A WELCOME FROM THE DEAN

CHANGE, GROWTH, PROGRESS

Our 40th Anniversary celebration has been a year of exciting events, many of which have honored our founding physicians. The architect of these festivities, former Dean William L. Henrich, MD, MACP, has been selected as President of the Health Science Center at San Antonio. The School of Medicine is moving forward with many thrilling initiatives under the energetic and visionary leadership of Dr. Henrich.

The new comprehensive outpatient practice clinic, the Medical Arts and Research Center, better known as the “MARC”, is one of these remarkable initiatives. The first programmatic clinics will open in the fall of this year, starting with primary care, orthopedics and diagnostic imaging. The remaining specialties will open sequentially throughout the following few months, including a new ambulatory surgery center.

The MARC is a major milestone in the history of the School. It will allow consolidation of the School of Medicine faculty practice plan, known as UT Medicine San Antonio, into one building, a ‘clinical home.’ It will be a one-stop shop for primary care and subspecialty care, organized in a multi-disciplinary fashion for the best patient care efficiency. The MARC will house the practices of almost 200 faculty members and nearly 50 different specialties. As an academic medical practice, we see our faculty as a complement to the private specialists in San Antonio with a goal of helping provide comprehensive medical care to South Texas. The MARC building has been designed for patient care efficiency - taking into account the flow of traffic, the flow of patients, an integrated electronic medical record system, and the incorporation of our many specialties into a single system of care.

As the new class of students, the class of 2013, completes their orientation, a sense of enthusiasm and countless signs of growth are pervasive throughout the School of Medicine. I hope you enjoy this issue of the FUTURE magazine.

Glenn A. Halff, MD
Interim Dean, School of Medicine
Dielmann Chair in Transplant Surgery
Professor of Surgery

The MARC construction is wrapping up. The first clinics open in August/September.
Features

Authors & Authorities
Writing Textbooks is a Labor of Love

Ethics in Action
Center for Medical Humanities & Ethics

The Center for Miracles
Seeking Proactive Remedies

Living Life Over Cancer
The Unsinkable Pat Mendonca

Highlights

Novalis Tx
Shaping the Future of Radiation Oncology

Michael S. Brown, MD, Nobel Laureate
The Story of Cholesterol Metabolism

William L. Henrich, MD, MACP
From the Dean’s Office to the President’s Office

Match Day 2009

40th Anniversary Album
Pannill Album: Pictures from the Past
AUTHORS & AUTHORITIES:

Writing Textbooks is a Labor of Love

By Karen Kolivosky
Picture this: you’re busy with a career that’s more than full time. You are actively involved with professional associations and ongoing education. On top of that, you have a family that needs your attention. Then someone asks you to write a book about what you do. And you say yes.
Or perhaps they ask you to recruit others in your field to each write a chapter about a niche within your profession, which you will then edit, fact-check and compile into one volume.

The whole process may take years. The pay falls far short of the amount of work involved, and with your full schedule, you have to squeeze the work in on nights and weekends.

Many School of Medicine faculty members have jumped into this exact scenario – repeatedly. For many professors, writing a textbook is a natural extension of their love of teaching.

“It's teaching on a big scale,” says Richard Usatine, MD, a Professor of Family and Community Medicine and Dermatology and an Assistant Director of Medical Humanities education. Usatine has served as lead author on several medical education books, including his most recent, “The Color Atlas of Family Medicine,” published in October 2008.

A TEXTBOOK CASE

In the world of medical textbooks, one thing leads to another. A journal article might lead to an invitation to contribute a chapter in a book. That, in turn, can lead to an invitation to write or edit one book, which often leads to another.

That’s how Charles Rockwood, Jr., MD, Professor and Chair Emeritus of Orthopaedics, became one of the most prolific and renowned textbook authors and editors in the world.

While serving on a committee of the American Association of Orthopaedic Surgeons (AAOS) early in his career, Rockwood became involved with training for emergency medical technicians. The only problem was that no training manual existed. So Rockwood took the lead in creating a book called “Emergency Care and Transportation of the Sick and Injured.”

“There was no question that we needed it, and there was no way I could do it,” he says. “We needed ophthalmology, obstetrics, neurosurgery, a chapter on poisonings... so I found people to write chapters.”

The book is now in its 9th edition and generated more than $45 million in sales for the AAOS. It quickly became the premier guide to EMT training and, 38 years after its initial 1971 printing, still is.

When a textbook publisher identified a need for a new book on fractures, they began asking around the AAOS to find an author. Rockwood’s name kept coming up.

Rockwood agreed to do it. When he began to research what was out there, he realized all the previous tomes had been authored by individual physicians. That’s impossible, Rockwood believed. The field is so vast, one can’t write a book alone. So he partnered with David Green, MD, as a co-editor, and in 1972 began corralling chapter authors.

When “Fractures” was published three years later, it became a bestseller worldwide. There was no current book on fractures, and Rockwood and Green had

“It quickly became the premier guide to EMT training and 38 years later... it still is.”
produced a comprehensive three-volume set, with chapters dedicated to each area of the body.

The book filled a niche because everything is in there, Rockwood says.

“If someone has a broken scapula, they can review the world history of treating broken scapulas, anatomy and development of the scapula, common injuries, treatment, and finally, the author saying ‘this is what I like to do,’” Rockwood says. “The thing that people fell in love with was the authors’ preferred method of treatment.”

Rockwood keeps an early edition of the book in his office. A thick brass ring pierces the volume where a chain once secured it to a desk.

“It became so popular in the emergency room that people were stealing copies,” he says.

The sixth edition of the book was published in 2006, and a seventh edition is now underway. Today, Rockwood and Green remain involved in the book on a consulting basis, approving editors and recommending authors for various chapters.

The publisher behind “Fractures” came back to Rockwood a few years later. This time, he asked Rockwood to write a comprehensive text on the shoulder.

“I told him I thought he was nuts,” Rockwood says. “It’s too damn much work.”

But the idea took hold of him. He recruited a colleague, Frederick A. Matsen III, MD, to co-edit. That collaboration has continued through the fourth edition of the two-volume text “The Shoulder,” which was published in January 2009.

“I just about stopped with the third edition because I’m going to turn 80 here in a few months. But what the hell. We did it,” Rockwood says. “You do it because you like it.”

“If the company wants to do a fifth edition, I would think I’d probably be happy to serve as a consultant,” Rockwood says. “I’ll probably be six feet under at that point.”

A PHOTOGRAPHER’S VIEW

Interest and opportunity convened for Dr. Richard Usatine’s latest effort, “The Color Atlas of Family Medicine.” Publisher McGraw Hill contacted Usatine with the idea of a photography-based book with images of various conditions throughout the body, and asked if Usatine would be interested in taking it on.

The opportunity created an outlet for the thousands of photos that Usatine had collected over decades. “It’s something I’ve been preparing for my whole career,” says Usatine.

Ever since starting on the faculty of UCLA in 1985, Usatine has kept a camera with him during patient rounds. With permission from patients, he began collecting clinical images, documenting conditions from head to foot.

“I do it because at the start of my career, I went straight into teaching and I’ve always felt that one of the best ways to teach students and other doctors is to have photographs to show people what can be seen instead of describing it in words,” Usatine says. “A picture is a valuable way to promote learning.”

In his first journal article, he wrote about dermatologic care for the homeless in an article that combined words and photographs. When a dermatologist at UCLA approached him about co-authoring a skin surgery book for primary care doctors, Usatine thought it was a great opportunity to learn more about the subject.

The partnership worked: Usatine learned content from dermatology experts, and at the same time learned to translate their experience and knowledge into a book for a target audience of primary care physicians. Since Usatine did most of the work, he took billing as lead author.

That book led to new teaching opportunities and journal editing. In 2003, Usatine began editing a column in the Journal of Family Practice called “Photo Rounds,” which presents a photo and patient background, quizzing the reader about the diagnosis before identifying the condition and discussing treatment. The column proved to be a wealth of photos when he was tapped to author “The Color Atlas of Family Medicine.”

CONTINUED ON PAGE 50
School of Medicine Bibliography

These are some of the recent additions to the library by School of Medicine faculty.

- Treating ADHD and Comorbid Disorders: Psychosocial and Psychopharmacological Interventions
  Steven R. Pliszka, MD

- Rockwood and Wilkins' Fractures in Children
  James H. Beaty, MD
  James R. Kasser, MD

- Emergency Care and Transportation of the Sick and Injured
  9th Edition
  American Academy of Orthopaedic Surgeons; Series originated by Charles Rockwood, Jr., MD

- Ethical Issues in Rural Health Care
  Craig M. Klugman, PhD
  Pamela M. Dalinis

- The Color Atlas of Family Medicine
  Richard P. Usatine, MD, Mindy Ann Smith, MD, E.J. Mayeaux Jr., MD, Heidi Chumley, MD, James W. Tysinger, PhD
Operative Techniques in Laryngology
Clark A. Rosen, MD, C. Blake Simpson, MD

Decision Making in Anesthesiology. An Algorithmic Approach.
4th edition. Lois L. Bready, MD, Susan H. Noorily, MD, Dawn Dillman, MD

Respiratory Injury: Smoke Inhalation and Burns
Edward F. Haponik, MD, Andrew M. Munster, MD

Principles And Practice Of Dialysis
4th edition
William L. Henrich, MD, MACP

The Shoulder, 4th Edition
Editors: Charles A. Rockwood, Jr., MD, Frederick A. Matsen, MD, Michael A. Wirth, MD and Steven B. Lippitt, MD, Associate Editors, Edward V. Fehringer, MD and John W. Sperling, MD
Ours is a story of discovery. Hope and joy. Commitment, vision and inspiration. We engage our minds and talents, and give from our hearts, to help and heal. We touch the lives of thousands, to serve those in need, here and around the world. And, through it all, we work to make lives better. Thank you for all you do to make our story so remarkable. You're the reason we're able to write the next chapter.

**Another Expertise: Medical Illustration**

Blake Simpson, MD and Clark Rosen, MD, *Operative Techniques in Laryngology* is a one-of-a-kind and was several years in the making. It is also unique in that all of the medical illustration – and it is extensive – was done here at The Health Science Center by the University’s multimedia services.

David Baker, Medical Illustration Supervisor from the multimedia group, was the project manager and did many of the internal illustrations. He points out that over 260 figures were created, including many detailed steps for complicated throat and vocal cord surgeries.

“We worked closely with Dr. Simpson and co-author Dr. Rosen,” Baker said, “…in understanding the surgical steps needed for illustration. We attended surgeries, mostly for general orientation and a little photography for reference. We would create sketches in pencil that Dr. Simpson could study, share with Dr. Rosen, and then point out modifications. Sketches would be corrected, and once approved, would be cleanly redrawn with a hard plastic pencil and scanned at high resolution.”

Dave Aten did most of the external drawings. Chris McKee worked with Baker on many of the internal views (scope and perspective views). The department now has a full-time animator, Sam Newman, who is a talented 3D artist for video, web, and print. Baker is also a fine artist who works in all mediums, including oils. The portrait of Dr. Howe in the President’s conference room was painted by Baker.

Contact Multimedia Services at (210) 567-2250 or visit them online: [http://ims.uthscsa.edu/media/medill.aspx](http://ims.uthscsa.edu/media/medill.aspx)

---

*a.* Laryngoscope has inadvertently “folded” the epiglottis during insertion, thus limiting the view of the vocal cords below (poor technique).

*b.* Typical preparation and draping of a patient for medialization laryngoplasty. Key here is the mounting and draping of the video scope used extensively during this surgery.

*c.* A TEFLOM GRANULOMA, is removed from just under the thyroid cartilage which has been split on one side to expose this paraglottic space.
Ours is a story of discovery. Hope and joy. Commitment, vision and inspiration. We engage our minds and talents, and give from our hearts, to help and heal. We touch the lives of thousands, to serve those in need, here and around the world. And, through it all, we work to make lives better.

Thank you for all you do to make our story so remarkable. You’re the reason we’re able to write the next chapter.
‘Ethics in Action’ is the Driving Force at The Center for Medical Humanities & Ethics

By Judy McCarter

Shannon Potter gives vitamin A to a patient in a village in rural Ethiopia. Vitamin A deficiency (VAD) is the leading cause of preventable blindness in children and increases the risk of disease and death from severe infections.
Jerald Winakur, MD, remembers a patient in her 30s who came to see him for a checkup because of her family history of breast cancer. “I did a mammogram a bit early because of that history, and of course, it was already in her nodes,” he recalled.

He remembers not being able to sleep the night before she came in for the results. “I rehearsed over and over how I was going to break the news. But she took one look at my face – and she knew,” he said. “It was terrible delivering that news and then to watch as she bravely went through radiation, then chemo, only to die of a brain metastasis.”

Winakur is now a clinical Professor at the Center for Medical Humanities & Ethics, who teaches first- and fourth-year students about the patient’s experience of illness and dying, hoping to provide the guidance he believes is essential to good doctoring and that he never had in his residency years. His teacher was experience. “This woman was much stronger than I through it all,” he said. She taught me more about dying with grace than I ever learned from any mentor, any book.”

“It’s very difficult to deliver bad news to a patient and family, and I had no preparation for this in medical school or residency. What the Center is doing is vital,” he said. “If you don’t mourn, if you just get on with the next case, well, eventually you’ll find your empathic responsiveness is blunted, your compassion reduced, your own humanity compromised.”

**Encourages Empathy, Stresses Collaboration**

The Center works to keep patients and their needs in front of students through exposing them to talks, books and movies where they can imagine their patients’ experience rather than seeing them as just another patient, in just another bed.

“The Diving Bell and the Butterfly,” a movie students discuss in their second year, is the film adaptation of Jean-Dominique Bauby’s remarkable book of the same name about his experience with ‘locked-in syndrome,’ which completely transformed his life. He went from being a high-flying advertising executive to paralyzed from head to toe, with his sole means of communication being to blink his left eyelid. The movie opens with the hospital ophthalmologist sewing his right eye closed, “just as if he were darning a sock,” and decreeing without emotion that it remain closed for six months, never offering a word of comfort to the paralyzed body he clearly assumed no longer housed a lively mind.

“Scenes like these show students how they can become inured to suffering as physicians,” said Ruth Berggren.

Ruth Berggren, MD, Director of Medical Humanities and Ethics

CONTINUED ON PAGE 52
“A 14-month-old and her younger brother were stuffed into a trash bag beneath their mother’s apartment. The mother is being charged with two counts of capital murder.” This is a real item from a San Antonio news story. Horrible realities like this case and others drove the creation of the Center for Miracles, founded by faculty member Nancy Kellogg, MD, and other community leaders. Kellogg is Division Chief for Child Abuse Pediatrics at the School of Medicine and also Medical Director of ChildSafe (formerly the Alamo Children’s Advocacy Center), a local nonprofit organization and community resource for child and adolescent victims of sexual abuse. Kellogg and a team, including two pediatricians, a nurse, a director, a social worker and a community outreach specialist, staff the new center in partnership with CHRISTUS Santa Rosa. The clinic is located across from the CHRISTUS Santa Rosa Children’s Hospital in downtown San Antonio.

About five years ago, Kellogg became concerned with the rapid and significant changes in medical knowledge, particularly in child physical abuse and neglect. “I applied for and received a grant from Children’s Justice Act allowing me to serve as a medical consultant to Child Protective Services,” explained Kellogg.

Through the grant activities, it became evident that a clinic was needed where children referred for physical abuse or neglect could be seen and evaluated instead of relying entirely on photographs and information presented by Child Protective Services (CPS). A feasibility study conducted by CHRISTUS Santa Rosa Children’s Hospital identified a community need for such a clinic. In 2006, the Center became a reality.

“It was all serendipitous and the Goldsbury Foundation provided their generous support,” added the pediatrician. The Goldsbury Foundation is a private family foundation committed to providing meaningful philanthropic support that stimulates positive and lasting change for the children and families of San Antonio. For every dollar donated, the Goldsbury Foundation will match up to $1 million toward child abuse prevention programs offered at CHRISTUS.

The mission of the Center for Miracles is to promote health and safety for children who have been abused or are at high risk of being abused. Whether the abuse is physical, emotional, sexual, or neglect, the scars can be deep and long-lasting. Prevention is the central goal.

“I would love to be out of a job,” says Kellogg, but the reality is child abuse is the second most chronic childhood disease.” Asthma is number one.

The Center handles the heartbreaking truths that are part of our community. They face obstacles such as funding but have support through state grants to help keep services available. Providing guidance and information to the legislators and staff who wrote State
Senate Bill 1877, the Center has been described as the “model program” proposing that similar “Centers of Excellence” be established for evaluating child abuse throughout Texas.

James Lukefahr, MD, also a Professor in the Division of Child Abuse Pediatrics, assumed the Medical Directorship position when he joined in 2007. Faculty and staff who also support the Center for Miracles include Kathleen Buckley, Certified Pediatric Nurse Practitioner, Dr. Amy Gavril, a first-year Child Abuse fellow, Sherry Rumsey, Project Director for the Forensic Assessment Center Network, and Sandra Quir oz, Administrative Assistant. Other team members include CHRISTUS Santa Rosa associates Rose Orsborn, who is Clinic Director, Community Outreach Director Brandy Ralston-Lint, social workers Angie Oviedo and Susan Lowe, Medical Assistant Leticia Martinez, and Administrative Assistant Sara Kizzie.

