

# 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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In his Conversation Lab, Robert Gramling, M.D., D.Sc., has assembled a team of researchers who are parsing the sentences we use, the words we choose — and the silent spaces in between — to understand how conversations bring meaning and comfort to patients and their loved ones. **By Erin Post**

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

## FROM THE DEAN

**S**ummer 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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**SENIOR ASSOCIATE DEAN FOR RESEARCH**  
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### Leadership

## HOLCOMBE NAMED UVM CANCER CENTER DIRECTOR

**R**andall 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.



**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

**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

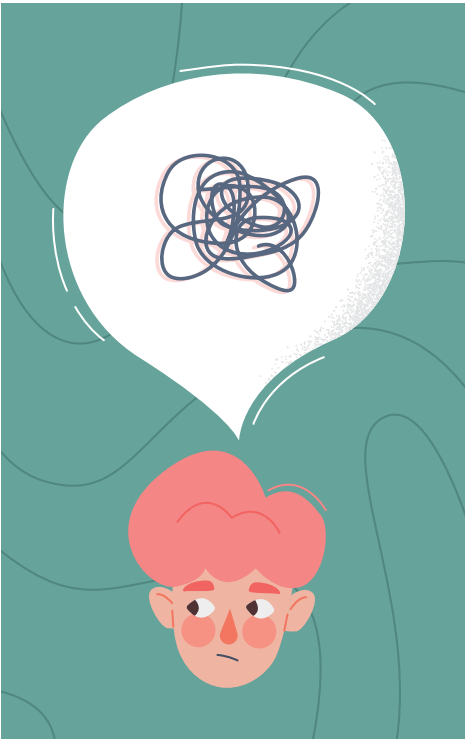
**Wolfgang Dostmann, Ph.D.**, professor of pharmacology, was awarded the University of Vermont’s 2020-2021 Kroepsch-Maurice Excellence in Teaching Award at the rank of professor. The award recognizes Dostmann’s “commitment to the greatness and virtue of instruction and... efforts at cultivating an inclusive 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.”

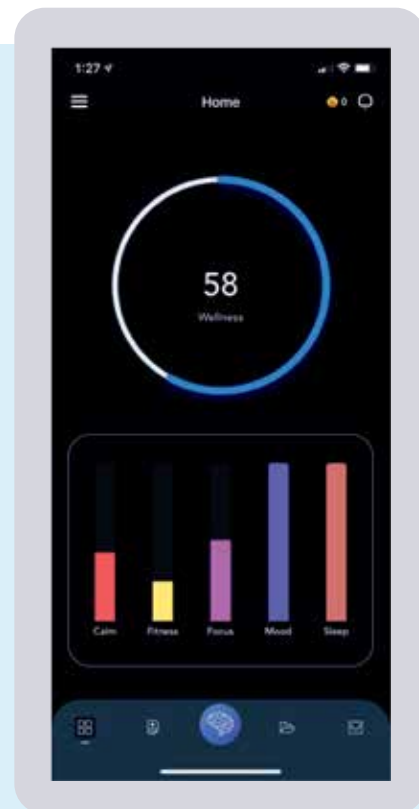
– From “Protecting Your Birth: A Guide For Black Mothers,” written by Erica Cahill, M.D.’13 and Erica Chidi and published in the *New York Times*

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.

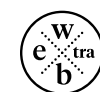
I could witness their reactions after a new diagnosis, a discussion about a treatment plan, or changes to medications. I remember so clearly after the cardiologist spent 30 minutes talking about different treatment options for atrial fibrillation, the cardiologist paused and asked if they had any questions. 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)



# One Dose at a Time



It took a village to plan from scratch and move with Herculean speed to open the UVM Health Network's vaccination clinic at the Champlain Valley Expo in Essex in December of 2020. In its seven months of existence, more than 80,000 vaccines were administered there, helping Vermont become the first state in the nation to vaccinate 80 percent of its population with at least one dose.

## Building a Team of Allies

ONE DAY IN LATE APRIL, HOWARD SCHAPIRO, M.D.'80, gathered with a group of about 50 nurses, vaccinators, pharmacists and support staff to pose for a group photo (at right). He stood toward the back, cracking a wide smile behind his mask.

The photo was a tribute to the people who had worked to set up the COVID-19 vaccination clinic at the Champlain Valley Expo in Essex. Schapiro,

UVM Health Network Chief Population and Quality Officer, remembered all too well how overwhelming it had seemed when they first began setting up the clinic four months earlier.

Months before the Centers for Disease Control and Prevention (CDC) rolled out a system for patients to self-schedule appointments, before anyone even really understood how a mass vaccination system was going to work, the State of Vermont put out calls to health care organizations asking them to create high-capacity vaccination centers as fast as possible. The UVM Medical Center responded, administering the first COVID-19 vaccines in the state at a small clinic set up at the hospital.

But more was needed, and soon the most urgent and profound public health challenge of our lifetime fell onto Schapiro's desk: How to vaccinate tens of thousands of people as quickly as possible.

"Today, sitting here, I think of that as a privilege," he says. "But I didn't think that on that day."

