

VERMONT MEDICINE

THE ROBERT LARNER, M.D. COLLEGE OF MEDICINE AT THE UNIVERSITY OF VERMONT

SUMMER 2021

ADVOCATES FOR CHANGE

Larner Students & Faculty
Address Health Care Inequity

ALSO FEATURED: VACCINATING VERMONTERS • CONVERSATION RESEARCH • COMMENCEMENT 2021



A Pioneer Honors Her Roots

A pioneer in the field of pediatric cardiology, **JACQUELINE NOONAN, M.D.'54**, was a renowned researcher, clinician, and mentor to many new physicians throughout the course of her decades-long career. In 1963, she became the first person to characterize a hereditary disorder typified by heart malformations and accompanied by a unique set of physical characteristics, a disorder that would later be named "Noonan

Syndrome." She was also the first to describe hypoplastic left heart syndrome. Her impact on younger generations of Larner graduates can be felt to this day, says **ANNE MARIE VALENTE, M.D.'96**, director of the Boston Adult Congenital Heart Program and associate professor of pediatrics and medicine at Harvard Medical School. "Dr. Noonan was always incredibly supportive and encouraging," she says. "Particularly in the field of cardiology, this mentorship proved to be invaluable and I am deeply grateful to her for her leadership." The College celebrated Noonan's impact on the field of medicine through her receipt of the 2009 UVM Medical Alumni Association's A. Bradley Soule Award and the first-ever Distinguished Service Award in 1996. She was a consistent and generous supporter of the 21st Century Fund, the Larner Endowed Loan Fund and, more recently, the UVM College of Medicine Fund. When Noonan died in July of 2020 at the age of 91, she donated \$285,000 to the College through her estate to support the Dean's Strategic Fund for Medical Research & Education. Her generosity will help to support the most pressing needs of the College and help recruit and support new faculty members.

(Above) Jacqueline Noonan, M.D.'54, at Medical Reunion 2009



The University of Vermont
LARNER COLLEGE OF MEDICINE

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On the Cover (From left to right): Students Erik Zhang, Tyler Harkness, and Krisandra Kneer—all members of the Larner Social Justice Coalition.

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See more online at med.uvm.edu/vtmedicine/web-extras including videos, photos, and blog posts.





RICHARD L. PAGE, M.D.
Dean, The Robert Larner, M.D. College of
Medicine at The University of Vermont

FROM THE DEAN

Summer in New England is special, made even more so here at the Larner College of Medicine by welcoming new and returning students. Our new medical students and graduate students arrive to a world that seems to change every day. UVM faculty, staff and students have behaved admirably throughout the past 18 months, and so have our fellow Vermonters, but at this writing, we are not yet out of the woods. We have seen what science can accomplish, at breathtaking speed, and we will continue to contribute to every effort to bring our College back to whatever “normal” future we have in store.

We have just welcomed the newest members of our Larner community, the medical Class of 2025 and our incoming graduate students. In addition to new students, we are welcoming staff and newly recruited staff and faculty. Among these recruits is Dr. Randall Holcombe, the new director of the UVM Cancer Center and Division Chief for the Division of Hematology and Oncology in the Department of Medicine, about whom you can read more in this issue.

While we look forward to embarking on new challenges, we realize that there is still much important work dating from before the pandemic that calls for our continued attention. Thrown in high relief during the past year has been the need to address issues of social justice locally and nationally. This issue of *Vermont Medicine* documents important ongoing work by our faculty, students and staff over the past several years to foster health equity. As we affirm in the Statement on Professionalism that guides our Larner community, a sense of altruism and social responsibility are key drivers of our work every day.

I expect that many of you received your diplomas from former Dean William Luginbuhl, who led our College for more than 20 years in the 1970s and 1980s. As you’ll read in this issue, Dean Luginbuhl passed away in late June. I was honored to visit with him and his wife, “Vi,” in 2019, and hear their memories and aspirations for our College. It is clear that the spirit of cooperation and teamwork evident during our latest challenges is a longstanding tradition.

Please mark your calendars. We plan to welcome our alumni back to campus for the first in-person reunion since 2019. I look forward with great expectation to seeing as many of our graduates as possible over the October 8-9 weekend.

