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CENTENNIAL ISSUE

# Illuminations

THE MAGAZINE FOR THE UNIVERSITY OF UTAH SCHOOL OF MEDICINE ALUMNI AND FRIENDS

Volume 1 Number 2

*A Century of Brilliance*



# Illuminations

THE MAGAZINE FOR THE UNIVERSITY OF UTAH SCHOOL OF MEDICINE ALUMNI AND FRIENDS

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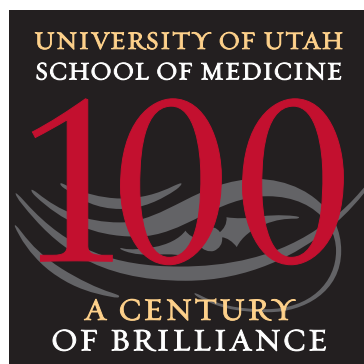
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## Message from the Dean



*For the first time* our medical students are attending classes in the new Spencer F. and Cleone P. Eccles Health Sciences Education Building. This 158,000 square-foot building has larger classrooms that provide state-of-the-art capabilities for education. It also has outstanding clinical and laboratory teaching areas. The classrooms replace the old classrooms A through D that have been used for medical student classes since the old hospital was constructed in 1965. After forty years, we now have the best and most up-to-date teaching facilities in the country.

Opening this new building seems an appropriate celebration of the one hundredth anniversary of the founding of the School of Medicine. I am sure that those fourteen students who enrolled in a two-year medical program in a building on President's Circle would be astounded by the current teaching space. Those physicians who practiced and trained at the old Salt Lake County Hospital in the early days of our four-year medical program are equally impressed by the expansion of our clinical facilities. The new Eccles Critical Care Pavilion, the Huntsman Cancer Hospital, the University Orthopedic Center, and the new Moran Eye Center (under construction) represent the greatest expansion of our clinical facilities in our history. When the Emma Eccles Jones Research Building opens this year it, along with extensive renovations of laboratories in Research Park, will provide a similar expansion of our research space.

From the humble beginnings on President's Circle in 1905, the University of Utah School of Medicine has grown to be an internationally recognized center of excellence in clinical care, research, and education. The School of Medicine has a budget of \$475 million this year to carry out our missions. We have 411 medical students, 630 residents and fellows in training, and 450 graduate students seeking advanced degrees. University Healthcare facilities are found throughout the Wasatch Front providing access for the state's population.

I recall the School of Medicine when I graduated in 1980. The current University Hospital was a large hole in the ground. The anatomy laboratory was in a barracks built on the side of the mountain during World War II. There was no Eccles Genetics Building, no Wintrobe Building, and no Biopolymers Building. Even then I was proud to be recognized as an alumnus of one of the best medical schools in the country. Like thousands of other graduates I gained the knowledge and skills that have allowed me to treat thousands of patients over the last 25 years. I have always been proud that I can

list the University of Utah School of Medicine in my credentials.

As we recognize this centennial year we celebrate the century of progress in education, patient care, and research that has occurred in our School. We should also celebrate the bright future that we face with our new facilities. I am confident that the next century will be even more remarkable than the last. We cannot predict what the School of Medicine will look like decades in the future, but I can assure you that the tradition of excellence will continue.

A handwritten signature in dark ink, appearing to read 'D. Bjorkman'.

David Bjorkman, M.D., M.S.P.H., 1980  
Dean  
University of Utah School of Medicine

## Alumni President's Message

*Everyone associated with the Health Sciences Center is aware of the 100-year anniversary of the School of Medicine. The Medical School began as a two-year institution a century ago, and this year we have had numerous activities celebrating this landmark event.*

*As part of the Alumni Weekend in June, our annual CME Conference focused on the history of the Medical School. Several of our "Pioneers of Medicine" returned to speak on the growth we have experienced within their respective specialties. Dr. George Veasy, who was instrumental in building Primary Children's Medical Center into the world renowned facility that it is, spoke on the history of the School of Medicine. Dr. Russell M. Nelson related his experiences in helping to develop the heart bypass machine and in doing the first open-heart surgery in Utah. Dr. Homer Warner spoke on his development of the first medical informatics department in Utah, and in the country for that matter. Dr. Lawrence Stevens talked about doing the first kidney transplant in Utah. And, Dr. Larry Jung spoke on establishing the first newborn ICU in the state.*

This year the new Spencer F. & Cleone P. Eccles Health Sciences Education Building opened and students have a wonderful new center to enjoy as they learn the science of medicine. The Alumni Association contributed close to \$150,000 towards its construction and has an auditorium named in our honor called "Alumni Hall." We want to extend a special thanks to all those who generously contributed to that hall. We encourage you to visit the Education Building and witness for yourself that magnificent facility. Our students are fortunate to have such a pleasant, modern, high-tech center for learning, and we as alumni can surely be proud to be a part of its completion. The environment within its walls is so enticing that it almost makes me want to go back to school.

As we look back on the history of our institution, it is natural to reflect on our own experience as we began our careers in medicine. When I arrived for my first day of class in the fall of 1972, I was awestruck to be in such a prestigious school studying my life's dream. Our campus was a far cry from the old county complex on 21st South. Yet, the new hospital had not yet been built nor had the Huntsman Cancer Institute, the Moran Eye

Center, the new Primary Children's Medical Center, the new Eccles Critical Care Pavilion, or the new Spencer F. & Cleone P. Eccles Health Sciences Education Center. Even AirMed was not yet in existence.

By today's standard, with all the marvelous additions to our campus, what we had to work with 30 years ago might seem rather archaic. On the other hand, we were blessed with legendary professors such as Dr. Hashimoto, who could draw the human body with both hands simultaneously and effortlessly. Who could forget Dr. Wintrobe whose demand for excellence inspired our desire for perfection? Then there was Dr. Goodman and his "Blue Bible" who taught us "the dose of the drug is enough!" I also can't forget Dr. Frank Tyler and his thoughtful retreats for students and residents at his log cabin home. I remember well Dr. Lou Samuels with his cheery disposition who taught us to understand and respect the laboratory.

Space does not permit mention of all those professors who were so instrumental in helping our class become physicians, but I am grateful for their training and interest in me. I suspect that in another decade, our current students will look back with the same

fondness and reverence for our current faculty who are fast becoming "legends of medicine."

Though the science and technology of medicine has progressed over the past three decades, some things will always be the same. Medicine will always involve interested, sensitive, well-trained professionals giving the best health care available. Despite new drugs, procedures, and changing techniques, the doctor-patient relationship will always remain. For me, that is what makes medicine such a special profession.

We as a committee appreciate all the support the alumni give whether it be personally, as in the mentoring program, or at various activities, or through financial support of the school and the Alumni Association. We also encourage any suggestions you may have to improve the Alumni Association and its mission to support the School of Medicine its alumni, faculty and students.



Fred F. Langeland, M.D., 1976  
President, Alumni Board  
University of Utah School of Medicine  
Alumni Association



Fred F. Langeland, M.D., 1976



# History & Achievements

## 1905-2005

*In 1972, Dr. John Dixon, Vice President for Health Sciences at the University of Utah, stated,*

“Utah has no business having a medical school in the state, absolutely no business from a financial standpoint or a clinical standpoint. We just can’t justify it, let alone a medical school that I think is one of the top fifteen in the U.S. We only deserve a third-rate, under-financed, trade-school operation, and what we have is a **first-rate**, research-oriented health sciences group... a **tribute** to all those who have gone before me.”

One hundred years ago, in 1905, the medical school at the

University of Utah was born. As Dr. Dixon stated, Utah did not have the funding nor the talent to start such an academic institution.

Nevertheless, from its humble beginnings, a world-class Medical School has been built thanks to the brilliance, talent, and hard work of hundreds of physician-educators, students, and administrators. A brief review of the history of Utah’s School of Medicine reveals spectacular accomplishments on community, national, and international stages. Drs. Max Wintrobe, George Cartwright, Leonard Jarcho, Val Jaeger, Frank Tyler, William Harris, Lyman Fulton, Hans Hecht, Edward Hashimoto, Ewart Swinyard, Louis Goodman, Leo Samuels, and

scores of others helped instill rigor and excellence into the medical school. Others have picked up the torch and are running with it today as the tradition of excellence continues.

