Proteins: Designing the Future of Medicine

Also in this Issue

A Good Beginning for High-risk Pregnancies

Inspiring Stories from our Report to Donors
When Julie and Brian Vath had their children, Ethan and Sara, the Vaths decided to make a will. And when their attorney asked the two UW School of Medicine graduates where they might like to leave a gift, says Brian, “both of us said the university medical school.”

“The School was so formative in the individuals we became,” says Julie.

If you’d like to learn more about leaving a gift in your will to benefit education, patient care or research, contact Mary Susan Wilson at 206.221.6172 or visit supportuwmedicine.org.

Read more about the Vaths’ gift on page iv, center.

A LETTER TO THE EDITOR —
A Note From a Future Researcher?

Middle-school student Cathy F. wrote a letter to the editor about her recent discovery: the hypnic jerk, that sensation of falling — then jerking awake again — just as you’re falling asleep. “I used to believe it was an abnormal behavior only I had,” says Cathy, and then she started to do some research on the topic. “It turns out that it is a common occurrence,” she says.

UW Medicine welcomes your letters and may edit them for length or style. Please email medalum@uw.edu or write: UW Medicine Magazine Box 358045 Seattle, WA 98195-8045

Going green.
Rather read UW Medicine on the web? Want to save resources? Send your full name and email (and your spouse’s or partner’s name and email) to medalum@uw.edu. Mention the magazine. Next time, you’ll get an email notification rather than a print publication. Thank you!

The paper used to print UW Medicine magazine is FSC-certified, free of acid and elemental chlorine. By choosing a paper with 50-percent recycled content and 30-percent post-consumer waste, we are making a difference.
Contents

FEATURES

Designing the Future of Medicine. Using the
body’s workhorses — proteins — to combat illness. ........ 7

A Good Beginning. Treating high-risk pregnancies
is everyday care at UW Medicine: one family’s story. ........ 11

Report to Donors. Stories of your generosity:
The Gift of Time, Opening Doors, Superstars,
To the Point, Scholarships & Possibilities,
and Exceptional Care, Without Exception .................. center

MEDEX Northwest: Military service, medical service:
veterans become faculty at MEDEX Northwest ............ 15

DEPARTMENTS

See our newest section, Top of Mind: short stories, interesting work.

Your World, Changing
Message From the Dean ....................................... 3

A Big “Hello!”: Message From the Alumni President ...... 4

Around UW Medicine: News ................................ 5

Top of Mind .......................................................... 16

Alumni and Student Updates ................................. 19

ClassNotes .......................................................... 24

Passages ................................................................ 36

Student Voices: Reflections on R/UOP .................... 40

Visit UW Medicine magazine on the web for »

• Protein design at home
• Triplets — delivered at UW Medical Center — see their story!
• Our 2012 alumni award recipients — on video
• Tomorrow Today — event photos featuring the
  UW Institute for Protein Design
• A tour of our new Montlake Tower (video)
• And more at uwmedmagazine.org.
ONE SYSTEM. EIGHT ENTITIES. A SINGLE MISSION.

At UW Medicine, we are eight entities united by a common mission to improve health. Here you’ll find the most comprehensive resources in the region, an integrated health system that is consistently recognized as one of the best in the nation, and people who are uncommonly committed to making a difference – starting with the patients we see every day. At UW Medicine we don’t just practice medicine, we continue to change it.

UW Medicine
From here, we change the world.
YOUR WORLD, CHANGING

Protein design, alumni contacts and a new task force

At UW Medicine, some of the best scientists in the world are working to find cures, treatments and prevention strategies for difficult diseases. In some cases, the research area being addressed has implications for dozens and even hundreds of diseases and conditions. One such area is protein design. From advances in diagnostics to development of vaccines and therapeutics, protein design will change the face of medicine for many diseases.

The lead article in this issue of UW Medicine describes work at UW Medicine at the new UW Institute for Protein Design. David Baker, Ph.D., institute director, and his team developed the Rosetta software program that is now the world standard for predicting protein structures and designing new proteins. It will be exciting to follow what is accomplished at UW Medicine in this truly revolutionary arena.

Several changes have occurred in recent months in UW Medicine Alumni Relations. I am pleased to welcome Sarah Brown Rothschild as the new alumni relations director. Sarah replaces Annie Pontrelli, who, after nearly 12 years in the position, has transitioned to a new role at UW Medicine Advancement as director for regional programs in the advancement office. Annie will work with alumni throughout the WWAMI region to advance education for the WWAMI region — an area of vital importance.

In addition to these changes, a new group, the UW Medicine Alumni Association Task Force, has been charged with developing a strategic vision and plan for the future of the UW Medicine Alumni Association. The task force, represented by alumni whose training years span from the 1950s to the 2000s, will identify ways to advance meaningful interactions among alumni and between alumni and students, as well as assess how UW Medicine can serve alumni throughout their careers.

Thank you for your work on behalf of improving health for all people. That mission is a strong bond among health professionals and drives our work at UW Medicine.

Sincerely,

Paul G. Ramsey, M.D.
CEO, UW MEDICINE
EXECUTIVE VICE PRESIDENT FOR MEDICAL AFFAIRS AND
DEAN OF THE SCHOOL OF MEDICINE, UNIVERSITY OF WASHINGTON
A BIG “HELLO!”

New alumni president asks you to stay connected

In the summer of 1991, I entered medical school and was drafted to spend my first year in Pullman, Wash. I was initially reluctant to leave Seattle, but in the end, it was a fabulous start to an incredible education. The WWAMI program has since gone on to add a “W” for Wyoming, it just celebrated its 40th birthday, and it is one of the many aspects of UW Medicine that make me proud to be a Husky graduate.

I am honored to serve the next two years as your alumni association president, and I’m joined by another new arrival: Sarah Brown Rothschild, our director for alumni relations. Together, we ask you to get involved — help us learn more about you, what we can do for you as an alumni association, and how we can become a part of your daily life. The UW Medicine Alumni Association Task Force, explained on page 23, was formed to gather just this sort of feedback from you. I hope to connect with all of you, too: through Facebook, email or alumni events with students.

Finally, I’d like to recognize two important people: the first is Annie Pontrelli, who served for nearly 12 years as our alumni director. Her warmth and her expertise were put to tremendously good use in building relationships among our members. I’d also like to recognize Trish A. Raymer, M.D. ’89, Res. ’92, who recently completed her term as our president. Both Trish and Annie have done a great deal for the alumni association, and they have my deepest thanks.

Angela J. Chien, M.D. ’95
PRESIDENT, UW MEDICINE ALUMNI ASSOCIATION
ACHIEN@OBDOC.COM

Photo: Sarah Rothschild
Neuron.

The July 26, 2012 issue of Neuron reports findings that a molecule, AAQ, can temporarily sensitize damaged neurons to light. The findings appear in the AAQ, which can temporarily sensitize damaged neurons to light. The study was conducted at the University of California, Berkeley, and the University of Munich, in collaboration with scientists from the University of California, Berkeley, and the University of Munich.

They found that a molecule, AAQ, can temporarily sensitize damaged neurons to light. The findings appear in the July 26, 2012 issue of Neuron.

**Embryonic stem cells: a resemblance to cancer**

Seattle researchers, including UW Medicine faculty, have reported that shortly after a mouse embryo begins to form, some of its stem cells undergo a dramatic metabolic shift to enter the next stage of development. These stem cells begin using and producing energy like cancer cells, a discovery published in *EMBO*, the European Molecular Biology Organization journal. “These findings not only have implications for stem cell research and the study of how embryos grow and take shape, but also for cancer therapy,” said the senior author of the study, Hannele Ruohola-Baker, UW professor in the Department of Biochemistry.

**Mapping a baby’s genome**

For the first time, researchers have determined virtually the entire genome of a fetus using only a blood sample from the pregnant woman and a saliva specimen from the father. Using new, high-speed DNA sequencing and statistical and computational methods, the UW genomics research team, led by Jay Shendure, M.D., Ph.D., UW associate professor in the Department of Genome Sciences, reconstructed the entire genetic code of an unborn baby boy. The findings were verified by looking at the baby’s DNA after birth, and the parts of the baby’s genetic material inherited from each parent were predicted with more than 98-percent accuracy. Researchers also were able to identify 39 of 44 new genetic mutations before the baby was born. In the future, the technique could make it possible to quickly scan for some 3,500 genetic disorders before birth without physically disturbing either fetus or mother. The paper, published in the journal *Science Translational Medicine*, was featured on the front page of The New York Times on June 7, 2012.

**Engineering a kidney tissue chip to predict drug safety**

Tissue chips combine miniature models of living organ tissues and a transparent microchip. Ranging in size from a coin to a house key, the chips are lined with living cells and contain features designed to replicate the complex biological function of a specific organ. Through new funding from the National Institutes of Health, Jonathan Himmelfarb, M.D., UW professor of medicine in the Division of Nephrology, director of the Kidney Research Institute and Joseph W. Eschbach, M.D. Endowed Chair in Kidney Research, will lead researchers in designing and testing a human kidney microphysiological system. The goal: to engineer a chip that will simulate the human body closely enough to predict the safety of new drugs prior to human testing.

**Chemical makes blind mice see**

A chemical that temporarily restores some vision to blind mice may hold the key to helping people with age-related macular degeneration, the most common cause of acquired blindness in the developed world, and retinitis pigmentosa, the most common inherited form of blindness. A team of UW Medicine researchers, in collaboration with scientists at the University of California, Berkeley, and the University of Munich, conducted the study. They found that a molecule, AAQ, can temporarily sensitize damaged neurons to light. The findings appear in the July 26, 2012 issue of Neuron.

**Patient Care**

**UW Medicine’s hospitals: best in the state**

In U.S. News & World Report’s rankings of “America’s Best Hospitals,” released in July, UW Medical Center was ranked the No. 1 hospital — with Harborview Medical Center at No. 2 — in both the state of Washington and in the Seattle metropolitan area. Valley Medical Center ranked No. 7 in the state and No. 4 in the metro area. The ratings also include rankings in specialties, and UW Medical Center was nationally ranked in cancer, diabetes-endocrinology, ear, nose and throat, geriatrics, gynecology, nephrology, neurology and neurological surgery, orthopaedics, pulmonology and rehabilitation. Harborview was nationally ranked in diabetes-endocrinology and orthopaedics.

**UW Medicine Creates Palliative Care Center of Excellence**

Providing outstanding, compassionate palliative care for patients with serious or life-threatening illness is important for the well-being of patients and families, and UW Medicine recently established a Palliative Care Center of Excellence to help patients and families receive top-quality palliative care. We will be exploring the new center, led by J. Randall Curtis, M.D., UW professor of medicine in the Division of Pulmonary and Critical Care, and the A. Bruce Montgomery, M.D.–American Lung Association Endowed Chair in Pulmonary and Critical Care Medicine, in a future issue of the magazine.
Airlift Northwest turns 30
Airlift Northwest, UW Medicine’s flying ICU, turned 30 this year. Read more about the program’s life-saving care on page iii, center.

UW Medical Center offers new therapy for deadly brain tumor
UW Medical Center is one of 15 clinical centers in the United States and the first in the Pacific Northwest to be certified to use a new medical device, the NovoTTF-100A, to treat adult patients with recurrent glioblastoma. Glioblastoma is a deadly and common form of brain tumor. The NovoTTF-100A is a portable, non-invasive medical device that uses a low-intensity electric field to inhibit cancer-cell growth within the tumor.

Education

Our School: No. 1 in primary care for the 19th consecutive year
U.S. News & World Report’s annual rankings of graduate and professional programs were released in March. For the 19th consecutive year, the UW School of Medicine was ranked the No. 1 medical school in the nation for training in primary care. Our programs also were ranked No. 1 in family medicine and No. 1 in rural medicine (both for the 21st year in a row), further proof of excellence in primary care and the effectiveness of our five-state WWAMI medical education program. Other educational strengths ranked by the magazine include: AIDS (No. 4), geriatrics (tie for No. 7), pediatrics (No. 7), and internal medicine (No. 8). Bioengineering, jointly offered with the College of Engineering, was No. 7.

Student receives Minority Scholars Award
Eriberto Michel, a second-year medical student at the UW School of Medicine, was one of 13 students nationally to receive the American Medical Association (AMA) Foundation’s 2012 Minority Scholars Award. This scholarship recognizes academic achievement and commitment to eliminating healthcare disparities. Michel, who hails from a rural farming community in Eastern Washington, served as the clinical director of a student-run free clinic that offers services to immigrant day laborers in greater Seattle. He also was the service director of the Latino Medical Student Association, among many other commitments and accomplishments.

WWAMI
(The five-state region served by the UW School of Medicine: Washington, Wyoming, Alaska, Montana and Idaho.)

Improving depression care for rural, low-income patients in WWAMI
A partnership between the federal government and the Social Innovation Fund will support improved depression care in medically underserved rural communities in the WWAMI region. The funding will help certain non-profit clinics serving low-income adults to implement IMPACT (Improving Mood-Promoting Access to Collaborative Treatment). IMPACT, an evidence-based depression care model developed and tested at UW Medicine, will add a trained care manager and a consulting psychiatrist to every participating practice; expected results include better patient outcomes and lower healthcare costs. Read more at impact-uw.org.

Medical consultation for remote areas
Project ECHO (Extension for Community Healthcare Outcomes) allows primary-care providers to consult with specialists based at academic medical centers. John Scott, M.D., Fel. ’05, UW assistant professor of medicine in the Division of Allergy and Infectious Diseases, launched Project ECHO — originally established at the University of New Mexico School of Medicine — in Washington in 2009. Started to help clinicians in remote areas evaluate and treat hepatitis C, the project has expanded to include tele-conferences in chronic pain, psychiatry, addiction and HIV/AIDS. This work was recently recognized with $1.5 million from the U.S. Department of Health and Human Services Health Care Innovation Awards, designed to help increase access, improve quality and reduce costs of care for 6,000 high-risk Medicare and Medicaid patients across Washington and New Mexico. Learn more at echo.unm.edu.

Notable

Facebook, Google founders — and now UW Medicine faculty
What do the founders of Facebook and Google have in common with Abraham Flaxman, Ph.D., UW assistant professor of global health at the UW Institute for Health Metrics and Evaluation (IHME)? All of these individuals received the TR35 Award, MIT’s prestigious list of the top 35 innovators in the world under the age of 35. Although the famous tech names are past winners, Flaxman — an expert in data quantification — is among this year’s group of awardees, announced in August. The TR35 recipients are featured in the September-October issue of Technology Review.
Viruses such as influenza and chicken pox have existed throughout human history, but their ability to wreak devastation on a large scale is a relatively recent phenomenon.

by Deirdre Schwiesow
“With the invention of agriculture 10,000 years ago, transmission of diseases from domesticated animals to humans became more common,” explains Trisha Davis, Ph.D., UW professor and acting chair of the Department of Biochemistry. And increased population density meant that diseases could be communicated easily across broad populations, before humans developed resistance.

While millennia have passed, the basic problem of disease hasn’t changed: it still takes time to develop resistance. And time, points out Davis, is at a premium in a world that grows ever more crowded.

“Viruses are emerging — like SARS — that we don’t have resistance to,” says Davis. “They could have a devastating effect, unless we find ways to develop therapeutics quickly, in months rather than years.”

The answer to developing a quick fix for a virus? (Or the answers to a whole host of other medical issues?) It might be found in proteins.

