its current status. In addition to partners in Fletcher Allen’s PRISM electronic health record office, faculty members Robert Alhoff, M.D., associate professor of psychiatry, and Kalev Freeman, M.D., Ph.D., assistant professor of surgery and emergency medicine physician, as well as Diantha Howard, M.S., biomedical informatics specialist in the Center for Clinical and Translational Science, have provided enormous support to Maruti and Desjardins.

In the past year and a half, the team conducted research to measure how well their algorithm simulates the psychiatrist’s cognitive process, and examined the feasibility of using the tool in a clinical setting. Freeman has led testing with more than 250 patients in the emergency department in conjunction with his UVM undergraduate Emergency Medicine Research Associate Program. Local psychiatry faculty, like Alhoff and others, conduct comparative evaluations of the cognitive process of the system.

“We are at the very early stages, but it’s promising,” says Desjardins.

Maruti and Desjardins are also considering applications outside of the hospital in such institutional environments as prisons, in the Veterans Administration, and in colleges and universities, which could also benefit from the new tool.

This spirit of sharing new knowledge speaks to the role and mission of an institution of higher learning. It’s no surprise that the latest innovations generated by UVM College of Medicine faculty have a strong public health and health system improvement bent — these inventions, whether laboratory-, computer-, or device-based, share a common objective to improve health among the population as a whole.

Maruti sums up what could be the guiding ethic of all College of Medicine faculty seeking to commercialize their innovations. “What drives us is that it’s ultimately about the patient,” he says. “If there’s a process that can help improve the care of the patients, address an unmet need, anything that can have a positive effect on their health, that’s our goal.”

In 1905, when the College of Medicine completed its third home at the corner of Prospect and Pearl Streets in Burlington, the main lecture room was named Hall A. For the next 63 years, students [such as the members of a class in the 1950s shown below] learned the science of medicine while perched on Those rows of steeply-raked wooden seats. When the College moved to the top of the Hill in 1968, the designation of Hall A moved to a slightly more comfortable assemblage of orange-upholstered seats on the second floor of the Given Building.

Today’s learning environment fits today’s medical curriculum. Students take in lectures as a class in the Sullivan Classroom, and they work in small group environments and in UVM’s cutting-edge Clinical Simulation Laboratory. The settings have changed, but the mission remains the same: inspiring a lifetime of learning in the service of patients. This section of Vermont Medicine, named in honor of that storied hall, serves as a meeting place in print for all former students of the College of Medicine.
We've also lost, as you'll see in the obituary pages, our two oldest alumni —

He wound up instructing medical students from the 1940s to the 1990s, even after more events outside of Vermont, and has also been a tireless advocate for aiding current talent for anatomical information and his eye for innovative modeling were recognized by the faculty and encouraged, and he was given increasing teaching responsibilities. Two focuses that I can assure you will continue.

As I think about the future of the MAA and the College, I cannot help but also reflect on our past. Like Mark, I have a personal legacy with the College: both our fathers are physicians who also graduated from this school. And in just the past few weeks, we have lost some true “giants” in the history of this College. Closest to me personally was Dallas Broussard, who passed away at his Burlington home on July 6. Dallas had the kind of life story you can only imagine happening at our medical school. Anywhere else he'd probably have remained an indistinguishable laboratory caretaker. Here, his prodigious talent for anatomical information and his eye for innovative modeling were recognized by the faculty and encouraged, and he was given increasing teaching responsibilities. He wound up instructing medical students from the 1940s to the 1990s, even after his retirement and honorary degree from the University. I was privileged to learn from him.

We’ve also lost, as you’ll see in the obituary pages, our two oldest alumni — Roger Mann, M.D., and Burnett Rawson, M.D., both from the Class of 1939. Both these men had long, productive careers as physicians, and both were involved in service to the community long after their formal careers had ended. That’s the Vermont way, and I encourage you to continue that legacy by getting involved in the MAA’s efforts to assist today’s students as they prepare to become tomorrow’s physicians. If you have news to share, please contact your class agent or the Development & Alumni Relations office at medicallnuals.relations@uvm.edu or (802) 656-4014. If your email address has changed, please send it to medicallnuals.relations@uvm.edu. For complete list of class agents, please see page 42.