In 2008, Kellogg was recognized with a Community Leadership award by the Federal Bureau of Investigation, which celebrates those who have made significant contributions to public well-being and security.

The Center provides medical, psychosocial and counseling evaluations, as well as diagnosis of treatment for children and their families referred to the Center. The work Kellogg, Lukefahr, and their dedicated team offer the community is nothing short of a miracle to an estimated 1,300 children evaluated each year in Bexar County and surrounding counties.

At the Center, affected families are able to talk to professionals in a nonjudgmental, respectful and receptive environment. The Center and its staff work closely with CPS.

“The Center cultivates trust between our staff and the families we are here to help—it’s a neutral environment,” explains Kellogg.

Essentially the Center is a referral-based child abuse center and a healing place for children and their families, but for one victim, it was heaven. It was the first place where she felt safe enough to describe her years of abuse and neglect; unfortunately, it wasn’t until after the tragic death of her 8-year-old sister. Beyond the vacant look in her eyes, the medical exam showed an enlarged liver, a sign of malnourishment, but this would just be a small piece of what needed to be mended. The emotional pain hidden behind the innocent child’s face showed no physical scars. The compassion and dedication of the Center’s team help these traumatic stories reach positive outcomes.

As you walk through the hallways, there are bright colors, alcoves for those needing quieter spaces, cut outs of native Texas animals on the walls, and an exam room painted as a fire station with an exam table that is also a fire truck.

Kellogg has also played an important role in making child abuse pediatrics a recognized subspecialty in the School of Medicine. Its child abuse fellowship is the only one in the state and one of only 18 in the country.

With the support of Thomas Mayes, MD, MBA, Chair of Pediatrics, the UT Medicine/CSR employees, the Goldsburys’, as well as the community and the state, the Center is certainly a group effort to support a dire need in the community.

“This is like heaven”
- Pediatric Child Abuse Patient
“Don’t worry, it’s not cancer.” Pat Mendonca remembers hearing those words from her (former) family doctor nearly twelve years ago. But after being treated for several weeks with antibiotics to cure a “urinary tract infection,” her worst fear became reality.

Mendonca, a school teacher for 25 years, arrived home from school in so much pain, that her husband, Ray, did the only thing he could think to do – he took her to the emergency room at Brooke Army Medical Center (BAMC). Mendonca nearly refused. She had always chosen to be seen by civilian doctors on her own insurance plan because she had “heard all of the horror stories involved with military medicine.” But Ray, her husband of 22 years and Air Force retiree, insisted. His insistence probably saved her life.

After hours of testing, the Mendoncas learned that a malignant tumor was found in Pat’s right kidney. She did, in fact, have cancer — clear cell renal cell carcinoma to be exact. Mendonca learned very quickly that while this was one of the most common types of kidney cancer, in order to have “two good years” left to live, she would be forced to have her kidney removed.

And so, her quest to live life over cancer began. “From the very beginning, I told myself that I was going to beat this,” Mendonca said. “You can sit around and feel sorry for yourself, or you can get up, get off your fanny, and live. And that is what I do, each and every day.”

“I have setbacks. My cancer has metastasized (spread) to other parts of my body, oh, six or seven times, but who’s counting. I would like to believe I am a medical miracle, but I think I am just too darn stubborn.”

Mendonca said with a laugh.

Within a year of her initial diagnosis, a routine CT scan indicated the cancer had spread to her left lung. Mendonca was immediately sent to the CTRC Institute for Drug Development satellite site at BAMC, the only Phase I oncology drug program in the world offering clinical studies to active and retired U.S. military and their dependents. It was there that she met her medical oncologist, Gia Dice, MD, who placed her on the first of several clinical studies to fight her cancer.

After six months with the tumor still progressing, Mendonca had a lower lobectomy of the lung to remove the cancer. But within a year of that surgery, an MRI showed the cancer was back - this time located in her left kidney. Mendonca once again began treatment on a new drug study, but within six months she learned she was not responding to the therapy and was forced to have a portion of her left and only remaining kidney removed.

“It seemed like we could never catch a break. It seemed like almost every year, almost to the date, we would learn that the cancer was back,” said Ray Mendonca, Pat’s foundation and self-declared partner in crime. “But Pat and I never let it stop us from living life and having fun.”

“Ray is almost perfect,” grinned Mendonca. “He does all the laundry and house cleaning – if only he could cook. He keeps all of my medicine straight, and he plans and packs for all of our trips. And I let him. Being a military man, he knows how to pack a suitcase and leave room for me to bring back goodies from our trips. Now, that’s important because I love to shop.”
In late 2000, more bad news came. This time the cancer had returned as lesions on her right lung and liver. Without hesitation, Mendonca started treatment on another clinical study. This time, the drug worked. It put her in remission, and the pair continued their journey.

Mendonca continued to work, and even after retiring from teaching, she took a job at Brighton Jewelry, a perfect part-time gig for the “shop-a-holic.” Together, the fun-loving pair volunteered together through the Lions Club and even traveled the world.

In fact, the two were having so much fun collecting clothes, jewelry and other mementos on their excursions, Ray Mendonca decided to build his bride a 14-foot by 14-foot walk-in closet — “a girl’s dream.”

Four of the drugs that Mendonca took while enrolled in clinical drug studies at the CTRC at BAMC have gone on to be approved by the Food and Drug Administration (FDA) – commercially marketed as Nexavar®, Sutent®, Torisel® and Gemzar®.

“Experimental drug studies never made me afraid; I wanted to live,” said Mendonca. “I did always want to know what side effects to expect though, and still do. Some were worse than others, but those drugs, all of them, both experimental and FDA approved, are what keep me here today.”

The story does not end there, however. Early this year, Mendonca began having pain in her hip area. She once again learned that her cancer was back - this time in her bones - and it had eaten a hole the size of a golf ball in her hip. For the time being, radiation therapy has stopped the cancer from growing.

“I don’t look sick, I don’t act sick, and frankly, I don’t feel sick,” said Mendonca, who turned 70 on May 13. “I just feel like I am getting older.”

Although she finally retired completely, the recent setback has not stopped the Mendoncas from continuing to live their lives. In March, they took a cruise through the Panama Canal, and in true “Mendonca fashion,” they entertained each other and other cruise goers by participating in and winning the “Not-So-Newly Wed Game,” having no shame in sharing hysterical, and very personal, tales of their life together.

Because of the complexity of her disease, and the recent symptoms of its progression, Mendonca returned to treatment with her original medical oncologist, Dr. Dice, now with Cancer Care Centers of South Texas (also a CTRC Institute for Drug Development satellite site) after leaving military medicine and returning to San Antonio.

“Pat’s tumor is slow growing, and she is now on Torisel® for symptom management. To think I would be treating Pat again after all these years of metastatic disease is unbelievable,” Dice said. “I remember telling her I thought she would have two good years left. I love it when I am wrong.”

Not only is Mendonca the longest living survivor with metastatic disease that Dice has treated in her medical career, she feels as if her patient is “almost part of her family.”

“Pat is like the ‘Unsinkable Molly Brown,’” Dice said. “Her attitude and zest for life keep her going. She could have given up a long time ago, but she didn’t.”

When the pair reunited, Mendonca was upset because there was not much her doctors could do for her, and her disease was again showing progression. Out of respect for her patient, Dice - like any good physician who vows to always be open and honest with her patients - had to deliver some tough news.

“Pat, you are a Stage Four cancer patient. You will always be Stage Four, and you are terminal,” Dice said to Mendonca, who was not happy with the symptoms (mainly fatigue and pain) she is now experiencing on a daily basis.

Mendonca appreciated the honesty.

“It’s not like I haven’t known the facts for years now, but I still didn’t like hearing it. But in reality, we are all terminal – what makes me different is that I am battling cancer. And that isn’t going to stop me from living,” a determined Mendonca said.

This spring the Mendoncas traveled to Pennsylvania for some down time with their youngest daughter and three grandchildren, making a special stop in the town of Hershey for a chocolate treat. This summer, they will embark on an Alaskan cruise, and according to Mendonca, “God willing, we are set for a trip to the Virgin Islands.”
Islands next year.”

“If it weren’t for the CTRC Institute for Drug Development at Brooke Army Medical Center, there is no doubt in my mind that Pat would not be here today,” Ray Mendonca said sincerely. “Those drugs have kept my best friend and soul mate right here beside me, where she belongs.”

The Mendoncas consider themselves “quite a crazy pair.” They credit their constant joking and laughter as the best medicine.

“I have never felt sorry for myself, and I’m not going to start now. God will take me when he is darn good and ready. But Ray says God doesn’t want me ‘cause I might try to reorganize heaven.”

Pat and Nurse
A Relationship like No Other

By Jill Byrd

One can certainly get to know a person over the course of nine years, especially when the reason for the first encounter is a matter of life and death. Pat Mendonca first met Jerry Medina, RN, in 1997, when she was diagnosed with renal cell carcinoma and treated at the CTRC Institute for Drug Development (IDD) Unit at Brooke Army Medical Center (BAMC). Medina was Nurse Manager at the clinic when Mendonca began her first clinical study. It was not long before an “awe-inspiring” friendship began.

“This may sound bad, but I always looked forward to Pat’s treatments – it was the highlight of the week,” Medina said as he reminisced with Mendonca sitting beside him. “Because she was a school teacher, we would always schedule her appointments late in the day - so she would often be the only patient in the treatment room. When she arrived we all gathered around her while she entertained us. A few minutes with Pat, and you will realize what a funny lady she is. When Pat’s around, there is always fun and laughter.”

To look at Mendonca, and especially after talking with her, one would never believe she is a cancer patient.

“Pat’s resilience awes me. Each time her cancer spread to another part of her body, and unfortunately, it did several times, she always took it in stride. She told us ‘start looking for something else, and make sure I keep my hair,’” Medina said with a smile.

Mendonca’s affection for Medina is reciprocated. In fact, she credits Jerry with always bringing a smile to her face and with saving her life.

“I’m not going to feel sorry for myself,” said Mendonca. “Sure, I have my moments (when I cry), but they aren’t often, and they are usually in the shower when I’m alone. But Jerry really helped me through those tough times.

“The IDD Unit at BAMC was small, and only had one bed but several infusion chairs. Jerry always made sure I got the bed,” Mendonca grinned as she winked to Medina. “He was like my angel; he helped me through chemo and would call me every night, on his own time, to check on me. Without a doubt, I know I wouldn’t still be here today if it weren’t for Jerry and the drug development unit at BAMC.”
Treating brain tumors no longer means having to put life on hold. Choosing Novalis Tx™ makes treatment a painless, non-invasive outpatient procedure. Most treatments last just minutes, so you can choose life over cancer.

www.CTRC.net • (210) 450-1000

My daughter had brain surgery this morning and spent this afternoon just being a kid.

Treating brain tumors no longer means having to put life on hold. Choosing Novalis Tx™ makes treatment a painless, non-invasive outpatient procedure. Most treatments last just minutes, so you can choose life over cancer.
Radiation oncology, alongside surgical and medical oncology, constitute the three disciplines at the Cancer Therapy & Research Center (CTRC) for the treatment of cancer. Over the past ten years, radiation oncology has experienced an explosive growth, with new treatment unit concepts, new radiation delivery techniques and most importantly increased precision of treatment delivery with a promise of improved treatment outcomes.

Intensity Modulated Radiation Therapy (IMRT) and Image Guided Radiation Therapy (IGRT) are two of the latest applications in the armamentarium of the radiation oncology team.

Historically, a typical patient receiving radiotherapy (RT) is scanned in a computed tomography (CT) scanner and the scan is used as a reference to build a custom radiation treatment plan. Scrutinized by a team of experts in radiation oncology, medical physics, and radiobiology, an individualized treatment plan is developed for optimal outcomes for the specific cancer and disease site. This plan will be executed for the subsequent five to eight weeks of treatment, assuming that the patient’s anatomy will not change during the treatment; an assumption that is frequently false, as the tumors often change size in response to radiation or the combination of chemotherapy and radiation treatments. Several tumors can also move during treatment as they are subjected to respiratory or cardiac motion. With real time image guidance, tracking and gating of the radiation beams, we can achieve near surgical accuracy in the delivery of the radiation to the target with maximal sparing of the surrounding healthy tissue.

With IGRT, physicians can image a patient daily by obtaining CT, radiographic and fluoroscopic images, prior to or during – treatment delivery. In doing so, they can verify the alignment of the radiation beams to the tumor and adapt the treatment plan if the target location or size has changed. Such integration of precision treatment delivery and real time image guidance is accomplished through the Novalis Tx™ treatment unit that is now installed at the CTRC. This unique machine for image-guided radiosurgery offers patients fast and accurate non-surgical treatments for cancer and other conditions in the brain, head, neck, and body. Novalis Tx incorporates advanced imaging, treatment planning, and treatment delivery technologies from Varian Medical Systems and BrainLAB, enabling physicians to carry out highly precise, non-invasive image-guided radiosurgery procedures quickly and with great precision.

Image-guided Radiosurgery (IGRS) involves quickly delivering precisely focused, high-energy radiation to a localized area to destroy tumors or to make other medical repairs that often cannot be addressed by conventional surgery, including some malignant and benign lesions, brain metastases, arteriovenous malformations, and functional lesions. The procedure is referred to as stereotactic radiosurgery (SRS) because the treatment is typically given in a single high dose fraction with surgical precision. There are, however, indications where the radiation is given in a few, rather than a single fraction, such as for small lesions in the lung or liver. This technique is referred to as stereotactic body radiation therapy (SBRT). Both treatment modalities are available with the Novalis Tx unit.

Novalis Tx combines a powerful linear accelerator, which rotates around the patient to deliver treatment beams from virtually any angle with a set of advanced image guidance and motion management tools that guide patient set up, positioning, and monitor motion during treatment. A high-definition, multi-leaf collimator...
shapes the treatment beam so it matches the shape of the tumor from every angle. Novalis Tx can be used to deliver frameless radiosurgery treatments, a more patient-friendly alternative to other systems that require immobilization with a head ring that attaches to the skull.

The versatility of the Novalis Tx platform enables the treatment team at CTRC to offer the most appropriate form of treatment based on patients’ specific needs, from stereotactic radiosurgery to stereotactic radiotherapy to longer courses of image-guided radiotherapy, with lower-dose treatments spread out over several weeks. This new treatment technology provides a powerful complement to the multi-disciplinary approach to cancer treatments offered at CTRC. Our team of oncology experts can now treat with the high precision of imaging and targeting inherent to the Novalis Tx unit, tumors that were previously challenging to treat successfully with conventional systems. As the only unit of its kind in South Texas, Novalis Tx can be used for the treatment of numerous cancerous and non-cancerous indications such as:

- Arteriovenous malformations (AVM)
- cavernous angiomas
- Trigeminal neuralgia
- Intractable seizures
- Parkinson’s disease
- Brain metastases
- Low and high grade gliomas
- Vestibular schwannomas
- Uveal melanomas
- Neurofibromas
- Spinal tumors
- Lung tumors
- Liver tumors
- Prostate tumors

Next Generation Technology Solves Old Problems

In contrast to the GammaKnife™ unit that has no image guidance capabilities and can only treat brain lesions, the Novalis Tx unit can treat both cranial and extra-cranial lesions using real-time imaging and with the same accuracy as the GammaKnife. The Cyberknife™ is another treatment modality that can be used for stereotactic radiotherapy, although it is capable of image guidance, it has a significantly lower dose rate resulting in very prolonged treatment times. In addition, it uses circularly shaped beams which can result in less conformal dose deposition as compared to the high resolution beam shaping capabilities of the Novalis TX unit.

The Novalis Tx allows a physician the flexibility to choose the most appropriate custom device to be used for the optimal treatment of the patient’s tumor. Whether with a circular beam or a shaped beam with the high resolution multileaf collimator, the treatments are always under image guidance, and the majority are non-invasive, painless and performed on an outpatient basis.

Novalis Tx is optimized for the fastest treatment delivery, improving both patient comfort and treatment accuracy. A Novalis Tx treatment or fraction typically lasts only minutes, contrary to the Gamma Knife and CyberKnife that may last over an hour and sometimes even longer. Throughout the treatment, Novalis Tx continuously tracks any micro patient movement and allows for automatic machine adjustments, ultimately increasing the level of accuracy and precision of radiation delivery. Novalis Tx has set a new standard with one of the most precise shaped beam technologies available, shaping each treatment beam to contour to the exact shape of the tumor and avoiding normal tissue with highly accurate and homogeneous doses.

Our multi-disciplinary team at CTRC is fortunate to have access to such an advanced technology, the only such unit in South Texas. Together with our colleagues from medical oncology, neurosurgery, thoracic surgery, gastroenterology and other specialties, we have a unique opportunity to shape the future of cancer care in South Texas, one beam at a time.

Niko Papanikolaou, PhD, is a Professor of Radiation Oncology and Radiology at the School of Medicine.
Michael S. Brown, MD  
Nobel Laureate  
The Story of Cholesterol Metabolism  
by Ray Hoese

Nobel Laureate Michael S. Brown, MD, made many important points in his detailed talk on the metabolism of LDL cholesterol, but he began with a note that was not about cholesterol. It was beneath a slide of him and his co-investigator Joe Goldstein, MD, with whom he shared the 1985 Nobel Prize for Medicine/Physiology. It was a picture of them taken 40 years ago when they were at the National Institutes of Health. “I don’t show this because we were handsome. I show this because we were young,” Brown said. “I show it because all the young people in the audience should realize that this is when things begin.”