With warmest regards for your continued health and safety,

VERMONT MEDICINE

THE ROBERT LARNER, M.D. COLLEGE OF
MEDICINE AT THE UNIVERSITY OF VERMONT

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Leadership

HOLCOMBE NAMED UVM CANCER CENTER DIRECTOR

Randall F. Holcombe, M.D., M.B.A., has been appointed director of the UVM Cancer Center (UVMCC) and chief of the Division of Hematology and Oncology in the Department of Medicine. Holcombe is expected to hold the newly established J. Walter Juckett Chair in Cancer Research. He joins UVM and the UVM Health Network from the National Cancer Institute (NCI)-designated University of Hawaii Cancer Center, where he held the post of director since 2016. He succeeds **Richard Galbraith, M.D., Ph.D.**, and **Chris Holmes, M.D., Ph.D.**, who became interim co-directors of UVMCC in 2020, with Holmes also serving as interim chief of the Division of Hematology and Oncology since 2017. Holcombe holds a B.A. from Duke University and earned his medical degree from the New Jersey Medical School and an M.B.A. from the Zicklin School of Business at Baruch College. He has held leadership roles at cancer centers since 1989, serving as associate director of clinical

Randall F. Holcombe,
M.D., M.B.A.



and translational research at the Chao Family Comprehensive Cancer Center and chief, Division of Hematology-Oncology, at the University of California, Irvine from 1997 through 2010 and as deputy director of The Tisch Cancer Institute at the Icahn School of Medicine at Mount Sinai from 2010 through 2016. At Mount Sinai, Holcombe also served as director of clinical cancer affairs and chief medical officer for cancer for the Mount Sinai Health System.



**FACULTY AWARD FOR
PROFESSIONALISM [1]**
Kristen Pierce, M.D.'03
Professor of Medicine,
Division of Infectious Disease

**STAFF AWARD FOR
PROFESSIONALISM [2]**
Mary Claire Walsh, P.A.
Researcher/Analyst, UVM
Vaccine Testing Center; Physician
Assistant, UVM Medical Center



Our ‘True North’: Larner Celebrates Professionalism with 2021 Awards

The Larner College of Medicine marked the second anniversary of the public roll-out of the College’s Statement on Professionalism with its first-ever Professionalism Week May 3 through May 7, 2021. As part of the week-long celebration, four members of the Larner community—a faculty member, staff member, graduate student, and medical student—were recognized on May 4 during the Professionalism Week Kick-off and Awards Celebration, held via Zoom. (The four awardees are shown at right and listed below.)

“We could never have anticipated the many ways our commitment to professionalism would be tested over the past year, but I think we should all take time to recognize just how much that ‘true north’ has guided us through the challenging times of the pandemic,” said **Dean Richard L. Page, M.D.**, in a message to the Larner community on March 30.

**GRADUATE STUDENT AWARD
FOR PROFESSIONALISM [3]**
Axel Masquelin
Graduate Research Assistant
and Pre-Doctoral Fellow,
Bioengineering

**MEDICAL STUDENT AWARD
FOR PROFESSIONALISM [4]**
Akua Frimpong '23

NATIONAL RECOGNITION

AMERICAN THORACIC SOCIETY HONORS BATES, PARSONS, KAMINSKY

Three members of the Department of Medicine were honored at the 2021 American Thoracic Society (ATS) International Conference held in May.



Jason Bates, Ph.D., D.Sc., professor of medicine, received a Recognition Award for Scientific Achievement, which “recognizes

outstanding scientific contributions in basic or clinical research to enhance the understanding, prevention and treatment of respiratory disease or critical illness” and is given “based on contributions made throughout their careers or for major contributions made at a particular point in their



careers.” E.L. Amidon Chair and Professor of Medicine **Polly Parsons, M.D.**, received the Edward Livingston Trudeau Medal,

which recognizes “an individual with lifelong major contributions to prevention, diagnosis and treatment of lung disease through leadership in research, education, or clinical care” and “acknowledges exemplary professionalism, collegiality and citizenship in the ATS community.”



David Kaminsky, M.D., professor of medicine, received the Assembly on Respiratory Structure and Function Dr. Robert Crapo

Memorial Lifetime Achievement Award in Pulmonary Diagnostics. This award recognizes the recipient’s “lifetime of dedication and accomplishment in the study of pulmonary diagnostic testing.”