Proteins, which fulfill the instructions of DNA, are the workhorses of all biological processes. Diseases result from protein malfunctions. Therefore, figured David Baker, Ph.D., UW professor in the Department of Biochemistry and a Howard Hughes Medical Institute Investigator, adapting or designing proteins could be the key to preventing and curing disease.

This idea has led to the creation of the University of Washington’s Institute for Protein Design (IPD) — a new endeavor with the potential to revolutionize medicine and other fields.

**Solving 21st-century problems, like flu**

“Simply looking at the range of things that proteins do in living systems gives you a hint of what proteins could do if you designed them to order,” says Baker, a pioneer of protein design and the IPD’s director. “So the prospect of being able to design new proteins to solve 21st-century health problems is very exciting.”

“A lot of strides have been made lately in this new field,” says Michelle Scalley-Kim, Ph.D. ’03, director of research and strategy for the IPD. “These are built on an understanding of how a protein folds into its unique structure — whether it’s catalyzing a reaction or communicating between cells.” Much of that understanding has come from Baker’s work with a computer program called Rosetta, which analyzes proteins’ structures based on their amino acid sequences. (Read more about Rosetta at uwmedmagazine.org.)

“**There’s a tremendous possibility to do good and help humankind.**” — Trisha Davis, Ph.D.

---

**How do proteins work against the flu? Binding!**

**The flu:** a challenge, as it mutates constantly — and creating a vaccine can take months or even longer.

**The search:** researchers examine the surface of the flu to find a likely spot that doesn’t mutate.

**The solution:** a protein is designed to bind to the spot and render the flu unable to infect other cells.

Previous page: David Baker, Ph.D., and Michelle Scalley-Kim, Ph.D. ’03, are colleagues and co-adventurers in the promising new world of protein design. All photos: Clare McLean.
One of the premises behind the medical use of designed proteins, says Davis, is that bigger is better. When researchers design drugs to combat disease, they are designing molecular structures that bind with the body’s proteins. When it comes to therapeutics, proteins have an advantage over small molecules — proteins are bigger, have more sites where they can bind with malfunctioning proteins, and contain more information than small molecules — which gives them tremendous potential.

“Big pharma has invested a lot of money into small-molecule discovery — things like aspirin,” Scalley-Kim explains. “But small molecules are not very specific, so you can’t treat all the disease you want to treat. We want to design synthetic proteins that have exquisite specificity and are cheaper to produce.”

“Looking at the range of things that proteins do in living systems gives you a hint of what proteins could do if you designed them to order.” — David Baker, Ph.D.

The Institute for Protein Design already has made a significant step forward: the development of a novel protein that binds to the flu virus and blocks it from infecting cells. This protein has been licensed by a large pharmaceutical company for translation into a therapeutic to treat flu infections. Davis calls this work “stunning,” saying, “they’ve basically developed the proof of principle” for the use of protein design for therapeutics.

“The field of protein design is so new that industry views making therapeutics based on protein design as too risky,” Scalley-Kim explains. “So creating the institute is really critical to moving this industry forward. Protein design just needs this push to make a big difference.”

Medicine, the environment, and more

The IPD recently received federal funding in the form of a three-year grant from the Defense Threat Reduction Agency. In collaboration with researchers from UW’s Applied Physics Lab, IPD investigators will work to shorten the timeframe for developing proteins, similar to the flu-inhibitors, as countermeasures to bio-warfare infections. It can take years to move therapeutics through development and FDA approval; increasing the speed of the process could be critical to effective bio-defense.

Baker’s group is also exploring protein design for disease diagnostics. Currently, diseases are diagnosed using antibodies designed to respond to specific viruses and biomarkers in the body; because designed proteins are more stable and cheaper to produce than antibodies, they could be ideal for use in developing countries.

“Our Department of Biochemistry has been an international leader in research related to proteins for more than 50 years,” says Paul G. Ramsey, M.D., CEO of UW Medicine. “With David Baker’s groundbreaking research, the IPD will be able to build on long-standing UW leadership to design approaches for diagnoses and therapeutics that will be much faster and substantially more cost-effective. The IPD will make a tremendous contribution to our mission of improving health.”
In addition to its use for therapeutics and vaccines — several of which are in the works at the labs of Baker and his collaborators — protein design has exciting applications in other areas, such as detecting and breaking down toxic compounds in the environment, creating new forms of fuel, producing new types of polymers that could replace materials like silk or wool, and, possibly, revolutionizing the creation of electronic devices.

Many experts, many resources
Tapping the remarkable potential of protein design requires close collaboration among scientists from many different fields.

“The IPD is a fascinating idea whose time has come,” says Davis. “Having David lead it is really what makes the difference, because of his genius in protein design and his ability to attract the top young researchers in the world to work in this area.”

“Collaboration is definitely key to the success of the institute,” says Scalley-Kim. “All of these [uses for protein design] require collaborators who can follow through with the experimentation that will be necessary to validate our proof of concept.”

Fortunately, Baker is also an adjunct professor in genome sciences, physics, computer science, chemical engineering and bioengineering. Working with researchers from these and other disciplines, as well as with scientists at various organizations around Seattle and beyond, IPD investigators are developing and testing new designs and then partnering with industry to produce therapeutics.

“At some stage, [Seattle] will be a huge breeding ground for small companies who will take these therapeutics to market,” Davis predicts. “The institute has tremendous potential to enhance not only the biochemistry department, but also the local economy.”

This is a prospect that University of Washington President Michael K. Young awaits with a great deal of anticipation.

“The UW has a history of making important discoveries and translating them into business opportunities — in order to take the extraordinary work we do in the laboratory out into the community to improve the lives of real people,” says Young. “Having spent time with David and his colleagues, I have absolutely no doubt they’ll do the same, and I’m very excited about the prospect.”
At 19 to 21 weeks into pregnancy, many women have an ultrasound to check in on their baby’s growth. Amy Gentzkow, then 33, remembers her appointment all too clearly.

“When they got to looking at her heart, the room got really quiet,” she says. Later, Gentzkow found out her child had a heart defect called tetralogy of Fallot.

Gentzkow, who manages the speech pathology program at the VA, consulted with medically knowledgeable friends and family. “It seemed that the best choice for us was to transition our care to the University of Washington,” she says.
Familiarity breeds excellence

The family’s case was taken on by Edith Cheng, M.D. ’87, Res. ’91, Fel. ’93, ’95, a medical geneticist and obstetrician who works with high-risk pregnancies.

Cheng is the medical director of the Maternal and Infant Care Center at UW Medical Center, as well as the medical director of UW Medicine’s Prenatal Genetics and Fetal Therapy Program. To Cheng and her colleagues in maternal-fetal medicine, Gentzkow’s case was serious, but not at all out of the ordinary.

“Our practice at UW Medicine receives a large number of referrals for high-risk pregnancies,” says Cheng. “We have a lot of experience caring for pregnancies complicated by maternal conditions or fetal birth defects.”

Complex structural heart defects, such as that found in Gentzkow’s baby, are routine to Cheng and her colleagues. The clinic also receives referrals for other birth defects, including spina bifida, gastroschisis or other abdominal wall defects, hydrocephalus, and Down syndrome.

Gentzkow found the staff’s familiarity with difficult cases comforting, “I felt the confidence that they had worked with someone like me before, and that it wasn’t abnormal,” she says.

“We have a lot of experience caring for pregnancies complicated by maternal conditions or fetal birth defects.” — Edith Cheng, M.D.

Preventing crises

Children with conditions diagnosed before birth, like Gentzkow’s baby, need specialized care shortly after they’re born. Cheng finds that this post-birth period is stressful for the parents. Not only do the parents have a new child, but they also have to make important decisions about the child’s medical care. And these decisions have to be made during a major transition: from the maternal-fetal medicine team (whom the parents know and trust) to a brand-new medical team that, while capable of providing sophisticated pediatric care, is unfamiliar to the family.

“How do we link these together?” Cheng wondered. “How do we make this a fluid transition for the parents?”

Her answer, in a program developed just a few years ago, was to enhance the quality and timing of collaboration between maternal-fetal medicine and neonatology at UW Medicine and pediatric subspecialists at Seattle Children’s.

Parents now meet early on with Cheng and the appropriate expert (in Gentzkow’s case, a pediatric cardiologist) to talk about the child’s diagnosis, post-delivery care options, and the coordination of the mother’s prenatal care. This meeting is held at Springbrook Medical Center, a block away from Seattle Children’s. Similar meetings with the UW obstetrical and neonatal teams take place at UW Medical Center, where the baby will be delivered. This process is immensely reassuring to parents, and it provides important continuity of care.

“In a time of crisis,” says Cheng, “it’s hard for parents to hear what the providers are saying.” With this new system, parents — and providers — have a game plan before the baby is born.

Caring for high-risk mothers

Maternal-fetal physicians like Cheng and her UW Medicine colleagues, who include Zane Brown, M.D., Thomas Easterling, M.D., Fel. ’89, Thomas Benedetti, M.D. ’73, and Michael Gravett, M.D., Res. ’81, Fel. ’83, also take care of mothers whose conditions drive the definition of a high-risk pregnancy.

For the past two decades, says David A. Eschenbach, M.D., Res. ’73, chair of the Department of Obstetrics & Gynecology, UW Medicine has treated...
some of the region’s most difficult pregnancies. “We got quite good at taking care of mothers with medical complications and developed a reputation of being able to provide excellent care under life-threatening circumstances,” he says.

Cheng’s specialty area, for instance, includes women with special health needs, such as cystic fibrosis, in which nutritional levels and pulmonary function may be compromised. She also sees women with genetic conditions formerly associated with early mortality and women who have had organ transplants.

Zane Brown takes care of pregnancies complicated by the mother’s diabetes, a condition becoming ever more prevalent on the national scene.

“Our diabetic patient population has exploded,” says Eschenbach. Women with poorly controlled diabetes, he says, have babies with high glucose levels. In turn, high glucose levels lead to higher rates of respiratory problems and birth defects. Some of these children were at risk for dying before reaching term at 37 or 38 weeks. As a result, babies of diabetic mothers used to be delivered early, at 35 or 36 weeks. This preterm delivery also posed problems, as the children were at risk for developing serious respiratory problems.

Now, with Brown providing guidance on diabetes management to women and community obstetricians, pregnancies can continue to full term. “This makes for a healthier baby,” says Eschenbach.

Thomas Easterling manages women with complex medical conditions, including organ transplantation, heart disease and hypertension, in which the mother’s antihypertensive drugs must be monitored carefully. Easterling and Thomas Benedetti are experts in critical care, and Michael Gravett manages pregnancies at risk for preterm birth, such as twins and triplets.

UW Medicine’s expertise in caring for high-risk mothers means that the maternal-fetal medicine team is in demand. Cheng, Brown, Easterling, Benedetti and Gravett travel to Yakima and other communities in the five-state region of Washington, Wyoming, Alaska, Montana and Idaho to provide consultative care and educate women and providers. Easterling and Brown, in fact, are developing a telemedicine program in which they check in with distant patients who log their blood pressure and glucose-insulin levels.

Before their baby is born, parents meet with physicians at UW Medicine and Seattle Children’s; having a treatment plan is immensely reassuring.
Knowing the terrain

Developing medical expertise for the Northwest region is part of UW Medicine’s mission, and the Department of Obstetrics and Gynecology offers both a residency (a four-year program where doctors learn more about obstetrics and gynecology, including the high-risk pregnancies found in the sub-specialty of maternal-fetal medicine), as well as an additional three-year fellowship for maternal-fetal medicine specialists.

Not all ob-gyn residents become maternal-fetal physicians, of course. Still, all the trainees benefit from exposure to high-risk pregnancies.

“You really need to have seen some of these conditions to know that they exist,” says Eschenbach. “You can’t assume that every pregnant woman will have a normal outcome.”

The badge of courage

On May 14, 2009, Mili Gentzkow was born, her heart working well enough for her parents to take her home. Not quite five months later, Mili had open-heart surgery at Seattle Children’s.

Gentzkow is enormously grateful to her doctor. Cheng was an advocate, she took time to answer questions, and “she dealt with my physical and emotional needs incredibly well,” says Gentzkow. And of course, Cheng delivered the goods. Twice, in fact. She also presided over a much less complicated second pregnancy and the birth of another daughter, Audri.

Now three, Mili’s follow-up care includes an annual echocardiogram. After she turns 10, she’ll have another surgery that will replace her pulmonary valve. Otherwise, she’s indistinguishable from other children her age.

“These kids are just like any other kids. They just have little scars,” says Gentzkow. “To Mili, it’s her badge of courage.”

The babies Edith Cheng delivered and cared for years ago are now having babies of their own. “It’s a full circle for me,” she says.
When Ruth Ballweg, PA-C (Seattle Class 11), associate professor and section chief of MEDEX Northwest, heard that the federal government wanted to allocate $2.3 million to training physician assistants — especially veterans — she thought it was great news. But it wasn’t exactly a new idea.

“We’ve been doing this for more than 40 years,” she chuckles.

Since 1969, the year the first class graduated from MEDEX Northwest, the program has trained more than 600 military veterans as physician assistants (PAs) — that’s nearly one-third of MEDEX’s graduates. Vets enter the program with some medical knowledge already, having received training and experience while still in the military.

Tony Skaggs, PA-C, took a slightly different road; he didn’t leave the military to train to be a physician assistant. Rather, he realized that he wanted to pursue medicine while still in the military. When he was in the Coast Guard, he received PA training at the military’s Interservice PA Program in San Antonio, Texas. Later, the physician assistant did a six-month tour on a Coast Guard ice-breaker in the Antarctic, and, during shore leave, he discovered Seattle. “I knew I had to get back someday,” Skaggs says. Accordingly, when he retired from the military after 21 years of service, he chose Seattle. He also chose MEDEX Northwest; Skaggs became a member of the faculty in January 2011.

The benefit of hiring a vet like Skaggs to teach? Not only do they make good instructors. They also serve as natural role models for students who are veterans.

Skaggs likes all his students — he teaches in all of the primary-care courses — but he has a special camaraderie with students from the military. “I know their language,” he says. “I have an enormous respect for them, because they’re in school to excel.” In addition to teaching, Skaggs also acts as an informal resource for his students, advising them on navigating the intricacies of the Veteran’s Administration or the GI Bill.

“MEDEX has always maintained its strong connection with the military, even when, in PA education, such an association wasn’t thought to be very important,” says Skaggs. “This has definitely changed, and now other PA programs look to MEDEX when deciding on the best way to support the veteran community.”

A Salute to Military Faculty

In addition to Tony Skaggs, we would like to recognize other veterans who serve as MEDEX Northwest faculty members in Seattle, Spokane, Wash., and Anchorage, Alaska, including: Don Coerver, Ph.D., PA-C, who served as a PA in the Air Force; Fred J. “Gino” Gianola, PA-C (Seattle Class 8), an Army corpsman in Vietnam; Tom Jones, NSSM, PA-C, a member of the first Navy class of military-trained PAs; Ashley Marquardt, PA-C (Seattle Class 33), a former member of the Air Force, Steve Melzer, PA-C, former Navy corpsman, Sharon Moses, M.S., ARNP, who served in the Air Force; and Bill Tozier, PA-C, MPH, Ph.D., a former senior PA in the Army.
IN SYNC WITH HEART REPAIR
New research helps us come a little closer to repairing damaged hearts after heart attacks

During a heart attack, the flow of oxygen-rich blood to the heart muscle is interrupted by formation of a clot, and downstream heart muscle dies. The scar tissue that replaces the muscle can disturb both the heart’s mechanical action (filling and emptying the chambers) and electrical signaling (which paces the heartbeat). In fact, arrhythmias — heart rhythm disturbances — are a major cause of deaths in patients after a heart attack.