Brown’s lecture, the final event celebrating the School of Medicine’s 40th Anniversary, was held May 5 at The UT Health Science Center Auditorium. Brown is also a Professor at UT Southwestern’s School of Medicine. He went on to make the point that although his list of titles now fills nearly half a page, he and Goldstein had none of those accoutrements when they began trying to figure out why a young girl and her brother had cholesterol levels 10 times higher than normal. Both children, afflicted with a genetic disorder known as familial hypercholesterolemia (FH), had endured multiple heart attacks by the first grade and only survived a few years beyond that.

Brown’s presentation began with the theme “Bedside to Bench and Back to Bedside” – emphasizing the process of helping patients through research. Brown showed a picture of the girl’s legs which had lumps in her skin caused by an inflammatory response to a buildup of excess cholesterol. Brown and Goldstein came to realize the same process that was happening in the girl’s skin was also happening in her coronary arteries. Cholesterol was damaging the lining of the arterial wall through an inflammatory response to the buildup of LDL cholesterol.

Brown and Goldstein studied cholesterol metabolism in cells they isolated from these patients and compared it with normal subjects. They found that cells digest cholesterol to make plasma membrane. Excess cholesterol is cast off. Mapping the pathway of normal and abnormal LDL metabolism and how cells take up and use cholesterol, as well as how the liver stores and produces LDL would take them a decade. The bedside examination of these ailing children led to more than ten years of “bench work” before they could get back to the bedside with a treatment.

Once they mapped the metabolic mechanisms, the question for Brown and Goldstein became “Why don’t our LDL receptors keep our LDL low?” High LDL is dangerous and causes heart disease. Why doesn’t cellular and liver metabolism, which can maintain equilibrium in LDL cholesterol levels, keep our LDL at a low, healthy level when we eat a high-cholesterol diet?
They looked at the LDL levels of other mammals, from newborn human babies, to pigs, rats, cats, and dogs. Even lions (from the Dallas zoo) that eat raw steak every day were included. Lions and dogs had LDL levels of less than 50 mg/dl. Meanwhile, they saw that human levels in Western cultures had most of the highest LDL levels in the world. This, of course, was a reflection of diet. Cholesterol levels and heart disease rates correspond tightly, as Brown showed in a graph, which also corresponds to countries with high-fat diets. (Figure 1.)

Brown pointed out another interesting finding. As a part of a study, they fed medical students large bacon and egg meals and tested their serum cholesterol over the next few hours. LDL levels did not go up. That brought up the question: How does a high-fat diet cause LDL to become elevated?

Brown explained: When we eat a diet rich in cholesterol, it builds up in our livers. The liver has a feedback mechanism for regulating cholesterol metabolism. When LDL rises, LDL production (and uptake) is reduced in the liver. Although the liver will lower its cholesterol production, it also reduces the amount of LDL it takes from the blood, resulting in elevated levels of serum LDL. Brown estimates the LDL production/uptake is only reduced by about 20 percent, but that is enough to result in dangerous levels.

Brown reminded the audience that in the mid-1970s, a Japanese scientist named Akira Endo discovered a class of fungal extracts that reduced cholesterol levels. They contain inhibitors which block reductase, a mechanism that would normally slow LDL-uptake by the liver. It facilitates an increase in liver LDL receptors so there is more uptake, causing serum LDL to fall. Brown said no one knows why the Aspergillus fungus produces compounds that inhibit reductase enzymes.

Brown and Goldstein published a study in 1981 showing dogs given the compounds had more receptors in liver cells and a reduction in serum cholesterol. They also found there was an increased rate at which cholesterol (tagged with a radio isotope) was removed from the blood in the presence of the inhibitors. This paved the way for development of the reductase inhibitor drugs known as statins. The first, Lovastatin, was cleared by the FDA in 1987.

Obviously, Brown said, the answer to our country’s heart disease problem is to change the diet. But it would be impossible to get Americans to adopt a diet one would typically find in a Japanese fishing village where they live on nearly 100 percent fish and rice. For those who cannot or will not change their diet, there are statins.

Brown also pointed out a crucial piece of research, the U.K. Heart Protection Study, which included more than 20,000 subjects and showed a decrease in coronary disease regardless of cholesterol level or other ailments. The study included patients with diabetes, hypertension, vascular disease and other issues. Brown said it showed that no matter what your cholesterol levels are, lowering LDL can result in a lower risk for heart disease. This is why statins are now a mainstay for treating heart disease. Being tireless researchers, Brown and Goldstein began to ask more questions.

“Why isn’t the protection greater?” Brown wondered aloud. “Why aren’t statins reducing heart disease by 90%, which is what you see if you lower cholesterol through diet?” At best, statins reduce risk by 30%.

Brown says it’s not settled yet, but there’s a clue in the Dallas Heart Study’s discovery of the gene PSCK9 – a protein that destroys LDL receptors and raises LDL. Brown suggests (and he clarifies that it is not a finding, but his and Goldstein’s opinion) that this gene may play a long-term role in reducing “cumulative exposure” to LDL in arteries. They theorize that arterial damage from LDL is cumulative over one’s lifetime. This gene helps keep artery damage from reaching its peak until a much later age (closer to 100) when people often die of other causes. He also noted that this suggests that earlier intervention, via diet and/or drugs, will lower the cumulative exposure to LDL and total risk of heart disease.

Brown ended the lecture where he began, with the theme of getting research back to the bedside where it is needed most—encouraging students and researchers in the audience to use patient care as the driver for research and to keep searching until you have answers to take back to the bedside. Brown also lectured at the Medicine Grand Rounds the next morning. In appreciation for his time, Interim Dean of the School of Medicine, Glenn Halff, MD, presented Brown with a painting of The University’s central square by famed San Antonio artist, Brother Cletus Behlmann, SM.
Congratulations, 
Dr. Henrich!

The Board of Regents of The University of Texas System has confirmed William L. Henrich, MD, MACP, as the new President of The UT Health Science Center at San Antonio.

The news of Dr. Henrich’s appointment was the source of celebrations and congratulations from every hall at the School. There was a hint of sadness from those in the Dean’s Office who have worked with him on a daily basis, where they will miss his positive attitude, sense of humor and the smile he had for any and all. No matter how difficult or unfriendly the situation, Dr. Henrich is known for his calm, positive approach - a rare and wonderful trait in a leader and co-worker.

However, those same people are thrilled at the bigger picture. Working with him has given them a front-row seat to see him as a focused visionary who believes strongly in the team approach. He is quick to take action and quick to defer credit away from himself and onto the other members of the team, no matter how great or small the accomplishment.

The selection of a new president is always a momentous event for the Board of Regents and the entire UT family. As you may understand, I have a special personal and professional interest in finding the best possible candidate to guide the institution that was my home for many years. I believe that the selection of Dr. Henrich by the Board as the sole finalist is an outstanding choice, and the right person who has the abilities to further enhance the reputation of The UT Health Science Center at San Antonio as a first-class comprehensive academic health center.

- Francisco Cigarroa, MD, Chancellor, UT System

The University of Texas Health Science Center San Antonio is a key partner for University Health System, and I am very much looking forward to working with President Henrich to continue to develop new strategies to advance our joint mission to provide the highest quality care to our patients and train the next generation of healthcare professionals. This is an exciting time for both organizations as we implement University Health System’s Target 2012: Capital Improvement Program, enabling us to expand capacity, and employ the very latest in diagnostic and advanced treatment tools at University Hospital and University Health Center - Downtown. I value Dr. Henrich’s leadership and vision as we work together to advance this partnership and our collective status as one the nation’s leading academic medical centers.

- George B. Hernández Jr., President/CEO University Health System

On behalf of CHRISTUS Santa Rosa, I want to extend my sincere congratulations to Dr. Bill Henrich on his elevation to the Presidency of The UT Health Science Center. We value Dr. Henrich’s long-standing commitment to strengthening the University’s partnership with CHRISTUS Santa Rosa. We look forward to continuing our work with the School of Medicine as we pursue efforts to expand and enhance Children’s and adult services in San Antonio and throughout South Texas.

- Don A. Beeler, FACHE, President & CEO CHRISTUS Santa Rosa Health Care

Bill Henrich is poised to become an outstanding president. He has a tremendous background in academic medical administration, research, education and clinical program creation combined with a deep understanding of the University’s initiatives and issues.

- Glenn Halff, MD, Interim Dean of the School of Medicine and Director, Transplant Center

Dr. Henrich has had a distinguished career in academic medicine as a teacher, a funded investigator and a leader; as a result, he has a thorough understanding of what an academic medical center should value and attempt to achieve. He has very high standards and is strongly committed to excellence; he has no interest in mediocrity.

- David Hills, MD, Chair, Department of Medicine

Dr. Henrich is uniquely qualified to take the helm of this University. The experience, leadership, and most importantly, the vision that he brings to this position will enable the Health Science Center to continue to thrive in each of our missions. He is a man of unwavering integrity and strong moral values who leads by example; we are blessed to have him on our team.

- Daniel Carlisle, MD, Chair, Department of Orthopaedics
Dr. Henrich had been the Dean of the School of Medicine since March 2006. The School has seen a tremendous growth in all categories since then, especially with the support of Dr. Henrich’s predecessor, Francisco Cigarroa, MD, who left as President in February to become Chancellor of the UT System.

Shortly after Dr. Henrich’s arrival, he established a vision for the School of Medicine that would propel it to join the ranks of elite schools of medicine through our traditional missions of healing, teaching and discovery. He led us through the ground work of this vision by retaining our outstanding and most productive faculty, recruiting new faculty who can contribute to our mission, creating a preeminent identity for our School and providing state-of-the-art facilities for our patients, students, faculty and staff.

Dr. Henrich has put a great deal of energy into building the three primary aspects of the School’s mission, with a vision to see the School recognized for the world-class research and expertise of its faculty. He speaks of the School’s faculty with respect and admiration, reminding those around him that the School’s reputation is built on their hard work.

On the educational front, the School’s Graduate Medical Education program was recently awarded the best accreditation status (Continued Accreditation) for five years. Also noteworthy is that the 2008 entering class had the highest GPA (3.7) and MCAT (30.0) than any other class in the history of the School. We continue to be capable of recruiting the brightest and most talented students.

The School received significant increases in research funding of 54 percent in the past two years. This represents a rise over that time in the School’s ranking of NIH funding in the 127 medical schools from 69th to 46th. Most noteworthy were the awarding of $33M from the Department of Defense for the Post Traumatic Stress Disorder Strong Star program and $33M from the National Institutes of Health for the National Children’s Study.

Dr. Henrich has also led an effort to re-invigorate the School’s clinical practice, UT Medicine San Antonio, and has supported the construction of the new Medical Arts & Research Center (MARC). Opening this fall, the MARC will allow faculty specialists to consolidate and integrate their practices, with a more efficient work flow and an electronic Medical Records system. Under Dr. Henrich, the clinical practice has grown in not just its scope of services but in the quality of its operations, including clinical service lines, customer service and access.

In late 2007, Dr. Henrich oversaw the merger of the Cancer Therapy & Research Center (CTRC) with the School of Medicine. It was one of the largest gifts ever received at The UT Health Science Center at San Antonio as well as within The University of Texas System. The faculty and staff of the CTRC have been successfully integrated into the School clinical operations and are being aligned with UT Medicine to gain efficiencies. Also, the renewal of CTRC’s accreditation as a Designated Cancer Center from the National Cancer Institute was submitted in January.

We spent this past year celebrating 40 years of growth in the School. Today, we celebrate one of the most dynamic leaders that this School has ever known. Thank you, Dr. Henrich, and our best wishes to you and Mary as you assume your new position as President of The University of Texas Health Science Center at San Antonio.
Doctors from the School of Medicine — MDs as well as some PhDs — visited area elementary, middle, and high schools on Monday, March 30th in recognition of National Doctors’ Day. Twenty eight faculty members from the School of Medicine made presentations to nearly 3,000 students in various schools in the greater San Antonio area and Laredo. Most of the presentations were made to high school students enrolled in health science technology, biology, and other science classes. Participating schools represented nine area public school districts and four private schools. Schools included Smithson Valley High in Spring Branch, just north of San Antonio, and some as far away as Laredo.

The doctors talked about how and why they chose their careers, sharing their personal journey. The recurring theme was a desire to help people in a profound way, which is what National Doctors’ Day is all about.

March 30th was set aside by presidential decree in 1991 to honor the people who help make lives better through diagnosis, treatment, research and education. We would like to honor them as well for reaching out to young people all over South Texas and encouraging them to work hard to pursue their goals. If those goals include the practice of medicine, it can make a strong and lasting impact on our community. Each student in the audience received a FUTURE DOCTOR t-shirt that featured the School of Medicine logo on the back.

Thanks to all the faculty who helped spread awareness of how the School of Medicine makes lives better in our community!

Alice Gong, MD, Professor of Pediatrics in the Division of Neonatology, talks to students at Marshall High School in San Antonio.

Ruth Berggren, MD
Jodi Gonzalez, PhD
•Lois Bready, MD,
Michael Parchman, MD
Ashlei W. Lowery, MD
•Luci Leykum, MD
•Donald J. Dudley, MD
Alice K. Gong, MD
S. Hinan Ahmed, MD
William Henrich, MD
Robert Reddick, MD
Carlos R. Jaen, MD, PhD
Lee Jones, MD
J. Michael King, MD
•Ronald Stewart, MD
St. Mary’s Hall
Somerset High School
Pershing Elementary School
Harmony Hills Elementary School
Glenoaks Elementary School
Whittier Middle School
Churchill High School
Holmes High School
Reagan High School
Health Careers High School
Health Careers High School
Healy Murphy High School
Edison High School
Sam Houston High School
Southside High School
Rajam Ramamurthy, MD
Michael Freckleton, MD
Merry L. Lindsey, PhD
Robin Brey, MD
Kent R. Van Sickle, MD
•Bonny Gillis, MD
K. Ashok Kumar, MD
•David Jones, PhD
Joanne G. Waltman, MD
Dan Hale, MD
Lauren Pankratz, MD
•Gabriela Brzankalski, MD
Michael McCarthy, MD
Stevens High School
St. Anthony High School
Johnson High School
East Central High School
Stevens High School
Johnson High School
Steele High School
J.B. Alexander High School & St. Augustine High School
Clark High School
Southside High School
Southside High School
Fox Tech High School
Smithson Valley High School
• denotes School of Medicine graduates
MARC Nearing Completion
The Medical Arts & Research Center or “MARC” for short, is nearing completion with clinical teams planning their first move-ins this summer. Located on Floyd Curl in the medical center (just down from the CTRC), the MARC will be the clinical home of UT Medicine San Antonio, the School of Medicine’s faculty practice plan. Currently, the various clinics are spread throughout the medical center and campus. This will allow most of the specialties to be consolidated into one location. The building has been designed to support the integration of the specialties, streamlining the work flow with many quality-of-care improvement initiatives, including an electronic medical records system. This will make the MARC a one-stop shop, pairing primary care with specialists and subspecialists. The building will also house full diagnostic and imaging labs, a food court and pharmacy. Primary Care, Orthopaedics, Rehabilitation Medicine, Physical & Occupational Therapy, and the Heart-Lung-Vascular Clinic will be the first to move in starting in August/September. The first patients will be seen there in early September. The other specialties will move in over the next six months.

New Leadership for the School of Medicine

William R. Allen, MHSA, has been appointed Senior Associate Dean for Finance, to include oversight of UT Medicine San Antonio finance and revenue cycle functions.

Luci K. Leykum, MD, MBA, MSC, has been appointed Interim Associate Dean for Clinical Affairs and Assistant Professor of Medicine.

UT Medicine San Antonio

Thomas C. Mayes, MD, MBA, was recently appointed Executive Director of UT Medicine. He is also Professor and Chair of Pediatrics in the School of Medicine, as well as a Physician–in–Chief at CHRISTUS Santa Rosa Children’s Hospital.

Carlayne E. Jackson, MD, is now Chief Medical Officer for UT Medicine. She is also Assistant Dean of Ambulatory Services and Professor of Neurology.

The MARC will be a premier outpatient facility and the largest in Central and South Texas. Visit UTMedicine.org for a full list of clinics.
School of Medicine Leadership Update

Randal A. Otto, MD, Chair of Otolaryngology, was appointed Physician-in-Chief of the Cancer Therapy and Research Center. Ronald M. Stewart, MD, has been named Professor and Interim Chair of Surgery. Jon A. Courand, MD, is now Vice Chair for Clinical Services, Pediatrics. Shawn L. Ralston, MD, is now Division Chief, Pediatrics/Inpatient Pediatrics. Donna B. Willey-Courand, MD, is now Division Chief, Pediatrics/Pulmonology. Donald J. Dudley, MD, is now Vice Chair for Research, Obstetrics and Gynecology. Mauricio Tohen, MD, is now Division Chief, Psych/Mood and Anxiety Disorders. Timothy Q. Duong, PhD, is now Division Chief, RIC/Magnetic Resonance Imaging. Geoffrey D. Clarke, PhD, is now Chief of Radiology/Research Education. Claire Escamilla, MD, is now Interim Division Chief, Surgery/Emergency Medicine.