*In the beginning* of the 20th century there was no sprawling Health Sciences Center on campus—just the John R. Park Building and some adjacent structures near the Park Building circle. And, the U.S. Army Post, Fort Douglas, was nestled in the foothills where the health sciences now thrive.

James E. Talmage Building, originally built as a museum in 1902, located on Presidents Circle. It housed the medical school from 1905 to 1920.



one hundred years



1905-1942

# beginnings

## *the starter home*

LeRoy Cowles Building on President's Circle. The School of Medicine had its beginnings on the second floor of the U of U Museum in 1904.

**1909** Entrance requirements established. Students must have one year of college work, including physics, inorganic chemistry, zoology or comparative anatomy, qualitative analysis, and a reading knowledge of French or German.

**1924** Premedical requirements increased from one to three years of college.

**1927** Since the University of Utah, until 1942, was only a two-year medical school, students needed to obtain their last two years of schooling elsewhere. The following quote from the December 9th *Chronicle* showed they did very well, "All students that have transferred to Harvard Medical School stood in the upper third to upper one-tenth of their classes, and similar reports are coming from other institutions. Students from the University of Utah lead all other groups who have transferred to the University of Pennsylvania."

**1909** Medical Department removed from College of Arts and Sciences when accreditation teams demanded it.

**1929** The Department of Biochemistry was formed and placed in a converted attic.

**1942** In September the school had \$150 left in the budget and staff consisted of one "efficient secretary, Mrs. Florence Strong."

**1942** In May, Board of Regents approves four-year medical school.

**1905-06** Two-year medical course begins in the Department of Biology. Fourteen students enrolled, all of whom became physicians.

**1907** An ill-fated two-year experiment began, placing the Medical Department in the College of Arts and Sciences.

**1907** Legislature passed a law that "unclaimed dead bodies of convicts and other persons" be provided to the medical school for instructional purposes.



**1909** ROTC barracks, built to train cavalry officers, became the medical school central facility for the next 40 years.

**1939** Working through the WPA, and at a cost of \$35,000, the only expansion of the medical building in 20 years was completed.

**1942** Dr. Louis P. Gebhardt, hired from Stanford University to head the Department of Bacteriology, is dismayed at what he finds. "The lab looked like the stone-age variety. There were only two cultures and both were contaminated." He admitted to having to collect 400 mice, steal cages to house them, and then having half die the first night because the labs weren't heated.



*Students train in physical diagnosis skills in the 1940s.*

**1942** In July, a contract is drawn between the University and Salt Lake County Hospital.

*Salt Lake County General Hospital*



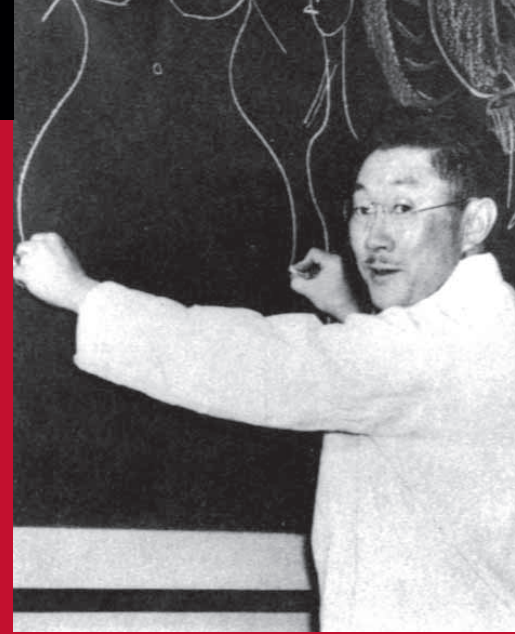


1942-1955



**1942** Also in July, Dr. Cyril Callister, noted plastic surgeon, is named the first Dean of the four-year school.

**1943** To increase faculty, “downtown” doctors were hired at \$1 per year and for the increased prestige that association with the University Medical School would bring.



*Edward I. Hashimoto, M.D.*

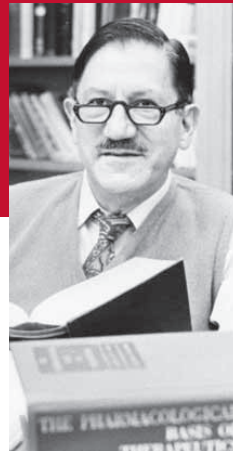
**1945** The medical school gets its first big grant—\$100,000 from Congress for research.

**1949** School began accepting students from Idaho, Nevada, and Arizona, under a plan in which the states would pay their students’ tuition.



**1949** Sloan Kettering Institute’s Dr. Rulon Rawson ranked Utah in the top ten medical schools in the nation.

*“The Bloodshed”—This barracks building on the Salt Lake County General Hospital grounds was fondly known by its intimates as the bloodshed because of the hematology research conducted there by Maxwell M. Wintrobe, M.D., Ph.D., George E. Cartwright, M.D., and others.*



*Louis S. Goodman, M.D., distinguished professor of pharmacology.*

**1946** To improve care at the Veterans Administration Hospital, informal rotations for students, interns, and residents were established with the Medical School.

**1948** Medical School receives \$416,400 to study cancer.



*An exacting taskmaster—medicine patient rounds with Maxwell M. Wintrobe, M.D., Ph.D.*

**1951** Building for cancer research opens.

# triumphs

**1955** Medical School receives \$1.5 million from the United States Public Health Services.

**1953** 75 full-time and 220 part-time faculty.

**1955** Business report states that every \$1 invested in the medical center generates \$3.10 revenue for the state of Utah. In 2005, it is over \$9 for every \$1.

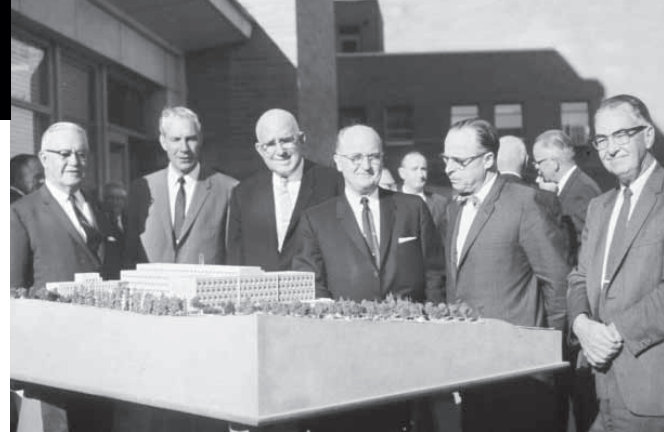


*Faculty forces deferentially referred to as “The Quorum” in the 1956 student yearbook, MEDICINE MAN, included, from far left: Leonard W. Jarcho, M.D.; George E. Cartwright, M.D.; Maxwell M. Wintrobe, M.D., Ph.D.; Blair “Val” Jager, M.D.; Frank H. Tyler, M.D.; Harold Brown, M.D.; H. William Harris, M.D.; Lyman Fulton, M.D.; Hans H. Hecht, M.D.; and Glen R. Levaster, M.D.*

1960-1980



*Student classroom, 1970s*



*1960* 126 full-time and 325 part-time faculty.

*1965* First University Hospital kidney transplant performed.

# progress



*1965* The University of Utah Medical Center opens in a building that cost \$15.6 million and contained 220 beds.

*1968* First Intermountain West Newborn Intensive Care Unit opens.

*1976* Intermountain Burn Unit opens.

*1978* Air Medical Transport begins.



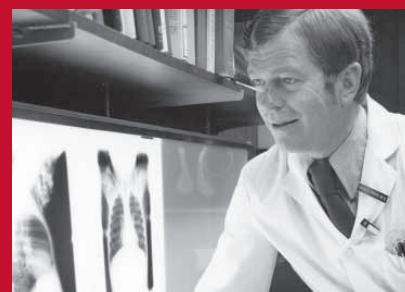
*Gastroenterology staff and training fellows, 1964.*



*Morton A. Stencheur, 1970-1977  
Obstetrics and Gynecology.*

*1979* Conjoined Hansen twins are surgically separated.