Understanding what was at stake, he started building an army of allies, the vaccine their only weapon. He called in experts from UVM Medical Center's pharmacy department and technology team, as well as the Network's Critical Care Transport Team, who had experience setting up the UVM Health Network's first mobile COVID-19 testing site. Next, the Expo, for help with the site and facilities; Green Mountain Messenger, for assistance shuttling vaccines back and forth every day from UVM Medical Center to the Expo, following exacting temperature protocols. The lineup of partners was long, but time was short. →

Photos by Ryan Mercer



The staff of the University of Vermont Health Network's COVID-19 vaccination clinic at the Champlain Valley Exposition in Essex Junction on April 26, 2021. Howard Schapiro, M.D.'80, stands in the back row, far right.



Continued from page 12

At times, there were significant hurdles, especially at the beginning. While the state had provided a list of first responders to contact—those in Tier 1A, eligible for the first vaccinations—the list was incomplete; fire departments, police departments, EMTs and other first responders in Chittenden County didn’t have complete contact information themselves. So, it was left to Schapiro’s team to track down thousands of people.

“We started making hundreds and hundreds of phone calls every day,” said Scott O’Neil, head of UVM Health Network’s Patient Service Access Center.

Schapiro tapped Todd Young, head of the UVM Health Network’s Telehealth program, to help things move faster. Young worked with people like senior project manager Roberta Mitchell, to come up with a patient self-schedule model ahead of the CDC’s rollout, allowing the number of vaccine doses administered to rise from a few dozen a day to hundreds.

By the end of January, the UVM Medical Center and the vaccine clinic at the Expo had administered more than 10,000 COVID-19 vaccine doses to frontline and community health workers.

From there, Schapiro, a former chair of the Department of Anesthesiology, put together a team of what he calls “very good thinkers.” People like Nurse Manager Nicole Courtois, of UVM Medical Center’s process improvement department, who took over from Mike Conti from the Critical Care Transport Team. Her mission: scale up operations as much as vaccine supply would allow.

By late May, about 120,000 COVID-19 vaccine doses had been administered by Network COVID-19 clinics throughout the region, at least 65,000 at the Expo alone.

“To a person, the team’s commitment, their willingness to give their time, to think outside the box... to do whatever it took to get it done, has been just amazing,” says Schapiro, who clearly enjoys talking about the whole experience... now. He credits his team for making the clinic what he refers to as “the happiest place on earth.”

“During my entire anesthesia career, I could probably say I contributed to saving a few lives,” says Schapiro. “Today I can say that I’ve been lucky to be part of a phenomenal team that has so far put more than 80,000 doses of a lifesaving vaccine in people’s arms.”

On that photo-op day in late April, the whole group was giddy. They knew they had saved many lives and given hope to thousands more. \*\*\*

# Six Hours and Counting

## CELSIUS AND FAHRENHEIT WERE

Kevin Smith’s steadfast companions when ushering the COVID-19 vaccines from UVM Medical Center’s loading docks to the COVID-19 vaccine clinic at the Champlain Valley Expo in Essex.

The process began on Thursday evenings, when Smith, the Pharmacy Operations Manager at UVM Medical Center, received an email from the Vermont Department of Health detailing how many doses of vaccine the hospital would expect the following week, and what type. The list was split by dose (first or second) and where it was coming from (the vaccine manufacturer or Vermont Department of Health).

In this case, the vaccine arrived from Pfizer. The timer started ticking right away: Smith and his team quickly unpacked it,

moved it to a special freezer, verified that the shipping container maintained the appropriate temperature during transport, and logged in the inventory.

“I’m mostly behind-the-scenes,” Smith said, “but, like the rest of our pharmacy team, I’m thrilled to be able to use my expertise for this effort.”

Part of that expertise was knowing how critical it was to keep the vaccine at the right temperature: The Pfizer vaccine must be kept between minus 112 degrees Fahrenheit and minus 76 degrees Fahrenheit for long-term storage. Fortunately, it didn’t need to be kept nearly as cold for the short trip to the Expo.

There, the painstaking process of compounding—or creating the vaccine mixture—began, a process dictated by temperature and time. Different vaccines require different temperature limits to remain effective, and the clock starts ticking the second a vial is opened; if they aren’t used within a given amount of time, they aren’t effective.

The trick is to prepare vaccine doses in advance of patient arrival, but not too far in advance, explained Michele Corriveau, the UVM Medical Center

*“I’m mostly behind-the-scenes, but, like the rest of our pharmacy team, I’m thrilled to be able to use my expertise for this effort.”* – KEVIN SMITH



Kevin Smith, Manager of Pharmacy Operations at the University of Vermont Medical Center.

Pharmacy Oncology Manager. The number of appointments each day had to be closely calibrated with the time it took a pharmacist to prepare each dose.

“We figured out it takes one minute per dose,” says Corriveau. “That, along with the fact that we have six hours once the vial is opened before we have to get each dose in a patient’s arm.”

The process began when the pharmacist or pharmacy tech inverted the vial exactly 10 times to ensure that the suspension in the vial was well mixed. It was then inspected for color and clarity, the cap removed, the stopper swabbed with an alcohol wipe, saline added and air removed. Again, the suspension was gently inverted 10 times and again inspected, an onerous process that only a chemist could love.

“No waste,” said Smith. “That’s our daily challenge.”

To help ensure that goal, each syringe was labeled: type of vaccine, volume, manufacturer’s lot number and the “beyond use” date, the time after which the vaccine could no longer be administered.

A pharmacist can compound between 8 to 10 vials per hour, so these calculations dictated the workflow each day at the vaccine clinic. One key technique to ensure that every bit of vaccine was extracted involved using a needle with a small ‘hub’ (the plastic end that attaches to the syringe tip). Needles with larger hubs tend to have ‘dead’ space, in which small volumes of vaccine can pool after the injection, potentially wasting vaccine.