Halff Named Interim Dean

Glenn A. Halff, MD, is now serving as the Interim Dean of the School of Medicine, effective February 2nd. He is also Director of the Transplant Center.

Faculty & Staff Honored at Presidential Awards Ceremony

Former University President Francisco Cigarroa, MD, and current President William Henrich, MD, were the hosts of a ceremony on January 29th in the Parman Auditorium to honor the 2009 Presidential Award winners. Winners from the School of Medicine were:

Peter Fox, MD, Director of the Research Imaging Center and Vice Chair of Research and Research Education in the Department of Radiology, received the Presidential Distinguished Scholar Award. Dr. Fox has been a leader in the field of functional neuro-imaging for over two decades. Among his many achievements, he is known for discoveries and key developments in the understanding of cranial blood flow, metabolism and other aspects of brain function.

David F. Jimenez, MD, FACS, Professor and Chair, Neurosurgery, was awarded the Presidential Clinical Excellence Award. Dr. Jimenez was recognized for his innovation and compassionate care in treating pediatric deformities,
including his groundbreaking, minimally-invasive procedure for treating craniosynostosis.

Nicolas Musi, MD, Associate Professor of Medicine/ Diabetology, was named the 2009 Presidential Junior Research Scholar for his work in research, teaching and practice in the community, especially in relation to type 2 diabetes and insulin resistance. His research has focused on many aspects of diabetes, including the discovery of the specific insulin-sensitizing mechanisms of Metformin, the most prescribed diabetes drug in the world.

Karen A. Hentschel Franks, DO, received the Clinical Excellence Award. She is the Assistant Professor of Pediatrics, and Medical Director of the Children’s Sleep Center at CHRISTUS Santa Rosa Children’s Hospital. She was cited for her thorough and compassionate care of children suffering from a variety of diseases. She joined the School in 2004, with a focus in Pediatric Sleep Medicine and teaches Pediatric Pulmonology.

Rebecca Loredo Hernandez, MD, of Radiology also received a President’s Award for Teaching Excellence. She was cited for her wealth of technical knowledge she brings to students, as well as a patient and dedicated approach to teaching as a whole. She joined the School in 1994 and has held many leadership positions since then.

Dawne Ideker-Sowle of Obstetrics and Gynecology received a President’s Gold Medal for Volunteer Service. She is an Administrative Assistant II who joined the School in 2005 and volunteers with the Girl Scouts of America. She currently works in the Bradley Service Unit here in San Antonio.

Darleen D. Loftice received an Employee Excellence in Service Award. She is an Administrative Assistant II in Pediatrics and was cited for being a team player integral to the department as well as for maintaining a positive attitude at all times.

Ian M. Thompson Jr., MD, will be given the highest award bestowed by the Society of Urologic Oncology — The Huggins Medal— at its annual meeting December 4 in Bethesda, Maryland. Dr. Thompson, who served as president of the society in 2004, is Professor and Chair of the Department of Urology and holder of the Henry B. and Edna Smith Dielmann Memorial Chair in Urologic Science. He also holds the Glenda and Gary Woods Distinguished Chair in Genitourinary Oncology at the Cancer Therapy & Research Center.

Five Faculty Chosen for UT Academy of Health Science Education

Five longtime faculty members have been invited to join the UT Academy of Health Science Education. Only 12 faculty of UT System health institutions are admitted annually.

Michael Lichtenstein, MD
Nan Clare, MD
Susan Naylor, MD
Frank Weaker, PhD
Thomas King, PhD
Chosen from the School of Medicine are, Michael Lichtenstein, MD, professor and chief of the Department of Medicine Division of Geriatrics, Gerontology and Palliative Medicine; and Nan Clare, MD, professor in the Department of Pathology. Dr. Clare is the senior associate dean in the School of Medicine and associate dean for academic affairs. Other members are Susan Naylor, PhD, professor; Frank Weaker, PhD, associate professor; and Thomas King, PhD, associate professor; all from the Department of Cellular and Structural Biology.

The distinction includes direct teaching in the classroom, mentorship of research projects in laboratories and development of innovative health science curricula. The five will be inducted for outstanding teaching of tomorrow’s biomedical scientists and health care professionals.

In Memorium: Michael Sanchez, MD

The Department of Surgery was deeply saddened by the death of Michael Sanchez, MD, Interim Chief of the Division of Emergency Medicine, who died Sunday, January 11, 2009, when struck by a car while jogging. Dr. Sanchez joined our Emergency Medicine Faculty in 2006 and was selected as Interim Chief of the Division of Emergency Medicine in August 2008. In that role, Dr. Sanchez was a tireless leader and a dynamic force engaged in revitalizing the University Hospital Emergency Center and School’s Division of Emergency Medicine. Mike was a beloved figure, a passionate worker, a great clinician and a wonderful teacher. He is survived by his wife, Appelle Sanchez, and two daughters, Carla Parker and Suzanne Sanchez. A memorial service was held in San Antonio on Wednesday, January, 14, 2009. Funeral and burial services were held on January 15, 2009, in New Mexico.

Carlisle Named Chair of Orthopaedics

Daniel W. Carlisle, MD, who was interim, was made permanent Chair of Orthopaedics on May 15. A native Texan, Dr. Carlisle received his undergraduate degree in Anthropology of Religion from the University of Houston before attending Medical School at The University of Texas Health Science Center at San Antonio, where he graduated first in his class of 200 students. He received his residency training at the Campbell Clinic in Memphis, Tennessee. After eight years of private practice in Oklahoma, he joined the Department of Orthopaedic Surgery in San Antonio in 2002. As the Interim Chair and Residency Program Director, he is able to devote all his time to running and improving the educational program here in San Antonio. His research interests include prosthetics and rehabilitation of the amputee as well as utilizing electronic/computer technology to enhance resident education.

Brey Named Founding Chair of Neurology

Robin L. Brey, MD, has been appointed the founding Chair of the Department of Neurology and the Edna Smith Dielmann Distinguished University Chair. Dr. Brey currently serves as the Associate Dean for Research, the Deputy Director for the Institute of Integration of Medicine and Science and is a Co-Principal Investigator for the Clinical Translation Science Award at the Health Science Center. On two occasions, she has served on the Board of Directors for the American Academy of Neurology. Under her stewardship, the funding of research in the School of Medicine has increased 56 percent over the last two years. Additionally, she has spearheaded the effort that resulted in the School offering the MD with Distinction in Research degree and increased the number of students that have enrolled in the Mentored Medical Student Supper Research Program.
CME - Library Offers Credit for Practice-Based Learning

The Office of Continuing Medical Education at the School of Medicine and the Health Science Center Libraries are joining forces to introduce a new Internet Point of Care (PoC) method for obtaining Continuing Medical Education credits. Internet PoC CME provides opportunities for structured, self-directed, online learning on topics relevant to clinical practice, to Health Science Center physicians and also to physicians who are affiliated with the library’s Circuit Librarian Health Information Program (CLHIN). During the process of completing each Internet PoC activity, the physician will do the following:

• Define a practice-based knowledge need and describe the need as a clinical question.
• Search a database of peer-reviewed, professional literature to find relevant articles (note that the literature search must be done by the physician rather than requested through the library).
• Using the form provided through the CME office, discuss how the articles found through the literature search assisted in answering the question and informing clinical care.
• Submit the completed form online to the CME office, which will keep track of the credits.

Continuing Education Credit

The UT Health Science Center at San Antonio School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The UT Health Science Center at San Antonio School of Medicine designates this educational activity for a maximum of 0.5 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Each Internet PoC activity is worth 0.5 CME credits. Physicians may earn up to 20 AMA PRA Category 1 credits.

Learn more about the Internet PoC program on the web site of the Office of Continuing Medical Education. A list of resources that can be used for the literature search is also available from the Library’s web site on the Internet Point of Care “Starting Point.” Please note that resources identified with an "💰" on either site are subscription-based and are available only to physicians affiliated with The UT Health Science Center. All other resources are available to the public.

www.cme.uthscsa.edu
**Selenium Study in JAMA**

A national study that involved 408 men at The University of Texas Health Science Center at San Antonio and Wilford Hall Medical Center concluded that two widely used health supplements do not prevent prostate cancer, despite promising results in two previous studies.

“If you’re taking vitamin E or selenium to prevent prostate cancer, you could better spend your money elsewhere, such as on a gym membership or a new pair of running shoes,” remarked one of the study’s authors, Ian M. Thompson, Jr., MD, Professor and Chair of Urology. He directs the genitourinary clinic at the Cancer Therapy & Research Center (CTRC) at The UT Health Science Center.

The Journal of the American Medical Association released the results online in December of 2008 and published the findings in its January 7 issue.

Also, a long-term study led by Thompson shows that follow-up radiation treatments (adjuvant radiotherapy) dramatically improve outcomes. The findings of this study, which began more than 20 years ago, were published in the March 2009 issue of The Journal of Urology.

**New device offers early warning for congestive heart failure**

One of the most reliable early signs of congestive heart failure (CHF) is increased blood volume in the left ventricle of the heart.

Marc D. Feldman, MD, and colleagues from the Janey and Dolph Briscoe Division of Cardiology at The UT Health Science Center worked with electrical engineers from UT Austin to develop a device that measures blood volume in animal models, accurately predicting CHF.

Their device, the ADVantage™ (short for Admittance-Derived Pressure Volume System), may someday help doctors predict CHF in humans, giving doctors precious time to increase medications to avert heart attacks.

**RAHC Research published in Nature Medicine**

New research may have uncovered a strategy for strengthening the only vaccine available today for protection against tuberculosis.

The current vaccine is prepared from a strain of the weakened bovine tuberculosis bacterium. Both the human and bovine pathogens have evasive mechanisms that prevent a stronger immune response. The new research has found ways to overcome these mechanisms and strengthen the immune response in mice.

The finding appeared in the March issue of the journal Nature Medicine. Subramanian Dhandayuthapani, PhD, a microbiologist with The UT Health Science Center at San Antonio, widely known as Dr. Pani, collaborated on the study with researchers from The UT Health Science Center at Houston and Baylor College of Medicine. Dr. Pani works in the Medical Research Division of The UT Health Science Center’s Regional Academic Health Science Center (RAHC) in Edinburg.

**Conway Co-Authors NEJM OB Study**

Associate Professor Deborah Conway, MD, was involved in the study examining elective Caesarean births. For a healthy mother and baby, scheduling a Caesarean section delivery one to two weeks earlier than necessary slightly raises the risk of respiratory and other preventable problems in newborns, and women should be counseled with this in mind.

That is the conclusion of a federally funded study conducted at 19 sites including The University of Texas Health Science Center at San Antonio. The study, sponsored by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), was reported in the January 8 issue of The New England Journal of Medicine.

**HSC Ranks in NIH Awards**

The School of Medicine at The UT Health Science Center at San Antonio ranked 46th of 127 medical schools in 2008 in research funding from the National Institutes of Health (NIH), according to an online report posted by Blue Ridge Institute for Medical Research.

The report, which included comparison figures from 2006 and 2007, showed the medical school’s 2008 NIH funding totaled $85.1 million. While this level is stable compared to 2007, it is dramatically higher than 2006 when its $42.4 million in NIH awards ranked 69th among all medical schools. The report was initially posted February 14, 2009, and was updated March 14.
Philanthropy Notes

Gwynne Keyland: Grateful for every breath

Gwynne Keyland of Fort Worth, Texas, underwent lung transplant surgery on April 3, 2008. John Calhoon, MD, faculty physician in the School of Medicine’s University Transplant Center, was her lead surgeon.

Here she recounts the incredible journey that took her from breathless to buoyant within a matter of months.

My life changed in an instant in 2004 when I was diagnosed with a progressive, fatal lung disease called Idiopathic Pulmonary Fibrosis (IPF). IPF has a prognosis of two to five years, and never having heard of it before, I was shocked. I was immediately put on continuous oxygen therapy, and by the winter of 2007, my disease had progressed to the point that walking just a few steps made me breathless.

I was listed for a lung transplant at UT Southwestern in Dallas in 2007. Thirteen months later, when my health was declining rapidly, and it was clear I might not survive until transplant, I decided to be double-listed, i.e., at two different centers. My Dallas doctor gave UTHSC San Antonio his approval. I made an appointment to meet with Dr. Luis Angel at the University Transplant Center and was listed the same week. From that very first meeting, I had the feeling the Lung Transplant Team was both a competent and compassionate group of people. I felt they were committed to helping their patients and sincerely cared about me.

Several months later, “the call” came from UTHSC saying they had a potential lung for me. I was air-ambulanced from Fort Worth, to San Antonio before midnight, and later that morning, received a single-lung transplant. The date was April 3 – my birthday! My transplant team sang “Happy Birthday” to me as I went under anesthesia.

I was up and moving around not long after surgery. The difference in my health was radical and immediate. I could breathe without supplemental oxygen and do things I hadn’t been able to do for years. Simple things seemed like tremendous accomplishments, and I felt I had participated in a miracle.

Today, I consider every breath a gift. I have been able to participate in my daughter’s wedding, to get in my car and drive myself wherever I want to go, and to celebrate life with friends and family. Most recently, I received the exciting news that my son and daughter-in-law are expecting a child – my first grandchild! Life is precious, and I am thrilled to be here to enjoy it.

Knowing that a single individual, my donor, made the precious gift which gave me a second chance at life is very humbling, and I will be forever grateful. A group of special friends created an organization in my honor named Gwynne’s Gift. Its mission is to expand awareness of the critical need for organ and tissue donation and to inform people how easy it is to become an organ donor. You can potentially give the gift of life to someone whose only hope is transplantation by signing up at donatelifetexas.com.

“Gwynne and her father have contributed $300,000 through their family foundation to assist our transplant research efforts. We are truly grateful for their support of the University Transplant Center, and especially our laboratories whose research is focused on making lives better for future transplant patients and their families.”

- Glenn A. Halff, MD, Interim Dean, School of Medicine, Director of the Transplant Center
Jannine Demars Cody, PhD: Ensuring brighter futures

Jannine is a woman on a mission. Shortly after her second daughter, Elizabeth, was born, her quest began. Elizabeth was born with a piece missing from one of her copies of chromosome 18—a condition called 18q-. Her bleak prognosis of lying in a frog-like position in a vegetative state for a normal lifespan fired an unrivaled passion and drive in Jannine. Her mission began, and she got busy – very busy.

She founded the Chromosome 18 Registry and Research Society in 1990 to help bring affected families together and to learn from each other. Jannine also enrolled in a PhD program at The UT Health Science Center. While pursuing her Ph.D., she developed the multidisciplinary Chromosome 18 Clinical Research Center.

She is now an Associate Professor and Interim Chief of the Division of Genetics in the Department of Pediatrics at the School of Medicine. She has raised over $5 million dollars for support of vital Chromosome 18 research, has testified before Congress on several occasions, and continues to make annual trips to Washington D.C. to make the Chromosome 18 case. Additionally, the Chromosome 18 Registry and Research Society now boasts over 2,000 families.

Ever vigilant, her goals have expanded:
- To use her researcher role to make abnormalities of chromosome 18 completely treatable conditions.
- To use her geneticist role to lead the evolution of clinical genetics from a diagnostic specialty to a treatment specialty.
- To use her Chromosome 18 Registry and Research Society role to ensure families get the information and services they need.
- To change public perception about mental retardation from strictly accommodation to changing and improving their health and condition.
- And, most importantly, to inspire people to believe in themselves and their power to make a difference.

“As a married student with children, the scholarships I have received have made it possible to attend medical school.”
- Mark Johnson, MSI

“I volunteered for the Thankathon because I wanted to give back. I am so grateful for my scholarship opportunity and know in the future I too want to give, so this fit perfectly.”
- Jessica Trevino, MSI

“My scholarship has been helpful to me because it’s helping finance my medical education! What a blessing! One of the greatest days of my life thus far has been the day I was informed of the award of my scholarship. Thank you!”
- Ben Wilson, MSII

Keeping the Connection

Each year, medical student scholarship recipients take time out to call the School’s benefactors, thank them for their generosity, let them know how much it means to them, and how they have personally benefitted from philanthropy.

As less than 15% of the School of Medicine’s annual budget comes from the State of Texas, we are state-assisted rather than state-supported. As a result, philanthropy is critical to our School’s success and helping us reach the next level. These are the faces of some of our student callers from last fall’s “Thankathon.”

“Jannine is the center of hope worldwide for a brighter future for the families of children with Chromosome 18 abnormalities”.
- Brian MacDonald, Vice President, Microsoft

“Jannine’s Chromosome 18 Clinical Research Center and the Chromosome 18 Registry and Research Society bring visibility to San Antonio and The UT Health Science Center. Her drive and efforts allow us to make significant contributions both nationally and internationally, and we are enormously grateful.”
- Glenn A. Halff, MD, Interim Dean

The Chromosome 18 Team (Dr. Cody pictured left in blue) gather around the large DNA sculpture in the Genome exhibit at the Witte Museum.
Dear Alumni:

As alumni of the School of Medicine, we have been given a great heritage. The legacy we create will be the result of how we apply our training every day.