Notable

Shukla Garner's Cancer Research Award

NATIONAL RECOGNITION

Professor of Pathology and Laboratory Medicine **Arti Shukla, Ph.D.**, was recognized for outstanding cancer research with the Society of American Asian

Scientists in Cancer Research (SAASCR) award during the annual American Association for Cancer Research meeting on May 17, 2021. SAASCR is a non-political and non-profit organization with more than 5,000 scientists from Asian (mainly Indian) origin and working in the U.S. and Canada in the field of cancer research.



Warshaw Named University Distinguished Professor

UNIVERSITY AWARDS

David Warshaw, Ph.D. '78, professor and chair of molecular physiology and biophysics, is a 2021 recipient of the University Distinguished Professor

Award—the highest academic honor that UVM can bestow upon a faculty member. Warshaw is an internationally renowned leader in the structure and function of the myosin molecular motors that power both muscle contraction and the transport of intracellular cargo. He developed technology to measure the molecular-level force generated by these tiny motor proteins, an advance that was critical to his paradigm-shifting discovery that patients with hypertrophic cardiomyopathy (HCM) have a genetic mutation to the cardiac myosin that can lead to heart failure and sudden death in young athletes. This discovery led to the development of drugs to “throttle back” the heart’s molecular motor in patients with HCM.



Kirkpatrick Honored as University Scholar

UNIVERSITY AWARDS

Beth Kirkpatrick, M.D., professor and chair of microbiology and molecular genetics, has been named one of three 2021-2022 University

Scholars. The University Scholars program recognizes UVM faculty members for sustained excellence in research, scholarship, and creative arts. Kirkpatrick began her career with research interests in enteric infections, mucosal immunology, and vaccines. In 2001, she launched the UVM Vaccine Testing Center, now a multi-disciplinary team researching candidate vaccines and vaccine immunology. Kirkpatrick is also the principal investigator of a National Institutes of Health-funded Center of Biomedical Research Excellence (COBRE) grant—the Translational Global Infectious Diseases Research (TGIR) Center—which focuses on the development of the next generation of faculty investigators from the biomedical and quantitative/modeling fields.



Dostmann Receives Teaching Award

UNIVERSITY AWARDS

Wolfgang Dostmann, Ph.D., professor of pharmacology, was awarded the University of Vermont’s 2020-2021 Kroepsch-Maurice Excellence

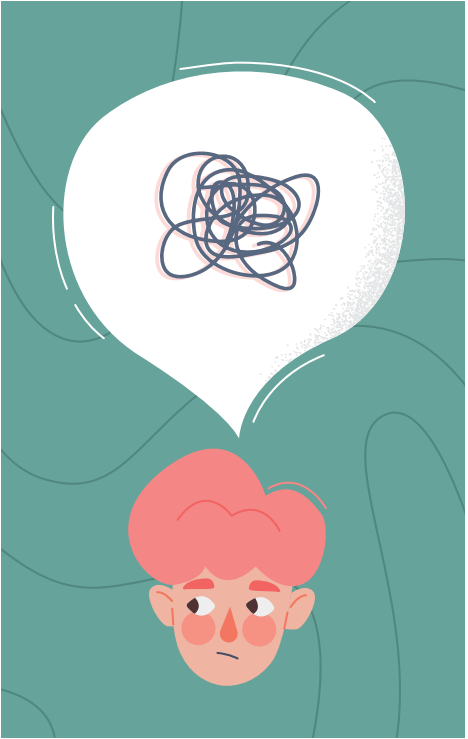
in Teaching Award at the rank of professor. The award recognizes Dostmann’s “commitment to the greatness and virtue of instruction and... efforts at cultivating an inclusive environment conducive to exceptional learning.” The awards memorialize Robert H. and Ruth M. Kroepsch and her parents, Walter C. and Mary L. Maurice. Robert H. Kroepsch served as Registrar and Dean of Administration at UVM from 1946-1956. His wife, Ruth, graduated from UVM in 1938 and her father, Walter Maurice, graduated from UVM in 1909. All four were teachers.