*1980* Teen Mother and Child Program is established.



*David G. Bragg, M.D., Department  
of Radiology.*



1981-1996



*Marcus Jacobsen, Ph.D., Chair of the Department of Anatomy.*

*1981* New University of Utah Hospital opens.

*1983* In-vitro fertilization program begins.

*1982* Pediatric Intensive Care Unit opens.



*Health Sciences Campus, 1995.*



*Former President George Bush, Senator Orin Hatch, and Dr. John Dixon.*

*1991* Bone Marrow transplant program begins.

*1991* Travel clinic opens at U Hospital.

*1985* First University Hospital heart transplant performed.

*1985* U Hospital installs area's first Magnetic Resonance Imaging Scanner.



*School of Medicine entrance.*

# milestones



*1982* Seattle dentist, Dr. Barney Clark, implanted with world's first permanent artificial heart. The Jarvik 7 heart was developed and designed at the University.

*1993* John A. Moran Eye Center opens.

*1996* Utah's first double lung transplant is performed.

*1996* Utah's first telemedicine program opens, linking the University with Wendover patients.



## 1997-2005

*1997* Telepharmacy offers Hospital Pharmacy and Drugs to health centers throughout State.

*1998* U Hospital issues patient record no. 1,000,000.

*1998* U purchases five outpatient medical clinics, creating a 14-clinic network along Wasatch Front and Summit County.

*1999* The 225,000-square-foot Huntsman Cancer Institute opens.

*1999* U Hospital Intermountain Burn Center earns prestigious national accreditation.

*2001* Utah Diabetes Center opens in Research Park.



*2002* University provides medical care for Olympic athletes in the athletes village and during opening and closing ceremonies.

*2001* U Hospital named the Intermountain West's first nationally certified Level I Center by American College of Surgeons.



*Raymond F. Gestland, Chair of the Department of Human Genetics, 1984-2000.*

*2004* U Hospital opens comprehensive transplant services and specialty clinic.



*2003* U Hospital opens \$42.5 million George S. and Dolores Doré Eccles Critical Care Pavilion.

*2003* U Hospital & Clinics opens Spanish-speaking clinic at Redwood Health Center.



*A. Lorris Betz, M.D., Ph.D.  
Senior Vice President for  
Health Sciences; Executive  
Dean, School of Medicine.*

*2004* Huntsman Cancer Hospital opens.

*2004* Orthopaedic Center opens in Research Park.



*2004* U Hospital & Clinics open South Jordan Health Center.

*2005* Health Sciences Education Building, housing classrooms to be used by all areas of the health sciences, opens.

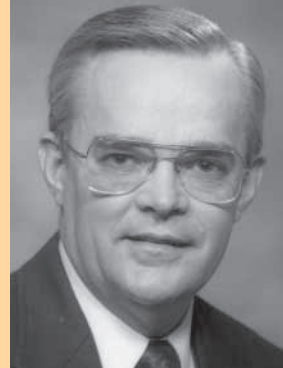
*2005* U Hospital & Clinics celebrates 40th Anniversary.





# APPRECIATION

JAMES L. PARKIN, M.D., CHAIR, CENTENNIAL COMMITTEE



Recently I went on a tour of the new Spencer F. & Cleone P. Eccles Health Sciences Education Building. Wayne Peay, the director of the Spencer S. Eccles Library and the coordinator of much of the planning of the new education building, was our guide. He told us about all the input received from students and how that input was incorporated into the building. I noticed the student lounges were much larger than the faculty lounges. What an impressive building. I wondered if the students can learn in such modern, comfortable surroundings. Isn't suffering a stimulus to retention?



I reflected back to "the good old days" in the barracks studying comparative anatomy and the beginning of my medical education in the second floor of the medical building on President's Circle just east of the then University library (currently known as the Utah Museum of Natural History). Later in our sophomore year and junior year, our base of education shifted to the plush quarters in the old county hospital on the corner of 21st South and State Street. I think the only important

part of that building complex memory remaining is the "Busy Bee," still across the street. Wayne's presentation made me wonder if the students who preceded me gave their input into the educational facilities I enjoyed.

The facilities in "the good old days" did not meet the standards of this new building, but we did have outstanding faculty who built this school into a top-tier medical school. The current faculty will propel it into the next century of its existence. When those in the future meet for the bicentennial celebration, they will remember their "good old days," but it seems they will be hard pressed to remember archaic facilities.

Many gave much to help us become competent physicians. Some gave more than others. Early in our freshmen year, Gary Larson, Mike Stevens, Dennis Russell (my lab partners) and I met Cyrus. That was the nickname we gave him because we did not know his given name. Cyrus did not demonstrate any of the ambidextrous skills exhibited by one of our favorite professors, Dr. E. I. Hashimoto, but Cyrus did give. He never was disrespectful to us. He never raised his voice. He trusted us with his innermost secrets. He contributed and

gave much. Thanks, Cyrus. You were a great cadaver.

Fortunately, the rest of my early education benefactors continued to give to me and other students in my class and in the classes that followed mine. Some were more demanding than others. The synaptic connections tend to amplify some experiences, but hopefully they do not diminish the sense of gratitude for facilities and teachers and mentors who gave us the opportunity to be players and contributors in the greatest of all professions. Thank you to Professors Hashimoto, Samuels, Dougherty, Eisenman, Gebhardt, Goodman, Wintrobe, Tyler, Renzetti, Castle, Kuida, Chiga, Cartwright, Richards, and many others too numerous to name.

The centennial year and celebration give us the blessing of reflection and resultant gratitude to the many who have made our pathway through life more adventurous and fulfilling. Hopefully, it will increase our resolve to also be numbered among the legions who give back and help provide opportunity for current and future generations of youth to share in and contribute to the art and science of healing.



*Anatomy class of 1966.*



## ❖ MEDICAL ALUMNI HALL ❖

The University of Utah's newest state-of-the-art education building is the centerpiece of the academic program at the Health Sciences Center—including its nationally ranked medical, nursing, pharmacy, and health training programs. The facility has been made possible through a major state appropriation, coupled with a landmark gift of \$7 million from Spencer F. and Cleone P. Eccles. Additional generous contributions from faculty, staff, friends, and alumni have enhanced specialized named areas.

A skybridge connects the new building with the adjacent Spencer S. Eccles Health Sciences Library, named for Eccles' father in 1965. The library was constructed with a generous bequest from the senior Eccles, and his wife, Hope Fox Eccles, and represents the first major personal gift from the Eccles family to the University of Utah.

The University of Utah Alumni Association and its Board of Directors felt inspired to take part in the project and have raised close to \$150,000 to name "Medical Alumni Hall." And, there is still an opportunity to contribute to Medical Alumni Hall. Please call Kristin, at 585-3818, and have your name added to the donor plaque. The University of Utah Alumni Association and its Board of Directors would like to gratefully thank the following individuals who have already contributed to Medical Alumni Hall:

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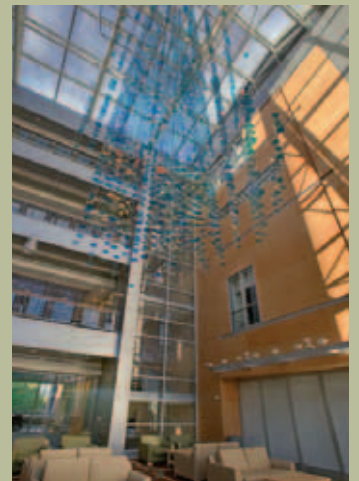
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Scot B. Jones, M.D.  
Stuart M. Kagan, M.D., N.P.H.  
Robert J. Kahn, M.D.