In the age of evidence-based medicine, we can prescribe the “best” regimen and be confident that we are doing so, but now we must ask, “What can or what has the patient accessed and/or implemented of that regimen?” Physicians have NOT done their job when they simply prescribe the care that meets national standards. Doing the job of medicine today requires the physician to evaluate whether or not the patient has access to the care.

Recently, I saw a patient and discovered that he was taking only four of his nine medications because he could not afford all of them. He left with the best prescription and medicine; he left with hope. He left with an appointment to SETMA’s ADA-approved Diabetes Self-Management Education program with the fees waived. Because he could not afford gasoline to attend the classes, he left with a gas card and with all of his medications paid for by the SETMA Foundation. He also left with help initiating his disability application.

Are gas cards, disability, and paying for medications part of a physician’s responsibilities? Absolutely not. Are they part of the new structure and organization of medicine? Absolutely.

Depressed and glum in the hospital, such that no one wanted to go into his room, the patient I’ve described above left the office with a smile and a feeling of hope. Six weeks later, he returned. What an incredible transformation! His HgbA₁C was at target. He was being evaluated for an experimental program that has promising results to save his vision. He had attended diabetic education and was well on his way to obtaining disability certification. His Framingham Cardiovascular risk score had dropped from “high” to “moderate” and his Global Cardio Risk dropped from 7.5 to 5.4 (below 4 is normal). The most dramatic change was in his spirit. He became positive and hopeful, confident and engaging and was no longer withdrawn and depressed.

That is a legacy that reflects well upon our School of Medicine and fulfills the promise given to us the day we were capped and gowned as physicians.

James L. Holly, MD ’73
CEO, SETMA, LLP
www.setma.com
President, SETMA Foundation
President, UTHSCSA School of Medicine Alumni Association
When Bready arrived at The University of Texas at Austin to study biology, a passion she developed in high school, she had not yet set her sights on medicine. “By the time I declared a major in microbiology at the end of my first year, I had begun to see a number of links between that discipline and medicine,” Bready recalled. “That’s when I began to think about becoming a physician.”

When it came time to choose a medical school, Bready selected San Antonio’s School of Medicine because she liked its “friendly and collegial environment.” During her third-year rotations, she enjoyed each rotation in turn, and became particularly interested in anesthesiology. “I liked the residents I was working with and was drawn to the overarching patient care aspect that is so vital to anesthesiology,” she said. “In fact, one of the most important lessons I learned in medical school is that you always need to focus on patient care.”

Bready was fortunate to study under some of the School’s most renowned professors. “Paul Cutler had a wonderful narrative approach that brought internal medicine to life,” she recalled. “Carlos Pestana’s lyrical and dramatic style when he lectured on surgery was very engaging. I also remember fondly George Bannayan, who was a wonderful Professor of Pathology.”

After earning her medical degree in 1977, Bready headed to the University of North Carolina at Chapel Hill for an internship and then residency in anesthesiology. “I’ll never forget going up to Chapel Hill in the fall of my fourth year of medical school to interview for match,” Bready recalled. “I arrived at night in complete darkness. When I awoke the next morning to begin the day of interviewing, I was greeted by a beautiful campus in the midst of the foliage season!” She was named Chief Resident in the Anesthesiology program in 1979-80, an honor that bolstered her desire to teach medicine.

But as much as she enjoyed her experience in Chapel Hill’s idyllic college-town setting, Bready had plans to return to San Antonio.

She began her teaching career as Assistant Professor of Anesthesiology at the School of Medicine in 1980, earning tenure in 1985-86 before advancing to Associate Professor in 1986. Not long after she began teaching, she became involved in several research projects, which reinforced her interest in understanding how programs and processes work and in making them work more efficiently. This interest, along with her inherent organizational talents, led her to assume administrative duties even as she continued to teach. In the ensuing years, she became further involved with education in anesthesiology, in national organizations, and in a number of publications, including two textbooks. In 1987, at the invitation of her then-Chair R. Brian Smith, MD, she became Residency Program Director, with responsibility for coordination of resident selection, education, evaluation and scheduling. By 1992, she had risen to the level of Professor with tenure.

Developed and implemented by Bready, the University Preoperative Medicine Clinic (UPOMC) is a prime example of how she has combined her considerable talents and passion for patient care to advance the School’s mission. Through the UPOMC, patients scheduled for surgery are interviewed and counseled prior to surgery, ensuring that they are both mentally and physically ready.

Over the past several years, Bready has developed dual career paths in both Anesthesiology and Graduate Medical Education (GME). She was appointed Vice Chair of the Department of Anesthesiology and was appointed to the Accreditation Council for Graduate Medical Education (ACGME) Anesthesiology Residency Review Committee (RRC), the entity responsible for accreditation standards and program reviews for the specialty. In 2007, she was elected...
Chair of the RRC and continues to serve in that role.

In 1999, Bready became Director of GME for the School of Medicine, with responsibility for the institutional organization, oversight and accreditation of the more than 50 residency and fellowship programs sponsored by the School. Since that time, she has advanced to the position of Associate Dean for GME and Designated Institutional Official for The Health Science Center.

When Bready took the helm of the GME program, the School was on a three-year accreditation cycle, having received 10 citations following its previous accreditation visit. Since that time, the ACGME has confirmed her effectiveness as a leader. Following the ACGME visit in 2003, the School of Medicine’s accreditation cycle was extended to five years, the maximum length awarded. ACGME recently placed its stamp of approval on the School’s GME program again by renewing its five-year cycle following the 2008 visit.

In 2009, ACGME honored Bready with its Parker J. Palmer Courage to Lead Award. Given to designated institutional officials who are responsible for all ACGME-accredited residency programs at an institution, the award recognizes recipients’ success in creating an optimum learning environment for residents; encouraging the ethical, professional and personal development of residents; and ensuring safe and appropriate patient care. In the nomination letter, Anesthesiology Chair Jeffrey Andrews, MD, wrote, “She is hailed as a visionary leader, a hands-on administrator, and an innovative problem-solver by her colleagues… At the heart of Bready’s leadership is her complete devotion to the well-being of the patients and the residents under her care.”

Bready credits her professional success to several lessons she’s learned along the way: “Interesting opportunities arise—not necessarily when you are looking for more things to do—but I’ve found it worthwhile to explore them as they arise. And you need to reach out to people… to make contacts, network, share knowledge and build partnerships. I believe our GME enterprise has been successful because we’ve been doing these things well.”

Malcolm D. Orr, MD, Ph.D., Professor of Anesthesiology at the School of Medicine, affirmed that Dr. Bready practices what she preaches. “Dr. Bready avails herself of every opportunity for interaction with all levels of medical students, administrators, faculty, residents and staff,” he said. “During her tenure at the University, her leadership, academic achievements and work ethic have greatly contributed to the success of the Department of Anesthesiology as well as the University.”

In recognition of her nearly three decades of outstanding service and leadership at the School of Medicine, Bready received the 2008 Distinguished Alumnus Award. In his letter nominating Bready for the award, Christopher A. Bracken, MD, Ph.D., former Professor and Interim Chair of the Department of Anesthesiology at the School of Medicine, commented on Bready’s broad range of skills. He noted that she is “an exceptionally well-organized and astute administrator and a gifted physician and educator.”

As Dr. Bready leads GME in the future, she will need to use those same skills to negotiate the changing accreditation landscape. “The Institute of Medicine's 2008 recommendations aimed at improving patient safety through further reductions in duty hours, more focused faculty supervision, and better patient handoffs, pose significant challenges for GME programs throughout the country,” Bready noted. “We view these challenges as an opportunity to work cooperatively with the GME Committee, program directors, and faculty to maintain the quality of the educational experience and appropriate work environment for our more than 700 residents who work and learn on the San Antonio and Lower Rio Grande Valley campuses in our teaching hospitals.”
**Students and Faculty Receive Recognition at Senior Awards Dinner**

At the School of Medicine 2009 Senior Awards Dinner on March 30, the Alumni Association presented several awards to outstanding fourth-year students:

- **John Martin** and **Pamela Deaver** received Merit Awards, given for excellence and leadership.
- **Christian Welch** received the Paul Cutler Award for Clinical Excellence, given to the student who best demonstrates the qualities of clinical excellence achieved through rigorous scientific discipline, thoughtful historical perspective, and insightful communications skills.
- **Pamela Deaver** received the Carlos Pestana, MD, PhD Award, given for truly outstanding academic talent, clinical skills and ethical standards.

At the Senior Awards Dinner, several alumni-faculty members received Outstanding Faculty Awards as selected by students:

- **Gregory D. Bowling, MD** (2003, 2005), Medicine
- **Donald J. Dudley, MD** (1984), Obstetrics and Gynecology
- **Linda Johnson, PhD** (1978), Cellular and Structural Biology
- **Michael M. Johnson, MD** (2002), Medicine
- **Thomas L. Matthews, MD** (1997), Psychiatry and Medical Dean’s Office
- **Brenda J. Talley, MD** (1984), Psychiatry

**Attention 2008 Reunion Year Classes**

The bio-directories from Reunion Weekend 2008 are now available in print or electronic form for alumni in the following classes: 1973, 1978, 1983, 1988, 1993, 1998, 2003. If you would like a copy, please e-mail medalumni@uthscsa.edu and specify if you want a print or electronic PDF version. If you would like a print version, please be sure to include your preferred mailing address in the e-mail request.
Alumni Association Gets an Assist at Match Day

When it came time for fourth-year medical students to open their Match Day letters on March 19, the Alumni Association was there to lend a helping hand. The Association distributed engraved letter openers to all the seniors as they arrived at Floore’s Country Store in Helotes, Texas, for a day of food, drink, music, and fun with family, friends, faculty, and staff.

New Staff Members Take the Helm of Alumni Relations

David E. Perryman and Valerie Satt joined the School of Medicine this spring as Alumni Relations Director and Alumni Relations Assistant, respectively. Formerly Assistant Dean of Marketing and Communications and Adjunct Lecturer at the SMU Cox School of Business in Dallas, Perryman has also served as Director of Enterprise Communications at USAA in San Antonio. He earned his BA from Wesleyan University and his MA from SMU. Satt comes to the School of Medicine from the California Medical Association, where she served as Coordinator of Member Value and Benefits. She has a BA in Spanish with a Business Certification and has also worked at the University of California Davis School of Medicine and the Kerlan-Jobe Orthopaedic Clinic in Los Angeles. In their new roles, Perryman and Satt will strive to foster a community of alumni who are more connected to each other, better informed about the activities at the School of Medicine, and more involved in events and programs that deliver value to alumni while advancing the mission of the School.

Noteworthy Alumni Accomplishments

C. Philip Hudson, MD (1976) has become the third recipient of the Ben Saltzman, MD, Professorship in Rural Family Medicine at the University of Arkansas for Medical Sciences (UAMS). The award is named for one of Arkansas’ most respected rural physicians and educators. Dr. Hudson received this professorship in recognition of his outstanding performance as a faculty member within the Department of Family and Preventive Medicine at UAMS. A 2006 recipient of the “Teacher of the Year Award” given by the Family Medicine residents, he has inspired many residents to adopt full-scope practices, often including rural practices and underserved areas. Dr. Hudson will hold this professorship until June 30, 2011. During that time, he will develop and implement an educational project that meets the intent of the endowment to improve residency education.

Patrick M. Palmer, MD (1973) was elected by the Texas Orthopaedic Association to the Board of Councilors of the American Academy of Orthopaedic Surgeons. After receiving his medical degree at the School of Medicine, Dr. Palmer completed his residency in orthopaedic surgery at the University of California in San
Francisco and his fellowship at the Alfred I. DuPont Institute in Wilmington, Delaware. He is currently an orthopaedic surgeon with the Baptist Hospital System in San Antonio, with clinical interests in adult orthopaedic surgery and pediatric orthopaedic trauma. Dr. Palmer served on the Board of Directors of the Texas Orthopaedic Association and is active in several professional societies, including the American College of Surgeons and the Texas Medical Association.

Valerie J. Pronio-Stelluto, MD (1990), Assistant Professor of Medicine at Harvard Medical School, received the 2009 Herbert S. Waxman Award for Outstanding Medical Student Educator, given by the American College of Physicians. The Award is given for outstanding teaching in Internal Medicine. Dr. Pronio-Stelluto is also Affiliated Faculty at Massachusetts Institute of Technology (MIT), Director of Medical Student Education at Mount Auburn Hospital, and a Harvard Macy Scholar. She has received numerous awards for her teaching and mentoring, including the Irving M. London Teaching Award and the Thomas A. McMahon Mentoring Award from Harvard University-MIT Division of Health Science Technology. In addition, she serves as President-Elect of the School of Medicine Alumni Association Board.

David Teuscher, MD (1984) was elected Secretary of the Board of Councilors of the American Academy of Orthopaedic Surgeons at the 2009 Annual Meeting in Las Vegas. He will also serve on the Academy’s Board of Directors. After receiving his medical degree from the School of Medicine, Dr. Teuscher completed his internship and residency in orthopaedics at the Brooke Army Medical Center and held academic appointments with the University of Oklahoma and Baylor University. He completed 13 years of military service and was the Chief of Surgery at Reynolds Army Community Hospital, where he received numerous military awards, commendations, and decorations. His military service included deployment to the 144th Evacuation Hospital in northern Saudi Arabia in support of Operations Desert Shield and Desert Storm. Currently, Dr. Teuscher is in private practice at the Beaumont Bone and Joint Institute in Southeast Texas, specializing in sports medicine.

Save the Date:
Reunion Weekend 2009
October 15-17

Does this person look vaguely familiar?

Will this “ensemble extraordinaire” make an appearance at Reunion Weekend 2009?

Do you know what your clinical rotation classmates are up to?

You’ll find out the answers to these and other burning questions at Reunion Weekend 2009. Block your calendars and plan to attend the festivities in San Antonio from October 15-17. The Office of Alumni Relations will be mailing more information about Reunion Weekend in the weeks ahead. For more details, go to http://www.SAmedAlum.com.
Leonard V. Barley, MD (Psychiatry, 1973)  
Cleveland, OH  
Dr. Barley founded and sold a medical device company called Med Logic Global. He holds three patents in the area of wound healing and earned his MBA in 2000. He currently serves as Chief Medical Officer at Windsor Laurelwood, a 160-bed behavioral health facility in Cleveland, OH.

James A. Rogers, MD (Child and Adolescent Psychiatry, 1973) Austin, TX  
Dr. Rogers serves as Medical Director of the Texas Department of Family and Protective Services in Austin, TX. Previously, he served as UTHSCSA faculty in the Psychiatry Department from 1977-2007 and directed the affiliated training site (Child Guidance Center) from 1987-2007. Dr. Rogers and his wife, Emilie, have two daughters: Aimee (27), who graduated from UTHSCSA with a BSN in 2005 and Celeste (24), who just entered the Class of 2012 at UTHSCSA School of Medicine. His wife is continuing her career as a teacher and student of Iyengar yoga in Austin. They plan to return to San Antonio in a few years.

Robert D. Johnson, MD (Urology, 1973) Springfield, MO  
Dr. Johnson serves as Section Chairman at St. John’s Clinic in Springfield, MO. A member of the American Urological/American College of Surgeons, Dr. Johnson is married to Frances Trotter Johnson.

David S. Rothberg, MD (Ophthalmology, 1978) Clearwater, FL  
Dr. Rothberg has been practicing ophthalmology as a corneal specialist in Palm Harbor, Florida, for 24 years. He and his wife, Debra (Pruski) Rothberg, a UTHSCSA-trained BSN, have three children: Jackie (25), Andy (24), and Scott (21). A former President of the Tampa Bay Ophthalmology Society (2007-08), Dr. Rothberg and his wife love to travel, having recently returned from a photo safari in Botswana, Africa.

Jon F. Manjarris, MD (Orthopaedic Surgery, 1978) Corpus Christi, TX  
Dr. Manjarris serves as the CEO of Calallen Orthopaedics, LLP, where he has been practicing medicine for 24 years. He works with Don Cardenas, MD (Class of 1978). Dr. Manjarris and his wife, Dawn, have five children: Natalie (28), Nick (26), Jennifer (25), Mia (20), and Nathan (20).

John A. Standefer, Jr., MD (Otolaryngology, 1978) Frisco, TX  
Dr. Standefer serves as a staff surgeon at Lifestyle Lift, a facial plastic surgery practice in Dallas, TX. Dr. Standefer and his wife have five children.

Rolly R. Steen, MD (Anesthesiology, 1978) Dallas, TX  
Dr. Steen is an anesthesiologist in Dallas who has worked with the same surgeon for 26 years. He enjoys playing duplicate bridge and has participated in the North American Bridge Championships.

Stephen T. Hougen, MD (General Surgery, 1978) Victoria, TX  
Dr. Hougen serves as President of Crossroads Surgical Associates, LLP, in Victoria, TX. He and his wife, Marva (Buckert) Hougen, a UTHSCSA-trained RN (1976), have three children: Kara (25), Eric (24), and Zach (14).

H. Pat Hezmall, MD (Urology, 1978) Arlington, TX  
Dr. Hezmall is a partner at Urology Associates of North Texas. He and his wife, Jennifer, have one child (19).