The University of Vermont Foundation M E D I C A L D E V E L O P M E N T & A L U M N I R E L A T I O N S O F F I C E

Chief Development Officer for Health Sciences (Academic)

Kevin Nucro

Senior Director of Development, Vermont Cancer Center

Marian DonCear

Director of Major Gifts

Meredith Armitrage

Ruth Hanni

Director of Annual Giving for Health Sciences (Academic)

Allison Scarpino

Director, Medical Alumni Relations

Cristin Gildea

Director, Administration

Ginger Lubkowitz

Assistant Director, Annual and Major Gifts

James Gibert

Assistants

Erica Corbitt

Megan Oudge

University of Vermont Medical Alumni Association A L U M N I E X E C U T I V E C O M M I T T E E

Officers (Two-Year Terms)

President


Vice-President

Frederick Mandell, M.D. ’04 (2014–2016)

Secretary


Treasurer

Paul B. Stensland, M.D. ’05 (2014–2016)

Executive Secretary

John Tampas, M.D. ’54 (Ongoing)

Members-at-Large (Six-Year Terms)

Ernest Bowe, M.D. ’01 (2012–2018)

Mary Gushin, M.D. ’19 (2012–2018)

Mark Allegrata, Ph.D. ’30 (2012–2016)

Suzanne R. Barker, M.D. ’71 (2012–2016)

Dorit Khayat, M.D. ’81 (2012–2016)

Ellen Andrews, M.D. ’75 (2012–2016)

Don P. Chang, M.D. ’77 (2012–2015)

Leslie S. Kizner, M.D. ’95 (2012–2015)


Ex Officio Members

Dean Frederick C. Mann, M.D.

Kevin Nucro

M A D E I N V E R M O N T J U N E 1 2 – 1 4 , 2 0 1 5

V E R M O N T M E D I C I N E

S U M M E R 2 0 1 4

32

33

19 4 0 s M E D I C A L R E U N I O N 1 9 4 0 s

19 5 0 s M E D I C A L R E U N I O N 1 9 5 0 s

19 6 0 s M E D I C A L R E U N I O N 1 9 6 0 s

19 7 0 s M E D I C A L R E U N I O N 1 9 7 0 s

19 8 0 s M E D I C A L R E U N I O N 1 9 8 0 s

19 9 0 s M E D I C A L R E U N I O N 1 9 9 0 s

20 0 0 s M E D I C A L R E U N I O N 2 0 0 0 s

20 1 0 s M E D I C A L R E U N I O N 2 0 1 0 s

UPCOMING EVENTS

October 2, 2014 Graduate Student Research Day, featuring 2014 Distinquished Graduate Student Award winner Peter Paradiso, Ph.D. ’77 UVM Campus

October 10–12, 2014 UVM Homecoming & Family Weekend UVM Campus

October 12, 2014 Fall Medical Alumni Association Executive Committee Meeting UVM Campus


October 27, 2014 Alumni reception in conjunction with the American College of Surgeons — Annual Clinical Congress (October 27–30, 2014) San Diego, Calif. [all local alumni & friends welcome]

November 14, 2014 White Coat Ceremony 2:00 p.m. Ina Allen Chapel UVM Campus


May 27, 2015 Graduation 2:30 p.m. Ina Allen Chapel UVM Campus

June 12–14, 2015 Medical Reunion Weekend 2015 UVM Campus

For updates on events see: www.uvm.edu/medicine/alumni
DiSalvo Endowed LGBT Lecture.

M.D.’85 and his spouse, George DiSalvo, to fund the new Imbasciani/Dr. Evans’ visit also helped inspire fellow alumnus Vito Imbasciani, 34

VERMONT MEDICINE

and has been honored with numerous additional awards for his efforts

Alumni Association’s 1996 Service to Medicine & Community Award,

organization offers many services to the HIV/AIDS community. Evans,

was elected as the organization’s president in 2002. This non-profit

Evans founded the AIDS Project of Greater Danbury in 1987 and

state: “I had nothing to rely on, really,” he said. “Nothing but me and my

contributions to Pediatric Anesthesia.

awarded the Robert M. Smith M.D.

in January 2014.