Darren Kay, M.D.  
 Lynne M. Kerr, M.D.  
 William E. Kilgore, II, M.D.  
 Chong-Song Kim, M.D.  
 Helen H. Labelle  
 Dr. Fritjof and Shirley Langeland  
 Dott G. Leverich  
 Tamara Lewis, M.D.  
 L. Kimball Lloyd, M.D.  
 J. Allen Lowe  
 Bo Lu Kirk Lund, M.D.  
 Caryn B. Madden  
 Franklin E. Mahoney  
 Michael C. Mallea, M.D.  
 Benjamin T. Marchello, M.D.  
 Craig Marsden, M.D.  
 Andrea T. Martinez  
 Gilbert C. McArdle, M.D.  
 James G. McCall, Jr.  
 Michael R. McFadden, M.D.  
 Betty S. Merritt  
 Dylan V. Miller, M.D.  
 David B. Miner, M.D.  
 E. Conrad Monson, M.D.  
 Nathan J. Morgan  
 Steven W. Mortenson, M.D.  
 Claus G. Mueller  
 Byron H. Naisbitt, M.D.  
 James Neeley, III, M.D.  
 Paul F. Nielson, M.D.  
 Oguchi H. Nkwocha  
 Dorothy B. O'Brien  
 Forrest W. Oliverson, M.D.  
 Ralph A. Olsen, M.D.  
 Russell J. Ord, M.D.  
 Scott Packer, M.D.  
 Joseph K. Papenfuss

Gordon S. Park, M.D.  
 Dr. James L. and Bonnie D. Parkin  
 Todd D. Parrish, M.D.  
 Alan R. Patterson  
 Marta J. Petersen, M.D.  
 John L. Peterson, M.D.  
 Randa Pickle  
 Hisham Fozi Qutob  
 Dr. Marv L. and Beth Rallison  
 Bryan Redd  
 Don L. Reese, M.D.  
     and Rebecca Reese  
 Michael Reid, M.D.  
 Bryan L. Richards, M.D.  
 Ron Richins  
 B. Noal Robinson  
 Marilyn Roubidoux, M.D.  
 Carol L. Rowley  
 Ronald J. Ruff, M.D.  
 John P. Sanders, D.D.S.  
 Dr. Richard H. Schmidt  
 Gregory A. Schwitzer, M.D.  
 James P. Seaman, M.D.  
 Clark W. Sheffield, M.D.  
 Howard C. Sharp, M.D.  
 William K. Sheffield, M.D.  
 Glen M. Sheppard, M.D.  
 Tze Shien Lo, M.D.  
 Otto Shill, M.D.  
 Garth L. Showalter  
 Dr. and Mrs. Eric V. Smart  
 Calvin Smith, M.D.  
 Dasil C. Smith, M.D.  
 Layne A. Smith, M.D.  
 Russell L. Sorensen, M.D.  
 Gene E. Speakman, M.D.  
 Robert A. Sperling  
 Diana M. Stafforini, Ph.D.

Klint Stander, M.D.  
 Lyman B. Stevens, M.D.  
 Lamar H. Stewart, M.D.  
 Robert E. Stockdale, M.D.  
 Jack D. Stringham, M.D.  
 Richard K. Strong, M.D.  
 Raymond J. Tardif, M.D.  
 Craig B. Taylor, M.D.  
 Paul Thorpe, M.D.  
 Kevin A. Tracy, M.D.  
 David A. Van Liew, M.D.  
 Dr. and Mrs. Michael K. Visick, M.D.  
 Gilbert Wallace  
 Richard K. Wallin, M.D.  
 Dr. and Mrs. Homer R. Warner  
 J. Ballard Washburn, M.D.  
 Ann R. Wennhold, M.D.  
 Dr. and Mrs. Hugh S. West, Jr.  
 William B. West, M.D.  
 Dr. and Mrs. Craig W. Wilkinson  
 C. Basil Williams, M.D.  
 Shirley Winn  
 John S. Wolthuis, M.D.  
 Robert F. Wong, M.D.  
 Gordon S. Wood, Jr.  
 Douglas K. Zirker, M.D.  
 Anonymous



✿ The new five-story, 158,000 square-foot building—replacing teaching facilities from the 1950s—will provide much needed classrooms, labs, and training facilities. The design incorporates multi-purpose space that will serve the needs of all students, regardless of specialty, with major emphasis on promoting interdisciplinary learning among future healthcare professionals.



# Alumni

## Weekend 2005

RICHARD E. BLACK, M.D., 1974  
*Vice President  
The University of Utah  
School of Medicine Alumni Association*

Alumni Weekend 2005 was outstanding! On Thursday evening, June 2, at the Downtown Marriott, 220 alumni and guests honored the Class of '55.

Twenty of a class of 53 were in attendance, were recognized with biographical presentations and presented medallions from Sr. Vice President A. Lorris Betz, M.D., Ph.D., and Dean David Bjorkman, M.D., M.S.P.H., 1980.

On Friday, June 3, we enjoyed a golf outing in Bountiful, Utah. A scramble-format golf tournament held at the beautiful Eaglewood Golf Course on Friday reunited alumni foursomes for food, fun, and a few birdies and eagles.

Class reunions for '75, '80, '85, '90, and '95 were held at Little America Hotel and the Grand America Hotel. Attendance was at an all time high!



CLASS OF 1955  
UNIVERSITY OF UTAH SCHOOL OF MEDICINE  
50th Year Celebration  
Thursday, June 2, 2005  
Downtown Marriott Hotel  
Salt Lake City, Utah

THE FOLLOWING WERE ABLE TO ATTEND THE CELEBRATION:

*Front row left to right—Dean Mahoney, Tada Sato, Kent Staheli, Robert Ferguson, William Stone, Richard Eliason, Wallace Jenkins, Gerald Snarr, Quinton Harris, Edmund Evans Back row left to right—Clarke Jones, Sy Sanfilippo, Orson Perkes, Galen Woolley, Vance Campbell, James Wootton, John Sorensen, Robert Stone, Richard VanOrden, Frank Nuttall*





1975



1980

*Alumni*



1990





*2005 Weekend Golf Event*



*2005 Weekend Golf Event*

*Alumni*

*2005 Weekend Golf Event*



*Reunion attendees, 2005*







*Reunion attendees, 2005*



*Fred Langeland, M.D., and Russell M. Nelson, M.D.  
Pioneers and Progress of Medicine, Annual CME Conference, 2005*



*August Jung, M.D., Pioneers and Progress of  
Medicine, Annual CME Conference, 2005*

# Weekend 2005



*Fred Langeland, M.D., and Thomas H. Caine, M.D.  
Pioneers and Progress of Medicine, Annual CME Conference, 2005*

*Dale Johnson's family, the Awards Banquet 2005*



## *The Distinguished Service Awards 2005*

BY THOMAS H. CAINE, M.D.  
Past President, The University of Utah  
School of Medicine Alumni Association

The awards banquet, the Alumni Association's most celebrated annual event, commemorates the School of Medicine by recognizing outstanding alumni and supporters who have contributed to the betterment of the community and the University.

### **The Distinguished Alumni Award**

*The Distinguished Alumni Award was established by the alumni of the School of Medicine. This award is presented annually to a graduate of the School of Medicine who exemplifies the ideals of the practice of medicine.*

#### **DALE G. JOHNSON, M.D., CLASS OF 1956**

*Among the many accomplishments in Dr. Dale G. Johnson's distinguished career as an academic pediatric surgeon are the following:*

Residency in General Surgery, Massachusetts General Hospital, 1957–1961

Fellowship in Pediatric Surgery, The Children's Hospital of Philadelphia, 1964–1965

Senior Surgeon, Children's Hospital of Philadelphia, 1967–1971

Surgeon-in-Chief, Department of Surgery, Primary Children's Medical Center, 1988–2004

Professor of Surgery and of Pediatrics, University of Utah School of Medicine, 1976–present

President, American Pediatric Surgical Association, 1985–1986

President, Pacific Association of Pediatric Surgeons, 1990–1991

Associate Editor, *Journal of Pediatric Surgery*, 1990–1991

Associate Editor, *Journal of Clinical Pediatrics*, 1980–1984

Outstanding Alumni, Children's Hospital of Philadelphia, 1990

Professor of the Year Award, Surgery Chief Resident, University of Utah, Class of 2001

Arnold M. Salzberg Mentorship Award, American Academy of Pediatric Surgical Section, 2002.