Scientists at UW Medicine have been experimenting with regeneration of heart muscle for a number of years, says Michael A. Laflamme, M.D., Ph.D., UW associate professor of pathology, bioengineering and medicine, and co-director of the Institute for Stem Cell and Regenerative Medicine. They’d already shown that inserting human stem cells into guinea pigs with heart damage improved mechanical function.

In a study published in the Aug. 5, 2012, issue of Nature, Laflamme and Charles E. Murry, M.D., Ph.D., UW professor of pathology, bioengineering and medicine, and co-director of the Institute for Stem Cell and Regenerative Medicine, showed something more. “In this recent paper,” explains LaFlamme, “we show that the transplantation of these cells also reduces the incidence of arrhythmias.”

The human cardiac muscle cells, grown from embryonic stem cells, coupled electrically and contracted in sync with host muscle following their transplantation in guinea pig hearts. “This supports the continued development of human embryonic stem cell-based heart therapies for both mechanical and electrical repair of the heart,” says Laflamme.

— Leila Gray

UW MEDICINE ALUMNUS RECEIVES THE PRESIDENTIAL MEDAL OF FREEDOM

In May, President Obama awarded a Presidential Medal of Freedom, the highest honor given to an American civilian, to epidemiologist and UW Medicine alumnus William H. (Bill) Foege, M.D. ’61. Foege, 76, is credited with devising the global strategy that led to the eradication of smallpox in the 1970s. A former director of the Centers for Disease Control, Foege is now an affiliate professor in the UW School of Public Health and a senior fellow at the Bill & Melinda Gates Foundation.

In a recent interview with Columns, the University of Washington’s alumni magazine, Foege reaffirmed several core beliefs: that global health requires optimism and hope; that there is reason for optimism — “we keep improving what’s possible,” he says — and that humanity and healthcare are synonymous. “We should always remember that there are faces behind the graphs and numbers,” says Foege. “We can’t become blind to why we do this work.”

— Leila Gray
In October, UW Medical Center opened its new Montlake Tower, high-tech space that will expand the services UW Medicine provides the community. The building increases the amount of space dedicated to cancer treatment and radiology, as well as the region’s most vulnerable infants.

“This is not coming too soon,” says David A. Eschenbach, M.D., Res. ’73, chair of the Department of Obstetrics & Gynecology. “We’ve been using our neonatal intensive care unit up to capacity.”

The expansion increases the current maximum for newborns to approximately 50 beds, and that, coupled with hiring more experts in maternal-fetal medicine over the past two years, is good news for families. “We’ll be able to serve the WWAMI region, especially Washington state, better,” Eschenbach says.

Read more about caring for infants and mothers in “A Good Beginning,” page 11, and get a glimpse inside the new tower at uwmedmagazine.org.
THE BREATH OF LIFE
Lung transplant program turns 20; team produces stellar results

When Ganesh Raghu, M.D., and his colleagues — including Joshua O. Benditt, M.D. ’82, Thomas L. Marchioro, M.D., and Edward D. Verrier, M.D. — founded the lung transplant program at UW Medicine 20 years ago, they were responding to what they saw as a pressing need in patient care. “The New England Journal of Medicine had just published an article on the first long-term lung transplant on a patient with idiopathic pulmonary fibrosis,” remembers Raghu, UW professor of medicine in the Division of Pulmonary and Critical Care Medicine and the program’s medical director until June 2012. “With the team of experts we’d assembled, I knew that we could help our patients with end-stage lung disease.”

It was a prophetic moment. Since the program’s creation, more than 650 patients have received new lungs — and a new lease on life — at UW Medical Center, the only site in a five-state region that conducts lung transplants.

“We have some of the best outcomes in the country even though we also have some of the sickest patients,” says Michael Mulligan, M.D., UW professor in the Department of Surgery, director of the lung transplant program and the holder of the UW Medicine Distinguished Endowed Professorship in Lung Transplant Research. “Nationally, about 20 percent of lung transplant patients have problems with their graft,” says Mulligan. “Here, it’s under 5 percent.”

Science is partially responsible for those results: Mulligan and his colleagues have figured out how to minimize problems with the graft by making the donated lung as healthy as it can be before it’s transplanted. The next likely advance? Increasing the number of available lungs through ex vivo resuscitation. Lungs are removed from the donor, treated on a special device to optimize performance, then transplanted.

Utter dedication is the other key to the program’s success. Faculty and staff put in long hours finding, repairing and transplanting lungs and providing pre- and post-operative medical care. It’s a team effort, says Raghu, and “that team includes every single person working here.”

THE ROAD TO HEALTH
Artificial-heart patient receives new heart

This summer, Chris Marshall, 51, was awaiting a heart transplant. That was about the only waiting he was inclined to do. Implanted with an artificial heart in March, Marshall had walked and hiked 607 miles by Sept. 11. (Yes, he kept track.)

With Marshall, UW Medical Center became the first Pacific Northwest hospital to discharge a patient implanted with the Total Artificial Heart, made by SynCardia Systems, and approved for U.S. use as a temporary bridge to transplant. The case gave UW Medicine’s Regional Heart Center a place in an elite cadre of U.S. cardiac programs that can offer surgery to patients who otherwise would be managed medically or referred to hospice.

“We have a viable option for patients with biventricular failure that we didn’t have before,” says Nahush A. Mokadam, M.D., UW associate professor of surgery and UWMC’s co-director of heart transplantation. “Not only do we have the device, we also have the ability to discharge these patients, so they don’t remain prisoners in the hospital. That’s the distinction here.”

An avid hiker, Marshall is generally in good health. Between that and his artificial heart, he was in good shape for a heart transplant — which he received Sept. 12.

— Brian Donohue
Photos: Clare McLean
From the wine-tasting at Urban Enoteca, to the trip to Woodland Park Zoo, to a night to remember at the Space Needle, alumni and their families enjoyed the 2012 Reunion Weekend, held in early June. We hope that you enjoy some of the photos from a memorable few days!

We’d also like you to save the date for the 2013 Reunion Weekend: May 31–June 1, 2013. All classes are invited, and we will be holding reunions for the classes of 1953, 1958, 1963 (their 50th reunion), 1968, 1973, 1978, 1983, 1988, 1993, 1998, 2003 and 2008. We’ll see you there!
GREAT BEGINNINGS  New WWAMI connection, new alumni director

We have exciting news to share about staffing at UW Medicine. First, the director of alumni relations, Annie Pontrelli, has taken on a new role: director for regional programs. In this position, Pontrelli will build upon the many relationships she’s already made, all while connecting alumni with a vital part of our mission — educating students from the WWAMI region for the WWAMI region. “I can’t believe I’ve been here for almost 12 years,” says Pontrelli. “Everyone has been so supportive, and I have had the opportunity to work with wonderful alumni. I’m looking forward to meeting many more in the months ahead!”

Our new alumni relations director, Sarah Brown Rothschild, joined us in September. Rothschild has a decade of experience in alumni and media relations, with positions at the University of Arkansas Alumni Association, the University of Virginia and the Atlantic Coast Conference in Greensboro, N.C. Rothschild, who has a B.A. in psychology from the University of Virginia, is excited to be at UW Medicine. “I am thrilled to join the UW Medicine family, and I look forward to meeting and working with alumni to continue building a vibrant and relevant alumni association for you,” she says.

Both Rothschild and Pontrelli would enjoy hearing from alumni, and they can be reached at rothsb@uw.edu or pontrell@uw.edu. We welcome them to their new roles!

NOTABLE ALUMNI — AND A NOTABLE EDUCATION

This year’s award recipients; nominate for next year

In June, five exemplary UW School of Medicine alumni were celebrated through the UW Medicine Alumni Association with major alumni awards. This year’s alumni award recipients include John Kendall, Jr., M.D. ’56, a world-renowned endocrinologist who received the Distinguished Alumni Award; Bradley Bernstein, Ph.D. ’97, M.D. ’99, a genomic investigator who received the Alumni Early Achievement Award; Melissa Smith, M.D. ’87, Res. ’91, recipient of the Humanitarian Award, who has dedicated her career to underserved populations; and Samuel Tarica, M.D. ’52, Res. ’55, and David Wolter, M.D. ’52, Res. ’58, co-recipients of the Alumni Service Award for decades of service to the alumni association. See these outstanding alumni discuss their education and careers on video at uwmedmagazine.org.

Want to nominate an excellent alumnus or alumna for the 2013 alumni awards? We’d like to hear from you; submissions are due by Dec. 31, 2012. Learn more at uwmedmagazine.org, or contact UW Medicine Alumni Relations at medalum@uw.edu, 206.685.1875 or toll free 1.866.633.2586.
THE CIRCLE OF GENEROSITY

You put medicine first

You might think that a Nobel Laureate could, well, rest on his laurels. Or take a moment to absorb the accolades.

When UW Medicine researchers Edmond H. (Eddy) Fischer, Ph.D., and the late Edwin G. Krebs, M.D., accepted their Nobel in 1992, however, they were quick to draw a broad circle around their accomplishment — the discovery of a protein modification that became vastly important to medical science. “This really isn’t for us,” the two biochemists said. “It’s for all the people we’ve worked with and everybody in the field.”

That statement shows a profound generosity of spirit — one also shown by our donors, the 15,880 people and organizations who contributed to UW Medicine’s work in research, patient care and education over the past year. In the pages that follow, you’ll read about contributors like you: people who look beyond their own interests to support everything from relieving chronic pain, to student scholarships, to recruiting faculty superstars like Eddy Fischer and Ed Krebs.

With every gift you make, you support our mission: improving the health of the public. Thank you for your generosity.

Lynn K. Hogan
CHIEF ADVANCEMENT OFFICER, UW MEDICINE, AND ASSOCIATE VICE PRESIDENT FOR MEDICAL AFFAIRS
UNIVERSITY OF WASHINGTON

2011–12: THE YEAR AT A GLANCE

Who are our donors?
15,880 individuals and organizations

Of interest: 2,407 UW Medicine alumni gave $1.7 million in gifts and grants over the past fiscal year.

What did they contribute?
Total: $117,105,011

Of interest: UW Medicine received more than $3 million from donors who gave through their estates.

What did they support?
Program support $102,238,532 (87.3%)
Faculty support $6,739,360 (5.8%)
Other/excellence funds $4,128,559 (3.5%)
Student support $3,567,193 (3.1%)
Capital funds $431,367 (<1%)

Endowment type New in 2011–2012 Total
Chairs (for faculty) N/A 91
Professorships (for faculty) 3 65
Student support 31 344
Research funds 6 209
Lectureships 2 39
Other N/A 37

Strengthening the endowment
Many contributors created or augmented endowments, invested funds that support UW Medicine’s work in perpetuity. More than $6.2 million in gifts and grants were directed to the endowment in the last fiscal year.
I cannot tell you how thrilled I am to pay this bill,” Marijo Brantner told the woman processing her payment to Airlift Northwest. “Without your organization, I would be a widow.”

Marjio’s 58-year-old husband, Steve, became ill while traveling in May 2011. Back home again in Juneau, Alaska, he was tired and missed a week of work. His doctor thought he might have pneumonia. A few days later, the Brantners’ friend Cris, a nurse, urged them to go to the ER at Bartlett Regional Hospital. Steve was having trouble absorbing oxygen, and his blood platelet count had dwindled to 12,000 per microliter (less than 10 percent of normal). The hospital had no replacement platelets.

What happens when you’re deathly ill in a town like Juneau — accessible only by boat or plane — and you need specialized care? You’re flown by a medical transport service to the closest site that can help. In Steve’s case, Bartlett called Airlift Northwest.

Airlift Northwest, part of the UW Medicine health system, has bases in Arlington, Bellingham, Juneau, Olympia and Seattle. The service transports approximately 3,500 patients per year to various hospitals, and it is a link to survival for people in the states of Washington, Alaska, Montana and Idaho.

“Pilots and nurses have to be available 24 hours a day,” says Chris Martin, R.N., BSN, Airlift Northwest’s executive director. And the nurses have to be ready to take care of incredibly sick patients, from the smallest baby to the 6’6”-tall Steve Brantner.

To this day, Steve doesn’t know why he got sick. Nor do his doctors. They do know that he was septic by the time he reached the hospital. His kidneys had failed, both of his lungs had started to hemorrhage, and he arrived just in time to stay alive. “The critical-care unit doctor said we got there with maybe a half-hour to spare,” says Steve.

“Airlift gives the gift of time,” says Marijo. Enough time for Steve to receive the care that a larger city hospital could provide. In gratitude, the Brantners decided to make a gift to Airlift Northwest.

Martin notes that Airlift is not the same as the fire department, where emergency services are paid by taxpayers. And, as is the case at UW Medicine’s other entities, Airlift provides care whether or not someone is insured or capable of paying. Gifts like the Brantners’, whether they underwrite Airlift’s costs or help purchase equipment, provide valuable support. It’s support that the Brantners are thankful to give.

“We wanted to help provide the same miracle for someone else,” says Steve.
There are good high-school guidance counselors and bad ones. Unfortunately, Julie S. Vath, M.D. ’00, had the latter.

“When I was in high school, I completely bombed a geometry quarter,” says Julie. Her guidance counselor’s recommendation: in the future, steer clear of math and science.

Julie took the advice to heart, majoring in English with an emphasis on creative writing, until the fateful quarter where she had to fulfill the University of Washington’s science requirement. “That physics class changed my entire life,” says Julie. “I realized I wanted to go into medicine.”

In contrast, her husband, Brian Vath, M.D. ’00, Res. ’03, ’06, grew up in a medical family. His dad, Ray Vath, M.D., was a graduate of the UW School of Medicine’s Class of 1965. And while Brian thought about other careers, he says, “I kept coming back to medicine.”

Medical school, the couple agrees, was a wonderful experience. “You get to be with extremely intelligent colleagues and dive into a field and immerse yourself fully,” says Brian. Julie has a similar memory, related to Cornelius Rosse, M.D.’s anatomy class. “I remember feeling that absolute passion for learning something in great depth…the surface was no longer good enough,” she says.

In fact, the Vaths appreciated all the faculty. “It really felt like we were being taught by people who were at the very pinnacle of their careers,” says Julie.

Years of training later, the Vaths are firmly settled in their own careers. Brian, a psychiatrist, co-founded a multi-specialty psychiatry clinic in Seattle. Julie, an anesthesiologist, is at Virginia Mason Medical Center.

The Vaths also have children, Ethan (7) and Sara (5), and having a family prompted them to draw up a will. When asked if they wanted to use their will to make a contribution to an organization important to them, the couple’s conclusion was swift and unanimous. “Both of us said ‘the UW’s medical school,’” says Brian.

The purpose of their gift is open-ended, allowing School personnel to apply it as they see fit, and the motivation behind the gift is similarly straightforward. It’s gratitude for a great education, and it’s gratitude for careers the Vaths love.

Because of the UW School of Medicine, says Brian, “Doors opened for us — anywhere we’d want to go and anything we’d want to do in the field of medicine. By supporting UW Medicine, we can pass that on.”
Superstars
Local enterprise invests in talent, honors Nobel Laureate

I don’t know for sure what a superstar scientist is going to create,” says Ron Howell, “but I do know that good things routinely come from superstars.”