John Kenerson ‘77,

writes: “Still practicing full time at the

University of Minnesota Medical

was married in August 2013 to Rogelio

in Florida, and daughter, Crocecia, is in

her 3rd year of doctoral program in architecture at M.I.T. I am still

practicing emergency medicine in Calais. Meas.”

Lee Jacobs retired from Kaiser Permanente in 2002 after practicing infectious disease. “Now a medical director on the Disney cruise ships as well as building a hospital in Turks and Caicos, he writes, “49 to all my UVM friends!”

Michael Hermana writes: “I have retired from Scott and White Clinic but I am still a part of the Ultrasound Residency Program at Central Texas Veterans’ Medical Center. See ya in 2018. Please say hi to all!”

John Ambrosio’s reports: “Still active in clinical practice of vascular and endovascular surgery. Think of you all often. Know any OBs who want a nice private practice in California?”

Donald T. Evans, M.D.

The Robert Larner, M.D. ’42 Lecture in December focused on “Across

Alumnus Shares Lessons of the AIDS Crisis

The Robert Larner, M.D. ’42 Lecture in December focused on “Across

Advancements in breast and vascular surgery over the past 30 years have

John Gould, M.D.’64, Father by Establishing Endowed Lectureship

In honor of his 50th reunion year, and to recognize his father for his many contributions to the field of orthopedics,

Sheryl and John Gould, M.D. ’64 established a lectureship in honor Nathaniel Gould, M.D., ’37 [below].

Development News

Trunk Supports Technological Innovation

A champion of biological innovation in its many forms, Erving Trunk of Plano, Texas, continues his support of leading-edge X-ray crystallography research at the UVM College of Medicine. A three-year supporter of $200,000 this builds on a previous gift of $400,000 to benefit research by Professor of Microbiology and Molecular Genetics Sylvia Double, Ph.D., whose lab in the building is named after Trunk’s father, William Trunk. An “almost alumnus,” Trunk studied medicine at the College in the early 1950s, but left the school after his first year of study that he himself has characterized as not as successful as originally planned. His experience nonetheless helped to shape his future, and led to a rewarding career as a successful patent attorney.

Stem Cell Research Benefits from Ault Bequest

Stem cell research at the UVM College of Medicine is yielding

Advancements in breast and vascular surgery over the past 30 years have

Improving the Lives of Seniors: Beeldock UVM 85 Supports UVM Center on Aging

As her chief and CEO of Beeldock Corporation, Gregg Beeldock has already

invested in improving the lives of older adults through the construction and management of several assisted living facilities in Vermont. His recent $25,000 gift to the UVM Center on Aging extends that commitment, and stands to help seniors for generations to come. Founded in 2008, the center supports collaborative gerontological and geriatric research, and provides educational opportunities in gerontology and geriatrics to students, staff, faculty, the lay community, and health care and human service providers throughout the state. Beeldock, who graduated from UVM in 1983 with a bachelor’s degree in resource economics, managers, through Beeldock Corporation, The Lodge at Shelburne Bay and The Lodge at Otter Creek, and is currently developing The Lodge at Quarry Hill.

Stem Cell Research Benefits from Ault Bequest

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The Medical Alumni Association of the College of Medicine has, for four decades, honored the accomplishments of its members for their work caring for patients, creating new advances in the laboratory, and contributing to their communities. These 2014 awardees received their honors at the Celebration of Achievements during Reunion 2014 at the College on June 6.

**A. BRADLEY SOULE AWARD**

Charles B. Howard, M.D.’69

Radiologist (retired); President and CEO, Princeton Radiology Associates, Princeton, N.J.