Research

Understanding the Adolescent Brain

Youth brain activation data from the largest longitudinal neuroimaging study to date provides valuable new information on the cognitive processes and brain systems that underlie adolescent development. The study, published June 7 online in *Nature Neuroscience*, stands to clarify the psychological processes that put young people at higher risk for developing mental and physical health challenges. Since many mental health disorders emerge during this time, understanding neurodevelopment from 10 to 20 years old is key to improving outcomes for adults. However, most neuroimaging studies have historically focused on adults. This paper is part of the Adolescent Brain Cognitive Development Study, which launched in 2016 and is a 10-year-long longitudinal study that has enrolled nearly 12,000 youth aged 9 to 10 at 21 sites across the country. Using functional magnetic resonance imaging technology, the researchers observed brain activation during a battery of three different tasks. Results demonstrated which brain regions are involved in a range of psychological processes, including cognitive control, reward processing, working memory, and social/emotional function. “This study—likely the biggest task activation paper



ever—shows the brain regions activated by each task, how well they capture individual differences, and will likely serve as a baseline for all the subsequent papers that will track the kids as they age,” says **Hugh Garavan, Ph.D.**, professor of psychiatry and senior author. **Bader Chaarani, Ph.D.**, assistant professor of psychiatry and the study’s first author, calls the brain activation maps the team developed “a gold standard for the neuroscientific community” that could “help inform study design.”

Quoted

“The pandemic has uncovered the insidious racism in medicine, forced us to address the plight of child hunger, to face the deep class divides in our country. As a physician, you have the privilege of a voice that will be respected and prioritized in conversations, so be a part of that conversation. Do not hide in silence.”



—Elizabeth Lynch, M.D. '21, addressing her classmates at the 2021 medical commencement ceremony

STUDY HIGHLIGHTS COVID-19'S IMPACT ON MAMMOGRAPHY

Research

A study by investigators

from the Breast Cancer Surveillance Coalition (BCSC) provides an analysis of mammography screening rates during the first five months of the COVID-19 pandemic, highlighting how the long-term health and wellbeing of different populations may be affected. Results published in the *Journal of the National Cancer Institute* show a strong rebound in breast cancer screening rates, but also uncover a cumulative deficit, as well as disparities by race, that researchers say require additional attention to address. Although trends in mammography screening were similar by age



and risk factors in the study, the researchers found the rebound in mammography volume to be lower among Hispanic and Asian women. “This national snapshot is important to help us focus research, outreach and intervention to close gaps that were perhaps created or made worse by the pandemic,” says **Brian Sprague, Ph.D.**, associate professor of surgery and the study’s lead author.

Commencement

“HAVE THE COURAGE TO BE A TRUTH TELLER”

CELEBRATING THE CLASS OF 2021


In a first-ever hybrid in-person/virtual commencement, the Larner College of Medicine celebrated its Class of 2021 M.D. graduates on May 23, 2021, during a ceremony that took place both at UVM’s Patrick Gymnasium and via Zoom. A total of 94 of the Larner College of Medicine’s 110 Class of 2021 medical graduates attended the ceremony, with 42 participating in person. All in-person participants complied with UVM’s strict COVID-19 safety protocols.

Family physician, epidemiologist, and anti-racism activist Camara Phyllis Jones, M.D., M.P.H., Ph.D., past president of the American Public Health Association, delivered the commencement keynote address. Jones counseled graduates that “being a social justice warrior is a legitimate and necessary part of being a physician.” She gave them four charges as they embark on their new careers: “Be courageous; be curious; be collective; and build community.” Jones gave examples of the behavior aligned with these charges, such as having the courage to be a truth-teller, asking serial “why?” questions, caring about the whole of humanity, and bursting “through our bubble” to make conversation with strangers in order to turn strangers into friends.

In her address, Senior Associate Dean for Medical Education Christa Zehle, M.D.’99, told students “If the pandemic has taught us anything, it is the power disease has to upend daily life in ways we never thought possible.” She recognized the students’ commitment to advocating for social justice and equity and said, “Your voice will continue to be important throughout your career, so speak up for what is right, be a model of professionalism, and demonstrate kindness and respect in all that you do.”



At right, Camara Phyllis Jones addresses the graduates via Zoom. At left, scenes from Commencement Day.

 SEE MORE PHOTOS AND A VIDEO OF THE EVENT AT: [MED.UVM.EDU/VTMEDICINE/WEB-EXTRAS](https://med.uvm.edu/vtmedicine/web-extras)

Notable

NEW PROGRAM
TREATS PATIENTS
WITH LONG COVID

A new COVID Recovery Program

created by a team at UVM Medical Center aims to provide services specifically to patients known as “COVID long haulers,” a group that experiences a constellation of disparate symptoms weeks or even months after initial infection.

David Kaminsky, M.D., professor of medicine, says a support group created for all UVM Health Network patients diagnosed with COVID-19 helped to identify the need for services specifically for COVID long haulers. He reached out to colleagues in rheumatology, infectious disease and family medicine to move forward with the COVID Recovery Program.