Howell, the CEO of Washington Research Foundation (WRF), knows that innovation drives research progress at the University of Washington. Making gifts to help recruit superstars — along with other contributions to the University — is part of WRF’s business cycle, which fosters the commercialization of technology.

Just a few months ago, WRF made a recruitment gift to UW Medicine supporting the creation of the Edmond H. Fischer-Washington Research Foundation Endowed Chair in Biochemistry. The chair is named in honor of emeritus faculty member Edmond H. (Eddy) Fischer, Ph.D.

Fischer is a superstar in his own right. In 1992, he and his colleague, the late Edwin G. Krebs, M.D., won the Nobel Prize for Physiology or Medicine for their discovery of phosphorylation, a protein modification. At the time of the discovery, says Trisha D. Davis, Ph.D., acting chair of the Department of Biochemistry, no one knew how common phosphorylation was, or how important in regulating proteins. Proteins control all bodily mechanisms, from breathing to fighting disease.

“For example, most cancers are the result of protein phosphorylation gone awry,” says Davis. “By targeting the enzymes involved in that process, scientists are developing cancer therapies.”

When Howell heard about Fischer’s groundbreaking work, he was intrigued. In part, he was interested because the man making the case for the creation of the Fischer Chair was Earl Davie, Ph.D., a distinguished UW Medicine faculty member who had collaborated with WRF on another project. Howell also saw the chair’s potential to advance the field of medicine in a substantive way.

“The accretion of knowledge is good,” says Howell, “but it’s also good to solve problems.”

The Edmond H. Fischer-Washington Research Foundation Endowed Chair in Biochemistry will allow UW Medicine to recruit an expert in biochemistry and molecular cell biology, someone who will tackle topics related to mammalian biochemistry and cancer and to cell signaling and regulation. She or he also will collaborate with scientists in the University’s new Institute for Protein Design, where researchers are creating proteins that hold promise in defeating disease.

This gift is a permanent tribute to WRF’s generosity and to Fischer’s contributions to science. More broadly, it’s a reminder of the importance of collaboration in advancing human health, a topic Fischer and Krebs touched on when they accepted their Nobel.

“This really isn’t for us,” Davis remembers the two researchers saying. “It’s for all the people we’ve worked with and everybody in the field.”

See the feature story on the UW Institute for Protein Design on page 7.
YOUR CONTRIBUTIONS TO OUR MISSION

To the Point
Innovative physician-donor ushers in new era of treatment

Pain physician Chan Gunn, M.D., has been on a crusade for decades. The basis of the crusade? That chronic pain is treatable. Without surgery, without pharmaceuticals, and for a relatively low cost.

“The object of this treatment is to promote the body’s ability to heal,” says Gunn. For Gunn and his trainees, this healing begins with an acupuncture needle.

Approximately 30 years ago, the Workers’ Compensation Board in British Columbia asked Gunn to find out why some people with back pain can return to work while others cannot. He began a close examination of some of the patients in question.

Gunn found that the people with debilitating back pain displayed different physical signs than their counterparts: spots on the skin that were tender, puffy and differently textured, an indication that a tender area or trigger point lay below.

Turning to physiology, Gunn connected these changes to dysfunction in nerve roots that exit from the spine at each level of the spinal column. Such dysfunction may cause a painful condition called myofascial pain syndrome. Using acupuncture needles, Gunn developed a therapy to relieve the pain.

The treatment, Gunn Intramuscular Stimulation (IMS), has been a mainstay in Heather Tick, M.D.’s practice for years. In Gunn IMS, the physician uses a needle to release the trigger points in the affected muscles and in muscles around the spinal column, lengthening them and beginning the healing process. Gunn IMS can treat long-standing myofascial disorders such as back pain, whiplash and repetitive strain injuries, among other conditions.

“I was seeing such incredibly rapid results that I really couldn’t expect to see from any other kind of technique,” Tick says of Gunn IMS. “His technique really does enable the body to heal itself from many, many injuries.”

Gunn, now 81, wants his treatment to find an ever-wider audience. That’s the impetus behind the gift he and his wife, Peggy Y. C. Gunn, made to create the Gunn-Loke Endowed Professorship for Integrative Pain Medicine. “I want someone at UW Medicine who can do it,” says Gunn.

Tick, a new recruit to the University of Washington and a clinical associate professor in the Department of Family Medicine and the Department of Anesthesiology and Pain Medicine, is the first holder of the professorship. She’s excited about the future: bringing new treatment to local patients, and studying the outcomes of Gunn IMS and other integrative approaches to pain with the research experts around her.

“We need other things [non-opiate options] to offer people,” says Tick. “It’s wonderful that the pain clinic has opened their direction to integrative medicine, and they’re truly embracing it.”
YOUR CONTRIBUTIONS TO OUR MISSION

Scholarships & Possibilities

A family of contributors issued a challenge: you answered

Dolly Turner helped put her husband, Leslie D. Turner, M.D. ’55, through medical school. It was tough. Her job as a teacher paid the princely sum of $3,020 a year, and she remembers that residents in training earned about $100 a month. “I know these numbers seem ludicrous now,” says Turner.

Today, of course, the figures would be vastly different. But the situation is not so different at all. Just as the Turners did, medical students and their families struggle with the cost of medical school — now $222,904 for a four-year education for state residents.

“Honestly, the loans and scholarships that the School of Medicine has been able to provide are what made it possible for me to come here,” says Greta Tubbesing, a second-year UW medical student and recipient of the Durward A. Huckabay, M.D. Endowed Scholarship.

Tubbesing, a Northwest native, spent a decade in the Bay Area, graduating from UC-Berkeley, volunteering at the Berkeley Free Clinic, and working in violence prevention and mental health. Becoming a physician, Tubbesing says, combines person-to-person contact, intellectual rigor and the potential for advocacy in an immensely appealing way.

“I always felt compelled to do what I can to try and make the world a more just place,” says Tubbesing.

Medical students like Tubbesing are why Tim Melhorn, M.D. ’74, medical ambassador-at-large for Yakima Valley Memorial Hospital in Yakima, Wash., is creating an endowed scholarship. “There are students who don’t have financial resources who have bright minds and compassionate hearts,” says Melhorn, “and I want them to have a chance to have the opportunities that I have been blessed with in medicine.”

Both Melhorn and Dolly Turner — who also created a scholarship, named after her husband, Les — responded to a matching scholarship challenge made by the Huckabay family, longtime supporters of medical-school scholarships.

“The Huckabay match was a wonderful bonus,” says Turner.

As for the Huckabay scholarship’s influence on Tubbesing’s education? “It’s been tremendous,” she says.

A Note from the Huckabay Family

We appreciate the support of other donors; they’re essentially doubling the amount of scholarships available to the students. It has been particularly gratifying to see matches coming from multiple sources, including recent graduates.

— John Huckabay
Exceptional Care, Without Exception

Our employees give their all at work — and many give even more

At UW Medicine, the phrase “mission of caring” is oft-used. It reflects a strong, system-wide commitment to providing excellent and compassionate care to everyone, regardless of their ability to pay.

No one “walks the talk” better than the people who work at UW Medicine. Take Brian Giddens, ACSW, LICSW, director of social work and care coordination at UW Medical Center. His department provides a host of services to patients, from helping plan discharges to counseling patients and families about end-of-life issues.

He and his colleagues also provide basic necessities, such as food and money for housing and gas — needs that have become more acute with the economic downturn.

“[Patients] are less able to work, and they have fewer savings to work with,” says Giddens. Although funding shortfalls affect Seattle-based patients, too, Giddens notes that people who leave their homes elsewhere to receive specialized, sometimes longer-term care in Seattle can be hit especially hard.

That’s why Giddens contributes to the Social Work Emergency Fund. “I see the need regularly,” he says, “and contributions help boost what we’re able to give.”

Carol Ridenhour, R.N., a unit discharge facilitator at Harborview Medical Center, makes a similar contribution; hers is to the Discharge Clothing Fund. “People come through the ER, and sometimes their clothes are damaged — or we have to cut off their clothes to provide treatment,” says Ridenhour. “This can be a hardship, especially for homeless people. That’s the reason I donate.”

These and other staff members support an ethic that is upheld throughout UW Medicine. In fiscal year 2011, Harborview Medical Center, UW Medical Center, Northwest Hospital & Medical Center and Valley Medical Center provided approximately $250 million in medical charity care. “This represents more than one-quarter of the charity care in the entire state,” says Johnese Spisso, R.N., MPA, UW Medicine’s chief health system officer and vice president for medical affairs.

UW Medicine’s mission of caring, however, isn’t defined solely by compassion. “Dr. Ronald Maier, the chief of surgery at Harborview, has a phrase for it: ‘exceptional care, without exception,’” says Spisso. From trauma to transplant and from diabetes to cancer care, UW Medicine provides exceptional primary and specialty care. The excellence of this care is nationally recognized.

“UWMC and Harborview were recently ranked Washington’s top two hospitals by U.S. News & World Report,” says Paul Ramsey, M.D., CEO of UW Medicine. “We strive to provide the best possible care to all our patients,” says Ramsey, “and it’s great to receive this additional affirmation.”
In honor of the 40th anniversary of our regional medical education program, states in WWAMI (Washington, Wyoming, Alaska, Montana and Idaho) scheduled a number of celebrations. Missoula, Mont., probably wins the prize for best costumes: see below for the 70s-themed photos from their celebration in May 2012.

Far left: Margaret (Peggy) Schlesinger, M.D., Res. ‘81, left, is the WWAMI track director in the WWAMI Missoula program office; with her is former colleague Megan Twohig.

Above: Mary Helgeson (left) and Suzie Thomas, representatives from the Area Health Education Center (AHEC), enjoy the festivities.

Left: First-year medical student Nick Loomis poses with Katie Adams from St. Patrick Hospital in Missoula.

At the University of Idaho-Washington State University, the WWAMI celebration was planned to coincide with another special ceremony: students receive their white coats during their first-year orientation.
ALUMNI WANTED!
Service learning & more

Service learning is an important part of the medical-school experience for our students, and we invite our alumni to be part of it. Combining community service with medical experience, service learning often involves providing medical care to underserved communities through partnership with free clinics, local community organizations and volunteer physician preceptors. If you would like to become a preceptor, or if you see an opportunity for service learning in your community, contact Lauren Henricksen, the School's service learning manager, at lhenric@uw.edu or 206.685.2009.

There are plenty of other opportunities to help students, too, such as participating in the Student-alumni Informational Days (SAID) program, where students learn what it’s like to be a doctor. Or signing up for HOST, the Help Our Students Travel program, in which alumni offer students a place to stay during residency interviews. Interested? Please contact us! (See below.)

OUR DOCS ARE TOPS
The annual magazine review is in!

Seattle Magazine published its annual review of top doctors in Seattle — in specialties ranging from cancer, to geriatric medicine, to orthopaedic surgery — and more than 150 of our alumni and faculty were listed. See the list, organized by specialty, at uwmedmagazine.org.

We congratulate our top docs, and we also congratulate alumni faculty who’ve recently received promotions at UW Medicine. You’ll see some of those promotions listed in the ClassNotes sections; promotions for clinical and affiliate faculty are highlighted at uwmedmagazine.org.

HONORING OUR VETERAN ALUMNI
Nominations are open for a UW award

This year, the University of Washington Alumni Association inaugurated the Distinguished Alumni Veteran Award, given to a living veteran who has made a positive impact on their community, local or global. Many UW Medicine alumni have served in the military, and we encourage you to honor your favorite vet by submitting a nomination for the 2013 awards (the 2012 nominations closed in August). The award will be presented each year on or around Veteran’s Day. Learn more or submit a nomination at washington.edu/alumni/cheer/dava.

Would you like to help students? We welcome your participation! Learn more by contacting UW Medicine Alumni Relations at medalum@uw.edu, 206.685.1875 or toll free 1.866.633.2586.
A CHALLENGE FOR YOU
Task force seeks your input on alumni association of the future

Anna Chavelle, M.D. ’57, the chair of the alumni association’s task force, is issuing you a challenge. Charged with developing a strategic vision and plan for the future of the UW Medicine Alumni Association by past president Trish Raymer, M.D. ’89, Res. ’82, Chavelle and her colleagues — listed below — want to hear from you!

“We’re taking on really important issues,” says Chavelle. “If you’re interested in how we can better serve all our alumni, what the association does for students, or what our philanthropic focus should be, we want to hear from you!”

By gathering data through an alumni survey and focus groups, members of the task force will produce a series of recommendations on these and other topics — such as regional engagement — for the UW Medicine Alumni Board by June 2013.

How can you be involved? Any number of ways! Call us to reserve your spot in a focus group, take a few minutes to take our survey (scheduled for November), talk to a member of the task force, or simply email UW Medicine Alumni Relations at medalum@uw.edu with feedback. We look forward to hearing from you.

The UW Medicine Alumni Task Force
Anna Chavelle, M.D. ’57, Chair
Kenji Asakura, M.D., Res. ’09
Angela Chien, M.D. ’95
Dan Downey, M.D. ’83
Trish Raymer, M.D. ’89, Res. ’82
Terry Scott, PA-C (Seattle Class 25)
Carol C. Teitz, M.D., Res. ’80
Brian Vath, M.D. ’00, Res. ’03, ’06
Julie Vath, M.D. ’00

Task force members, pictured from left to right (above): Anna Chavelle, Julie Vath, Brian Vath, Dan Downey, Terry Scott and Trish Raymer.

CELEBRATING OUR STUDENTS
Milestones shared with family, friends

It’s a popular tradition. Family Day, held in September, helps acquaint new students — and their family and friends — with the rigors of medical school. The Clinical Transition Ceremony, held about two years later in the spring, is also a big attraction: at the completion of their second year of medical school, students receive the white coat that symbolizes their mastery of the classroom and the beginning of their clinical rotations.

Students Alex Salter and Quyen Vu are pictured with their families on Family Day.
New job, award, move or family addition? A volunteer or service learning experience you'd like to share? Send us a quick note; simply visit uwmedmagazine.org, click on the “ClassNotes” button, and let us know how and what you’re doing. And take a minute to improve our residency records — use the “ClassNotes” function to confirm your specialty, location and year.

The ClassNotes below were received through August 2012; any received afterward will appear in the next issue.

Prefer mail to the web? We’d love to hear from you: UW Medicine Alumni Relations, Box 358045, Seattle, WA 98195-8045.

1953

The Class of 1953 celebrates its 60th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Eugene F. Moore, M.D., and Judy Baskey were happily married in Seattle in the summer of 2011 after traveling around the world while working on a small cruise ship. Both are in good health and enjoying life. Moore, still working part-time locums in Hawaii, in Washington and on cruise ships, is currently splitting his year between Hawaii and Seattle.

1955

Alan L. W. Gunsul, M.D., attended the 2012 Summer Olympic Games in London. He’s especially interested in track and field, and this was his 11th trip to the summer games.

William E. Morton, M.D., writes, “Our great news this year is that our grandson, Jacob Morton, will be attending the University of Washington and has been recruited to the crew program to row for UW. So we will be spending more time on campus in the next few years. We were sorry to miss the June events but hope to rekindle the friendships next year.”

1957

Grace F. Holmes, M.D., and Frederick F. Holmes, M.D., have published Tumbili, a medical mystery set in Tanganyika in the early 1960s under the nom de plume Anne Miller Johnson, M.D.