As a student, Dr. Howard was greatly influenced by Dr. A. Bradley Souls. Dr. John Tampas and the UVM Radiology Department. Thus, it was not surprising that after an internship at Walter Reed Army Medical Center, he continued on in Radiology at Walter Reed, where in 1972 he was appointed Chief Resident. In 1974 he was Chief of Radiology at Kimmbrook Hospital in Olentangy, Maryland. In 1976 he joined Princeton Radiology Associates (PRA). In 1983 he was elected President and Managing Partner of PRA, a position he held until 2009. During his tenure, he transformed PRA from a solo-based hospital-based practice to a primarily non-hospital based (independent) practice by building some of New Jersey’s largest outpatient facilities, providing both diagnostic and therapeutic Radiology services. In the late 1980s he built the Princeton’s Physician Organization (PO) and Physician Hospital Organization (PHO) and served concurrently on the Board of Directors of both organizations until 2009. He was instrumental in building RADCM (Radiology Consultants), a network of N.J. Radiology Groups. In 1999, he began building RadPharm (Radiology Pharmaceutical Research). After finalizing plans for a proton radiation treatment center in September 2009, a $100 million project which opened in 2011, he retired. Dr. Howard’s commitment and service to the UVM College of Medicine includes twelve years as agent for the Class of 1969. In 1998, he earned the Membership on the MAEC, he and his wife created the Charles & Edith Howard Medical Alumni Association Challenge Scholarship. All four of his children attended either undergraduate and/or medical school at UVM.

**Service to Medicine and Community Award**

Presented to alumni who have maintained a high standard of medical service and who have achieved outstanding record of community service or assumed other significant responsibilities not directly related to medical practice.

**Early Achievement Award**

Presented to alumni who have graduated within the past 15 years in recognition of their outstanding contributions to College service and/or scientific or academic achievement.

**2015 NOMINATIONS**

Do you know a class member deserving of recognition? Send in your nominations for the 2015 awards at: www.uvm.edu/medicine/alumni.

**2014 MEDICAL ALUMNI ASSOCIATION AWARDS**

**DISTINGUISHED ACADEMIC ACHIEVEMENT AWARDS**

**Distinguished Academic Achievement Award**

Presented to alumni in recognition of outstanding scientific or academic achievement.

**MEDICAL ALUMNI ASSOCIATION AWARDS**

2014

**A. BRADLEY SOULE AWARD**

Charles B. Howard, M.D.’69

Radiologist (retired); President and CEO, Princeton Radiology Associates, Princeton, N.J.

A. Bradley Souls was a highly talented and dedicated physician; his contributions to the College of Medicine must emulate those qualities as he is the first recipient, A. Bradley Souls, M.D.’28.

**2014 DISTINGUISHED ACADEMIC ACHIEVEMENT AWARDS**

**Distinguished Academic Achievement Award**

Presented to alumni in recognition of outstanding scientific or academic achievement.

**Summit Medical Group**

Triumph Award: The Robert Larner M.D.’42 Student Award

This year, a new MAA award has been created, The Robert Larner M.D.’42 Student Award. See page 11 for this year’s winners.

**2015 NOMINATIONS**

Do you know a class member deserving of recognition? Send in your nominations for the 2015 awards at: www.uvm.edu/medicine/alumni.

**Do you know a class member deserving of recognition? Send in your nominations for the 2015 awards at: www.uvm.edu/medicine/alumni.**

**Summer 2014**
Dr. Michael Upton, M.D.’94
Psychiatric and Clinical Assistant Professor
UVM College of Medicine, Burlington, Vt.