*Dr. A. Lorris Betz, Dr. Dale Johnson and Dr. David Bjorkman*

### **The Distinguished Service Award**

*The Distinguished Service Award was established by the alumni of the School of Medicine to recognize individuals who have made outstanding contributions to the school, the community, and the practice of medicine.*

#### **JOHN C. NELSON, M.D., MPH CLASS OF 1969**



*Dr. John Nelson*

*Dr. John C. Nelson has a long history of service to organized medicine, as seen by the following:*

Residency in obstetrics and gynecology

Masters in Public Health, 1969

Deputy Director of the Utah Department of Health

President of the Utah Medical Association

Utah Health Advisory Committee

Delegate to the American Medical Association House of Delegates

American Medical Association Board of

Trustees, 1994–2002

Secretary-Treasurer of the American Medical Association, 2002–2003

President-Elect of the American Medical Association, 2003

159th President of the American Medical Association, 2004



# Honoring EXCELLENCE



*Pathology*

M. ELIZABETH HALE HAMMOND, M.D., FCAP

M. Elizabeth Hale Hammond, M.D., FCAP, a pathologist from Salt Lake City, was named the 2005 Pathologist of the Year at a ceremony held at the annual meeting of the College of American Pathologists in Chicago on Sept. 11, 2005.

Dr. Hammond received the 2005 CAP Pathologist of the Year Award, the College's highest honor, in recognition of her outstanding leadership in the field of pathology and for her sincere dedication to improving the lives of patients.

"I am deeply humbled to be named Pathologist of the Year," said Dr. Hammond, a professor of pathology and adjunct professor in internal medicine at the University of Utah School of Medicine. "I feel privileged to be recognized for doing something I love."

Dr. Hammond is commended for her services as current chair of the CAP's Education Committee and for her commitment to ensure that CAP educational opportunities fulfill the College vision. In addition, she is recognized as a member of the National Meeting Planning Committee. Previous CAP positions include service as Cancer Committee chair and as a CAP governor in 2000-2003. She has also served on several committees, including the Council on Government and Professional Affairs, and the Council on Scientific Affairs.

Named among the "Foremost Women of the Century," Dr. Hammond has been applauded for her accomplishments on numerous lists, including "Notable American Women" and "Best Doctors in America." She is an expert in transplantation pathology and in predictive cancer factor evaluation, as well as in cancer diagnosis and in diagnosis of antibody mediated inflammatory diseases such as autoimmune processes.

Dr. Hammond graduated magna cum laude with a B.S. degree and received her M.D. with cum laude distinction, both from the University of Utah, Salt Lake City. She interned at University Hospital in Salt Lake City and was a postdoctoral fellow for the U.S. Public Health Service (National Cancer Institute) at the Karolinska Institute in Stockholm, Sweden.

Dr. Hammond completed her residency and immunopathology research training at Massachusetts General Hospital in Boston and was an assistant professor of pathology at Harvard Medical School prior to returning to work in pathology at Intermountain Health Care and the University of Utah School of Medicine. She was named diplomate of the American Board of Pathology in 1974 and was recertified in 1997.



AUGUST L. JUNG, M.D.

Rick Fullmer, right, U of U Hospital & Clinics CEO, announced the NBICU's new name honoring Dr. Jung.

It was standing room only as colleagues, friends, family, and former patients of August L. (Larry) Jung, M.D., filled the Hope Chapel and spilled into the hallway as U Hospital named its newborn intensive care unit (NBICU) in his honor.

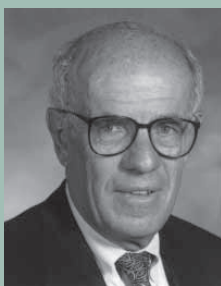
Naming the August L. Jung, M.D., Newborn Intensive Care Unit represents a \$1 million gift from the hospital and a thank-you to Jung for his dedication since establishing a one-room NBICU in 1968, Fullmer said at the announcement.

The five-baby unit was the region's first and only NBICU between Denver and the West Coast, and Phoenix and Canada.

Medical school Dean David J. Bjorkman, M.D., M.S.P.H., professor of internal medicine; Edward B. Clark, M.D., professor and chair of pediatrics and medical director of Primary Children's Medical Center; J. Ross Milley, M.D., Ph.D., professor and division chief of neonatology, and Patricia C. Isaacs, Ph.D., R.N., a nurse when the NBICU opened, also spoke to honor Jung.

Jung, professor of pediatrics and former chief of neonatology, not only trained the Intermountain West's first generation of neonatologists but also established neonatal care units throughout the region, according to Clark.

Jung, whose parents ran a pumpernickel bakery in Chicago, came to Utah in 1953 to study forestry at Utah State University. He became interested in the needs of newborn babies following the illness of his first-born daughter, Christine. Shortly afterward, Jung switched his career to medicine, graduating from the U medical school in 1961.



HOMER R. WARNER, M.D., PH.D.

Homer R. Warner, M.D., Ph.D., professor emeritus of medical informatics, will be inducted into the Utah Information Technology Association (UITA) Hall of Fame in December. Warner, who joined the U in 1953, pioneered many aspects of computer applications to medicine. He was the first chair of the Department of Medical Biophysics and Computing, now the Department of Informatics, in 1973. He also served as the U of U Health Sciences chief information officer. Warner has received numerous local, national, and international honors, including the Morris Collen award, the highest recognition bestowed by the American College of Medical Informatics, in 1994.

The "Hall of Fame" is the premier recognition event for the Utah IT industry. UITA honors individuals with Utah ties who have made a significant contribution to the IT industry

either through technology, innovation, and/or business. Their groundbreaking contributions have created jobs, commercialized technology, improved productivity, and stimulated the nation's growth and development.

Dr. Homer R. Warner has pioneered many aspects of computer applications to medicine. He was the first chair of the Department of Medical Informatics at the University of Utah, the first medical school in the U.S. to formally organize a degree in medical informatics. Author of *Knowledge Engineering in Health Informatics*, he also served as CIO for the U of U Health Sciences Center, as president of the American College of Medical Informatics (where an award has been created in his honor), and was actively involved with the National Institutes of Health.

*Informatics*

### The White Coat Ceremony

The SOM Class of 2009 marked the start of their education by receiving white coats and reciting the Hippocratic Oath at the White Coat Ceremony on August 26, 2005. Some 102 freshman, their families and friends, and School of Medicine faculty and administrators attended.



*Dean David Bjorkman presents a white coat to new student, Sonia Ponce.*

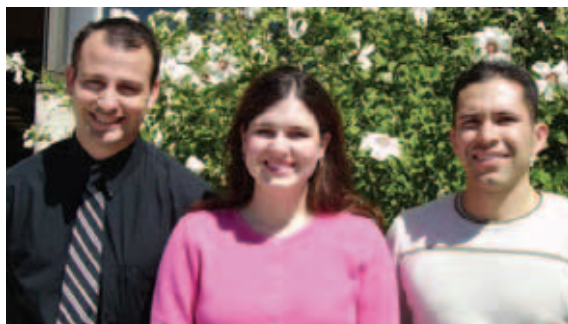
**David J. Bjorkman**, M.D., M.S.P.H., Dean of the medical school, welcomed students and presented each with a white coat. **Kim Mulvihill**, M.D., a physician and health reporter for television stations KPIX in San Francisco and KSL in Salt Lake City, gave the keynote address, "Communicating with Patients: Through the Camera and Face to Face." Mulvihill is married to **Sean J. Mulvihill**, M.D., professor and chair of surgery.

This year's entering medical class was selected from 1,072 applicants and includes 39 women and 14 minority students. The average age of the class is 26, and the grade point average is 3.64.



### The Freshman Barbecue 2005

The School of Medicine Alumni Association welcomed the class of 2009 by hosting the annual freshman barbecue at the home of Dr. Chuck and Mrs. Jasmine Rich on August 25, 2005. Over 100 students, family, and friends of the class of 2009 attended the barbecue. It gave the students an opportunity to socialize with one another, as well as mingle with members of the Board of the Alumni Association.



### Student Body Presidents

The Alumni Association congratulates the 2005-2006 student body presidents, Todd Grunander, Liz Johnson, and Sergio Gonzalez.

### Be a Host!

The Alumni Relations Office of the School of Medicine administers the HOST (Help Our Students Travel) program. We invite you as an alumni or former housestaff to be a volunteer in this program. The various ways to be a HOST include providing general information about prospective hospitals and cities, and providing transportation to and from the airport, dinner, and/or accommodations.