1958

The Class of 1958 celebrates its 55th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Richard H. Parker, M.D., writes, “Since I left the UW, I have completed 25 years of activity in academic medicine, achieving the position of associate professor of medicine and spending more than 25 years in private practice. I am still practicing medicine as director of primary care and HIV medicine at a community clinic in D.C., plus part-time private practice. Work obligations prevented me from attending the 50th reunion of my class, but I am planning to attend the 55th next year. Photography and travel with my wife of 28 years constitute my main non-professional activities. I am blessed with three children and four grandchildren. My youngest son is currently a resident of Seattle, serving as a U.S. Navy officer stationed at Bremerton Navy Yard.”

Helen Routous Rockas, M.D., writes, “After several decades of graduating from the great UW School of Medicine — in 1958, to be exact — it is time to give back to the elderly. So I have given up my pediatric interest to aid my peers. Retirement homes have invited me (because I told them I am available) to help them learn about prevention of stroke, heart attacks, and all health issues the elderly are concerned with. If anyone wants my expertise, contact me!” Rockas is also writing her autobiography, enjoying retirement with her husband, Chris, and looking forward to seeing classmates next year at the 55th reunion.

1961

William H. Foege, M.D., received the Presidential Medal of Freedom from the President of the United States — the highest civilian award in the United States. See page 16 for details. In addition, he was honored at Helen Keller International’s “Spirit of Helen Keller” gala in May. Credited with devising the global strategy that led to the eradication of smallpox in the late 1970s, Foege is a leader in public health.

1962

Frank I. Backus, M.D.’s son Eric works as an electrical engineer for Agilent Technologies. His daughter, Anne, is raising two teenage daughters in Bend, Ore. His son Mark, an internist, is raising three young children in the same community.

After 43 years in the same house in Seattle, Phil Braden, M.D., and his wife, Lois, moved to the Mirabella, a wonderful retirement community in Seattle, half a mile from downtown and the lake. He is able to walk to many locations, has lots to do and has made a number of new friends. Braden continues to share a weekly bible study with Kirk Douglass, M.D. ’57, and Denny Reichenbach, M.D. ’58.

Sharon S. Bintliff, M.D., FACP, has published a book of poetry, Soular Energy, inspired by and dedicated to her only grandchild, Ileiana, who died of cancer in 2005. All proceeds are donated to Camp Anuenue, a summer camp in Hawaii for children with cancer. She also writes, “Aloha, Class of 1962. I am so disappointed that I was not able to attend the reunion, but several other commitments had been made. As for what is going on with me, the most exciting thing right now is getting pumped up and training to paddle in the World Sprints in Calgary, Canada, in August. We have a six-woman crew, all over 70 years of age. WOW!! We are the TOB (Tough Old Broads), and we are really excited. As for work, my friend and I still have the Resort Docs, a business that makes house calls to all the fancy
hotels here on the Kohala Coast on the big island. I meet some nice people and deliver a service that is greatly appreciated. Hawaii is still paradise, and I continue to surf. Not the big ones, but Mother O takes care of me. I am playing lots of golf, biking and trying to stay fit.”

William E. Hardy, M.D., is enjoying the good life in Arizona, in the “valley of the sun” with Alice, his wife of 48 years.

1963
The Class of 1963 celebrates its 50th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013, with its members joining the 50-Year Association. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Richard Honsinger, M.D., Res. ’68 (internal medicine), received the annual leadership award from the American Academy of Allergy, Asthma and Immunology. Honsinger is president-elect of the Joint Council of Allergy, Asthma and Immunology, representative to the Council of Subspecialties and a member of the FDA’s pulmonary advisory panel. He practices allergy-immunology in Los Alamos and Santa Fe, N.M., where he and his wife, Marian, raised five children. They now have 12 grandchildren.

1965
Raymond E. Vath, M.D., Res. ’69 (psychiatry and behavioral sciences), writes, “I have been promoted to associate professor emeritus by the Department of Psychiatry and Behavioral Sciences for my work with MEDEX, Mercy Corps, the U.S. Foundation and the UW Medicine Alumni Association. Letters from Tom Norris, Fel. ’89 (family medicine) and Peter Roy-Byrne were very helpful. I could not have had the successes I have had without the preparation I received from the UW School of Medicine. Thanks for giving me the opportunity to give back to the university.” Read about Vath’s family on page iv, center.

1967
John R. Kearns, M.D., Res. ’69 (general surgery) writes, “Hello, Class of ’67 – Forrest, Hecht, Ruby, Jones, Jeffers, Killien and others. I am still practicing orthopedics in Minnesota full time and enjoying it. I think of all you guys often and hope that you are all doing well. We had a great class with outstanding graduates, so let us be proud of our accomplishments. Hear, hear to the Class of 1967!”

Jeannette M. Moulthrop, M.D., retired on Jan. 1, 2012. She plans to pursue her passion for photography. Moulthrop and her recently retired husband like to explore national parks where photography opportunities abound.

1968
The Class of 1968 celebrates its 45th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

1969
William J. Bremner, M.D., Res. ’72 (internal medicine), Ph.D., the chair of the Department of Medicine at UW Medicine, was honored for academic excellence at the 2011 UW Medicine Distinguished Faculty Celebration.

1970
Kaj H. Johansen, M.D., Ph.D., has been elected to a two-year term as chief of vascular surgery at Swedish Medical Center. He is a clinical professor of surgery at UW Medicine, a nationally known vascular specialist and surgical educator, and recognized for consultative assistance provided to colleagues in remote and rural areas. After graduating from the UW, he completed his surgery training and earned a Ph.D. in physiology/pharmacology at the University of California, San Diego in 1978.

1972
John H. Newsom, M.D., continues his membership-based family medicine practice in Yardley, Pa. He was recently selected as president-elect of the 747-member medical staff at St. Mary Medical Center in Langhorne, Pa.

1973
The Class of 1973 celebrates its 40th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

1974
Stuart J. Farber, M.D., has been promoted to professor in UW Medicine’s Department of Family Medicine.

1975
William R. Phillips, M.D., Res. ’78 (family medicine), MPH, UW professor in family medicine, has been appointed to an expert advisory panel at the Patient-Centered Outcomes Research Institute. The related study will be managed by the Center for Evidence-based Policy at Oregon Health & Science University.

1976
Francis K. Spain, M.D., is the 2012 recipient of the Idaho WWAMI Alumni Award for Excellence in mentoring, teaching, leadership and patient care. Spain is a member of the first WWAMI-Idaho class of 1972 (entering class). He is a longtime advocate for medical education in Idaho.

Excellence rewarded: Francis K. Spain, M.D.
Phillip C. Cory, M.D., writes, “After completing an anesthesiology residency in Seattle, I went into private practice in Great Falls, Mont., for three years. But the research bug led Joan and me to join the faculty at Penn State University for a few years. The urge to academia is curable, however, and we returned to Bozeman, Mont., in 1990, where Joan joined the faculty at MSU. I was in private practice in anesthesiology-pain management until 2009, and helped to found Nervonix, Inc., an R&D company working on impedance neurography and nerve stimulation technologies, in 1991. I have retired from active practice, doing biomedical consulting, developing a few hybrid grape varieties that I hope will grow (survive? flourish?) in the Rocky Mountains. If they produce good wine, that’ll be even better. The photo shows the two of us (I’m the one with less hair) last summer. I’ve also just published a work of fiction, Titanea, in the sci-fi/fantasy/adventure genre. I hope you’ll take a peek, if interested.”

Cynthia L. Clinkingbeard, M.D., writes, “1979 seems so long ago. We have been physicians for more than 30 years. I took a medical retirement in 2005, and in 2009, I completed a public health master’s at Boise State. It is officially an MHS due to Idaho educational politics, but I focused on research and took all the classes for the equivalent degree (the official MPH) from Idaho State University. Susan, the love of my life, and I got married in Connecticut two years ago and live together with Taylor, my 19-year-old son and his wonderful girlfriend, Amara. We live on a two-acre production farm, grow most of our own food, including eggs, chickens, lambs, ducks, Thanksgiving turkeys and tons of fresh vegetables and herbs. We are a state-registered goat dairy and eagerly await our baby goats. Our life is good — blessed, really. I am also running for Congress in Idaho’s first district.”

Brad Henley, M.D., UW professor in orthopaedics and sports medicine, has been appointed to the board of directors of the Washington State Orthopaedic Association, representing his department.

Meet the Admiral: Dawn Wyllie, M.D. ’85

Dawn Wyllie, M.D., ’85, MPH, FFAFP, is a medical officer in the U.S. Public Health Service (USPHS) assigned to the Indian Health Service (IHS) in Bemidji, Minn. Recently promoted from captain to the flag rank of rear admiral, Wyllie — the regional deputy area director/chief medical officer for the Bemidji-Area IHS — could also fairly be called the USPHS’s unofficial ambassador. She’s passionate and enthusiastic about her job, and she wants you to join her!

Of Sisseton-Wahpeton Oyate (Dakota) American Indian heritage, Wyllie grew up in the Mission District in San Francisco and on the California-Oregon coastal border. At UW Medicine, she gained exposure to medical care for Native populations at the Seattle Indian Health Board and the Alaska Native Medical Center, among other learning sites. Today, she oversees work related to providing public health and medical leadership for a region that serves 34 tribes, four urban programs, and about 120,000 beneficiaries in Minnesota, Wisconsin, Michigan, upper Indiana and Illinois. In addition to being a family physician and an expert on Indian healthcare, Wyllie also is board-certified in addiction medicine and is addressing the epidemic of prescription drug abuse and diversion.

A single parent of two adopted sons, now young adults, and a mentor of three students currently in medical school, Wyllie says, “I’m blessed to have taken a career path that I enjoy and where I know I’m making a difference.”

Interested in Wyllie’s career path? Contact her at dawn.wyllie@ihs.gov, visit the USPHS at usphs.gov, or learn more about the Indian Health Service at ihs.gov.
After nearly 30 years of practice, 11 on the faculty and seven years as Group Health Family Medicine program director, Sara D. Thompson, M.D., has announced her retirement.

1982

Judith A. Jacobsen, M.D., writes, “I was very blessed to take a recent five-month sabbatical and travel around the world. There was so much to learn! Now back to my surgical assisting business, which I love!”

1983

The Class of 1983 celebrates its 30th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

1986

Anthony D. Loebel, M.D., was recently appointed chief medical officer for Sunovion Pharmaceuticals, the U.S. subsidiary of a leading Japanese pharmaceutical company called Dainippon Sumitomo Pharma.

1987

Jay L. Larson, M.D., FACP, is the governor of the Montana Chapter of the American College of Physicians (ACP), the national organization of internists. A resident of Clancy, Mont., Larson is currently a private-practice physician at South Hills Internal Medicine Associates; in 2008, he received laureate and key contact awards from the ACP.

Wayne C. Liles, M.D., Ph.D., has been named associate chair for research in UW Medicine’s Department of Medicine.

1988

The Class of 1988 celebrates its 25th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Frederick S. Buckner, M.D., has been promoted to professor in UW Medicine’s Department of Medicine.

1993

The Class of 1993 celebrates its 20th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Elizabeth Swisher, M.D., has been promoted to professor in the Department of Obstetrics and Gynecology, and Stephanie G. Wheeler, M.D., Res. ’96 (internal medicine), has been promoted to associate professor in the Department of Medicine at UW Medicine.

1994

Gwenn A. Garden, M.D., Ph.D., has been promoted to professor in UW Medicine’s Department of Neurological Surgery.

1995

Lisa K. McIntyre, M.D., Res. (general surgery), Fel. ’03, has been promoted to associate professor in UW Medicine’s Department of Surgery.

1997

Paolo F. Gerbasi, M.D., was honored with a Teacher of the Year Award at the WWAMI Teacher Appreciation and WWAMI 40th Anniversary celebration in Billings, Mont.

1998

The Class of 1998 celebrates its 15th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Heidi L. Crane, M.D., has been promoted to associate professor in UW Medicine’s Department of Medicine.

1999

Melissa M. Hagman, M.D., Res. ’02 (internal medicine), and Jennifer M. Specht, M.D., Res. ’02 (internal medicine), Fel. ’05, have been promoted to associate professor in UW Medicine’s Department of Medicine.

Ryan C. Maves, M.D., has been deployed for the past six-and-a-half months to the NATO Role 3 Multinational Medical Unit in Kandahar, Afghanistan. A “Role 3” hospital is a larger trauma-receiving hospital with fully equipped operating rooms, CT scanners, an ICU and a ward. He writes, “I’m working here as an internist-hospitalist while doing a bit of ID consultation when needed. We take care of U.S. and NATO troops injured in combat, as well as Afghan soldiers and civilians hurt in the ongoing fighting — often grim, but definitely rewarding work. I should be returning home in September, back to San Diego, where my wife, Robin, has been alone with our three kids — Astrid (9), Robby (7), Jonny (6) — since January when I left for training. Hope my classmates are doing well.”

2000

Rachel E. Thompson, M.D., Res. ’03 (internal medicine), has been promoted to associate professor in UW Medicine’s Department of Medicine.

2002

Rod Story, M.D., writes, “I’ve been working at Pullman Regional Hospital as a hospitalist since 2009. Jenny and I enjoy living on the Palouse in Moscow, Idaho. We’re up to nine kids, ages eight months to 16. Life is good!”

2003

The Class of 2003 celebrates its 10th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.
The Filmmaker:
Sean F. Ackerman, M.D. ’10
His day job: a medical resident in child psychiatry in Burlington, Vt. His not-so-secret “secret” job: a filmmaker with ties to Hollywood. Who is this mysterious and multi-talented man? It’s Sean Ackerman, M.D. ’10.

While studying film at New York University’s Tisch School of the Arts, Ackerman exercised the left side of his brain by reading science books like Gray’s Anatomy. He received a B.A. in fine arts in 2001, and he went on to write and direct his first movie, Straight Line, in 2005. Although the movie was successful, Ackerman wanted his life to make a bigger, more humanitarian mark. So he came to school at UW Medicine, where he spent his entire third year in the Missoula track in Montana. After graduating in 2010, Ackerman made his next film, an independent titled The Diary of Preston Plummer, released in 2012. The movie played in theaters in several cities and is now available at various sites for digital download. Meanwhile, Ackerman is back to practicing medicine — with the goal of making a movie every decade or so.
See more at thediaryofprestonplummer.com.

2004
Celine R. Gounder, M.D., accepted a new position in April as an assistant commissioner and director for the Bureau of Tuberculosis Control at the New York City Department of Health and Mental Hygiene.

2006
The WWAMI-Wyoming Program saluted Kathleen A. Hannifan, M.D., Res. ’09 (pediatrics), for her outstanding efforts as a preceptor for first-year medical students in Laramie, Wyo.

2007
Melissa Molsee, M.D., and her husband, Ethan, welcomed their third son, Aden Charles, on May 21. He weighed nine pounds, measured 19.5 inches and is a healthy, contented baby. Their two older boys, Aaron (5) and Elias (2, almost 3) are doing well. The Molsees are preparing to live and work at a mission hospital in Togo, West Africa. They leave for France at the end of December to learn French; then they will travel to Togo. They plan to return to the U.S. for a year every four years.

2008
The Class of 2008 celebrates its 5th reunion at the 2013 Reunion Weekend, May 31–June 1, 2013. Please mark your calendar. If you’d like to join the reunion committee, please contact UW Medicine Alumni Relations at medalum@uw.edu.

Andrew J. Cowan, M.D., spent a year working as a fellow in the Amyloid Treatment and Research Program at Boston University, one of the main referral centers for this disease in the U.S. In May 2012, he presented his research at the 13th International Amyloid Symposium in Groningen, the Netherlands.