Celebrating her 20th reunion, Dr. Michael Upton completed his psychiatric residency at Dartmouth and returned to Burlington to begin his psychiatric practice in 1994. As a native Vermonter, his family includes four generations of UVM College of Medicine graduates dating back to the 1890s. Currently, Dr. Upton is a CAPS (Counseling and Psychiatric Services) staff psychiatrist who has worked at the Center for Health and Wellbeing at UVM since 2004. His clinical interests include diagnostic evaluation, medication management, and brief psychotherapy. He has worked in a number of settings including inpatient psychiatry, substance abuse treatment centers and community health centers. For the past seven years Dr. Upton has been a faculty member on the college’s student wellness committee—a confidential peer support system for medical students. Dr. Upton is a co-faculty advisor of the ISA (Gay Straight Alliance) at the College of Medicine who has been a valued team member helping to guide this group. Pamela Gibson, M.D. ’99, Dr. Upton’s co-faculty advisor on the ISA describes Dr. Upton as “a compassionate listener who seeks to improve the visibility and acceptance for all underrepresented in the medical community including students, faculty, staff and patients.” His approach, says Gibson, “is thoughtful and inclusive.”

The hypertension guideline we wrote for Haskell was being published this month and co-endorsed by American and International Societies. This new guideline for management of hypertension in the community, along with a companion article written on Hypertension in Haiti, and the challenge of Best Possible Practice. Our Haiti program and manual will become the World Hypertension League standard translated into French, Spanish, and soon Chinese. Presenting as the standard at the Atlantic meeting in June. Having impact there, as well as Emergency Medical Obstetrics.

Gary Berk writes: “I have been involved in a family practice in Homer, NY since 1977. I came here on my N.Y.S. shortage obligation and stayed. I delivered babies for my first nine years in practice and they’re now in their 20s. I admit to Canton Potsdam Hospital until the hospitalist program arrived here a couple of years ago and I just go to the hospital to do my rounds. A full member of the Admissions Committee since 2007, Dr. Zehle is co-faculty advisor on the GSA describes Dr. Upton as “a compassionate listener who seeks to improve the visibility and acceptance for all underrepresented in the medical community including students, faculty, staff and patients.” His approach, says Gibson, “is thoughtful and inclusive.”

Christa M. Zehle, M.D.’99
Associate Dean for Students & Associate Professor of Pediatrics
University of Vermont Children’s Hospital/At Fletcher Allen Health Care, Burlington, Vt.

Celebrating her 15th reunion, Dr. Christa Zehle successfully launched the Pediatric Hospitalist Program at Fletcher Allen Health Care and continues in her clinical role at the Children’s Hospital along with her responsibilities as Associate Dean. She is a sought-after mentor by medical students and residents, and has received numerous awards for teaching. Dr. Zehle has been honored twice by residents as Clinical Attending of the Year and was nominated for the award five more times, garnering runner-up honors in her first year at UVM/Fletcher Allen. She has been a physician mentor for the Public Health Projects, the UVM Pre-medical Enhancement Program (MEDP) and Community ROUNDS. A full member of the Admissions Committee since 2007, Dr. Zehle is co-director for the Pediatric Student Interest Group. She also advises a number of senior medical students pursuing a career in pediatrics or other specialties, as well as pediatric interns, and informally advises the 18pediatrics residents. At Vermont Children’s Hospital, she serves on the Residency Education Committee, the Integrated Quality Program Committee, and is a member of the Fletcher Allen Child Abuse Task Force. She is a fellow of the American Academy of Pediatrics, a member of the Vermont Chapter of the Pediatric Academic Society (PAS), and was honored as an AAP Educational Scholar in 2009, receiving a grant to pursue a scholarly project in medical education.

The Passing of a Legend: Dallas Boushey (1919–2014)

The man who taught anatomy to medical students across six decades, the legendary Dallas Boushey, died on July 6, 2014 at the age of 94. Dallas was a modest, dedicated and extraordinary individual. He worked virtually at the College of Medicine for 50 years, initially as a technician in animal care and then for 47 years as a member of the Department of Anatomy and Neurobiology, where he rose from technician to Assistant Professor in 1972. He was promoted to that rank even though he had no formal degrees. With limited formal schooling and mostly through self-teaching, he became one of the most knowledgeable anatomists to teach in the College. His anatomical vocabulary was legendary. He was renowned for the cross-sections and many his models that he created over the years, many of which are still used by students today. He was recognized by his students for his outstanding teaching skill and knowledge, receiving the Teacher of the Year Award in 1992. A few years later the gross anatomy teaching laboratory was renamed in his honor. For years Dallas received more invitations to College of Medicine class reunion dinners than any other faculty member. His knowledge of human anatomy was not just recognized at the College; many state coroners called on him when they were stumped and needed help to correctly assemble anatomical specimens. In 1990, in recognition of his dedication, significant contributions, and excellencies in education, the University, Dallas received an honoring S.C. degree. At the request of his family, memorial contributions may be sent to the UVM Department of Neurological Sciences, HSRF 426, 149 Beaumont Ave. Burlington, VT 05405, attention Joanne Stetson.