Promptly at 4:30 p.m., the unopened vaccine vials were transported back to the UVM Medical Center loading dock where the unopened vials were returned to refrigerators and freezers. Smith set about the work of preparing to start all over again in 12 hours.

“To be able to help people feel like they’re going to get through this?” he said. “It’s just such a privilege. \*\*\*



Michele Corriveau



READ MORE STORIES ABOUT THE VACCINE CLINIC AT THE CHAMPLAIN VALLEY EXPO AND VIEW A VIDEO: [MED.UVM.EDU/VTMEDICINE/WEB-EXTRAS](https://www.med.uvm.edu/vtmedicine/web-extras)



Todd Young, Director of Telehealth for the UVM Health Network

# Scaling Up

## IT MIGHT SEEM LIKE A BIG LEAP—

from milking cows to leading the University of Vermont Health Network’s Telehealth Services—but Todd Young says working on his grandfather’s farm taught him one important lesson: how to work hard. Over the past year, he’s brought his work ethic to an unprecedented array of challenges: A pandemic, a cyberattack and, most recently, the mission of setting up complex IT systems to support the COVID-19 vaccination clinic at the Champlain Valley Expo in Essex.

As the pandemic descended upon Vermont, seemingly overnight video visits became the primary means for people to see their health care providers. Young and his team from IT oversaw the UVM Medical Center’s transformation from conducting 1,000 telehealth visits per year to 1,000 video visits each day during the height of the pandemic.

Then a cyberattack hit, and Young’s team had to build systems—some digital, some so manual they involved sorting papers into cardboard boxes—to get the UVM Medical Center through the worst days. Still reeling from that effort, Young was asked to help with the Essex vaccination effort.

One of their first assignments was to help

build a system that would allow patients to schedule their vaccination appointments themselves.

“Initially, the team had to consider varying timeframes for different vaccines, and Pfizer requires three weeks between doses; Moderna requires four,” explains Young. “They had to build processes to not only address this factor, but to make sure that the Expo staff could document the timing easily and efficiently.” It was all about building quality and efficiency into the systems we developed,” he says.

Next, rather than a paper sign-in processes, the team provided the technology that allowed the staff to be sure that patients’ vaccinations were properly documented. “It’s an important patient safety and quality issue,” Young says.

Ultimately, the many systems the team put in place allowed a rapid increase in vaccinations. “For the people who work here it’s amazing to know we went from a few dozen doses to more than 1,000 per day,” says Stephyne Burke, R.N., the manager of the clinic. “I don’t think the patients coming in even realize it, because the process is so smooth.”

“This work proved we can change the experience for our patients and our people when we unite around a common cause,” Young says. “It connected me to the community more than anything else I’ve ever done.” VM

These stories were originally published by the UVM Health Network. To see the complete series, visit: <https://www.uvmhealth.org/coronavirus/staying-healthy/champlain-valley-expo-vaccination-clinic>





READ THE CONVERSATION LAB RESEARCH BLOG,  
CHECK OUT RECENT PUBLICATIONS FROM THE TEAM,  
AND MORE: [MED.UVM.EDU/VTMEDICINE/WEB-EXTRAS](https://med.uvm.edu/vtmedicine/web-extras)

# A Search for Meaning

## The StoryListening Study

### Parses Words

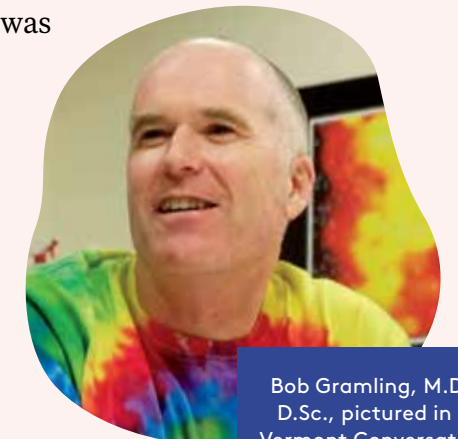
### and Silences

## to Find Moments of Connection

By Erin Post

**B**ob Gramling, M.D., D.Sc., has witnessed grief in its many forms. As the inaugural Holly and Bob Miller Chair in Palliative Medicine and a professor of family medicine, he counsels seriously ill patients and their families while they navigate the challenging terrain between life and death. During the COVID-19 pandemic, Gramling worked with a UVM Medical Center team to provide critical support at a Burlington nursing home experiencing an outbreak. He sat with patients, often holding a phone or iPad, so they could say goodbye to loved ones who, because of safety precautions, couldn't be present. The forced distancing was difficult, but moments of connection still emerged.

These moments—as brief as they may be—deserve attention, says Gramling. He wants to find the communicative patterns that develop. If his team can uncover a clearer picture of the exchanges that bring humans together in empathy and compassion, then perhaps medical professionals can collectively create end-of-life journeys that are a little less lonely and fraught with fear, and maybe even a little more joyful.



Bob Gramling, M.D.,  
D.Sc., pictured in a  
Vermont Conversation  
Lab t-shirt

In their Vermont Conversation Lab in the Given Building at the UVM Larner College of Medicine, Gramling and his team have assembled a breadth of research expertise focused on parsing the sentences we use, the words we choose—and the silent spaces in between—to understand how conversations bring meaning and comfort to patients and their loved ones.