Abby K. Furukawa (formerly Parsons), M.D., graduated from Oregon Health & Science University’s (OHSU’s) ob-gyn program in June and has accepted a position in Portland, Ore., with Portland Obstetrics and Gynecology Associates. Although joining a private practice group, she anticipates that she will continue to pursue regular and frequent interactions and teaching opportunities with OHSU medical students and residents.

Andrew M. Rose, M.D., and Sadie M. West, M.D., have joined the Cheyenne Children’s Clinic in Wyoming. Rose and West are members of the 2004 entering WWAMI-Wyoming class and completed residencies in general pediatrics at Primary Children’s Hospital in Salt Lake City, Utah. Both will practice general pediatrics.
Residents, Fellows and Ph.D. Alumni

New job, award, move or family addition? A volunteer or service learning experience you’d like to share? Send us a quick note; simply visit uwmedmagazine.org, click on the “ClassNotes” button, and let us know how and what you’re doing. And take a minute to improve our residency records — use the “ClassNotes” function to confirm your specialty, location and year.

The ClassNotes below were received through August 2012; any received afterward will appear in the next issue.

Prefer mail to the web? We’d love to hear from you: UW Medicine Alumni Relations, Box 358045, Seattle, WA 98195-8045.

---

**Department of Anesthesiology and Pain Medicine**

Lorri A. Lee, M.D., Res. ’98, has been promoted to professor in UW Medicine’s Department of Anesthesiology and Pain Medicine.

**Department of Comparative Medicine**

Piper Meigs Treuting, DVM, Fel. ’99, has been promoted to associate professor in UW Medicine’s Department of Comparative Medicine.

**Department of Family Medicine**

Sharon A. Dobie, M.D., Res. ’89, UW professor in family medicine, has been selected to receive a 2012 Writers in Residence Award from Hedgebrook, a retreat for women writers on Whidbey Island.

Jonathan A. Dreznner, M.D., Fel. ’00, has been promoted to professor in UW Medicine’s Department of Family Medicine.

**Linda J. Gromko, M.D., Res. ’87,** writes, “I have operated a family practice clinic, Queen Anne Medical Associates, PLLC, since 1989, recently adding a weight-loss service. In addition to providing general family practice service and focusing on the prevention of metabolic syndrome, the practice also serves a large transgendered population. My latest book, *Let Me Go When the Banter Stops: A Doctor’s Fight for the Love of Her Life*, tells the story of my late husband’s renal failure, home dialysis, failed transplant, aortic valve replacement and critical illness myopathy. It is my late husband’s legacy. If even one person is helped, the book will be a tremendous success! More information is available at LindaGromkoMD.com.”

**Division of General Internal Medicine**

A number of residency alumni received promotions at UW Medicine: Shireesha Dhanireddy, M.D., Res. ’98 (associate professor, Department of Medicine), Florian Hladik, M.D., Ph.D., Res. ’97 (research associate professor, Department of Obstetrics and Gynecology), Nona Sotoodehnia, M.D., Res. ’99, Fel. ’02, ’03 (associate professor, Department of Medicine), and Jonathan R. Weinstein, M.D., Ph.D., Res. ’99 (associate professor, Department of Neurology).

Bradley D. Anawalt, M.D., Res. ’92, UW professor and vice chair in the Department of Medicine, was named “most outstanding reviewer in his field” by the *Journal of Clinical Endocrinology and Metabolism*.

**J. Randall Curtis, M.D., Res. ’91,** UW professor of medicine in the Division of Pulmonary and Critical Care, will serve as the director of UW Medicine’s newly established UW Palliative Care Center of Excellence with Anthony L. Back, M.D., Res. ’87, UW professor of medicine in the Division of Oncology, serving as co-director. The center will bring together experts in palliative care, integrating research, clinical and educational activities.

Stephen D. Fihn, M.D., Res. ’79, MPH, FACP, UW professor of medicine and head of the Division of General Internal Medicine, received the 2012 Robert J. Glaser Award from the Society of General Internal Medicine.

Nicholas C. Hunt, M.D., Res. ’97, received a Physician Partnership Award from St. Alphonsus Regional Medical Center in Boise, Idaho.

Vishesh K. Kapur M.D., Res. ’98, co-authored an editorial published in *JAMA*: “Filling in the Pieces of the Sleep Apnea-Hypertension Puzzle” with Edward M. Weaver, M.D., MPH, chief of sleep surgery and the surgical program director of the UW Medicine Sleep Center. Kapur, UW professor of medicine in the Division of Pulmonary and Critical Care Medicine, is the founder and medical director of the center as well as the sleep medicine fellowship director.

The American Diabetes Association honored Benjamin A. Lipsky, M.D., Res. ’77, Fel. ’78, UW professor of medicine in the Department of General Internal Medicine, with the Roger Pecoraro Lecture Award.

The UW Department of Medicine recognized Steven R. McGee, M.D., Res. ’83, with the Marvin Turck Outstanding Teacher Award for 2012.

Alvin Matsumoto, M.D. ’75, Res. ’78, UW professor of medicine in the Division of Gerontology and Geriatric Medicine, was a 2012 recipient of the Sidney H. Ingber Distinguished Service Award, one of the Endocrine Society’s Laureate Awards.

Vivian G. Oehler, M.D., Res. ’00, Fel. ’03, an acting instructor, received a Falkow Award at UW Medicine, recognizing outstanding achievements of junior faculty in research, teaching, clinical work and academic citizenship.
Michael W. Schwartz, M.D., Res. ’86, UW professor of medicine and director of UW Medicine’s Diabetes and Obesity Center of Excellence received the 2012 Solomon A. Berson Distinguished Lectureship Award from the American Physiological Society, Endocrinology and Metabolism Section.

Yong Ki Shin, M.D., Res. ’96, has been appointed assistant clinical dean for the WWAMI program in Western Washington, a new position.

Gordon A. Starkebaum, M.D., Res. ’75, Fel. ’78, UW professor of medicine, received the Department of Medicine’s 2012 Beeson Award for outstanding service to patients and trainees.

Joanne D. Stekler, M.D., Fel. ’05, assistant professor of medicine in the Division of Allergy and Infectious Diseases, received a Fialkow Award at UW Medicine, recognizing outstanding achievements of junior faculty in research, teaching, clinical work and academic citizenship.

Joshua P. Thaler, M.D., Ph.D., Res. ’05, UW assistant professor in the Division of Metabolism, Endocrinology and Nutrition, has received the 2012 Perkins Coie Award for Discovery to study how cells and neurons of the brain affect energy metabolism.

Steven L. Writer, M.D., Res. ’80, received a Physician Partnership Award, given by St. Alphonsus Regional Medical Center in Boise, Idaho.

Elizabeth K. Vig, M.D., Fel. ’01, has been promoted to associate professor in UW Medicine’s Department of Medicine.

Michael L. Linenberger, M.D., Fel. ’89, UW professor of medicine in hematology, was named the first holder of the Robert and Phyllis Henigson Professorship in Hematology at UW Medicine.

Carol H. Miao, Ph.D., Fel. ’00, has been promoted to professor in UW Medicine’s Department of Pediatrics.

Jonathan R. Fromm, M.D., Ph.D., Fel. ’04, has been promoted to associate professor in UW Medicine’s Department of Laboratory Medicine.

Ian H. de Boer, M.D., Fel. ’06, has been promoted to associate professor in UW Medicine’s Department of Medicine.

Raimondo D’Ambrosio, M.D., Ph.D., Fel. ’97, UW associate professor in neurological surgery, received two-year National Institutes of Health funding for a grant titled, “Optimization of the FPI model for epilepsy therapy development.”

Robert C. Rostomily, M.D., Res. ’92, has been promoted to professor in UW Medicine’s Department of Neurological Surgery.

Joseph R. Zunt, M.D., Res. ’92, ’93, MPH, has been promoted to professor in UW Medicine’s Department of Neurological Surgery.

The UW Institute of Translational Health Science, led by Nora Disis, M.D., Fel. ’93, UW professor of medicine in the Division of Oncology, has been awarded nearly $65 million over the next five years from the National Institutes of Health to continue its groundbreaking work translating research discoveries into practical applications to improve the health of the public.

A new spine skills lab directed by Walter F. Krengel III, M.D., Res. ’90, UW associate professor of orthopaedics and sports medicine and chief of the spine program at Seattle Children’s, trains residents with hands-on work stations and state-of-the-art instrumentation and guidance systems.

Eduardo Mendez, M.D., Res. ’05, and Henry Ou, M.D., Res. ’04, have been promoted to associate professor in UW Medicine’s Department of Otolaryngology-Head and Neck Surgery.

A number of residency alumni received promotions at UW Medicine: Kimberly H. Allison, M.D., Res. ’07 (associate professor, Department of Pathology), Andrew N. Hoofnagle, M.D., Ph.D., Res. ’07 (associate professor, Department of Laboratory Medicine), and Keith R. Jerome, M.D., Ph.D., Res. ’97, Fel. ’99 (professor, Department of Laboratory Medicine).
Department of Pediatrics

A number of residency alumni received promotions at UW Medicine, all in the Department of Pediatrics: Julie C. Brown, M.D., Res. (associate professor), Lucas R. Hoffman, M.D., Res. '01 (associate professor), Julie R. Park, M.D., Res. '91 (professor) and Danielle M. Zerr, M.D., Res. '93, MPH (professor).

Peter J. Adasek, M.D., Res. '70, was promoted to clinical professor in the Department of Pediatrics of the University of Colorado School of Medicine in July 2012. He lives part-time in Colorado Springs, where he practiced before semi-retiring, and part-time in his boyhood home of Little Falls, N.Y. He continues to do pro-bono lecturing on child abuse. Adasek and his fiancée, Sun Hui Creecy, continue to enjoy ballroom and Czech/Slovak folk dancing. Adasek is also a docent at the Colorado Springs Fine Art Center Museum. (Photo on previous page.)

Edward M. Kolb, M.D., Res. '85, has been appointed to the position of medical director for Boys Town National Research Hospital and Clinics.

Contributions recognized: F. Estelle R. Simons, M.D., Res. '75

F. Estelle R. Simons, M.D., Res. '75, received the 2012 American Academy of Allergy Asthma and Immunology Distinguished Clinician Award, presented in recognition of significant contributions toward improved understanding of the clinical pharmacology of medications used to treat allergic diseases.

Department of Psychiatry and Behavioral Sciences

A number of residency alumni received promotions at UW Medicine, all in the Department of Psychiatry and Behavioral Sciences: Joseph R. Fann, M.D., Res. '93, MPH (professor), Ruth Kohen, M.D., Res. '92 (associate professor) and Mitchell R. Levy, M.D., Res. (associate professor).

Stephen R. Dager, M.D., Res. '83, UW professor of radiology, was a principal investigator at the UW site for a study on differences in brain development in high-risk infants who later develop autism. The study, conducted by UW researchers in collaboration with investigators at several North American universities, was published in the Feb. 17, 2012 online edition of the American Journal of Psychiatry.

Making Therapy Playful: Sarah (Sally) Westcott McCoy, MPT ’79, Ph.D. ’93

The children in Sarah (Sally) Westcott McCoy’s research program look like they’re having a blast. That’s because playing could be the key to better motor control for children with cerebral palsy and developmental coordination disorder. This is the premise behind the work of McCoy, MPT ’79, Ph.D. ’93, UW professor in the Department of Rehabilitation Medicine, and her colleagues at UW Medicine.

Since repetition can improve motor control, McCoy wants children to do motor therapy outside of the therapy session. And the best way to do that is to make it entertaining. “We wanted to come up with a fun intervention that was motivating for children to do at home, and we’re leveraging virtual reality technology to do that,” she says.

In one game, a child dons virtual reality glasses and guides a plane through a series of targets, all while trying to maintain balance on a moving platform. In a more traditional on-screen game, repetitious movements help children learn to control and relax specific muscle groups. See McCoy and some of her research participants at work by visiting YouTube: search for “Westcott neuro gaming.”

An evidence-based collaborative care model developed by Wayne J. Katon, M.D., Res. ’79, UW professor and vice chair of the Department of Psychiatry and Behavioral Sciences, and his colleagues is receiving national attention. Along with other healthcare partners, UW Medicine received a three-year, $18 million dollar grant from the Centers for Medicare and Medicaid Services to implement a collaborative care model for patients with depression and diabetes and/or cardiovascular disease.
Division of Pulmonary and Critical Care Medicine  
Andrew M. Luks, M.D., Res. ’03, ’04, Fel. ’07, UW associate professor of medicine, was selected by the UW Medicine graduating Class of 2012 to receive a Distinguished Teacher Award. Students noted his unparalleled dedication and effectiveness as a role model and mentor. In addition, Luks received the 2012 David R. Saunders Memorial Award for Excellence in Teaching.

David R. Park, M.D., Res. ’92, UW associate professor of medicine in the Division of Pulmonary and Critical Care Medicine, received the Outstanding Educator Award from the American Thoracic Society in May 2012. The award recognizes lifetime contributions in education and mentoring in the fields of pulmonary, critical care or sleep medicine, and honors excellence in clinical or research education as it relates to pulmonary disease.

Department of Radiology  
A number of residency alumni received promotions at UW Medicine, all in the Department of Radiology: Robert S. Miyaoka, M.D., Res. ’92, Ph.D. (research professor), Sudhakar Pippavath, M.D., Ph.D., Fel. ’03, ’04 (associate professor), and Mahesh Thapa, M.D., Res. ’05, Fel. ’06 (associate professor).

Department of Rehabilitation Medicine  
Two residency alumni received promotions at UW Medicine, both in the Department of Rehabilitation Medicine: Marla S. Kaufman, M.D., Res. ’06, ’07 (clinical associate professor), and Christopher J. Standaert, M.D., Res. ’94 (clinical professor).

Margaret C. Hammond, M.D., Res. ’82, UW professor in rehabilitation medicine, shared top awards from the Academy of Spinal Cord Injury Professionals (ASCI) with Barry S. Goldstein, M.D., Res. ’90, UW professor in rehabilitation medicine. Hammond received the 2012 ASCI Leadership Award and Goldstein received the 2012 ASCI Excellence Award.

Department of Urology  
Daniel W. Lin, M.D., Res. ’96, ’99, has been promoted to professor in UW Medicine’s Department of Urology.

Annette Wundes, M.D., Fel. ’09, UW assistant professor in neurology, who specializes in demyelinating diseases of the brain and spinal cord, will co-direct the new, dedicated, comprehensive multiple sclerosis center at Northwest Hospital & Medical Center with Shana Johnson, M.D., UW assistant professor in rehabilitation medicine.

Department of Surgery  
A number of residency alumni received promotions at UW Medicine, all in the Department of Surgery: Jeffrey B. Friedrich, M.D., Res. ’07 (associate professor), Adam B. Goldin, M.D., Fel. ’05 (associate professor), David M. McMullan, M.D., Res. ’04, ’05 (associate professor), and Nahush A. Mokadam, M.D., Res. ’07 (associate professor).

Eileen M. Bulger, M.D., Res. ’93, Fel. ’00, UW professor of surgery and chief of trauma at Harborview Medical Center, is the principal investigator for a new clinical study to help determine which of two common blood-product combinations provides the best outcomes for trauma patients who require massive blood transfusions.

Hugh M. Foy, M.D., Res. ’83, Fel. ’84, UW professor of surgery, received a Distinguished Teaching Award, presented to faculty who show a mastery of their subject matter, intellectual rigor and a passion for teaching at the University of Washington’s 42nd Annual Awards of Excellence Ceremony.