1990s

RECONCILE 1991 – 1995

Catherine E. Chatul joined Mercy Clinic, Plastic Surgery in Joplin, Missouri, on December 16. She completed her plastic surgery residency at Albert Einstein College of Medicine/Montefiore Medical Center.

1994

HALL A | M.D. CLASS NOTES

VERMONT MEDICINE

SUMMER 2014

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UVM Design & Photography, Maria Hegarty

39
Neurology for the Non-Neurologist

October 24, 2014
The Essex, Essex, Vt.

Bridging the Divides: Integrating Primary Care and Pharmacy
November 6, 2014
The Essex, Essex, Vt.

Bridging the Divides: Substance Misuse & Primary Care
November 7, 2014
The Essex, Essex, Vt.

Breast Cancer Conference
October 26, 2014
Stowe, Vt.

Advanced Dermatology for Primary Care
October 16–19, 2014
Hilton Hotel, Burlington, Vt.

Northern New England Neurological Society Annual Meeting
October 24, 2014
The Essex, Essex, Vt.

the Center for Breast and Body Contouring in Grand Rapids, Mich., and later joined The Smile Team for skin lip and palate medical missions in Uganda, Africa. She is based certified in plastic surgery and is a member of the American Society of Plastic Surgeons.

Russell Bradley writes: “2015 Greek vila! Come back!”

Dobrow reports: “I recently transitioned out of private practice to be an OB hospitalist. Ten 24-hour in-house shifts per month and 20 days a month as the “mom.” With two middle school aged daughters, this has been terrrific for our family! And I have lots of time to ride my horse.”

Donna Gamache writes: “Just want to tell you how much I appreciate all the kindness everyone showed to my husband and me during school! God bless you all (or now that I live in Virginia, y’all), and if there is anything anyone ever needs please call!”

Eric Mikul reports: “Laurie and I are doing well here in Maine. It is hard to believe we graduated almost 20 years ago. I am now in practice with classmates Matthew Farina III and Tom Degenninney. I couldn’t have better partners — best to all!”

Brian Levine writes: “Since I have become the program director of the emergency medicine residency last year at Christiana Care in Delaware, life has been crazy. Keep sending us your best medical students!”

Jonna Doherty is still in private practice in Santa Cruz, Calif., but looking forward to transitioning to a leadership position soon! Hopefully I’ll be able to spend more time with my twins, Kate & Gavin, age four and a half, and lovely wife Naomi.”

2000s

Jennifer Maharaj recently received funding from the NH/ NNFt to be PI of the Utah regional coordinator center in the new NINDS stroke trials network.

Thuan Nguyen reports: “Our children, Reece, four, and Davis, three, keep on growing. We are enjoying traveling and have been to Mexico, Ohio, and Hawaii [three times!], among other places over the past year. My wife, Sarah, works as a consultant at Dignity Health and I have been working in the valley for eight years. Can’t believe it!”

Christine Staats writes: “Enjoying seeing all the news everyone shares!”

Omar Khan writes: “It has been a busy year! Our son is now 12 and in 7th grade. I started as associate vice chair of our department [Family Medicine, at Christiana Care in Delaware], and continue to direct the Global Health Residency track, as well as oversee our preventive medicine/community health work. My team is managing a chunk of the ACX implementation in Delaware as well, including getting uninsured patients into approved health plans. I continue to see patients as well and perhaps enjoy that the most. It was great to see so many UVMers [alumni/ family/ staff/ faculty] at the 13 Reunion!”