Although the work has been ongoing for over four years, the COVID-19 pandemic has infused it with a new sense of urgency.

“Whether it’s just the potential energy of this year or where our work has naturally evolved, we’re becoming more and more interested in this one fundamental question: What is human connection?” says Gramling. “What does it look like in different types of conversations? And then how do we foster that?”

The StoryListening Study is the newest project for his team. Funded through the Holly and Bob Miller Endowed Chair Fund in Palliative Medicine, UVM Continuing and

Distance Education, and a generous donation from UVM Medical Center Foundation board member Kate Laud, the goal is to enroll 150 to 200 family members, friends or clinicians who experienced the death of a loved one or patient during the COVID-19 pandemic. These people are invited to tell their story—with no stipulations on how they tell it, or for how long, or what specifically they talk about. End-of-life doulas trained in UVM’s certificate program serve as the “listeners.” The exchanges between participants and end-of-life doulas happen via televideo—a key aspect of the study, says Gramling. He’s excited to discover more about how video affects human connection between participants.

Participants receive 15 questions before and after the exchange, designed to measure “the acceptability of the televideo StoryListening visit” and to understand “the aspects of the storytelling experience that are most beneficial to quality-of-life.” →



The recordings of the exchanges between participants and end-of-life doulas tell their own stories, says Gramling. Researchers are listening to each conversation, analyzing the language, the silences, even the frequency of “turns” the speakers take, that may uncover when and how moments of connection are created. Once patterns emerge, machine learning can help scale the analysis across thousands of conversations, helping to home in on when barriers fall away.

“One way or another, we’re hovering around this concept of loneliness or feeling disconnected,” says Gramling. “And the converse of that: what does connection look like and how do we make it happen?”

### Analyzing Silence

A UVM undergraduate majoring in biology with a minor in gender studies, Ann Wong has been a researcher on Gramling’s team since the spring of 2020. She has spent many hours in the Conversation Lab—headphones perched on her head—listening to some of the intimate moments in the lives of patients facing the end of life. The gravity is not lost on her.

“They were definitely very difficult, heavy conversations, but it was a really enriching experience to be able to hear that vulnerability and to have the honor of being able to listen to those words,” she says.

Wong has been focused specifically on silences. When they appear in a conversation, she’s tasked with noting their presence and categorizing them based on what they signify. Two fellow researchers in the lab—Cailin Gramling and Brigitte Durieux—created a code book and a 1-3 scale to help guide the process. A “one” is an “invitational connectional silence,” where “there’s a question and [the speaker] is trying to invite a conversation,” says Wong. A “two” is an “emotional connectional silence,” characterized by a silence of a couple of seconds or more following a moment of gravity, whether it is an unfavorable diagnosis or a difficult decision point. The “three” indicates a deeper exchange that invites further dialogue.

“Immediately following an emotional connectional silence, there’s an acknowledgement of the moment of gravity. Quotes that we’d hear are: ‘That’s a lot to take in,’ or ‘Can you tell me more?,’” Wong says.

Sometimes, the work is more art than science, reliant on a team of people willing to parse slivers of a conversation—quite literally the absence of words in two- to three-second intervals—for what may be happening in that space.

“If there was ever conflict, then we’d have a group listen and determine what we thought the code was,” says Wong. “And sometimes someone would say, ‘I thought that was a moment of gravity,’ and then another coder could be like ‘Oh, I didn’t really think so.’ It was interesting to see how our different brains worked with what we identified.”

These exchanges are critical to a process that hinges on context and culture. Each member of the team brings a unique viewpoint that taken together helps to arrive at a common understanding.

“We’re just starting to publish on some important ways of developing a taxonomy of silences,” says Gramling. “What are they? And can we find them in ways that are reliable and valid and that are not overly culturally defined? Because what counts, what looks like connection in one setting, in one context, in one person’s experience, may not be in another. We have to make

sure that we’re open to all different definitions of what human connection can be.”

This summer, Wong is applying what she’s learned to the StoryListening Study, parsing the exchanges between participants and doulas for silences and other communication patterns that may help to identify moments of connection.

Silences are just one piece of the puzzle. Previous publications from Gramling and his team— dating back more than a decade—have explored a variety of language patterns in serious illness conversations. One study published in the *Journal of Pain and Symptom Management* focused on correlations between expressions of anger and clinical outcomes. Another in the *Journal of Palliative Medicine* describes a tandem human and machine coding method to identify connectional silences. Most recently, the team, led by a recent graduate of UVM’s Computer Science doctoral program, Larry Clarfeld, Ph.D., and former chair of computer science, Maggie Eppstein, Ph.D., published a paper in *PLOS One* detailing a “computational model of conversation flow in serious illness conversations,” which stands to serve as a “fundamental tool in conversational epidemiology.”

**“Immediately following an emotional connectional silence, there’s an acknowledgement of the moment of gravity. Quotes that we’d hear are: ‘That’s a lot to take in,’ or ‘Can you tell me more?’”** – ANN WONG

The Conversation Lab’s database contains over one million words of conversation—more than ten thousand minutes of patients, family members and health professionals talking—all of which has been poured over to understand what defines moments of connection. In collaboration with his brother, David, Gramling has written what is perhaps the definitive book in the field, titled *Palliative Care Conversations: Clinical and Applied Linguistic Perspectives*.

For the StoryListening Study, Gramling is excited to see how the work unfolds, leaving open the possibility for entirely new lines of inquiry to emerge.