Deborah D. Douglas, MD (Pathology, 1978) Burnet, TX  
Dr. Douglas retired from practicing medicine in 2002. She now lives on a ranch 10 miles from Burnet, TX, where she builds rock walls, grows organic vegetables, and tends Australorp chickens (www.burnetbird.com). The mother of two children, Jessica (26) and Andrew (23), she has published three books: Gone for the Day: Family Fun in Central Texas (Texas A&M University Press, 1995), Stirring Prose: Cooking with Texas Authors (Texas A&M University Press, 1998), and Foot Soldiers: Stories from the Breast Cancer 3-Day Walk (Aslan Publishing, 2006).

James B. Longino, MD (Pediatrics, 1983) Sulphur Springs, TX  
Dr. Longino is a self-employed pediatrician in Sulphur Springs, TX.

Brett R. Ravkind, MD ‘88  
Arlington, Texas  
October 6, 2008
Springs, TX. He and his wife, Vickie, have two children: Lauren (19) and Ann (17).

**David A. Flack, MD** (Pathology, 1983)
Wichita Falls, TX
Dr. Flack co-owns and serves as Lab Director of Pathology Associates of Wichita Falls, P.A. Previously, he served as Board President of the Wichita Falls Independent School District, and currently, he serves on the boards of the Priddy Charitable Trust and First National Bank – Wichita Falls. He and his wife, Allyson, have three children: Allen (24), Jennifer (21), and Natalie (17).

**R. Anton Posch, MD** (Family Medicine, 1983)
Renton, WA
Dr. Posch serves as Clinic Chief, Family Physician at the Renton Medical Center, Group Health Cooperative in Renton, WA. He and his wife, Lian-Tien, have four children: Michael (22), Liang (20), Erik (18), and Galen (12).

**Lorna W. Russell, MD** (Anesthesiology, 1983)
Paris, TX
Dr. Russell is a retired anesthesiologist living in Paris, TX, with her husband, Bill George. They have three children: Catherine (39), Elizabeth (36), and Geoff (31).

**Charles J. Morris, MD** (Family Medicine, 1983)
Houston, TX
Dr. Morris is Chief Medical Officer – Houston for United Healthcare.

**Bonnie B. Furner, MD** (Dermatology, 1983)
San Antonio, TX
Dr. Furner is a self-employed dermatologist living in San Antonio with her husband, Dave, and their two children: Luke (18) and Bryna (17).

**Camille (Clark) Glascock, MD** (Ob/Gyn, 1983)
Dallas, TX
Dr. Glascock practices obstetrics and gynecology in Dallas, TX. She and her husband, Homer, have one child: Hop (15).

**Alan L. Parks, MD** (Obstetrics /Gynecology, 1983)
San Marcos, TX
Recently semi-retired to spend more time with his wife and three children, ages 12, 10, and eight, Dr. Parks is starting an organization called Americans for a Balanced Budget Amendment to help America get back on a sound financial footing.

**Oralia T. Wells, MD** (Pediatrics, 1983)
McAllen, TX
Dr. Wells is a self-employed pediatrician in McAllen, TX. She and her husband, Franklin, have three children, ages 22, 16, and 14.

**Marion L. Coats, MD** (Ophthalmology, 1983)
Sarasota, FL
Dr. Coats and her husband, James Stephen, live in Sarasota, FL, where she has a solo private ophthalmology practice.

**Jeanette K. Stehr-Green, MD** (Public Health, 1983)
Port Angeles, WA
Dr. Stehr-Green is a self-employed consulting medical epidemiologist in Port Angeles, WA. She works in public health at the local, state, and national levels with a focus on infectious diseases, including parasitology, HIV/AIDS, hospital-acquired infections, and foodborne and waterborne diseases. She develops innovative epidemiologic training materials for public health practitioners and has authored numerous class case studies and four computer-based case studies available at www.cdc.gov/epicasestudies. In addition, she serves as an Adjunct Affiliate Clinical Faculty member at the University of Washington in Seattle.

**Joseph M.C. Leary, MD** (Otolaryngology, 1988)
Austin, TX
Dr. Leary serves as a board member of the Austin Regional Clinic, which he joined 15 years ago. He and his wife, Elizabeth, have six children: Paul (16), Matthew (14), Kelly (10), Michael (8), Kristen (5), and John (3).

**Richard S. Urso, MD** (Emergency Medicine, 1988)
Arlington, TX
Dr. Urso worked as an emergency physician for Questcare Emergency Services for eight years before becoming an owner and partner of Questcare Partners. He has also worked in the Emergency Department at the Medical Center of Arlington for 12 years. Outside of his full-time ER work, he occasionally serves as the Lead Medical Officer for
Holland America on their cruise ships and also teaches an “Introduction to Radiology Interpretation” class to Nurse Practitioner students. He and his wife, Lori, have one daughter, Lauren.

Lucas Wong, MD (Hematology and Oncology, 1988) Temple, TX
Dr. Wong is an Associate Professor of Medicine at the Texas A&M Health Science Center. He and his wife, Lisa, have three children: Zoelle (9), Lizette (7), and Marc Philippe (5).

Farhataziz, MD (Radiology and Oncology, 1988) Denton, TX
Dr. Farhataziz is a retired physician residing in Denton. He and his wife, Nasra, have three children: Shaneela (36), Nabeel (32), and Ebram (29).

Jeffrey T. Liegner, MD (Ophthalmology, 1988) Sparta, NJ
Dr. Liegner is an ophthalmologist residing in Sparta, NJ.

Marla R. Hersh, MD (Radiology, 1988) Tampa, FL
Dr. Hersh recently began working at the James A. Haley VA Hospital in Tampa, FL. Prior to that, she was in private practice in North Carolina and worked at the Moffitt Cancer Center at the University of South Florida. She and her husband, Martin, love to travel and have one daughter, Mollie (15).

Suzanne L. Bertram, MD (Preventive Medicine, 1988) Fort Collins, CO
Dr. Bertram is currently (and possibly temporarily) retired from practicing. She and her husband, Scott, have two daughters: Maggie (11) and Elena (9).

1990s

Beverly A. (Smith) Brennan, MD (Internal Medicine, 1993) Newbury, MA
After graduating, Dr. Brennan and her family moved around the country prior to settling 30 miles north of Boston, where she is currently a partner at Pentucket Medical. She and her husband, Patrick (Class of 1994), have three children: John (12) and twins Colin and Chris (9).

Ellen E. Claxton, MD (Obstetrics /Gynecology, 1993) Flagstaff, AZ
Dr. Claxton is a staff physician at North Country Health Care. She and her husband, James, have two children: Eliza (4) and Meg (3).

Dr. Osborn and her family have moved to England, completing two years of a four- to five-year tour. She is in the second year of a Master’s of Public Health Program at the London School of Hygiene and Tropical Medicine. She continues to do part-time clinical work at the University of Virginia in Charlottesville in emergency medicine and surgical-trauma critical care. Dr. Osborn has two children, Ashley (6) and David (2).

Darrell R. Pietsch, MD (Family Medicine, 1998) Waco, TX
Dr. Pietsch is a family practitioner at White Rock Family Medicine, which he bought from a retiring internist and allergist. He and his wife, Rhonda, have three children: Haley (15), Madison (10), and Hayden (7).

Rick Q. Ngo, MD (General Surgery, 1998) Houston, TX
Dr. Ngo is a general surgeon at Memorial and Katy Surgical Specialists. He and his wife, Nicole, have three children: Hannah (5), Matthew (4), and Alyssa (1).

Julie P. Hildebrand, MD (Internal Medicine/Rheumatology, 1998) Verona, WI
Dr. Hildebrand is a rheumatologist at the Dean Health System. She and her husband, Christopher, have two children: Anna (6) and Jack (7 months).

Kathryn Pool, MD (Obstetrics /Gynecology, 1998) Columbus, OH
Dr. Pool practices at Artman and Turner MD’s Inc. She and her husband, Dr. Joseph Pool (Class of 1998), have three children: Emma (9), Audrey (6), and Hayley (4).

Joseph Pool, MD (Internal Medicine, 1998) Columbus, OH
Dr. Pool works at Suburban Internal Medicine and has three children with fellow alumna, Dr. Kathryn Pool.

Steven K. Jones, MD (Family Medicine, 1998) Graham, TX
Dr. Jones is a family practitioner at Graham Medical Associates and is very active in church and community activities. He and his wife, Kristi, have two children: Joel (9) and Claire (6).
Michelle M. McKane, MD (Pediatrics, 1998)  
Houston, TX  
Dr. McKane serves as a faculty member of The University of Texas Medical School at Houston in the Emergency Medicine Department. She and her husband, Dr. Brice McKane (Class of 1998), have three children: Brice (9), Alexandra (7), and Aiden (3).

Bryce W. McKane, MD (Plastic Surgery, 1998)  
Houston, TX  
Dr. McKane is a self-employed plastic surgeon in Houston and has three children with fellow alumna, Dr. Michelle McKane.

Afrouz Gerayli, MD (Internal Medicine/Geriatrics, 1998)  
Woodland Hills, CA  
Dr. Gerayli has her own clinic in Camarillo, CA. She and her husband, Amir, have two children: Aiden (3) and Atessa (1).

Michael P. Teichelmann, MD (Anesthesiology, 1998)  
Woodway, TX  
Dr. Teichelmann is a partner at Mid Tex Anesthesia Associates. He resides in Woodway with his wife, Sara.

Amit Lahoti, MD (Nephrology, 1998)  
Houston, TX  
Dr. Lahoti is an Assistant Professor at The University of Texas MD Anderson Cancer Center. He and his wife, Sonia, have three children: Kate (6), Christopher (5), and Ethan (2).

Jana M. Lee, MD (Emergency Medicine, 1998)  
Scottsdale, AZ  
Dr. Lee is on staff at North Valley Emergency Specialists and Banner Thunderbird Medical Center. She and her husband, Henry, have two children: Nathaniel “Nate” (3) and Olivia (1).

Todd A. Canon, MD (Family Medicine, 1998)  
Portland, OR  
Dr. Canon is a family physician practicing at GreenField Health. He and his partner, Perry Heitman, reside in Portland, OR.

Mary A. Gonzales, MD (Physical Medicine and Rehabilitation, 1998)  
Austin, TX  
Dr. Gonzales is the Medical Director of the Seton Central Texas Rehabilitation Hospital. She and her husband, Fabio, have a one-year-old child.

Will Mitchell, MD (Family Medicine, 2003)  
St. Louis, MO  
Dr. Mitchell works at Monroe County Family and Sports Medicine in Columbia, IL. He and his wife, Lindsay, were married in October 2007 in St. Louis.

Trina M. Gates, MD (Anesthesiology, 2003)  
Renton, WA  
Dr. Gates is currently an Anesthesia Resident at Virginia Mason Medical Center in Seattle, WA. After serving as a Flight Surgeon for two years at the Naval Aerospace Medicine Institute in Pensacola, FL, she was deployed in 2006 to Al Taqaddum, Iraq, with a Marine Corps Unmanned Aerial Vehicle Squadron. Her daughter, Kylie, was born in November 2007.

Heather W. Wickless, MD (Dermatology, 2003)  
Chicago, IL  
Dr. Wickless is an Assistant Professor at Northwestern University in the Department of Dermatology. She and her husband, Scott, currently reside in Chicago, IL.

William L. Dobie, Jr., MD (Radiology, 2003)  
McGregor, TX  
Dr. Dobie resides in McGregor, TX, with his wife, Ashley, and six children: Alexis (14), Cheyenne (9), Robert (9), Kaiya (6), Trey (3), and Colton (2).

Nitesh B. Vachhani, MD (Gastroenterology, 2003)  
Albuquerque, NM  
Dr. Vachhani is currently a Fellow at the University of New Mexico.

Grace C. Lindhorst, MD (Ophthalmology, 2003)  
San Antonio, TX  
Dr. Lindhorst is a self-employed comprehensive ophthalmologist. She and her husband, Chris, have two children: Cole (6) and Riley (2).

Jennifer S. Jennings, MD (Neurosurgery, 2003)  
Syracuse, NY  
Dr. Jennings currently works at the State University of New York Upstate Medical University.

Kimberly M. Wheeler, MD (Family Medicine, 2003)  
Lockhart, TX  
Dr. Wheeler is a family physician at Lockhart Family Medicine. She and her husband, Russell, have two children: Megan (5) and Hannah (2).
Match Day 2009

The Class of 2009 received their Residency Match results on March 19. The class planned a celebration at Floores Country Store in Helotes which included live music and plenty of food. As students were called by name, they walked on stage to the tune of their favorite song and received the cherished envelope. Fifty six percent will be leaving Texas and 15 percent will stay in San Antonio.

Verónica Del Socorro Acosta, Pediatrics Residency, UTHSCSA
Uel Joseph Alexis, General Surgery Internship, Anesthesiology Residency, Mount Sinai Hospital, NY
Amanda DeAnn Almazan, Pediatrics Residency, UTHSCSA
Yanett Anaya, Obstetrics and Gynecology Residency, Baylor College of Medicine Houston
Charmaine Chauntelle Anderson, Ob/Gyn Residency, Reading Hospital Med Ctr, Reading, PA
Jonathan Osborne Anderson, Emergency Medicine Residency, Orlando Health, Orlando, FL
Adanna Linda Anyikam, Obstetrics and Gynecology, Metropolitan Hospital Center, New York, NY
Aya Cristin Aoshima-Kilroy, Psychiatry Residency, Baylor College of Medicine, Houston
Gary Alan Barber, Emergency Medicine Res, The Univ of New Mexico School of Medicine, NM
Scott Taylor Bassett, Internal Medicine Residency, Baylor College of Medicine, Houston
John Charles Bates III, Internal Medicine Internship, Tulane University School of Medicine, NO
Sherrie Joy Acoba Baysa, Pediatrics Residency, The UT Southwestern Medical School at Dallas
Lindy Yick Belayev, Internal Medicine Residency, UTHSCSA
Sarah Ann Borgogoni, Ob/Gyn Residency, Earl K. Long Medical Center, Baton Rouge, LA
Danny Lee Bowman, Ob/Gyn Residency, Texas Tech Univ Affiliated Hospitals, Odessa, TX
Tanner Steven Boyd, Emergency Medicine Residency, University of Virginia, Charlottesville, VA
Matthew A. Brimberry, Family Medicine Residency, John Peter Smith Hospital, Fort Worth, TX
Natalie Anne Britt, General Surgery Residency, UTHSCSA
Jessica Lambert Brown, Internal Medicine Residency, The UT Medical School at Houston
Ashley Michelle Brumm Ob/Gyn Residency, UTHSCSA

Haley Ann Burke, Int Med Internship, Presb Hosp, Dallas, Neurology Res, Univ/Colordo School of Medicine
Elizabeth Christina Campos, General Surgery Internship, Vanderbilt University Medical Center, Nashville, TN
Jeremy David Cannell, Radiology-Diagnostic Residency, Texas A&M-Scott & White, Temple, TX
Diane Godar Caranta, Obstetrics and Gynecology Residency, Naval Medical Center Portsmouth, VA
Stacey Colias Carter, General Surgery Internship, University of California at Los Angeles Medical Center
Bryan Scott Child, Pediatrics Residency, University of Rochester – Strong Memorial, Hospital, Rochester, NY
Janet Chen Chou, Pediatrics Residency, University of California at Irvine Medical Center Orange, CA
Edward Williams Clark, Psychiatry Residency, The UT Southwestern Medical School at Dallas
Rebekah Leigh Clarke, Transitional Residency, Christiana Care, Newark, DE Radiology-Diagnostic Residency, Baylor-Dallas
John David Cluley, Internal Medicine Residency, McGaw Medical Center of Northwestern University, Chicago, IL
Ann Marie Collier, Neurology Residency, University of Utah Affiliated Hospitals, Salt Lake City, UT
Christian Andrews Corbitt, Otolaryngology Residency, Baylor College of Medicine Houston
Travis McFarlane Cotton, General Surgery Residency, University of North Carolina Hospitals, Chapel Hill, NC
Brian Parish Cox, Radiology-Diagnostic Residency, The UT Southwestern Medical School at Dallas
Allison Nicole Daum, General Surgery Residency, The UT Medical Branch at Galveston, TX
Cedric Tarryl Day Jr., Obstetrics and Gynecology Residency, Texas A&M-Scott & White, Temple, TX
Steven D. Deas, Internal Medicine Residency, Keesler Medical Center, Keesler Air Force Base, MS
Pamela Marie Deaver, Int Med Internship, MA Gen Hosp, Radiology-Diag Residency, Brigham & Women’s Hosp
Scott Thomas Demarest, Pediatrics Internship, Child Neurology Residency, Children’s Nat’l Med Ctr, Wash, DC
Kadria Natasha Derrick, General Surgery Residency, Univ of Med and Dentistry of NJ, Newark, NJ
Prashant A. Desai, Intern Med Intern, St. Mary’s Med Ctr, SF, Rad-Onc Res, NY Hosp Med Ctr of Queens
Casey Jane Devine, Obstetrics and Gynecology Residency, John Peter Smith Hospital Fort Worth, TX
Lucia Zoraida Diaz, Pediatrics Internship, UTHSCSA, Dermatology Res, The UT Med School at Houston
Aurora Dominguez, Obstetrics and Gynecology Residency, Washington Hospital Center Wash, DC
Laura Marie Dominguez, Otolaryngology Residency, Virginia Commonwealth, Univ Health Sys, VA
Irina Dralyuk, Pediatrics Residency, The UT Medical School at Houston
Angela L. Duckworth, Emergency Medicine Residency, Orlando Health, Orlando, FL
Molly Katherine Dudley, Obstetrics and Gynecology Residency, UTHSCSA
Mind Harris Fein, Pediatrics Residency, Children’s Hospital Los Angeles, Los Angeles, CA
David Floyd Ferguson, Orthopaedic Surgery Residency, Texas A&M-Scott & White, Temple, TX
Jonathan Chase Findley, Psychiatry Residency, UTHSCSA
Amy Wallace Flores, Pediatrics Residency, UTHSCSA
Leticia Flores, Pathology Residency, UTHSCSA
Laurel Annette Franck, Pediatrics Residency, Phoenix Children’s Hospital, Phoenix, AZ
Timothy Paul Frank, Emergency Medicine Residency, Wake Forest Baptist Medical Center, Winston-Salem, NC
Vanessa Cristina Garcia, Cara Alexis Giannotti, Pediatrics Residency, Baylor College of Medicine, Houston