Rachel E. Gaidys recently joined Central Vermont Medical Center’s Hospitalist team. Rachel did her internship and residency at Montana Family Medicine Residency based out of RiverStone Health, the Federally Qualified Community Health Center (FQHC) in Montana’s largest city, Billings. She spent six months in New Zealand providing primary care in rural communities through the New Zealand General Practice Network. Her most recent position was as a Hospitalist at Saint Vincent Healthcare in Billings. She and her husband, Daniel Burson, have a young daughter, Elena, and expect a second daughter in late May or early June.

Leslie Bradford has been hired by UMass Memorial Medical Center. She completed her residency at the University of Wisconsin Hospital and Clinics and a fellowship in gynecologic oncology at Massachusetts General Hospital.

Emily Wooldredge reports: “My husband and I welcomed our daughter, Scarlett, to the world on 111513.”

Anna Daugherty writes: “I am on faculty at the UVM College of Medicine in the Department of OB-GYN. Twenty-five percent of my year is spent working on global health projects in Uganda and Tanzania. I am also enjoying working with residents and medical students.”

2010s

Jillian Brennan has joined Central Vermont Medical Center’s Hospitalist team. She completed her family medicine residency at the Ventura County Medical Center in California.

The College of American Pathologists (CAP) Foundation presented Joanna Conant with the Leadership Development Award at a special ceremony October 12, 2013, at the College’s annual conference, CAP13 — The Pathologists’ Meeting in Orlando, Fla. The award commends her interest in the complex issues facing the future of pathology, her aspiration to influence local and national policies that shape the specialty, and her commitment to keeping patient well-being at the core of her clinical service. She is an anatomic and clinical pathologist resident at the UVM College of Medicine.

A Courtyard Circle

Not only have the people in this photo undoubtedly gone through some changes ever the thirty-something years since it was taken, the very setting of this group has undergone medical redshirting.

At the center of this circle of students sits the late David Torney, M.D., who for more than 40 years served as associate dean for admissions and student affairs at the College of Medicine. He and the students he is leading in a group discussion are sitting in the George Wolf Courtyard, the open-air center of the Given Building from its completion in 1968 to its enclosure in 2010.

He and the students he is leading in a group discussion are sitting in the George Wolf Courtyard, the open-air center of the Given Building from its completion in 1968 to its enclosure in 2010. The very setting of this group has undergone radical reshaping. And who are these students? Other than a note on its back about Dr. Torney and the courtyard setting, this photo carries no detailed information. It was found in a folder containing old photos taken for many different yearbooks. Hairstyles indicate the late 70s or early 80s, as does that prominent pair of classic Adidas running shoes down center.

A future issue of Vermont Medicine
Class Agent Directory

Class agents are dedicated alumni who volunteer their time to serve as the voice of their classmates at the College of Medicine, and who work to encourage support of the College each year. Agents help deliver information to their far-flung friends about their classmates at the College of Medicine.

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Please email modakre@vtmednet.org if you’d like to serve as 1990 class agent.

John Dewey, 1324 East 4th Road, Rutland, VT 05701, (802) 826-2108, jdewey@vtmednet.org

If you’d like to learn more about serving as a class agent, contact Crisitin Siddal at 802-865-4014 or Crisitin.Siddal@vtumed.vmu.edu.

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A few days after his 50th anniversary reunion in June, John Gould, M.D.’64, sent a letter to all his classmates recapping their experiences on campus. With Dr. Gould’s permission, we present excerpts from his letter, which sums up the wonderful feeling of the weekend:

“The school and its facilities are beautiful; the faculty impressive: young, bright, energetic, and enthusiastic. I couldn’t help thinking, ‘Boy, would I like to go to medical school here, and now.’ Of course, we did, and we attended in an era without the electronic wizardry that now exists, but we still learned the art and the skills in a benevolent and nurturing atmosphere which made our education and skills second to none. One could not help but feel proud that UVM was and is a superb medical school. The students we met from all the classes are a diverse group, not only from Vermont and New England, but from around the country, with impressive backgrounds and education. Although their college GPAs may be higher on average than ours, they were so humble and proud to be at UVM, so enthusiastic about medicine and their futures; even we cynical septuagenarians were caught up in their infectious good spirits. They spent time with us in all the venues, including the class picnic and receptions so there was a significant amount of time for one-on-one conversation. Whether it was their elective rotation at a primary care center in Island Pond, Vermont, as one young woman described, or an elective in a surgical center in Florida discussed by another, it was clear that they were well received and had an excellent experience…”