We need volunteer hosts near hospitals that have a residency program (except Utah). The HOST program has been a great service in the past to our students. We have heard many stories of students being helped. One student's bags were lost, and he was provided a sport coat to wear to his interview; several have slept on couches of alumni; many have been given helpful directions for using the light rail systems in various cities. Please phone Alumni Relations if you are interested in becoming a host: (801) 585-1121.



# ALUMNI MEMORIES

## Alumni Notebook

**RICHARD A. ALDOUS, M.D.**  
SOM Graduate 1956  
Ophthalmology; Private Practice

Dr. Davenport was conducting an experiment in physiology class in which he had to get a student totally rattled in order to demonstrate some physiological principles (change of vital signs, etc.). He began his lecture by saying that doctors should be cultured people and that he would probably fail any student who was not well versed in the cultural arts. He then looked directly at Stuart Datt and said, "Datt, name five operas by Verdi."

Stuart (instead of turning into a basket case) calmly recited more than five operas by Verdi. The challenge did not even increase his heart rate. Dr. Davenport's experiment was totally ruined. What he did not realize was that Stuart was an accomplished musician and an expert in opera, having grown up in New York City where he had regularly attended the Metropolitan Opera.

**EUGENE L. BELLIN, M.D.**  
SOM Graduate 1958  
Internal Medicine

I've regretted not thanking the Admissions Committee for accepting me, a Jewish person from New York, with a Yale average of only 83, and taking me three thousand miles to Salt Lake city into a fascinating LDS environment, giving me a chance to be a doctor—after a rocky medical course, helped by an understanding faculty (Wintrobe, Holmstrom, Price, etc.).

**KENNETH N. BUCHI, M.D.**  
SOM Graduate 1978  
Internal Medicine/Gastroenterology

I remember my first medicine sub-internship as a new fourth-year student at the V.A. hospital. This is when I first felt like I was a physician.

**JOHN W. EMMETT, M.D.**  
SOM Graduate 1952  
Radiology

I remember all the softball and football games at noon before I would sleep through the pathology lectures in the "temporary" wooden Army building behind the main building.

**KENNETH D. SHANKLIN, M.D.**  
SOM Graduate 1967  
Plastic Surgeon

I have wonderful memories of being the first class to use the University Medical Center for our clinical years of training and its proximity to the mountains I loved.

I also remember the nightmares I had for several weeks after our class started cadaver dissection anatomic training. Then, for an unknown reason, these nightmares ended as abruptly as they started. I thought for a period that I would have to drop out of medical school.

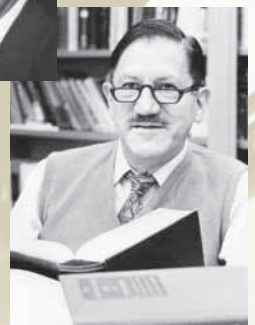
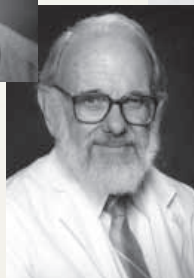
**JOSEPH M. HEATH, M.D.**  
SOM Graduate 1958  
Family Practice

We were in our first year, very green, and very apprehensive, wondering if we were going to make the grade. The first class of the day was physiology. No one will forget the towering, demanding professor, Horace Davenport. Every contact with him brought a combination of respect and fear. He usually let us know that he was condescending to be teaching freshman medical students away from his beloved Oxford.

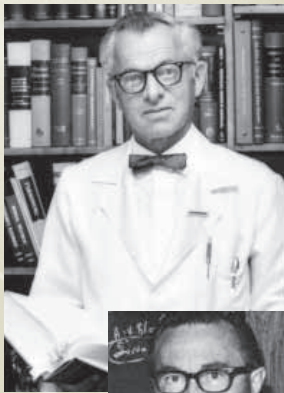
One morning during the first few weeks of medical school, Herb Spencer and I walked together, rather hurriedly, as we were a bit late to physiology. As we walked in the darkened room, the class had already started. For the first time Dr. Davenport was not teaching the class, I blurted out to Herb quite audibly, "Where's Horace?"

When my eyes adjusted to the dark, and I looked around, my heart went in my throat. Horrified, I discovered the "Horace" was seated directly behind us.

This story has a postlude. I began to feel that my days in medical school may be numbered. We had a hard test in physiology and were awaiting the results. A few days later, we were in the physiology lab. I was "wired" with all the paraphernalia to measure pulse, respiration, and blood pressure under different conditions. Dr. Davenport walked by in his white coat, and suddenly asked in his authoritative, Oxfordian voice, "Heath, do you really think you can make it though medical school?" It was the best example of the day of the effect of emotions on vital signs.





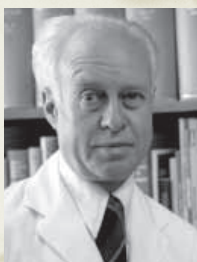


**JOHN V. DICKSON, M.D.**  
SOM Graduate 1961  
Otolaryngology and  
Rhinologic Allergy

I remember Dr. Eddie Hashimoto's bimanual, colored chalk, blackboard presentations; with his drawings of multiple layers of anatomy. He would also enliven his lectures with numerous philosophical descriptions of reproductive anatomy.

**PENELOPE "PENNY" A. PEMBERTON, M.D.**  
SOM Graduate 1965  
Pediatrics

I'll always remember the care and concern for my best interest and welfare that my fellow classmates always exhibited toward me. I felt like I had brothers for classmates. Also I discovered that the education and training that I received at the University of Utah Medical School was second to none.



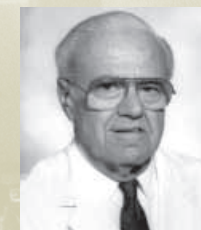
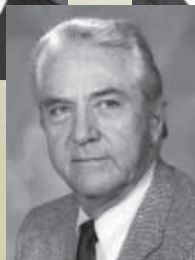
**G. PAUL DOXEY, M.D.**  
SOM Graduate 1980  
Otolaryngology–Head and Neck Surgery

My favorite rotation was on OB-GYN and I really liked the gross anatomy with "Sasquatch," our cadaver.

There were also some teachers and professors at the school who were inspirational. I shall never forget Dr. Hashimoto and his lectures.

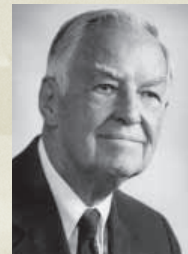
**JOHN C. NELSON, M.D.**  
SOM Graduate 1968  
Ophthalmology

I remember watching Dr. Hashimoto drawing on the blackboard with both hands simultaneously, and teaching us clinical pearls when we were thirsting for anything beyond the basic sciences.



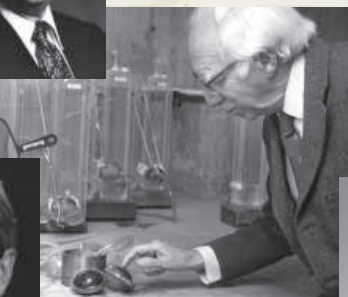
**CLAUDE R. THOMAS, M.D.**  
SOM Graduate 1961  
General Practice

Shortly after beginning medical school, after four years in the Korean War, we had a test in biochemistry that was very difficult. In fact, my score was about 63. That same day, my wife told me we were expecting our 4th child. I almost quit medical school. As it turned out, the test was so difficult, 63 was not a bad score at all, and the child we were expecting is now a prominent physician at the Mayo Clinic.



**J. BRADLEY TAYLOR, M.D.**  
SOM Graduate 1975  
Urologist

I remember the first case I ever scrubbed on with Dr. Gary Maxwell—a kidney transplant. I have been in love with kidneys ever since.



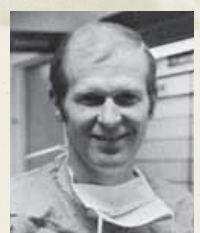
**BOB GREENSIDES, M.D.**  
SOM Graduate 1976  
Pediatric Cardiology

I remember flunking my first anatomy quiz and having Dr. Hashimoto call me and several others into his office. He lights his pipe and tells us all to relax, have fun, you're all worrying too hard—what a relief!