Nicholas B. Vedder, M.D., Res. ’89, UW professor and chief of the Division of Plastic Surgery, has been appointed to the American College of Surgeons Board of Regents Committee on Trauma for a three-year term.

Barbara S. Johnson, B.S. ’63 (physical therapy), has edited, illustrated and co-published a children’s book with her daughter, Anne. Patches in Her Dreams was written by Anne when she was only nine years old and is directed to any child who longs to have a pet.

New job, award, move or family addition? A volunteer or service learning experience you’d like to share? Send us a quick note; simply visit uwmedmagazine.org, click on the “ClassNotes” button, and let us know how and what you’re doing. The ClassNotes below were received through August 2012; any received afterward will appear in the next issue.

Prefer mail to the web? We’d love to hear from you: UW Medicine Alumni Relations, Box 358045, Seattle, WA 98195-8045.

From therapist to illustrator: Barbara S. Johnson, B.S., and daughter Anne.
MEDEX Northwest Alumni

New job, award, move or family addition? A volunteer or service learning experience you’d like to share? Send us a quick note; simply visit uwmedmagazine.org, click on the “ClassNotes” button, and let us know how and what you’re doing. The ClassNotes below were received through August 2012; any received afterward will appear in the next issue.

Prefer mail to the web? We’d love to hear from you: MEDEX Northwest, 4311 11th Ave. NE, Seattle, WA 98105.

Anchorage

Brad Newhart, PA-C (Anchorage Class 1), writes, “I find it really incredible to have experienced the change from being a medic in the combat zone to a civilian provider, and I am happy that MEDEX remains a huge advocate for the original vision of the PA. Since graduating from Anchorage Class 1, it’s been quite a whirlwind. I married another MEDEX PA, Kindra Newhart (née Freedom), PA-C (Seattle Class 43), and we both work in the inpatient setting at Harborview, where the acuity and volume of patients is certainly a challenge for a new grad, but credit my past experience and fantastic training opportunities in Alaska to my success. Right now, I am focusing on gaining more experience before hopefully taking on some PA students in the coming months, and I am especially excited to see more veterans entering MEDEX and continuing their service to others.”

Seattle

Robert J. Woodruff, PA-C, ’70 (Seattle Class 1), and a Vietnam veteran, writes, “I retired July 6, 2011, after 41 years of working as a physician assistant in Washington. During my 41 years, I worked for Cheney Medical Center in Cheney, Wash., and most recently for Kaiser Permanente in Vancouver, Wash. Retirement plans include traveling, doing some volunteer work at the free clinic in Vancouver, improving proficiency in my adopted second language, Spanish, and hopefully some backpacking and fishing.”

Ruth Ballweg, MPH, PA-C (Seattle Class 11), associate professor and section chief for MEDEX Northwest, is the 2012 recipient of the American Academy of Physician Assistants’ (AAPA’s) Eugene A. Stead, Jr. Award of Achievement; Ballweg is being recognized for advancing the PA profession both domestically and globally, and for her dedication to creating paths to the PA profession for military servicemen and women.

Elmer Sisneros, PA-C (Seattle Class 27), writes, “It’s hard to believe, but 17 years ago in October I graduated from MEDEX. I currently live in Heber City, Utah, with my beautiful wife and six children. Over the last four years, we embarked on the concept of delivering affordable healthcare. We own and operate two urgent-care centers in northern Utah. We offer affordable healthcare to the uninsured and high-deductible patients; nowadays, that seems to be everyone. We serve a large Hispanic and uninsured population in this resort town. As healthcare innovators, we have gained a lot of attention in our community and throughout the area. Without the costs of billing insurance, we are able to reduce our overhead by 60 percent, therefore passing the savings on to the patient. We are able to achieve quality healthcare outcomes and high patient satisfaction because we are not pressured or confined by time. We are now turning the corner on our fifth year and growing. The best thing of all is that a physician assistant has set an example of how to deliver affordable, quality healthcare. Visit us at 5minuteclinic.org.”

Randall Dickson, PA-C (Seattle Class 29), writes, “I am working in urgent care at Group Health in Seattle but live on Lopez Island. We built our new home last year and have been enjoying it greatly. Over the past few years, I have become a gardener of both flowers and vegetables. I also love spending time cooking, especially if I grow the food. Ron and I have been together now for 21 years, and we are hoping to get married next year, assuming that Washington approves Referendum 74. Last year, our family grew with the birth of our granddaughter, who lives in San Francisco with our son and his wife. I am the immediate past president of WAPA, and, for the past year-and-a-half, I have been working hard to improve PA laws in our state. Last month, some friends and I organized a welcoming event for the Long Road Home Project, a group of five veterans who are riding their bicycles across the U.S. from Washington to Washington, D.C. to raise money and awareness for wounded veterans and their families.”

Martin (Marty) Buccieri, PA-C (Seattle Class 31), writes, “I still work inpatient psychiatry at Harborview, lecture for MEDEX and precept MEDEX students. Also still living on the houseboat. When I’m not at work, I try not to come ashore.”

Gayle Brannon, PA-C (Seattle Class 32), writes, “After six years at Madigan, I decided to take some time off and played a lot of golf. I’ve been working as a locum since then and love the freedom and travel it affords. I’ve been to Haiti twice since the earthquake and spent several weeks there working in a clinic. I’m planning to go back this winter. I’m currently working for Group Health, and staying home for a few
months gave me time to grow a huge veggie garden, and, of course, play more golf. The grandkids are grown — they don’t have sleepovers with me anymore, they just want the car keys — and the oldest will head for college in another year.”

George Wise, PA-C (Seattle Class 35), writes, “I am a retired Navy chief hospital corpsman who graduated from MEDEX Northwest in 2003. I am currently working as a civilian PA in the Army at a battalion aid station and at a family medicine clinic on Joint Base Lewis-McChord. I am married to Dianna, my lovely wife, and we have two cats: Amber and Thor, the wonder cat.”

Scott (Scotty) Light, PA-C (Seattle Class 38), writes, “Hello from Grays Harbor, Wash. Marcos Chavez, PA-C (Seattle Class 42), Niekol Hall (née Pixton), PA-C (Seattle Class 42), and I are the three MEDEX alumni currently here on the hospitalist service. Niekol Hall will be leaving us this fall, and Brian Goody, PA-C (Yakima Class 17), joined us in October. We have really enjoyed the throngs of MEDEX students over the past few years. They give me energy, and it is one of my favorite parts of the job — when we aren’t too busy! Aries gave birth to our beautiful daughter, Judy Mei, right here at the community hospital four years ago. I hope everyone is doing well, and I’m looking forward to running into everyone sometime soon.”

Taj Mahalia Rock, PA-C (Seattle Class 38), writes, “I am currently happily employed at Petrin Dermatology in Redmond, Wash. We do a lot of very interesting work with psoriasis patients and skin cancer. Dr. Petrin is a Mohs surgeon. I am thankful every day to be a PA. Thanks, MEDEX Northwest and Ruth, for all that you have done and continue to do for our profession.”

Martin Muy-Rivera, PA-C (Seattle Class 39), writes, “The good news is that I just passed the PANRE; it was a little more complicated than the PANCE because I had to study while I was working. Hence, there was little time to study. Besides, one loses the ability to take tests after five years of not being in school, but, thank God, I passed it well. I am working at Valley Medical Center in Renton, Wash., in urgent care, and in the near future, I am looking forward to precepting a PA student. I also have been more involved in athletics. I swim twice a week and also bike (spin) once a week, depending on the time, which is limited. I continue visiting my mom in Mexico every six months and keep in contact with friends in Mexico.”

Morgan Maier, PA-C (Seattle Class 40), writes, “I am starting my third year in dermatology at Seattle Children’s and continue to love my job. I recently moved to View Ridge from West Seattle, and now I am really enjoying my 1.5-mile commute, which I plan on walking and/or biking via the Burke Gilman Trail. I have precepted nurse practitioners, doctoral-level nursing students and medical students from multiple colleges and universities in the area, and I continue to love to teach and mentor mid-level providers.”

Barbara Inglin, PA-C (Seattle Class 40), writes, “I am currently working in rural Minnesota for the year in a VA community-based outpatient clinic. I am learning a lot about primary care in rural communities and its special challenges. I enjoy the work and feel that I’ve been able to connect with my patients and make a difference.”

Howard Chaitoff, PA-C (Seattle Class 40), writes, “I served as a medic from 1987–1991 at Eielson Air Force Base in Fairbanks, Alaska. It was there that I was first introduced to a physician assistant. He was the officer in charge of the acute care clinic and my supervisor for the next four years. He was as eager to teach me everything he knew about medicine as I was to learn it. He is why I became a physician assistant. So I now find myself, after multiple reincarnations, serving again as a medic for the military. I am the primary care manager for the Warrior Transition Unit at Fort Richardson, Alaska. I manage the care for all soldiers evacuated out of theatre for physical illness, injury or psychological trauma. I manage very complex patients with very difficult diagnoses that include PTSD, traumatic brain injury and chronic pain. These men and women have answered the highest calling, protecting our country with their lives. It is the most rewarding work a veteran can do, taking care of soldiers. I feel very fortunate that a very new and untested civilian physician assistant like myself was given the opportunity to lead a team of healthcare professionals to care for these soldiers. I knew practically nothing about managing psychiatric trauma and chronic pain. Now I use my expertise to help other primary-care providers avoid poly-pharmacy and dependence on narcotics and to develop safer and more sustainable medication regimens for our soldiers. I could not have left teaching to start a new career in medicine without the support of my wife, Kimberly. I would not be able to work through those difficult times without the resilience afforded me by the unconditional love that is heaped upon me by my children: Kathryn (24), Harrison (19), Madison (4) and Camden (1). I had a midlife crisis about two years ago and took up bass guitar. I feel certain it is only a matter of time before I can leave medicine to pursue rock stardom. In the meantime, I will re-certify in 2014, just to be safe.”

Spokane

Anthony Walker, PA-C (Spokane Class 1), writes, “I retired in January 2010 with a total of 24 years’ uniformed service, 12 with the U.S. Army and 12 with the U.S. Public Service. I worked in family practice after retirement, but have taken a position with the Army as a civilian, back working with my military brothers and sisters and their families, along with other area retirees. It is rewarding practicing as a staff PA in the urgent-care portion of the emergency room on Fort Riley, home of the Big Red One [First Infantry Division].”

Joseph Joslyn, PA-C (Spokane Class 7), writes, “I moved from Montana last year and live in Madison, Wis. I now commute to work at a small-town hospital (Portage, Wis.), splitting my time between ER and urgent care. I’ve been in the Air National Guard for 19 years, which included a tour in Afghanistan in 2010. In Afghanistan, I was the first PA assigned to an aero-medical evacuation squadron at a NATO base (Camp Bastion), part of the 451st Air Expeditionary Wing based out of Kandahar. In addition to my regular duties, clearing patients for air transport, I volunteered to practice in a U.S. Navy aid station and helped the U.S. Navy concussion treatment team based out of Camp Leather-
neck. Prior to being deployed, I was clinical director for an urban Native American clinic in my hometown of Great Falls, Mont. As a PA with the Wisconsin Air National Guard, part of my duties include being the triage officer for an emergency response force unit, comprising Army and Air National Guardsmen who can be deployed with 12-hour notice to any terrorist-related event or natural disaster in our FEMA region. My wife, Bonnie, and I are ready to celebrate 20 years of marriage in September. We have three children yet at home, Kathleen (17), Aaron (13) and Samantha (11). We also have three grown children, Matthew (29), Melissa (27), and Mark (25), and one grandchild, who all live in Montana. Hope to hear from other classmates."

Amber Bell, PA-C (Spokane Class 12), writes, “Has it really been two years since graduation? I have been working at Summit Urgent Care and Occupational Medicine for two years and love coming to work each shift. I love our career field and am so thankful to be where I am today. I miss the camaraderie and excitement of the military from time to time, but enjoy the flexibility and control I have over my civilian life. For now, I’ll continue to travel in my spare time and finish my most recent read, Paradise General: Riding the Surge at a Combat Hospital in Iraq. I still run often. My most recent events included the Publix Half Marathon in Atlanta, Ga., and a Wounded Warrior Project-sponsored 5K in Kennesaw, Ga. I am looking forward to seeing how the rest of my classmates are doing this year and wish everyone the best!”

Cari Rodgers, PA-C (Spokane Class 12), writes, “I am currently employed by Community Health Association of Spokane and have had the unique opportunity to open the first school-based medical clinic in the Spokane area. I am working as the medical provider at Sunset Elementary Health Clinic in Airway Heights. It has been a wonderful learning experience. We just opened last April and re-opened for the 2012–2013 school year in August. It is a pleasure and joy to serve the underserved children in the community, providing easier access to care for families whose children attend the elementary school. There is a lot of talk about expanding. However, as with any new clinic, baby steps are the key to success. Life is busy, and my daughter keeps me on my toes. She is beginning kindergarten this year, a new chapter in her life (and mine)!!”

Yakima

Margaret Hale, PA-C (Yakima Class 4), writes, “I am an officer in the United States Public Health Service (USPHS), assigned to an inpatient unit in a federal prison. I am attending school online at A.T. Still University for a master’s degree, and I draw and read in my spare time, when I have any. I went to Cuba last year with Friendly Planet, and am hoping to go to Italy next year with my church.”

Brian Callier, PA-C (Yakima Class 4), writes, “My first three years after graduation were spent working for the Paiute Indian Reservation in Las Vegas and Moapa, Nevada. This was a great learning experience. From the get-go, I was a new grad with a lot of autonomy. Very scary at times, but a great experience overall. After the reservation, I went into ophthalmology for one year, working with a corneal specialist and learning about the eye. I was able to assist in some awesome surgeries, including traumas and corneal transplants. For the last eight years, I have been working as an urgent-care specialist with Southwest Medical Associates/United Healthcare. PAs here have a lot of autonomy, performing numerous procedures and care for all types of patients. The particular urgent-care site I work for is considered a high-level, 24-hour facility, complete with a 24-hour observation unit. I work three 12-hour shifts in a row, which gives me a four-day day weekend every week. For the last four years, I have been doing swing shifts, 3 p.m. to 3 a.m. On a more personal level, I have been married for 13 years now, having met my wife while in PA school on one of my rotations. My wife is a PA as well. We have two children, a boy who is 13 and a daughter who is 11. We have lived in Las Vegas since we both graduated 12 years ago. I’m an avid runner — I participate in 5K races — and I weight train and practice mixed martial arts. My current fitness goal is to run a sub-20-minute 5K.”

Carlos Caso, PA-C (Yakima Class 7), writes, “I have been living in Nicaragua with my family. I was hired by a mission that is headquartered in Maple Valley, Wash.: Corner of Love. It is only eight weeks of work per year. My wife is teaching full time at the Nicaraguan Christian Academy. I am networking through an administrator at the Hospital Metropolitano. The PA situation in Central America is interesting. It seems as though we are not established or recognized here. I would like to help in setting a PA precedent.”
PASSAGES: OUR FRIENDS, REMEMBERED
Below we pay tribute to recently deceased alumni, faculty and friends. Because we are not always aware of deaths in the larger UW Medicine community, especially those that take place outside of Seattle, we rely on other alumni, faculty and friends to notify us and send us obituaries. Our sincere condolences to those who have lost loved ones.