If you’re in a class that ends in 0 or 5, mark your calendar for REUNION 2015: June 12–14!
Obituaries

Dr. Rawson returned to Vermont, into his nineties. In retirement, in the local peace movements well on race and religion. He was active in the war, he began an internship in a medical unit in Japan during World War II, after his internship at Beverly Hospital in Beverly, Mass., and before his residence in ophthalmology and genecology at Washington George Washington University Hospital in Washington D.C. Dr. Stevens was a member of the American Medical Association, a member of the American Medical Association and the American Academy of Ophthalmology and Otolaryngology. He was a fellow of the American College of Oph-Gyn, the American College of Physicians. Dr. Stevens served to help deliver more than 7,000 babies in his 36-year career.

Dr. Caccavo died in his home in Burlington, Vt., on December 3, 2013. Born in Montpelier, Vt., on June 23, 1918, he was a graduate of Syracuse University and the UVM College of Medicine, and practiced general medicine in Chelsea and Barre. He moved to Burlington in Vermont in 1943, for a general surgery residency and practiced surgery until the early sixties when he became the plant physician at General Electric. Dr. Caccavo was a World War II veteran, retired from the U.S. Army Medical Corps and was a professor of surgery at the Vermont State University. He was also instrumental in establishing the Vermont Heart Association, and served on the Vermont Board of Education, and served on the Board of Directors.

Dr. Stevens, a member of the American Society for Medical Research. He was a fellow of the American College of Physicians. Dr. Stevens served to help deliver more than 7,000 babies in his 36-year career.  

Dr. Manjoney died October 1, 2013. He was 91. Born in Bridgeport, Conn., he received his medical degree from the University of Vermont in 1947 and served his internship at Bellevue Hospital and his residency at Mt. Sinai Hospital in New York City. After his residency, he became a general surgeon at St. Vincent’s Hospital in Baltimore, Md. Dr. Manjoney died of a heart attack at age 69 on October 12, 2013, while doing what he loved to do every Columbus Day weekend, hanging Mount Washington in New Hampshire. He was born in Boston, and attended Boston Latin and Boston College before coming out West. He was a member of the Medical Staff at Southern Maine.

Dr. Hanlon died May 7, 2013. He was 75. Born in Salem, Mass., he was a member of the Medical Staff at Southern Maine.

Dr. Fernandez died of a heart attack at age 69 on October 12, 2013 while doing what he loved to do every Columbus Day weekend, hanging Mount Washington in New Hampshire. He was born in Boston, and attended Boston Latin and Boston College before coming out West. He was a member of the Medical Staff at Southern Maine.

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June 7, 2014 1:50 p.m.

UVM medical student Samy Ramadan’17 shares a laugh with alumni from across 60 years at Nostalgia Hour during Reunion 2014. "Listening to their accounts was definitely my favorite part of the weekend," he says. "and I felt honored to be the newest addition to the College of Medicine family."
RECONNECT FOR REAL!

Sure, social media has made keeping up with old friends easier. Still, nothing beats getting back together in person with the classmates with whom you shared some of the most formative experiences of your lives. Medical Reunion is the setting for all kinds of unplanned personal reunions, and it gives you the chance to show your family the place where your medical career began.

If you’re in a class that ends in 0 or 5, mark your calendar for

REUNION 2015:
June 12–14!

EVENTS INCLUDE: Medical Education Today Session • Tours of the College, including the Clinical Simulation Laboratory • Alumni Awards and Reception • Medical Alumni Picnic • Nostalgia Hour • Class Receptions

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