“There’s going to be some sense of discovery,” he says. “We know we’re going to go after some things like the turn-taking, the silences, moments of human connection based on some existing definitions. But we’re also going to maintain the openness to discovery... we have to redefine what we’re looking at and make sure we can reliably find [and name these moments].”

### Finding Patterns

Donna Rizzo, Ph.D., professor in UVM’s Department of Civil and Environmental Engineering, is an expert on machine learning. She’s applied it to better understand a wealth of environmental challenges, including humanity’s impact on groundwater, the development of cyanobacteria blooms, and how soils swell and shrink. Now, she is leading efforts with Gramling’s team to apply



Donna Rizzo, Ph.D.

it to the StoryListening Study’s televideo conversations.

She also knows grief. Several years ago, she and a colleague from her department attended a talk Gramling hosted at UVM. It hit home.

“It was at a time in my life when I was the primary caretaker for three people over the age of 90, one had dementia,” she says. “Three of the people I love most in the world. And one was my mom.”

She witnessed their struggles to be heard and understood in a healthcare system that didn’t always prioritize human connection. When a doctor truly listened to them, she could see a weight lifted.

“It relieved stress,” she says. “And it preserved an amount of dignity that people should have at that age in their life.”

At the same time, Gramling was seeking specialists in complex systems to help to scale up analysis of palliative care conversations.

“I think it was just at the right time in my life,” she says. “We both ended up tracking each other down, but for very different reasons.”

Rizzo says the computational methods she’s used to tackle large-scale problems as an engineer lend themselves to understanding human connection. In both cases, patterns emerge.

“There are tools out there that are really good at identifying fear in a conversation, or sadness or happiness, or certain emotions that you can link,” she says. “But in order to train these algorithms to do a good job so that they’re not biased, you do need human coding the first time around. That’s where Bob’s data set, I think, is rather unique. I don’t think there’s another data set out there, at least associated with serious illness, that has had humans go through such a large collection of conversations and identify these connectional moments.”

As the study unfolds, she’ll be fine tuning the algorithms to assess the exchanges the team records, looking for correlations among what participants describe as meaningful and the features of those conversations.

She’s also completed UVM’s end-of-life doula certificate program and is speaking with study participants. The conversations she’s had have reinforced the healing power of storytelling. And going through the training, about six months after the death of her mother, and less than one year after the death of her aunt, brought her peace in a way she didn’t expect.

“I didn’t realize I was grieving as much as I was,” she says. “Just knowing that you’re not alone, that other people are experiencing this same kind of trauma, was comforting.”

### The Value of Storytelling

End-of-life doulas learn to pick up on the subtlest of cues to help support people through intensity, says Francesca Arnoldy, director of UVM’s certificate program.

“As a doula, I consider myself a chameleon caregiver on assessing the need and then meeting the moment,” she says.

The eight-week program has exploded in popularity in the last several years, buoyed even further by the pandemic. She says people who have been furloughed or lost their jobs have signed up, as have individuals who have reassessed what they want as they faced quarantine and death on an entirely new scale.

“There’s just been this awakening to this idea of mortality

that people can no longer ignore,” she says.

End-of-life doulas learn to help people navigate the myriad challenges the end of life brings, whether it’s the minutiae of end-of-life planning, having difficult conversations with loved ones, or dealing with grief and loss. When Arnoldy heard Gramling was launching the StoryListening Study, she knew it was an opportunity for collaboration.

“I said ‘Bob, this speaks to me. If you are able to get this off the ground at some point, I would love to talk more because I really feel like story listening is something that doulas provide. We do this very naturally.’”

Now, three end-of life-doula graduates and Arnoldy herself serve as the StoryListening interventionists, hosting video conversations with people who have lost a loved one during the pandemic.

“What I’ve seen in my sessions is that some people have a real need to celebrate the life that was lost,” says Arnoldy. “And they want to share stories about this person. Whereas other storytellers want to express deep sadness and yearnings or some of the physical manifestations of grief...And other people, it’s maybe trauma, and it’s that they had a complex relationship or a painful relationship with this person.”



Francesca Arnoldy

No matter the story, there’s value in telling it.

“Being able to tell your story to a really engaged listener who doesn’t have a vested interest in your story other than that you get a chance to tell it can be quite freeing,” Gramling says. “The expertise of being a doula is to bear witness to people’s unfolding story.”

There are implications here for physicians, nurses and healthcare professionals, says Rizzo.

“We have an insufficient understanding of what features naturally occur in conversations,” she says. “And the fact is that these things coalesce into beautiful observable patterns. If we could match those patterns to at least what the patient thinks was a good conversation, maybe we could transform the way doctors and clinicians interact with patients in the future.”

In the long-term, Gramling wants to define and delineate the value of these conversations. If the medical system can shift its approach to death and dying—and if clinicians within it can understand and foster connection—maybe more patients and their families could experience peace and comfort in the most difficult of times.

“In the context of training people to listen, which is fundamentally what we’re going after, what does it mean to listen well? How do we promote that? How do we welcome people to shape their story as it’s unfolding? A lot of the settings we study are potentially high in suffering and also high in joy. They’re high in a lot of raw human experience. And those are also times that we humans often search for meaning.” **VM**





# FOSTERING SOCIAL- CONSCIOUS CLINICIANS

Addressing Health Inequity  
Through the Vermont  
Integrated Curriculum.