**P. J. PETERSON, M.D.**  
SOM Graduate 1976  
Internal Medicine

Being a female with 96 "Brothers." I always felt well treated and accepted by our classmates. Probably my truly best memory is presenting my research project at the National Meeting in Carmel, California.

*Please share your memory with Alumni Relations by using the form on page 20.*





# HURRICANE RELIEF EFFORTS

Picture the Salt Lake Valley from 4500 South to its northern border under ten feet of sewer water for three weeks with dead people and dead animals floating around in 95 degree heat. That's how New Orleans was described by one of the 18 members of a team of U of U doctors, nurses, and health-care professionals who recently returned from a two-week mission to help the victims of Hurricane Katrina.

**T**hey organized a team and went down to see what they could do to help. They set up a clinic for disaster management and treated mostly firefighters, police officers, and paramedics who needed to decompress from their work with flood victims. Patients were treated for rashes, mosquito and other insect bites, minor wounds, and infections.

But the greatest need was emotional. "The scale of physical loss and destruction was incomprehensible," says Steven I. Bott, an anesthesiologist and the team's leader, "and the emotional toll was enormous. One-half to three-fourths of the firefighters treated had lost their homes and didn't know where their families were."

"We gave them hugs, we held their hands, and we listened," said Jane Stetich, a registered nurse. "We told them how proud of them we were. They needed to hear that to begin to get their mental health back."

Some of the group members were sent to care for people at a Kmart store that had been converted into a hospital, affectionately termed "Our Lady of the Blue Light."

The team from the U was hosted by generous members of a Baptist Church located outside Baton Rouge. "The first night I arrived I had turkey and sausage gumbo



and crawfish pie," says Mark Brann, a cardiologist who was part of the team. The Baptists gave up their own beds and had hot dinners waiting each night at 10 p.m. when the team returned from the clinic, and hot breakfasts at 5 a.m. when they headed out. They also offered them the use of their church van to get into New Orleans. "Southern hospitality is real!" says Lorene Johnson, a registered nurse.

And now, Bott wants to bring back what they learned and apply it to the disaster management plans for the U of U and the state of Utah. "What hurt the New Orleans rescue operation most was the lack of a clearly defined command structure and the lack of a stable communications operation," says Bott. "These two things are of critical importance and must be in place before any disaster strikes. The command structure must clearly state who's in command of what, with no overlap."

Members of the University Health Care Louisiana Medical Relief Team included: Janet Angell, R.N., Christian Bain, R.N., Steven I. Bott, M.D., W. Mark Brann, M.D., Marcus Day, R.N., Bruce Garrett, R.N., Page Gault, M.D., Martin C. Gregory, M.D., Mike Huntzinger, R.N., Theodore (Ted) G. Liou, M.D., Lorene Johnson, R.N., Mark Martinex, M.D., Rachael Matthews, R.N., Jill Moore, M.D., John Morrison, M.D., Glenn Alan Nielson, R.N., Scott Nielson, R.N., Amrapali Shah, M.D., Carrie O'Hara, R.N., Scott Provost, M.D., Suzanne Putz, R.N., Julie Schmidt, R.N., Julie Smit, R.N., Cathie Smith, R.N., Warner Smith, M.D., and Jane Stetich, R.N.

We salute the members of this team for their generosity and compassion, and for taking the initiative to act on behalf of Katrina's victims.

The University of Utah has created a Web site to coordinate the institution's efforts to help address

the needs of those affected by the hurricane. The site, "Operation Giving Hope," can be found on the University's home page, [www.utah.edu](http://www.utah.edu), and it is the sole point for updated information on University policies for affected students and employees and links to various state and national organizations that are assisting in the relief efforts. Equally important, the site will provide regularly updated information on how the community can become involved in these relief efforts—ways to contribute time or money and participate in campus events to support victims. It also provides information on services available to address the concerns of students and employees who need counseling or advice in coping with this disaster.

A CONDENSATION OF

## “THE UNTAPPED POWER OF THE PROFESSION”

*presented at the*

UNIVERSITY OF UTAH SCHOOL OF MEDICINE  
ALUMNI CME CONFERENCE SALT LAKE CITY, UTAH  
SATURDAY, JUNE 4, 2005—12:45 PM

BY JOHN C. NELSON, M.D. M.P.H.  
PAST PRESIDENT, AMERICAN MEDICAL ASSOCIATION

Working on behalf of medicine and the American Medical Association (AMA), I recently enjoyed visiting many beautiful areas in New York, Mississippi, Massachusetts, Georgia, Ohio, California, and Arkansas. Yet nothing can match the feeling I get as my plane approaches Salt Lake City International and I look out the window to see our beautiful mountains, valleys, and monuments—all with fresh eyes.

Here, I hope to help you to see a familiar world with fresh eyes, too. Not so much in terms of Utah—but in terms of our profession. While modern medicine is a thing of wonder, we easily lose sight of this wonder in the daily hustle and bustle of our practices and in the difficult, seemingly intractable, healthcare issues: How do we care for the uninsured, offer better preventive services, address disparities in care, and keep practicing the best medicine possible under a broken medical liability system?

### POWER OF THE PROFESSION

Let us pause, however, to look at our profession the way patients do. They see us as heroes, the men and women they come to, in trust, during times of greatest need. Patients see us as their advocates, the only sure links in the healthcare system who always put their interests first. Finally, patients see us as powerful, having the ability to comfort, heal, and save lives. They see us as a moral authority—a force for good. I want to remind us of the power that we have—simply by being who we are and by doing what we do. I also want to show you some ways to tap that power for the good of medicine and patients, using tools that the AMA has developed.

### CRISIS OF THE UNINSURED

Right now 45 million Americans have no healthcare coverage; more than 20 million of them work [RW] study, April 2005]. A disproportionate number are minorities. All of these uninsured people—our patients—live sicker, die younger, and are more likely to die from preventable diseases.

Uninsured Americans are also at economic risk. More than half of uninsured, working-age adults report serious problems paying medical bills [IOM 2004] with one medical emergency pushing them into bankruptcy. As a nation, we see lost income and profits—and thus lost tax revenue—due to reduced employment and productivity. The uninsured strain public health systems, including emergency care.

And everyone pays; even those with coverage pay a premium for this national disaster. In 2004, taxpayers paid \$35 billion in uncompensated, publicly funded care for the uninsured [Hadley and Holahan, May 2004, Kaiser]. That's \$4 million per hour every day, in addition to the billions spent on privately funded and charitable care.

### AMA PLAN TO COVER THE UNINSURED

We do not have to accept millions of uninsured. By thinking outside the box, the AMA developed a plan with three major pillars, a plan that, if enacted nationally, could get 94 percent of Americans covered. First, create a system of income-related, refundable, advanceable tax credits. People can then use these credits to buy the health insurance they want and need. Second, develop individual rather than employer-owned healthcare plans. People then can buy insurance through their employer—or not—depending on their needs. Third, create vibrant health insurance markets through legislated market reforms so insurers have an incentive to cover high-risk individuals and so patients have an incentive to purchase coverage before they get sick.

The AMA plan upholds the strengths of our current system, such as patient choice and medical innovation, and suggests implementing the plan incrementally, perhaps through federally-funded state pilot programs aimed at some of our most vulnerable patients. How can you help? Get involved with Cover the Uninsured Week, sponsored every spring by the Robert Wood Johnson Foundation and affiliates, such as the AMA. Find out how to get involved at [www.covertheuninsured.com](http://www.covertheuninsured.com) and learn more about the AMA plan at [www.ama-assn.org](http://www.ama-assn.org).

### ENDING RACIAL AND ETHNIC DISPARITIES IN CARE

You can also help end racial and ethnic disparities in healthcare. What do I mean by disparities? Minority patients are less likely to be given appropriate cardiac medication or to undergo bypass surgery after a heart attack. They are less likely to receive kidney dialysis or transplants, to get recommended prescriptions for cancer pain, or to receive sophisticated treatments for HIV infection. Providing these people the very best medicine has to offer means looking at an old problem in a new way.