Friends and family celebrate Match Day at Floores Country Store
<table>
<thead>
<tr>
<th>Name</th>
<th>Residency/Medical Field</th>
<th>Institution</th>
<th>City/State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neil Anant Mauskar</td>
<td>General Surgery Residency</td>
<td>Washington Hospital Center, DC</td>
<td>Washington, DC</td>
</tr>
<tr>
<td>John Matthew Martin IV</td>
<td>Internal Medicine Internship, Dermatology Residency</td>
<td>UTHSCSA</td>
<td>Austin, TX</td>
</tr>
<tr>
<td>Seema S. Mahale</td>
<td>Internal Medicine Residency</td>
<td>Barnes-Jewish Hospital, St. Louis, MI</td>
<td>St. Louis, MI</td>
</tr>
<tr>
<td>Megha Madhukar</td>
<td>Internal Medicine Internship</td>
<td>Baylor College of Medicine, Houston</td>
<td>Houston</td>
</tr>
<tr>
<td>Meng Lu</td>
<td>Internal Med Intern</td>
<td>Albert Einstein Med Ctr, PA, Ophthal Residency</td>
<td>Columbus, OH</td>
</tr>
<tr>
<td>Amy Liu</td>
<td>Pediatrics Residency</td>
<td>University of Chicago Medical Center, Chicago, IL</td>
<td></td>
</tr>
<tr>
<td>Joanna Renee Linsteadt</td>
<td>Internal Medicine Residency</td>
<td>UTHSCSA</td>
<td>Houston</td>
</tr>
<tr>
<td>Jeffrey Earl Levea</td>
<td>Internal Medicine Residency</td>
<td>Cleveland Clinic Foundation, Cleveland, OH</td>
<td></td>
</tr>
<tr>
<td>Jennifer Kelly</td>
<td>Pediatrics Residency</td>
<td>Medical University of Wisconsin, Madison, WI</td>
<td></td>
</tr>
<tr>
<td>Brian S. Hailey</td>
<td>Int Med Internship</td>
<td>Univ of Maryland Medical Center, Baltimore, MD</td>
<td></td>
</tr>
<tr>
<td>Mark Edward Hamaker</td>
<td>Pediatrics Residency</td>
<td>UTHSCSA</td>
<td>Houston</td>
</tr>
<tr>
<td>Leslie Claire Hamlett</td>
<td>Emergency Medicine Residency</td>
<td>Michigan State University, Lansing, MI</td>
<td></td>
</tr>
<tr>
<td>Ronald Douglas Hogue</td>
<td>Orthopaedic Surgery Residency</td>
<td>UT Southwestern Medical School at Dallas</td>
<td></td>
</tr>
<tr>
<td>Megan Murphy Hogue</td>
<td>Pediatrics Residency</td>
<td>University of Texas Southwestern Medical School at Dallas</td>
<td></td>
</tr>
<tr>
<td>Travis Laws Holloway</td>
<td>General Surgery Residency</td>
<td>UTHSCSA</td>
<td>Houston</td>
</tr>
<tr>
<td>Jordan Enid Hollsten</td>
<td>Transitional Residency</td>
<td>Univ of TN Grad SOM, Ophthalmology Residency</td>
<td>Memphis, TN</td>
</tr>
<tr>
<td>Andrew Chung-Pi Hsu</td>
<td>Int Medicine, St. Mary’s Med Ctr SF, Med and Rehab Residency</td>
<td>Univ of Wash Affiliated Hosp</td>
<td></td>
</tr>
<tr>
<td>Cherwin Stephen Hsu</td>
<td>Int Med Residency</td>
<td>Olive View-UCLA Medical Center, Salt Lake City, UT</td>
<td></td>
</tr>
<tr>
<td>Richard Lloyd Hunt</td>
<td>Internal Medicine Residency</td>
<td>Texas A&amp;M-Scott &amp; White, Temple, TX</td>
<td></td>
</tr>
<tr>
<td>Hassan Irshad</td>
<td>Transitional Residency</td>
<td>Albert Einstein Med Ctr, PA, Rad-Diag Residency</td>
<td>Houston</td>
</tr>
<tr>
<td>Jacquelyn Audra Jetton</td>
<td>Transitional Residency</td>
<td>Legacy Emanuel-Good Samaritan Portland, OR, Ophthalmology Residency</td>
<td>Dallas, TX</td>
</tr>
<tr>
<td>Christopher Louis Jimenez</td>
<td>General Surgery Internship</td>
<td>Rush University Medical Center, Chicago, IL</td>
<td></td>
</tr>
<tr>
<td>Jeremy Christopher Jones</td>
<td>Anesthesiology Residency</td>
<td>Vanderbilt University Medical Center, Nashville, TN</td>
<td></td>
</tr>
<tr>
<td>Pearl Kurian Jones</td>
<td>Int Med-Neurology Residency</td>
<td>Vanderbilt University Medical Center, Nashville, TN</td>
<td></td>
</tr>
<tr>
<td>Stacy L. Kaiser</td>
<td>Emergency Medicine Residency</td>
<td>Med College of Wisconsin Affl Hosp, Milwaukee, WI</td>
<td></td>
</tr>
<tr>
<td>Ravish Kapoor</td>
<td>Anesthesiology Residency</td>
<td>Penn State Hershey Medical Center, Hershey, PA</td>
<td></td>
</tr>
<tr>
<td>Steven Jeffrey Katz</td>
<td>Emergency Medicine Residency</td>
<td>Barnes-Jewish Hospital, St. Louis, MI</td>
<td></td>
</tr>
<tr>
<td>Jacqueline Reeds Keeedy</td>
<td>Int Med Residency</td>
<td>Univ of Washington Affiliated Hosp, Seattle, WA</td>
<td></td>
</tr>
<tr>
<td>Rebecca Elaine Sokel Kidd</td>
<td>Pediatrics Residency</td>
<td>Univ of Arkansas at Little Rock, AR</td>
<td></td>
</tr>
</tbody>
</table>

**Match Day Results 2009**

Bradley Dale Gilliam, Orthopaedic Surgery Residency, UTHSCSA

Samantha Nicole Gomez, Pathology Residency, The University of Texas Medical Branch at Galveston

Tamara Lourdes Gomez, Pediatrics Residency, St. Louis Children’s Hospital, St. Louis, MO

Jason Christopher Goodwin, General Surgery Residency, Fort Sam Houston

Michael Brandon Gottschalk, Orthopaedic Surgery Residency, Emory University School of Medicine, Atlanta, GA

Allison Caren Grimes, Pediatrics Residency, UTHSCSA

Monica Grover, Pediatrics Residency, Baylor College of Medicine, Houston

Anasuya Gunturi, Internal Medicine Residency, Beth Israel Deaconess Medical Center, Boston, MA

Theodore Bryan Gupton Jr., Transitional Res, John Peter Smith Hosp, Fort Worth, Rad-Diag Residency, UTHSCSA

Clarissa P. Gutierrez, Ob/Gyn Residency, Ohio State University Medical Center, Columbus, OH

Genaro Jesus Gutierrez, Surgery Internship, UTHSCSA, Anesthesiology Residency, George Washington Univ, Wash, DC

Jeremy Todd Hackney, Genl Surgery Internship, Indiana Univ School of Medicine, Indianapolis, IN

Brian S. Hailey, Int Med Internship, Univ of Maryland Medical Ctr, Rad-Diag Residency, Baylor COM Houston

Mark Edward Hamaker, Pediatrics Residency, UTHSCSA

Leslie Claire Hamlett, Emergency Medicine Residency, Michigan State University, Lansing, MI

Wesley Doyle Harden, Internal Medicine Residency, Univ of Wisconsin Hosp and Clinics, Madison, WI

Jill Alison McClain Hobbies, Anesthesiology Residency, Maine Medical Center, Portland, ME

Caren Tracy Hoffman, General Surgery Internship, Baylor College of Medicine, Houston

Grant Douglas Hogue, Orthopaedic Surgery Residency, The UT Southwestern Medical School at Dallas

Megan Murphy Hogue, Pediatrics Residency, The University of Texas Southwestern Medical School at Dallas

Travis Laws Holloway, General Surgery Residency, UTHSCSA

Jordan Enid Hollsten, Transitional Residency, Univ of TN Grad SOM, Ophthalmology Residency, Univ of FL

Andrew Chung-Pi Hsu, Int Medicine, St. Mary’s Med Ctr SF, Med and Rehab Residency, Univ of Wash Affiliated Hosp

Sherwin Stephen Hsu, Int Med Residency, Olive View-UCLA Medical Center, Sylmar, CA

Richmond Lloyd Hunt, Internal Medicine Residency, Texas A&M-Scott & White, Temple, TX


Hassan Irshad, Transitional Residency, Albert Einstein Med Ctr, PA, Rad-Diag Residency, Thomas Jefferson Univ, PA

Jacquelyn Audra Jetton, Transitional Residency, Legacy Emanuel-Good Samaritan Portland, OR, Ophthalmology Residency, Univ of OK

Christopher Louis Jimenez, General Surgery Internship, Rush University Medical Center, Chicago, IL

Jeremy Christopher Jones, Anesthesiology Residency, Vanderbilt University Medical Center, Nashville, TN

Pearl Kurian Jones, Int Med-Neurology Residency, Neurology Residency, Vanderbilt Univ Med Ctr, Nashville, TN

Stacy L. Kaiser, Emergency Medicine Residency, Med College of Wisconsin Affl Hosp, Milwaukee, WI

Ravish Kapoor, Anesthesiology Residency, Penn State Hershey Medical Center, Hershey, PA

Steven Jeffrey Katz, Emergency Medicine Residency, Barnes-Jewish Hospital, St. Louis, MO

Jacqueline Reeds Keeedy, Int Med Residency, Univ of Washington Affiliated Hosp, Seattle, WA

Rebecca Elaine Sokel Kidd, Pediatrics Residency, Univ of Arkansas at Little Rock, AR

Miles Francis Kilroy, General Surgery Residency, Baylor College of Medicine, Houston


Jeannie Kim, Phys Med & Rehabilitation Residency, Univ of Wisconsin Hosp & Clinics, Madison, WI

Theresa Nguyen Kinard, Pathology Residency, The UT Southwestern Med School at Dallas

Michael Bruce Koehler, Emergency Med Residency, Carolinas Med Ctr, Charlotte, NC

Juannan Grace Kotara, Psychiatry Residency, drip Education Programs, Austin, TX

Brent Wallace Lacey, Internal Medicine Residency, Navy Medical Center, San Diego, CA

Casey Lee Lagan, Orthopaedic Surgery Residency, Texas A&M-Scott & White, Temple, TX

Jeffrey Earl Levea, Internal Medicine Residency, UTHSCSA, Anesthesiology Residency, George Washington Univ, Wash, DC

Grayson Moore places a pin on the map to indicate the city of his residency.
Jon Richard Maust, Psychiatry Residency, Wright Patterson Medical Center, Wright Patterson AFB, OH
Charles Woodrow McCurley IV, Family Med Residency, McLennan County Family Med, Waco, TX
Wendy Peet McCurley, Family Medicine Residency, McLennan County Family Medicine, Waco, TX
Michael Loyd Megison, General Surgery Res University of Alabama Medical Center, Birmingham, AL
Michael Kurt Merz, Orthopaedic Surgery Residency, Univ of Illinois College of Medicine, Chicago, IL
Catherine Lindsay Meshew, Family Medicine Residency, Texas A&M-Scott & White, Temple, TX
John Richard Miller, Gen Surgery Intern, UTHSCSA, Anesthesiology Res Univ of AZ Aff Hospitals, AZ
Brandi Nicole Milmo, Psychiatry Residency, National Naval Medical Center, Bethesda, MD
Bryan Woel Ming, Orthopaedic Surgery Residency, John Peter Smith Hospital, Forth Worth, TX
Kalpa Kantilal Mitra, Family Medicine Residency, Memorial Hermann Hospital, Sugar Land, TX
Jorge Antonio Montes, Internal Medicine Internship, Ophthalmology Residency, UTHSCSA
John Ross Montford, Internal Medicine Residency, Univ of Colorado School of Med, Aurora, CO
Marlene Morales, Emergency Medicine Residency, CHRISTUS Spohn Memorial Hospital, Corpus Christi, TX
Jami Larsen Morgan, Obstetrics and Gynecology Residency, UT Southwestern Medical School, Dallas
David Ryan Mullican, Family Medicine Residency, CHRISTUS Santa Rosa, San Antonio, Texas
Lauren Andreae Murray, Ob/Gyn Residency, UT Southwestern Medical School, Dallas
Myrna Rita Nahas, Internal Medicine Residency, Univ of California at Los Angeles Medical Center
Kevin Michael Narag, Internal Medicine Residency, Beth Israel Medical Center, New York, NY
Katherine Elaine Neubecker, Internal Medicine Residency, UT Southwestern Medical School, Dallas
Donna Nguyen, Internal Medicine Internship, The University of Texas Medical School at Houston
Sarah Bonilla Nickerson, Pediatrics Residency, Texas A&M-Scott & White, Temple, TX
Daisy Corina Nieto, Int Med Residency, Univ of Minnesota Med School, Minneapolis, MN
Reid Nelson Orth, Emergency Medi, New York Presb Hosp-Columbia & Cornell, New York, NY
Rachel Michelle Osborn, Ob/Gyn Residency, UT Southwestern Medical School, Dallas
Rupal Patel, Internal Medicine Residency, UTHSCSA
Sean Paul, Trans Residency, John Peter Smith Hosp, Fort Worth, Ophthal Residency, U of OK-Dean McGee Eye Institute
Jorge Javier Peacher, Gen Surgery Internship, Univ of Colorado SOM, Aurora, CO
Lara Marina Pierce, Family Medicine Residency, Clarkson Family Medicine, Omaha, NE
Catherine Davenport Pollock, Int Med Internship, Union Mem Hosp, MD, Phys Med & Rehab Residency, Sinai Hosp, Baltimore, MD
Angel Alejandro Pulido, Int Med Internship, Neurology Residency, UC School of Medicine, Aurora, CO
Praveen Kalipatnam Rao, Internal Medicine Residency, Barnes-Jewish Hospital, St. Louis, MO
Jose Roberto Rosillo, Emergency Medicine Residency, UT Southwestern Medical School, Dallas, TX
Masoud Saman, Otolaryngology Residency, New York Eye and Ear Infirmary, New York, NY
Sarah Ann Saxon, Otolaryngology Residency, Univ of NM School of Medicine, Albuquerque, NM
Michael Carlyle Scott, Int Med-Emergency Med Residency, Univ of Maryland Medical Center, Baltimore, MD
Scott Jeffrey Selingier, Internal Medicine Residency, Legacy Emanuel-Good Samaritan, Portland, OR
Angela Diane Shedd, Int Med Internship, McGaw Med Ctr of Northwestern Univ, Dermatology Residency, UT Southwestern
Neha Sinha, Gen Surgery Internship, Methodist Hosp, Houston, Rad-Diag Residency, St. Barnabas Med Ctr, Livingston, NJ
Christopher Matthew Sobey, Anesthesiology Residency, Vanderbilt Univ Med Ct, Nashville, TN
Lauren Gayle Sowards, General Surgery Residency, The UT Medical Branch at Galveston
Hayden W. Stagg, General Surgery Residency, Texas A&M-Scott & White, Temple, TX
Ashlie Renee Stowers, Anesthesiology Residency, UTHSCSA
Jennifer Jill Street, Ob/Gyn Residency, UT Southwestern Medical School at Dallas
Kathryn Elisabeth Swann, Ob/Gyn Residency, UTHSCSA
Nicole Marie Buchorn Tapia, General Surgery Residency, Baylor College of Medicine, Houston, TX
Tania Tarjan, Internal Medicine Residency, Presbyterian Hospital of Dallas, Dallas, TX
Rae Christina Taylor, Pediatrics Residency, UTHSCSA
Stefanie Amy Teng, Internal Medicine Residency, University Hospital-Cincinnati, Cincinnati, OH
Joel Torres, Emergency Medicine Residency, Texas Tech University Affiliated Hospitals, El Paso, TX
Ginger E. Truitt, Ob/Gyn Residency, St. Francis Hospital, Hartford, CT
Karina Vasquez, Internal Medicine Residency, UTHSCSA
Mario Antonio Villaseñor, Pediatrics Residency, University of Colorado School of Medicine, Aurora, CO
Jennifer Ann Walker, Emergency Medicine Residency, Wake Forest Baptist Medical Center, Winston-Salem, NC
Melissa Kay Webb, Pediatrics Residency, University of Colorado School of Medicine, Aurora, CO
Christian Monahan Welch, Anesthesiology Residency, UTHSCSA
Jennifer M. Welty, Pediatrics Residency, San Antonio Uniformed Serv Health Edu Consortium-BAMC, Ft Sam Houston
Kirsten Ann Wennermark, General Surgery Residency, University of Colorado School of Medicine, Aurora, CO
Erin Ahrens Whitney, Internal Medicine Residency, Baylor College of Medicine, Houston, TX
Peter J. Whitney-Cashio, Emergency Medicine Residency, University of Virginia, Charlottesville, VA
Brian Preston Wilson, Radiology-Diagnostic Residency, Texas A&M-Scott & White, Temple, TX
Amanda Jo Woltz, Int Med Internship, Presb Hosp of Dallas, Dermatology Residency, Texas Tech Univ Affl Hosp. Dallas
Amanda Mabray Wright, Psychiatry Residency, UTHSCSA
Yingda Linda Xie, Internal Medicine Residency, Oregon Health and Science University, Portland, OR
Randy Yeh, Internal Med, Olive View-UCLA MC, Radiology-Diagnostic, NY Presb. Hosp-Columbia Univ MC
Marcy Eileen Youngdahl, Family Medicine Residency, CHRISTUS Santa Rosa, San Antonio, TX
Pictures from the Past

School of Medicine’s 40th Anniversary Photo Album

These pictures from the first two years of the School were generously supplied by F. Carter Pannill, Jr., MD, Dean of the School of Medicine from 1965 to 1972.