By Michelle Bookless

(From left to right) Larner  
College of Medicine students  
Erik Zhang, Krisandra Kneer,  
and Tyler Harkness



Scientific advancements such as genome sequencing, mRNA vaccines and point-of-care ultrasound have saved countless lives. But new technologies are only as successful as the practitioners who use them. In order to reduce the incidence of disease and improve health outcomes, particularly in historically underserved populations, the clinicians and systems that deliver patient care must also evolve.

In an article published in May 2021 by the Association of American Medical Colleges, titled “Medical Schools Overhaul Curricula to Fight Inequities,” Stacy Weiner notes that if medical schools succeed in weaving health equity inextricably throughout their curricula, “the physician of the future will look very different.”

In 2017, Samuel Epstein, M.D., Christina Dawson, M.D., Reed Hausser, M.D., Elizabeth Lynch, M.D., and Raghav Goyal, M.D., began medical school as members of the Larner College of Medicine Class of 2021. Now, they are part of the generation of physicians Weiner referenced in her article. During their four years at Larner, they worked with faculty to incorporate social medicine and health equity education throughout Larner’s Vermont Integrated Curriculum. These curricular elements are now being formalized as the Social Medicine Curriculum (SMC).

A report by Larner faculty and medical students, recently published in *BMC Medical Education*, details the burgeoning SMC at Larner and its three core components: “(1) a strong series of related conversations regarding social medicine topics delivered in the weekly first-year, small group longitudinal discussion course [PCR]; (2) social medicine content embedded in foundational science courses [including sixteen] ethics sessions...; and (3) cross-curricular integration of social medicine content...

[including] the Social Medicine Theme of the Week...” Although progress has been made, there’s much more to be accomplished. In the report, the students identified “several major contributors to the successful design of the novel SMC at Larner,” but concluded, “This work is not done...As Audre Lorde once said, ‘revolution is not a one-time event.’” Here are some of the contributors to date:

PROFESSIONALISM, COMMUNICATION, AND REFLECTION

Since 2002, Larner’s Professionalism, Communication, and Reflection (PCR) course has served as an opportunity for pre-clinical medical students to reflect on their medical school experiences. The groups offer a non-judgmental environment with a small group of peers. By taking time for these reflections, says PCR Course Director and Associate Professor of Family Medicine Stephen Berns, M.D., “students learn how to develop skills in active listening, vulnerability, and how to seek support.”

Over the years, PCR has evolved with invaluable guidance from former course directors such as Yvette Pigeon, Ed.D., Dana Walrath, Ph.D., Lee Rosen, Ph.D., and Shaden Eldakar-Hein, M.D. It was Eldakar-Hein who worked with Goyal, Epstein, Dawson, Brach, and Finnie to initially link social determinants of health topics more clearly with PCR sessions. Now, this work is in the midst of its next evolutionary leap with Berns at the helm.

In January 2020, Berns became PCR course director, and in the middle of a pandemic that brought the broken pieces of the American health care system into full view, he seized on the theme of structural change and began to reconfigure PCR once again.

PCR is now delivered in five modules. “Becoming a Physician,” “Humanity,” and “Society and Medicine” are taught during the

first year; “Advocacy and Social Justice” is addressed during the second year; and during their third year, students engage in the final module—“The Medical Culture and Resilience.”

In the first three modules, students explore topics like self-identity, the burden of individual trauma, and the concept of implicit bias. As they enter the second year, Berns and course professors focus primarily on advocacy, asking the students to consider questions such as “What is a physician’s role as an advocate—for their patients, their colleagues, and their communities?” and “Why should or shouldn’t social justice be taught in medical school?”

During their third year, the final PCR module challenges students to find their meaning in medicine. They learn how to approach situations of moral distress and investigate the “hidden curriculum,” which encompasses the “implicit messages about values, norms and attitudes” that students learn outside of the classroom, says Berns.

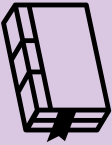
As he continues to evolve PCR, Berns says he’s committed to increased training for faculty. “A lot of medical school faculty around the country have recognized their own shortcomings in the areas of social justice and health equity. We’re hearing them say, ‘This isn’t an area I got trained on when I was in medical school,’ and ‘I want to learn more,’” he says. “I appreciate that Larner faculty are open, eager, and curious to learn.”

“WHAT IS A PHYSICIAN’S ROLE AS AN ADVOCATE—FOR THEIR PATIENTS, THEIR COLLEAGUES, AND THEIR COMMUNITIES?”  
—STEPHEN BERNs, M.D.



MEDICAL ETHICS  
Undoing historical injustices hinges in part on open, honest discussion about the historical and cultural roots of injustice, says Timothy Lahey, M.D., M.M.Sc., professor of medicine and director →

ENVISIONING A MORE EQUITABLE WORLD:  
THE SOCIAL JUSTICE COALITION BOOK CLUB

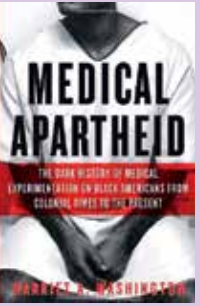


The Social Justice Coalition (SJC) Book Club began as a small group of medical students in the Class of 2021 meeting to discuss historic and current injustices in health care and medicine spurred by texts such as *Witches, Midwives, and Nurses* by Barbara Ehrenreich, *Susan Sontag’s Illness as a Metaphor*, *Coal* by Audre Lorde, and Mary Beard’s *Women and Power*. After a brief hiatus, the book club resumed last summer (virtually via Zoom), as the COVID-19 pandemic and the death of George Floyd highlighted the continued racial disparities and health inequities in the U.S. This time, the group welcomed faculty, staff, and graduate students. Its goal? “Through the reading and discussion of texts that

challenge our perceptions, we are able to envision a more just and equitable world,” says Richard Brach ’22. “This, in turn, informs our work in continuing to name and combat the racism and structural violence around us.” Through thoughtfully curated discussion guides and a combination of large group discussions and small break-out rooms, club members share ideas and take a deep dive into each book. In the future, members hope to incorporate additional forms of media such as documentaries, poems, and podcasts onto their “bookshelf.” All faculty, staff, medical, graduate students, and alumni of the College are welcome to join. Here are a few of the books the club has discussed.