### COMMISSION TO END HEALTH DISPARITIES

To help solve this problem, the AMA helped launch the Commission to End Health Disparities. We worked with the National Medical Association, the National Hispanic Medical Association, and more than 30 of the nation's largest physician and public health organizations. The Commission plans to educate physicians and other healthcare professionals about health disparities and to develop workable strategies to close gaps in care.







# issues

Also, we are conducting site visits to specific areas of the country to find out what procedures and tools are now working. Every six months, we will use the data we have collected to develop a set of “promising practices” to provide physicians, hospitals, and medical offices with the tools and guidelines to improve quality of care. We’re also working with the American Association of Medical Colleges, as well as the Accreditation Council for Graduate Medical Education, to incorporate the topic of disparities into medical school curricula. As for physicians already in practice, the Commission has a plan to distribute cultural competency tools, such as online courses. And, in June, we will distribute a new video aimed at raising awareness about disparities. In the meantime, keep an eye out for new developments at the AMA Web site—[www.ama-assn.org](http://www.ama-assn.org).



## PROMOTING HEALTHY LIFESTYLES: BEHAVIORAL ISSUES

Another familiar public health problem is poor health habits and behaviors that consist of the eight scourges of our society: alcohol and drug abuse, violence, suicide, obesity, STDs and teen pregnancy, tobacco addiction, and—the number one killer of anyone under age 34—automobile accidents. Each can be prevented; each puts an unnecessary cost

burden on the healthcare system, with hundreds of billions of dollars spent each year in medical costs. As physicians, fathers, mothers, and citizens, we must educate, inform, and sell the idea of healthy lifestyles and preventive medicine.

## FIXING THE BROKEN LIABILITY SYSTEM

We also have to tap our power to make sure that all patients who need high-risk medical services can get the care they need. This is not always a simple matter because of the medical liability crisis that’s devastating 20 states.

What do I mean by crisis? A crisis exists when physicians practice the Three Rs—reducing high-risk services, relocating to another state, or retiring early and closing shop, all because of escalating medical liability costs, particularly for the high-risk services of obstetrics, neurology, and surgery. Most of all, however, a crisis in medicine exists when patients begin to suffer, when they cannot find a radiologist to read a mammogram or a neurosurgeon to perform brain surgery.

The AMA continues to work on getting reforms enacted both at the federal and state levels. We are working for caps on non-economic damages to slow down the escalating awards that drive premiums

through the roof. That is why I was pleased to see Utah adopt a six-year test of arbitration as one path out of the woods. Mediation and arbitration are two routes. Special medical courts are another avenue worth exploring. Again, learn more at the AMA Web site—[www.ama-assn.org](http://www.ama-assn.org).

## MEDICARE

Consider taking action on another critical healthcare front. Medicare payments are poised to tumble by 26 percent over the next six years, and a 5 percent cut will take place January 1, 2006, unless we act to stop these cuts to protect the Medicare program.

With practice costs set to rise 15 percent over the next six years—the same years we could face steep cuts—physicians may soon find themselves unable to take on new Medicare patients. Still others said they would need to reduce nursing home visits, close satellite offices, or defer intensive care purchases. This will not be good for us, but it will be worse for Medicare patients.

Fortunately, there is legislation in both the House and the Senate that could stop these cuts. H.R. 2356, introduced in the House of Representatives, calls for a Medicare payment increase of no less than 2.7 percent in 2006. H.R. 2356 also would replace the current flawed Medicare physician payment formula. Important legislation has also been introduced by the Senate—in the form of Senate Bill S. 1081. Please contact your Senators and Representatives to let them know how important it is that they support legislation that would prevent the cuts. You can call them at 1-800-833-6354, or use the Internet, [www.ama-assn.org/go/grassroots](http://www.ama-assn.org/go/grassroots).

I hope I have helped you see a familiar world of problems with fresh eyes. I also hope I have convinced you that, as a healthcare professional, you are a particularly powerful agent for change. You can help get the uninsured covered, help end racial and ethnic disparities in care, help reduce unhealthy behaviors, help fix the broken medical liability system, and help avert a possible Medicare crisis.







## Alumni Notebook

### *In Memoriam*

<b>Gerhard O. Bern, M.D.</b>	<i>MD 1944</i>	<i>5 Mar 05</i>
<b>Willis L. Bond, M.D.</b>	<i>MD 1951</i>	<i>4 Aug 05</i>
<b>George Wallace Bradley, M.D.</b>	<i>MD 1940</i>	<i>28 Jun 05</i>
<b>Melvin J. Bryson, Ph.D.</b>	<i>MD 1948</i>	<i>14 Apr 05</i>
<b>Carvel H. Evans, M.D.</b>	<i>MD 1955</i>	<i>29 Jul 05</i>
<b>Wesley H. Evans, M.D.</b>	<i>MD 1951</i>	<i>6 May 05</i>
<b>Robert M. Fowler, M.D.</b>	<i>MD 1946</i>	<i>28 May 05</i>
<b>Glenn H. Lubeck, M.D.</b>	<i>MD 1945</i>	<i>28 Jun 05</i>
<b>Clarke G. McCarthy, M.D.</b>	<i>MD 1957</i>	<i>10 Apr 05</i>
<b>Lamond G. McQuarrie, M.D.</b>	<i>MD 1942</i>	<i>20 Apr 05</i>
<b>Leon M. Neal, M.D.</b>	<i>MD 1957</i>	<i>3 Jul 05</i>
<b>Jack H. Petajan, Ph.D.</b>	<i>MD 1973</i>	<i>22 Jun 05</i>
<b>Richard B. Raile, M.D.</b>	<i>MD 1950</i>	<i>19 May 05</i>
<b>Frank B. Rogers, M.D.</b>	<i>MD 1961</i>	<i>08 Aug 05</i>
<b>Robert S. Rothwell, M.D.</b>	<i>MD 1939</i>	<i>23 Jun 05</i>
<b>Dale A. Stringfellow, Ph.D.</b>	<i>MD 1972</i>	<i>18 Mar 05</i>
<b>Richard Bruce Sutton, M.D.</b>	<i>MD 1967</i>	<i>22 May 05</i>

## \$22.5 MILLION DOLLAR GIFT

*Former CEO of Amalgamated Sugar and family friend of the Bennings, Allan Lipman spoke at the event.*



A \$22.5 million gift to the School of Medicine will help recruit and retain top researchers and clinicians in a variety of fields, according to University officials who announced the gift last week at a special ceremony. The donation is from the estate of the late Arthur E. Benning and is in honor of his parents, H. A. and Edna Benning.

Benning is the former president and chairman of the board of The Amalgamated Sugar Company. Benning spent 50 years at the Ogden, Utah-based, company before retiring in 1982. He died at age 78 in 1990. His wife, Rosemary, died in 2004.

Benning's decision to leave his estate to the U came, in part, after he remembered the care a colleague's daughter had received at University Hospital. "Art remembered my family's great experience when the hospital saved our little 3-year-old-daughter during my first year of employment with Amalgamated," said Allan M. Lipman, a family friend and former Benning colleague.

Annual proceeds from the gift will help fund the work of 12 faculty members, each of whom will hold an H. A. and Edna Benning Presidential Endowed Chair. Chair holders will be named by the president of the University.

"Endowed chairs are vital to the backbone of any university," said U President Michael K. Young.

The gift also establishes what will be known as the H. A. and Edna Benning Medical Society. The group will include each of the Benning chair holders and will sponsor an annual lecture or symposium focusing on leading-edge medicine.

"The magnitude of this gift is remarkable. This funding will have lasting effects on the quality of our faculty and our national reputation," said A. Lorris Betz, M.D., Ph.D., senior vice president for health sciences and executive dean of the School of Medicine.

*To date, three H. A. and Edna Benning Presidential Endowed Chairs have been named:*

- Human Molecular Biology and Genetics, held by Stephen M. Prescott, M.D., professor of internal medicine.
- Obstetrics and Gynecology, held by D. Ware Branch, M.D., professor of obstetrics and gynecology.
- Radiology, held by Edwin A. "Steve" Stevens, M.D., professor and chair of radiology.

To learn more about endowed chairs and planned giving opportunities with the U of U School of Medicine, please contact Stephen Warner, Assistant VP of Health Sciences for Development and Alumni Relations at (801) 585-7010.



*School of Medicine graduates*



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