The group decided to anchor the COVID Recovery Program in the region’s primary care offices. Specialists created guidelines for primary care physicians to assess a patient with persistent COVID symptoms and steer them to the appropriate services.

Katherine Benson, D.O., assistant professor of medicine, says long-term interventions like physical therapy, occupational therapy and speech therapy seem to help with symptoms such as brain fog, chronic fatigue and muscle weakness.

The program should also help to understand how many UVM Health Network patients are experiencing Long COVID, a number that according to some estimates may range from 10 to 30 percent of patients diagnosed with COVID-19.



“This guide is meant to help Black women feel safer, and to provide a modern framework for medical providers to actively address their own racism.”

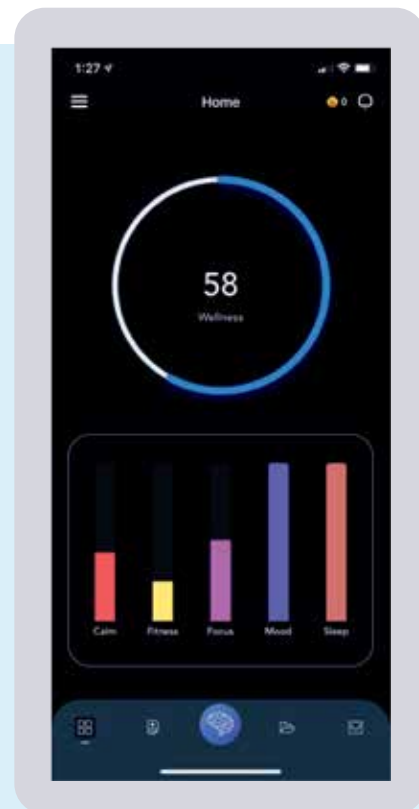
– From “Protecting Your Birth: A Guide For Black Mothers,” written by Erica Cahill, M.D.’13 and Erica Chidi and published in the *New York Times*

Wellness Environment
Launches WE MD App
Study at Larner

Launched seven years ago, the Wellness Environment (WE) program for UVM undergraduates is an incentive-based program focused on health promotion, illness prevention, and behavioral change. For several years, students in WE have been given Apple watches and used the WE App, which was recently updated, to keep track of their health and wellness activities.

On May 24, members of the WE program at UVM, in collaboration with leaders at Larner, opened a voluntary research study of the WE MD App in which medical students in the classes of 2022 and 2023 can enroll.

The latest creation conceived by WE founder and Director **Jim Hudziak, M.D.**, professor of psychiatry and director of child psychiatry and the Vermont Center for Children, Youth and Families, the WE MD App was inspired by Hudziak’s experience as a medical student and that of his daughter, Vicenta Hudziak, M.D.’18. The WE App served as a foundation for the WE MD App, which was tweaked for a medical student user based on input from a team including Hudziak, **William Copeland, Ph.D.**, professor of psychiatry, **Lee Rosen, Ph.D.**, interim associate dean for students and assistant professor of psychiatry, **Elizabeth Lynch, M.D.’21**, and medical students **Alexandra Novelli ’23**, **Carly Watson ’23**, and **Hakeem Yousef ’22**.



The WE MD App homepage explains an overall personal wellness score as well as scores in the five main arenas of well-being.

An arm of the WE program, led by Copeland, focuses on research based on the findings generated by students’ responses in the app, including a recent *Journal of Child and Adolescent Psychiatry* article on student wellness during the pandemic. The goal is to better promote wellness behaviors, provide individualized feedback, and offer incentives for engaging in reflection and wellness activities.

Viewpoint

Bystander or Advocate?
Who Do You Choose to Be? BY DIANE MAGRANE, M.D.

Culture change begins with acts of individual change. You may have heard the phrase “Be the change you aim to see.” This wisdom often is attributed to Mahatma Ghandi, but the actual author was high school teacher Arleen Lorraine, who first used it to advance a program in the poverty- and violence-challenged high schools of Brooklyn. Each of us can choose to be the change through actions that advance everyone’s opportunities while challenging traditional norms.