THE FIRE NEXT TIME  
BY JAMES BALDWIN  
Review by Erik Zhang ’24  
“Do I really want to be integrated into a burning house?” author James Baldwin demands in this reflection on his experience with organized religion, the individual and collective Black American experience, and the nature of justice and injustice. Caught between his own non-violent vision for Black liberation and a growing militant Black Power movement, Baldwin wrestles with the paradoxical position of strength and weakness held by the Black community in the context of white supremacy. Providing a unique perspective into the thoughts and experiences of one of America’s greatest writers and orators, *The Fire Next Time* serves as a key introduction for readers who are interested in understanding the dynamics fueling liberation movements of the mid-twentieth century.



MEDICAL APARTHEID  
BY HARRIET A. WASHINGTON  
Review by Simran Kalsi ’24  
In *Medical Apartheid*, medical ethicist Harriet A. Washington describes how an extensive history of abusive medical practices against Black Americans contributes to skepticism and distrust of the medical establishment. In explicit detail, Washington describes the persistence of racism in health care from James Marion Sims’ mistreatment of Black women in the 1800s to modern day clinical trials and surgical technology through which Black Americans are still harmed. Washington highlights the intersectionality of race, gender, and socioeconomic status. As readers, we must reckon with contextualizing our current medical practices built upon a foundation of “scientific racism.” For current and future health care professionals and researchers, *Medical Apartheid* is essential reading to begin to understand the history of the current racial health gap in the U.S. From this foundation, we can continue to educate ourselves and take action to rebuild trust.





**"IF PEOPLE ARE FEELING UNDER-FIRE, UNDER-APPRECIATED, AND SLEEP-DEPRIVED, WE KNOW THAT THEY ARE MUCH MORE LIKELY TO DO SOMETHING UNETHICAL."**

– TIMOTHY LAHEY, M.D, M.M.SC.

of clinical ethics at UVM Medical Center. Giving medical students the opportunity to have those conversations early and often fosters an awareness that stands to help change the system.

"Understanding the social determinants of health and the incentives and history that inform them can help us identify real tools for change," he says. "That can convert a will to fairness into a

concrete plan that in fact yields it."

Lahey seeks to foster open discussion about the social determinants of health and other ethics topics through 16 ethics sessions woven throughout the first-year Foundations of Clinical Science course. These sessions complement multiple other ways medical students can learn about social justice at Lerner, from the student-run Social Medicine Theme of the Week to social justice-related sessions throughout the pre-clinical curriculum.

The weekly ethics sessions consist of pre-reading and a quiz, followed by in-class discussion. Lahey frequently links the sessions to current events, encouraging students to apply their understanding of medical ethics to an ever-changing world. For instance, during the height of the COVID-19 pandemic in the United States, Lahey added a session on resilience.

"I wanted the students to see how resilience relates intimately to ethics," he says. "If people are feeling under fire, under-appreciated, and sleep-deprived, we know that they are much more likely to do something unethical."

Medical ethics is tightly tied to health equity work, says Lahey. "Ethics helps equity work have nuance by showing the full set of complex values that inform and even transcend justice. That guards against the human temptation to approach any value, including the value of fairness, too simplistically," he says.

## SOCIAL MEDICINE THEME OF THE WEEK

"Our current system is excellently equipped to deal with a faceless collection of symptoms," says Erik Zhang '24, "but once we begin layering in the interacting components of race, gender, mental health, language, and weight, to name a few of the big categories, in addition to the connotations and stigmas carried by each one, we lose the ability to appropriately address the issues being presented."

It's this understanding that motivated five Lerner students to create the Social Justice Coalition in 2017. This group helped to drive creation of the formalized social medicine curriculum, which was piloted during the 2018-19 academic year. After its founding by Epstein, Dawson, Hausser, Goyal and Lynch, the social medicine curriculum continued to evolve with involvement from Class of 2022 medical students Richard Brach, Sheridan Finnie, and Nikkole Turgeon, Class of 2023's Krisandra Kneer, and most recently, Class of 2024's Erik Zhang and Tyler Harkness.

Within the social medicine curriculum, the student-driven Social Medicine Theme of the Week (SMTW) weaves discussions of social determinants of health throughout all courses. SMTW themes are based on the seven learning objectives of the social medicine curriculum, including topics like appraisal of the intersection of social determinants with marginalized populations' histories, perspectives, and experiences; synthesis of the United States' role in the "global health narrative;" and tools and strategies to advocate for lasting social change.

Themes align with relevant content taught during the pre-

**SMTW WEAVES DISCUSSIONS OF SOCIAL DETERMINANTS OF HEALTH THROUGHOUT ALL COURSES.**

clinical foundational science courses and PCR. Examples include "The Genetic Basis of Race," presented during the Foundations of Clinical Sciences course, when students learn about genetics and "Housing and Water," during the Attacks and Defenses course, in which students learn about toxicology.