ALUMNI
Neil F. Thorlakson, B.S. ’49, M.D.
Died Jan. 2, 2012
Dr. Thorlakson was an ophthalmologist who believed in supporting the rights of the dying.

Robert M. Burns, M.D. ’56
Dr. Burns was a decorated combat medic and a pediatrician.

Robert H. Mosebar, B.S. ’54, M.D. ’57
Died Aug. 23, 2011, in San Antonio, Texas
Dr. Mosebar was the father of “Combat Lifesavers,” soldiers trained to provide medical aid during combat.

Haywood L. Alexander, M.D. ’58
Dr. Alexander served in the U.S. Army.

Eugene M. Baldeck, M.D. ’59
Died April 16, 2012, in Lewiston, Idaho
Dr. Baldeck was the first board-certified ophthalmologist in Lewiston, Idaho.

Ivar W. Birkeland, Jr., M.D. ’59, Res. ’67
Dr. Birkeland was an orthopaedic surgeon who enjoyed skiing and sailing.

Max C. Bader, M.D. ’61, Fel. ’84, MPH
Died April 30, 2012, in Beaverton, Ore.
Dr. Bader served governmental health agencies at the city, state and federal level.

Wayne D. Crill, M.D. ’61
Please see Dr. Crill’s obituary on page 37.

John W. Ensinck, M.D., Fel. ’62
Please see Dr. Ensinck’s obituary on page 37.

Dean F. Obenchain, M.D. ’62
Died Jan. 28, 2011, in Boise, Idaho

R. Palmer Beasley, M.D., Res. ’67
Died Aug. 25, 2012, in Houston, Texas
Please see Dr. Beasley’s obituary on page 37.

Bryce E. McMurry, M.D., Res. ’67
Dr. McMurry was a lieutenant commander in the Navy and a psychiatrist.

Donald G. Bliss, M.D. ’77
Dr. Bliss was an orthopaedist who helped found WestSound Orthopedics.

Bruce E. Hubler, M.D. ’91, Fel. ’97
Died June 26, 2012, in Eagle, Idaho
Dr. Hubler was born in Idaho and, after achieving honors at the University of Washington, practiced in his home state. His family and friends have created a scholarship in his memory.

FACULTY
Nelson Fausto, M.D.
Please see Dr. Fausto’s obituary on page 38.

Albert B. Harris, M.D.
Dr. Harris was a professor emeritus in UW Medicine’s Department of Neurological Surgery.

James R. Smith, M.D.
Died May 5, 2012, in Kirkland, Wash.
Dr. Smith was an emeritus professor in the Department of Obstetrics and Gynecology at UW Medicine.

Alvin J. Thompson, M.D.
Died May 21, 2012, in Mercer Island, Wash.
Please see Dr. Thompson’s obituary on page 38.

Marvin R. Young, M.D.
Dr. Young was an active advocate for medicine and the practice of dermatology.

COMMUNITY
Jack Benaroya
Please see Mr. Benaroya’s obituary on page 39.

Lucille Rinaudo Phillips
Died Feb. 28, 2012
Mrs. Phillips was a former president of the Medical Faculty Wives’ Club, now the Friends of the UW School of Medicine.

George B. Rathmann, Ph.D.
Please see Dr. Rathmann’s obituary on page 39.

Full obituaries at uwmedmagazine.org »
WAYNE E. CRILL, M.D. ’61
Born Feb. 14, 1935

Wayne E. Crill, M.D. ’61, was a UW professor emeritus in the Department of Physiology and Biophysics and the Department of Neurology. He completed a neurology residency at New York Hospital at Cornell University. Dr. Crill then returned to UW Medicine to complete a postdoctoral fellowship in physiology and biophysics, joining the department as an assistant professor in 1967, with a joint appointment in the Department of Neurology. He served as chair of the Department of Physiology and Biophysics from 1983 to 1999. Throughout his career, Dr. Crill maintained a clinical neurology practice and a neuroscience research laboratory — authoring nearly 100 peer-reviewed articles — while also serving as a beloved mentor to faculty and trainees. Two funds were established in his honor: the first, the Wayne E. Crill Endowed Graduate Student Research Fund, was established by colleagues, former students and friends to support students in the Department of Physiology and Biophysics. The second, the Wayne E. Crill Endowed Professorship in Physiology and Biophysics, was established by former M.D.-Ph.D. student Guy L. “Bud” Tribble, Ph.D. ’83, and his wife, Susan K. Barnes, to honor Dr. Crill’s many contributions to basic science research. Dr. Crill, who received the Distinguished Alumnus Award from the UW Medicine Alumni Association in 1999, is survived by his wife, Jean, his children, Betsy, Jennifer and Wayne, and seven grandchildren.

R. PALMER BEASLEY, M.D., RES. ’67
(INTERNAL MEDICINE)
Born April 19, 1936, in Los Angeles, Calif.
Died Aug. 25, 2012, in Houston, Texas

R. Palmer Beasley, M.D., Res. ’67, was born in California, received an undergraduate degree at Dartmouth College, and attended Harvard Medical School, where he decided to focus on the study of infectious diseases — a decision that would eventually save hundreds of thousands of lives. He came to the University of Washington, receiving a master’s degree in public health as well as fulfilling a residency in internal medicine, then moved to Taiwan to research rubella. While there, he became interested in hepatitis B, and he and his colleagues determined that hepatitis B virus is a primary cause of liver cancer, and that mothers can transmit the virus to their baby during childbirth. They also determined that a shot of immune globulin at birth protected children. For this life-saving work, Dr. Beasley was awarded the King Faisal International Prize in Medicine, the Charles S. Mott Prize, the Maxwell Finland Award for Scientific Achievement and the 2010 Distinguished Scientist Award by the Hepatitis B Foundation. In addition to maintaining a 20-year connection with the University of Washington, Dr. Beasley worked for the Centers for Disease Control and Prevention from 1963 to 1965 and served as the dean of the University of Texas School of Public Health from 1987 to 2005. Dr. Beasley is survived by his wife of 32 years and scientific collaborator, Dr. Lu-Yu Hwang, two children from his first marriage, Monica and Fletcher, a daughter from his second marriage, Bernice, a brother and two grandchildren.

JOHN W. ENSINCK, M.D., FEL. ’62
(ENDOCRINOLOGY)
Born Feb. 19, 1931, in Montreal, Canada

John W. Ensinck, M.D., Fel. ’62, received undergraduate and medical degrees from McGill University in Canada. After residency, he completed fellowships at Rockefeller University and UW Medicine, joining the faculty in 1961 and becoming a professor of medicine in 1973. In 1970, Dr. Ensinck was named director of the UW Clinical Research Center, having earlier been instrumental in establishing policies for including and protecting human subjects in research and teaching. Dr. Ensinck published over 100 papers related to diabetes, insulin and calcium metabolism, cared for patients at several sites, including UW Medical Center and Harborview Medical Center, and was an enthusiastic teacher and mentor. He was a member of the American Society for Clinical Investigation and a fellow of the American Association for the Advancement of Science and the American College of Physicians. When Dr. Ensinck retired, an annual lecture was established to honor his many contributions to UW Medicine. He is survived by his son, John W. Ensinck, Jr. Dr. Ensinck’s family has suggested that contributions be directed to the Friends of the UW School of Medicine; to learn more or to contribute, contact 206.543.5686.
NELSON FAUSTO, M.D.
Born Dec. 13, 1936, in São Paulo, Brazil

Nelson Fausto, M.D., the chair of UW Medicine's Department of Pathology from 1994–2011, was an acclaimed researcher in liver function and disease, as well as a beloved mentor to his trainees, faculty and staff. He was the co-editor of universally used medical textbooks on pathology and the liver, he published more than 200 widely cited research papers, and he served as editor-in-chief of the American Society of Investigative Pathology's flagship journal, The American Journal of Pathology. In 2010, in recognition of his role as past president, as founding editor of the Journal of Molecular Diagnostics and as “an individual who represents the highest ideals in pathology and medicine,” Dr. Fausto received the Gold-Headed Cane award from ASIP, the highest honor offered by this organization. In 2012, he received the Distinguished Service Award from the Association of Pathology Chairs. Nelson Fausto is survived by his wife, Ann DeLancey, and his brothers, Boris and Ruy. The family suggests that those who wish to make donations can contribute to the Nelson Fausto and Ann DeLancey Endowment for Native American Education or the Fausto-DeLancey Endowed Professorship in Pathology at UW Medicine; to learn more or to contribute, contact 206.543.5686.

For an obituary detailing Dr. Fausto's accomplishments, please visit uwmedmagazine.org.

ALVIN J. THOMPSON, M.D.
Born April 5, 1924, in Washington, D.C.
Died May 21, 2012, on Mercer Island, Wash.

Alvin J. Thompson, M.D., was appointed to the U.S. Naval Academy in 1940 before earning his medical degree from Howard University in 1946. He moved to Seattle in 1953 to work at the VA. Shortly after, he established a private practice, and he created the gastroenterology and internal medicine lab for Providence Health and Services. Dr. Thompson helped found several area organizations and annual events, including the Washington State Association of Black Professionals in Health Care and the Northwest Kidney Centers’ annual Kidney Health Fest. Dr. Thompson — a clinical professor at UW Medicine — strengthened UW Medicine’s mentoring program for minority medical students by connecting the campus with more area physicians. A laureate and master in the American College of Physicians, Dr. Thompson served on numerous county, state and national government committees, focusing on equal access to healthcare, the use of tobacco, diabetes, immunization, education and research. He received many honors, including the John Geyman Health Justice Advocate Award, the Dr. Benjamin Rush Award for Citizenship and Community from the American Medical Association and the Philanthropist of the Year from Washington Gives in 1989. He is survived by his wife, Faye, and his children, Michael, Donna, Kevin, Susan and Gail. The family suggests that those who wish to make donations can contribute to the Alvin Thompson Medical Student Support Fund at UW Medicine; to learn more or to contribute, contact 206.543.5686.
JACK A. BENAROYA  
Born in 1921, in Montgomery, Ala.  
Died May 11, 2012  
Jack A. Benaroya was the leading commercial real-estate developer in the Seattle area for many years. Born in Alabama, he spent part of his childhood in California, coming to Seattle in 1933. In 1939, he graduated from Garfield High School, and he served in the Navy in the Philippines during World War II. As well-known as Mr. Benaroya was for his business prowess — he brought the concept of the industrial park to the Northwest — he was equally well-known (with his wife, Becky) for philanthropy. The home of the Seattle Symphony Orchestra bears the Benaroya name, as does the Benaroya Research Institute at Virginia Mason. The Benaroyas also supported diabetes research — among many other interests — at the University of Washington. In addition to his wife of 70 years, Becky, Mr. Benaroya is survived by three children, Donna, Alan and Larry, four grandchildren, five great-grandchildren and a sister, Rose.

GEORGE B. RATHMANN, PH.D.  
Born Dec. 25, 1927, in Milwaukee, Wis.  
George B. Rathmann, Ph.D., was a renowned biomedical innovator and entrepreneur. After receiving an undergraduate degree from Northwestern University, he earned a Ph.D. in physical chemistry at Princeton University. Dr. Rathmann, who became the director of research at Abbott Laboratories, went on to become the co-founder and CEO of Amgen. Under his direction, Amgen identified the gene for erythropoietin or EPO, a hormone that triggers the body’s production of oxygen-carrying red blood cells. In 1989, the FDA approved the sale of EPO, which has since been used to treat chronic anemia in kidney dialysis patients and other types of anemia, such as that experienced by chemotherapy patients. In addition to heading this hugely successful company, Dr. Rathmann — who retired from Amgen in 1990 — retained an interest in biotechnology, and served as chairman of Icos Corp. (now known as CMC Icos Biologics), Nuvelo and ZymoGenetics. Rathmann also was interested in philanthropy, and he and his family created the Rathmann Family Foundation Endowed Chair in Patient-centered Clinical Education at UW Medicine. Dr. Rathmann is survived by his wife of 61 years, Joy, sons James and Richard, daughters Margaret, Laura Jean and Sally, and 13 grandchildren.
The Rural/Underserved Opportunities Program is a four-week-long experience that takes place after a student’s first year of medical school. During the summer, students shadow a physician in a rural or medically underserved urban setting. For most, it’s their first in-depth exposure to clinical practice, and it leaves an impression. Here are some reflections from a few of our students.

A Bigger Town
The country out here is stunning — especially as the sun drops in the evening, and the field turns brilliant shades of ocher, gold and green. I want to hop back on my bike and explore every little hilly back road, every last river bend, and scan every fence line for a bird I’ve never seen before.

In these past three days in the clinic, I’ve seen all manner of folk, old and young, stoic and scared, healthy and sick, wealthy and poor. And I’ve seen people of different cultures, races and religions. And there are big, challenging issues I’ve confronted every day in the clinic — issues like access to OB care, access to dentistry, drug and alcohol abuse, and childhood obesity. From an epidemiological perspective, these issues are monstrous.

But somehow these challenges are made bigger, more real and more personal when they manifest in an individual in front of you — in a single person suffering. I’ve already learned a lesson about judgment, about making pre-conceived notions of a place. The human challenges have made it obvious — this is a much bigger town than I imagined.

First and Last
Going to work in a hospital and clinic setting is a stark contrast to the classroom work that consumed most of our first year of medical school. My first day in clinic with the doctor gave me an immediate reminder that the circumstances you are placed in as a physician are incredibly unique and extraordinary. I got to take part in two cases that drastically changed the lives of two community members and their families.

These cases just happened to be the first and last cases of my first day. The first, the birth of a beautiful baby girl for a newly formed family unit to love and adore. The last, a love lost unexpectedly. For one family, it was a day to be cherished and remembered; for another, a day that brought devastation.

The Miracle
Tonight, I held M. G.’s hand and asked how she was doing. She looked up at me and said, “Hi, how are you?” This may sound like a normal patient interaction, but for me, it seemed more like a miracle.

I have seen M. G. every morning since my R/UOP began, but these are the first words we have exchanged. She has been on a ventilator and completely non-responsive. This morning at 7:30 a.m., when we checked in on her, she was unable to follow any commands or respond in a recognizable way... Now, at 9:45 p.m., here she was off the ventilator, having a conversation with me.
What does it take to move medicine forward? It takes you.

Protein design. High-risk pregnancy. From manipulating the smallest particles to taking care of the smallest infants, UW Medicine is moving medicine forward — all while educating the next generation of healthcare professionals. And you can help. Make a gift by contacting us at 206.543.5686 or writemed@uw.edu, scanning the QR code at right, or visiting us at supportuwmedicine.org.

UW Medicine

CONTACT US

UW Medicine Advancement and UW Medicine Alumni Relations
Alumni Relations: 206.685.1875 or toll free 1.866.633.2586
Advancement: 206.543.5686
medalum@uw.edu
uwmedalumni.org
supportuwmedicine.org

MEDEX Northwest Physician Assistant Program Office
206.616.4001
medex@uw.edu
medex.washington.edu

Continuing Medical Education Office
206.543.1050
cme@uw.edu
uwcme.org

To learn more about our programs and events, visit UW Medicine magazine on the web at uwmedmagazine.org.
2013

REUNION WEEKEND

Your friends. Your class. Your university.

SAVE THE DATE

Friday, May 31–Saturday, June 1, 2013

Welcoming all classes and honoring the classes of 1953 • 1958 • 1963 • 1968 • 1973 • 1978 • 1983 • 1988 • 1993 • 1998 • 2003 • 2008 and the 50-Year Association

Inside: photos from the 2012 Reunion Weekend! See page 19.