We can check the power language that maintains traditional equilibrium and facilitates marginalization, choosing instead to:

- Acknowledge transgressions in the space and time in which they occur. Politely. Firmly. Failure to do so by waiting until a private conversation after the meeting is called private allyship. It results in silently condoning the transgression.
- Address issues of bias and discrimination in real time, creating space to hear them out. Pivoting the conversation away from the alleged sexism or racism towards a more neutral topic is called side-stepping. It leaves the challenge unexplained and diminishes the person feeling harmed by it.
- When we call it out power language, when we check our own use and readjust, we change the conversation in the room to make it more welcoming and inclusive.

Allow individuals to express their thoughts and feelings openly, without becoming defensive. Avoid tone policing that shuts down the marginalized person as being angry or emotional. And take care not to put their words into yours. People, even in the midst of their passion, are capable of speaking for themselves.

We can count and report the counts and gaps. We measure—and report—what we value. What do your counts show of gender and race in publications, appointments, conference speakers, awards that are not targeted to specific groups? What does that say about what we value as a community? The Gender Equity Report Card being developed by medical student Stellar Levy with the Gender Equity Committee is a great example of counting and reporting.

We can acknowledge the good work in front of us. Pay attention to the behaviors described in the gender equity awards. Speak up in favor of these changes and encourage more. Consider how they might be replicated across the institution.

Twenty years ago, UVM faculty and students designed one of the first medical student curricula in the nation that integrated leadership development as a core theme. That theme, and in particular, the skills related to advocacy for inclusive community, are even more important today as we recognize that equity is key to health, innovation, and productivity. How might UVM continue to lead the nation as ambassadors of this teaching and learning? Specifically, what would you do differently if you were to commit to creating the most diverse and inclusive medical school in the country? Where do you have discretion and freedom to act? Will you choose to stand by as a protector of the status quo or will you choose to listen, speak and act to expand diversity, inclusion and equity in this community?



Diane Magrane, M.D., former associate dean for medical education at the UVM Larner College of Medicine, served as keynote speaker for the College’s Celebration of Gender Equity in Medicine and Science on March 4, 2021. She is immediate past director of Executive Leadership in Academic Medicine (ELAM) and former Association of American Medical Colleges associate vice president for faculty development and leadership. This viewpoint is an excerpt from a post she wrote for the College blog.

Study Shows Better Way to Pay for Pain Management

BY JANET FRANZ

Assistant Professor of Family Medicine Jon Porter, M.D. describes the people under his care as heroes: They fight daily battles against debilitating backache, arthritis, fibromyalgia, systemic inflammatory conditions, and chronic headaches, braving unrelenting pain to care for loved ones and manage their lives. For years, these individuals fought their pain with traditional medical weapons—opioid medications, steroid injections, surgeries—bringing short-term relief and, for some, addiction, depression and anguish. Still, Porter says, they persevere in quests for respite, dignity and joy.

Porter, medical director of the UVM Medical Center Comprehensive Pain Program (CPP), knows that yoga, nutrition, mindfulness, massage and acupuncture can help people manage pain more effectively than traditional approaches. Paying for these therapies is tricky though: For health insurance providers, covering the costs of surgeries, shots and pills comes easier.

To change this paradigm, Porter and a team of UVM researchers gather qualitative data from people participating in 13 weeks of evidence-based integrative therapies paid for Blue Cross and Blue Shield of Vermont (Blue Cross). The program aims to support participants' self-efficacy and provide tools for coping with pain, while measuring health improvements and impacts on health care spending.

"We want to demonstrate to society the value of this novel approach to pain," said Porter. "Blue Cross wants to know if it works. They want their subscribers to be healthier and to reduce costs."

The project models value-based care, a payment system offering financial incentives to medical providers for meeting health outcomes. It's opposite of fee-for-service, the traditional model that reimburses providers for each procedure. If it works, Blue Cross may cover integrative therapies more broadly, and other payers may follow suit.

Study participants attend group meetings and receive therapies at a clinic in South Burlington. The clinic includes a studio for gentle movement, teaching kitchen for culinary medicine classes and rooms for massage, acupuncture, Reiki, physical therapy and substance abuse counseling.

Participants complete surveys assessing their pain's intensity and impacts on daily life, fatigue, anxiety, ability to participate in social roles and sleep disturbance. The surveys also gauge self-compassion, confidence and resilience.

Preliminary data show significant changes in key areas: Participants report reduced

pain, improved physical function, better sleep and fewer visits to primary care and emergency departments for pain relief.