Dedication of the first building, July 12, 1968.

School of Medicine courtyard with Bexar County Hospital, now University Hospital, in background.

Faculty at the first commencement ceremony, June 14, 1970.

Wilbur Cohen (left), receives a key to the city from Mayor Walter W. McAllister.

Exhibition of paintings by Michael Frary, Professor of Art, The University of Texas, Austin in 1970.

Members of faculty and their wives sign in at the reception honoring artist Michael Frary.
Carter Pannill, MD, (middle) receiving a thank you gift for all of his contributions to the San Antonio Heart Association.

First graduating class of 1970 enjoy a poolside celebration at the Lutcher Center.

Fred Taylor, MD, leads the procession with the carrying of the Mace.

Carlos Pestana, MD, PhD and Joseph Seitchik, MD with student at graduation.

Rabbi David Jacobsen with Wilbur Cohen, who was cabinet officer of Health Education and Welfare, under President Johnson.
Usatine is already contemplating his next book project: a version of the atlas designed for the general population. “It’s hard to stop, at least for me,” he says.

THE EDITOR’S CHALLENGE

Lois Bready, MD, knows that feeling. Bready, Associate Dean for Graduate Medical Education and Professor and Vice Chair of the Department of Anesthesiology, has edited four editions of “Decision Making in Anesthesiology.” The latest, which was published in 2007, includes 220 chapters.

“You can imagine the complexity,” Bready says.

Being editor of a textbook is like being the producer of a film, she says. You either come up with the idea and convince the publishing house to do it, or you’re approached by the publishing house, like Bready was.

The editor is given a contract and a timeline – which Bready’s publisher was flexible on, thankfully, because she learned the difficulty of getting chapters delivered from busy people who tend to underestimate the time it takes to write and revise a textbook chapter.

The editor also shepherds all of the contributing authors, keeping tabs on their progress and constantly going back and forth with authors who say, “Yes, I’ll have it to you by next Friday.”

“Maybe they do and maybe they don’t,” Bready says. “Once you figure out who delivers on time, you come to worship the ground they walk on.”

The editor also must be mindful of the book’s earliest submitters, being careful that their work doesn’t sit on a shelf and age out while waiting for slower contributors to submit their chapters.

When manuscripts come in, the editing begins, including making sure that references are correct, ensuring that practices espoused in chapters are consistent with standard practice, and are safe and proven. The process usually takes a couple of years.

For Bready, the payoff is knowing that somewhere in Japan, an anesthesiology resident or nurse anesthetist is reading the book she worked so hard on. She’s actually seen the Japanese edition and has marveled at the pictographs that fill the pages.

Knowing that the book is being used all over the world – it’s been translated into seven languages so far – is “pretty amazing,” Bready says.

“There are far bigger works in anesthesiology than mine, but it makes me feel great that I’m playing some role in someone’s professional development,” she says.

That drive to contribute to the pool of knowledge helps propel physician authors through months of tremendous workloads. With schedules already packed with various combinations of practice and teaching, most authors devote nights and weekends to the pursuit.

“You carry a manuscript with you at all times and pull it out when you have a few minutes,” says Bready.

Bready’s entrée into textbooks came when she was asked to contribute a chapter to a textbook. One chapter turned into four. The same publisher then approached her about doing an anesthesiology textbook.

She dedicates the textbook’s first edition, published in 1987, to her two daughters for playing quietly while she worked. On the fourth edition, her youngest daughter Katy served as her editorial assistant (Katy will begin studies at the School of Medicine in summer 2009).

THE HALO EFFECT

It’s a textbook chicken and egg question: are you an expert before you write the book, or do you become one in the process? It’s a little of both.

In most cases, you’re sought out because you know something about your field. But in the process of researching and writing it for others to internalize, you internalize it yourself.

Deborah Conway, MD, Associate Professor of Maternal-Fetal Medicine, is in the process of editing her first textbook, “Obesity in Pregnancy.” Her research, teaching and clinical interest in the topic of diabetes in pregnancy led to her being asked to take the lead role on the book.

When Usatine was asked to co-author a book on skin surgery with three dermatologists, it wasn’t because he was an expert on skin surgery. A combination of his interest in dermatology, previous success in academic writing and teaching and an ability to present the information...
to fellow family practice physicians led everything to fall into place.

“It’s very clear to me that you learn more when you have to teach something. You learn even more when you have to write about it,” he says. “It wasn’t even that I felt I was an expert in skin surgery at that point, but I decided I would need to develop my expertise and be able to translate that to primary care doctors.”

Usatine calls “The Color Atlas of Family Medicine” a collaborative effort that spanned across many School of Medicine departments, faculty, students and residents, with many contributing photographs to the book. Eight medical students helped as well, researching and creating some initial chapter drafts that Usatine edited, reinforcing Usatine’s philosophy that you don’t have to be the leading expert in a field to make a significant contribution to a textbook.

“Motivation and having the mindset to want to help people learn are most important,” Usatine says.

There’s a halo effect of expertise that comes with having your name on a book. When you are perceived to be a leader in your field, opportunities find you.

“It’s led to some wonderful things, of course. When you write the premier textbook on fractures, it opens up lots of doors, invitations, opportunities to travel all over the world,” Rockwood says. “There are probably hundreds of people who know as much as I do, but when your name is on the book, they invite you to go to France to make a presentation.”

Throughout Conway’s writing career, from authoring chapters to editing a journal and now a textbook, Conway has seen an influx of opportunity come about.

“I think that when you put things out there that are as good a quality as you can manage, it gets noticed in ways you can’t anticipate,” she says. Conway has been invited to serve on advisory panels, give talks, and consult on everything from legal cases to individual patient cases.

Usatine credits his books with paving the way to work in a variety of settings, both nationally and internationally.

“There’s no doubt that at least the first book made a big difference in terms of being given the opportunities to be involved in teaching, writing and editing beyond your home institution,” Usatine says. “It opens doors when you write a book.”

Making the Leap

Medical books lend themselves to collaboration, so when you’re ready to start, begin by finding a mentor,
Lectures and Open Discussion

As the Center’s full-time bioethicist, Craig Klugman, PhD, Assistant Director of Ethics Education, encourages a culture of ethics. “Our ethics and humanities course is taught in the very first hour of the students’ first day in medical school, and that sets the tone for their educational experience here,” said Klugman. “The first year gives them the formal tools for ethical thinking. In their second year, they look at medicine from the patient’s viewpoint. The third year, which includes the Ethics Bites series, gives them a case-based approach to ethics decision-making, and the fourth year is geared to the clinical situations they will face as new interns.”

He also sets the agenda for Ethics Bites, seeking a forum for critical thinking. In a recent session led by Ken Washburn, MD, on organ transplantation, students argued over who should receive an available organ, and whether a liver should be permitted to go to a reformed alcoholic or drug abuser, or even to an older person; and whether a rich person could buy an organ or influence a move up the list. They questioned the objectivity of a transplant team’s evaluation and rating of candidates, many of them surprised to learn that a central database at the United Network for Organ Sharing administers the nation’s organ transplant waiting list and that ‘local-ness’ is often primary in the final decision.

Klugman encourages heated discussion, saying there are always questions in ethics debates, and like real patient encounters, there is seldom a single right answer. Often, even experts disagree.

Leonel Vela, MD, MPH, Regional Dean of the Regional Academic Health Center in Harlingen, is pleased that Ethics Bites is video conferenced to Harlingen and supports it and a quarterly distinguished lecture in ethics with an annual grant to ensure that students at the South Texas campus also have a quality experience.

Literature & Medicine Elective

Student interest propelled development of the Literature & Medicine elective for second- and fourth-year students that Winakur also teaches with his wife Lee Robinson, a novelist and poet. They use stories, poetry and plays in once-a-month meetings and ongoing online discussions.

“Many of these readings help students learn about patients in a way that is quite different from their medical textbooks and clinical work,” Winakur said. “They will see fictional patients suffering through illness and grief, and learn from the positive or negative experience portrayed in the literary work. They learn the value of leaving room for hope.”

Authors of several of this year’s stories have been on campus recently, among them Paul Farmer, MD, and Tracy Kidder, and they have helped bring others to the University. Other events that have attracted community interest are last year’s panel discussion on “Faith-Based Approaches to End-of-Life Care,” and the Frost Lecture in Ethics, the first in a series of “Conversations about Ethics.”

Broadening programs like these keep Marvin Forland, MD, Professor Emeritus, spending much of his retirement volunteering at the Center. Having had an enduring interest in ethics and the humanities throughout his medical career, he laughs that he’s in the right place at the right time, helping with an area of study that interests him deeply and that he believes broadens students’ views of their future careers and their lives.

“There is nothing like a well-told story to teach you about life,” he said. “The humanities help us be more understanding of others’ frailties and our own, and give us an understanding of suffering without having to experience it first-hand.”

Service Learning Opportunities

There is no lack of students who want to participate in community activities, especially in their pre-clinical years. As Berggren sees it, “to fulfill our mission of training caring, ethical and culturally sensitive healthcare providers, we must take students from the increasingly dense basic-science curriculum in the classroom out into the community.” Students shadow Berggren in her weekly HIV clinic in downtown San Antonio, and the student-run clinics, initiated by Richard Usatine, MD, who has a part-time appointment at the Center, are
expanding. Partially funded by the Kronkosky Charitable Foundation, these clinics provide basic medical care on a weekly basis and reduce emergency room visits by residents.

Melanie Stone, MPH, MEd, community service learning coordinator, who runs the Center’s community service “mini-grant” programs, said the individual projects students do with faculty mentors provide a grounding in grant writing, budgeting and accountability.

A mini-grant project developed by students Ryan White and Jantzen Thorns, and centered around their neighborhood barber shop, generated attention in the San Antonio Express-News recently after the students secured permission to educate about hypertension, known to be a health problem for African-Americans.

Berggren believes that work in impoverished settings is eye-opening, even life-changing, and develops new depths of compassion in students. Raised in Haiti, Berggren is the daughter of two public health physicians who worked in remote settings, and her interest in the medically underserved is a driving passion that was electrified by her experience in 2005 in New Orleans after Hurricane Katrina. As a lone physician with a few loyal nurses at Charity Hospital, she endured six long days without fresh water, electricity or supplies for her acutely ill patients.

Sarah Lapey, MD, is enthusiastic about the Center’s global health program and her new elective, Preparing for Global Health Work. “Global health experiences nurture the idealism and compassion that students bring when they come to medicine,” she said.

Third-year student Shannon Potter agrees. In her first year, she organized a summer trip to Ethiopia. She currently travels across the border to Mexico with a student group and plans a fourth-year elective with a physician in Ethiopia.

“I think I’ll always work with the underserved one way or another,” she said. “I am grateful it is encouraged here.”

**Bridging Continents & Cultures**

From Haiti and South Texas to the formal classes and discussions, and the rich variety of speakers and presentations, the Center is clearly attracting attention. The humanities and community service learning programs are often the reason students select San Antonio over another institutions for medical school training.

Winakur is pleased that today’s students in his “Walk in My Shoes” class are encouraged to express their softer side in a way he was not.

“It all spills over into your personal life and helps you be more the human being you are meant to be and more the physician.”

Berggren is excited about the expansion of the community service learning program and that a capacity crowd filled the large lecture hall recently for the Frost Ethics Lecture in March when Thomas Murray, PhD, President of the venerable Hastings Center in New York, gave an address on the rights of a child and the responsibilities of parents.

“That we were able to attract an audience of this size to a talk like this tells me there is a lot of interest in what we are doing,” Berggren said. “We hope ethics can be an everyday thing, not a book on the shelf. When it’s ‘ethics in action,’ people get that our long-term goal is to help develop physicians who are concerned about the patient’s experience.”

---

**New Website For Advanced Care Planning**

Texaslivingwill.org is a free, web-based advanced care planning program created and hosted by the Center for Medical Humanities & Ethics and initially funded by AT&T. The goal of advanced care planning is to allow people to choose a decision maker and to make their own wishes known in the event that they are unable to make or express their own choices regarding end-of-life care.

Most families find having such documents to be a gift, since it lets them know what their loved ones would have wanted. The website provides educational information on advance directives in Texas and allows them to use a guided interview to complete their Directive to Physician & Family and Medical Power of Attorney. After the interview, users can print a copy of their Texas advance directive, sign and witness, and distribute copies.

Texaslivingwill.com also provides information and documents on out-of-hospital-do-not-resuscitate orders, directives for mental health treatment as well as tools to help people have advance care planning discussions with friends and family.
Founding Faculty Honored at Luncheon

Founding faculty members from the School of Medicine were honored at an April 29th luncheon in the Parman Auditorium Foyer. The group included the Foyer’s namesake, Mr. Dan F. Parman, a long time School benefactor and advocate.

Three former Deans:

Founding faculty
Back row (left to right): Elliot Weser, MD, Ivan Cameron, PhD, Carter Pannill, MD, Jim Story, MD, Stanley Crawford, MD, Norman Wulfsohn, MD

Next row (left to right): Dale Bennett, MD, Carlos Pestana, MD, PhD, Albert Sanders, MD, Waid Rogers, MD, PhD, David Fuller, MD

Front row (left to right): Robert Leon, MD, Anatolio Cruz, MD, Samuel Friedberg, MD, Brad Aust, MD, PhD

RAHC Faculty Appreciation

The Regional Academic Health Center (RAHC) Faculty Appreciation Event was held on June 4. This annual event has brought together clinical departments from San Antonio, new and senior faculty at the RAHC and current students completing third year clerkships at the RAHC. This year, the opening remarks were presented by Glenn A. Halff, MD, Interim Dean of the School of Medicine.

Additionally, Leonel Vela, MD, Regional Dean, provided an update on the RAHC activities and accomplishments. This year’s event included recognition of the new SOM faculty at the RAHC. Dr. Halff, Dr. Vela and the respective departmental representative presented each new faculty member with an appreciation certificate.

As in previous years, the MS3 students presented one faculty member from each of the clerkships with the Best Attending Award. Award winners included: Maria de Jesus Munoz, MD, Family & Community Medicine; James F. Hanley, MD, Internal Medicine; Nivia Fisch, RN, CNM, Obstetrics/Gynecology; Samuel W. Dudley, MD, Pediatrics; J. Don Weathers, MD, Daniel Gutierrez, MD, and Cesar A. Matos, MD, Psychiatry; Ashraf A. Hilmy, MD, Surgery. The event concluded with presentation of the Distinguished Faculty of the Year Award presented to James F. Hanley, MD and the Faculty Horizon Award presented to Stephen Stewart, MD.
Making a bequest to The University of Texas Health Science Center at San Antonio School of Medicine is a flexible way to achieve your charitable and financial goals. Thoughtful estate planning can have many benefits to help ensure your family’s future and also provide support to your School of Medicine. Whether you choose to support deserving students in the form of a scholarship, provide critical funding to further the work of our esteemed faculty or plant the seed for cutting-edge research that could change the face of medicine, your gift intention will make a profound difference.

If you would like to learn more about making a bequest to the School of Medicine, please contact Kim Warshauer at (210) 567-0242 or warshauer@uthscsa.edu.

Together, with your support, we are making lives better.

For more information on the variety of gift plan options, visit our website at http://www.uthscsa.edu/development/planned_giving.asp

You can create a legacy for the future of health.
Our doctors develop innovative new treatments other doctors rely on. Our doctors write textbooks other doctors learn from. Our doctors teach the best medicine by practicing the best medicine. They teach. They discover. And they see patients—just like regular doctors. But they’re not regular doctors. They’re the faculty from the School of Medicine at The UT Health Science Center San Antonio. And they can be your doctor.

For an appointment, call (210) 450-9000 or visit www.UTMedicine.org