"The results show a statistically significant improvement in patient outcomes," said Adam Atherly, Ph.D., director of UVM's Center for Health Services Research at the Larner College of Medicine. He collaborates with Porter and Janet Kahn, Ph.D., a research assistant professor at Larner and massage therapist at CPP, on the study. Atherly evaluates the survey results and has prepared a manuscript for peer review.

"The research asks, 'does this program work at UVM Medical Center?' Early evidence shows that it does. People are getting better," Atherly said. "Blue Cross has been looking at the claims data, and they see it's working. As the payer, they are satisfied that it's a reasonable investment." The next question is, can it be replicated?"

"We're helping individuals feel more hopeful and confident in working with their pain. The cost savings will be huge, and cumulative," said Porter. "If we can help someone in their 30s or 40s find ways to deal with their pain, it will help them for decades."



Viewpoint

Bearing Witness to the Patient Experience BY FLORA LIU, M.D.'21

During 2019, I was a student in the Larner College of Medicine's Longitudinal Integrated Clerkship at Central Vermont Medical Center. This gave me the opportunity to follow multiple patients through their illnesses and their journeys, getting to know them over the course of time. Some patients recovered quickly; others had multiple complications and took many months before they felt better. One patient in particular I will always remember, as following his journey was one of the most meaningful experiences during my third year of medical school. He showed me how important it is to bear witness to the full range of a person's experiences, even as you work to diagnose and treat their medical conditions.

I crossed paths with this patient and his wife early in my clerkship.* While reading his chart, I found that he had several serious conditions affecting his lungs and gastrointestinal system. The first time I met him and his wife, they really didn't know what his health conditions were and what he needed. They were so confused as to why they were in the office. He required his wife to answer everything for him, but his wife didn't know what help we could provide. We used our best judgment to prescribe some medications and instructed him to follow up in four weeks.

A month or two after our first visit, he returned and needed to be hospitalized for several cardiac issues. Upon discharge, he was instructed to have multiple follow-up appointments with primary care, oncology, cardiology, and neurology. During the period of follow ups, he had many diagnostic tests done on top of multiple medication adjustments. He was also given the diagnosis of Alzheimer's dementia.

During the time he was seeing different specialists, I attended multiple appointments with him and saw how his life had been impacted by all of the different medical decisions. I had the luxury to sit in the waiting room with him and his wife, getting to know their background and who they are outside of medical appointments. I learned how they loved to garden, read, and hunt, and I began to understand how these medical conditions were impacting their lives.

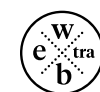
I could witness their reactions after a new diagnosis, a discussion about a treatment plan, or changes to medications. I remember so clearly after the cardiologist spent 30 minutes talking about different treatment options for atrial fibrillation, the cardiologist paused and asked if they had any questions. The patient turned and said, "What's a fib?" Being so medicalized, patients are sometimes left confused, frustrated, and unsure where to ask for more help.

As medical providers, we are often focused on a patient's problem list and our assessment and plan. Although this is an essential part of our training, we sometimes forget about who is sitting in front of us, what their emotional reactions are, and how their lives are being impacted. As a student with the luxury of time, I got to hear their complaints, frustrations, worries, and disappointments. This experience makes me wonder when we take the oath of "do no harm," what are we doing to patients when we are only so focused on how we treat their problem list?

My time with this patient and his wife has given me the opportunity to approach my work as a physician from a different perspective. After many months of battling with his health conditions, and more than a year of constant medical visits and adjustments to treatment plans, he finally said he felt better for the first time. He may not be the perfect answer in a test question, and his medical regimen may not be optimized, but his quality of life has improved. After following him for the past year, I saw him go through so many ups and downs. I am so thankful that they welcomed me on their journey. At my last visit with him, I was just so touched seeing him feeling better. They were proud that they could provide me this educational experience. Reflecting on my time with them, I consider this one of the most rewarding experiences of my medical education.

**Some details have been changed to protect patient confidentiality*

I learned how they loved to garden, read, and hunt, and I began to understand how these medical conditions were impacting their lives. — Flora Liu, M.D.'21



LIU CHOREOGRAPHED, PERFORMED AND FILMED AN INTERPRETIVE DANCE ABOUT HER EXPERIENCE IN THE LIC, TITLED "IN BETWEEN." WATCH A VIDEO OF HER DANCE PERFORMANCE AT: [MED.UVM.EDU/VTMEDICINE/WEB-EXTRAS](https://med.uvm.edu/vtmedicine/web-extras)