Although SMTW has helped raise student awareness of social determinants of health and their impact on health outcomes, the team has created a survey to gauge the level of success so far and guide further improvements to the curriculum. According to the paper that Goyal, Dawson, Epstein, Brach, and Finnie published, future goals include further integration of SMTW into pre-clinical and clinical training, faculty training, and assessment through student reflection and patient outcomes.

"Today's system dedicates huge amounts of money, resources, and brain power to cutting-edge technology and medications, often at the expense of ground-level, socially-minded patient care," says Harkness. "Things are

changing, especially at Lerner, but there needs to be a more deliberate shift in mindset for the 'physicians of tomorrow.'" VM



READ BLOG POSTS WRITTEN BY MEMBERS OF THE SOCIAL JUSTICE COALITION AND A RESEARCH PAPER ABOUT THE COLLEGE'S SOCIAL JUSTICE CURRICULUM PUBLISHED IN BMC MEDICAL EDUCATION: [MED.UVM.EDU/VTMEDICINE/WEB-EXTRAS](https://med.uvm.edu/vtmedicine/web-extras)



## PATHOLOGIES OF POWER: HEALTH, HUMAN RIGHTS, AND THE NEW WAR ON THE POOR

BY PAUL FARMER

Review by Richard Brach '22

Paul Farmer's *Pathologies of Power: Health, Human Rights, and the New War on the Poor* draws connections between

today's unprecedented levels of wealth and the exploitation of the poor. While wealthy countries revel in the advances of modern science and globalization, the global poor suffer from human rights violations and die from preventable diseases that cost less than \$2 per day to treat. Farmer labels our ignorance "a stain on the conscience of modern medicine and science," and emphasizes the importance of addressing the structural violence around us.

This book is an essential read for responsible healthcare professionals and should be required reading for anyone interested in global health and health equity.



## HEALING RESISTANCE: A RADICALLY DIFFERENT RESPONSE TO HARM

BY KAZU HAGA

Reviewed by Nikkole Turgeon '22

*Healing Resistance* details author Kazu Haga's life and training in the nonviolent legacy of Dr. Martin Luther

King Jr. Haga encourages the reader to envision a path towards the "Beloved Community" Dr. King described by explaining the Six Principles of Nonviolence and how readers can take steps to incorporate them into their lives.

This book should be required reading for everyone as it provides context and a framework for Kingian principles, which have historically been whitewashed and often eliminated from traditional teaching about Dr. King.



## WHERE DO WE GO FROM HERE: CHAOS OR COMMUNITY?

BY DR. MARTIN LUTHER KING JR.

Review by Mahima Poreddy '24

Dr. Martin Luther King Jr. dreamt of "creative dissenters" across different races who strive for racial equity and abolish poverty. *Where Do We Go From Here: Chaos or Community* expresses Dr.

King's revolutionary opposition against wealth inequality, the Vietnam War, and capitalism. His writing also explores the challenges of being a Black man: "To be a Negro in America is often to hope against hope. It means fighting daily a double battle—a battle against pathology within and a battle against oppression without." *Where Do We Go From Here* offers a potent reminder of how ideas like alleviating poverty through providing a universal basic income have been discussed and studied for decades.

For all those who strive for racial and health equity, the words of Dr. King that are often ignored by the mainstream media serve as a guide for anti-racist work today.



## RED AT THE BONE

BY JACQUELINE WOODSON

Reviewed by Erik Zhang '24

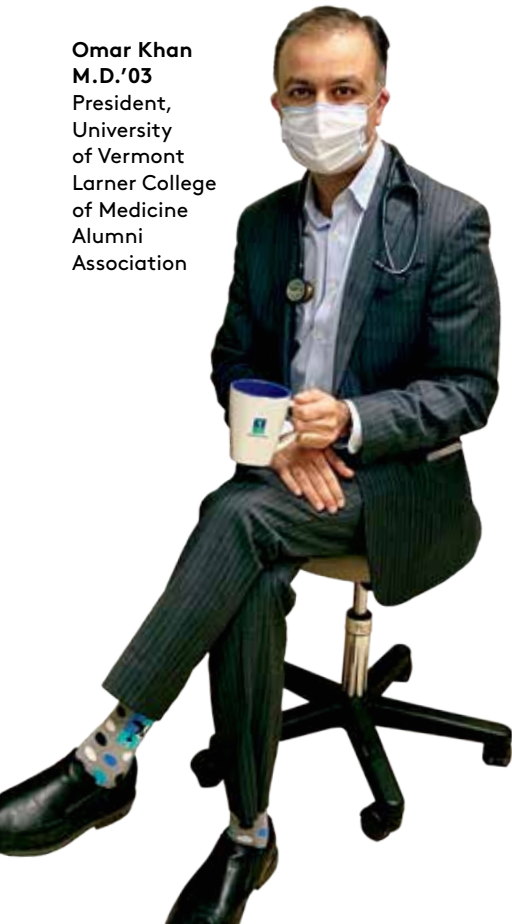
Jacqueline Woodson's multigenerational saga, *Red at the Bone*, is filled to the brim with poignant moments evoking both hope and despair. An ensemble of characters commands an empathetic response from any reader. Built on a

scaffolding of a shared historical trauma, Woodson opens an inquiry into the most salient questions of class, gender, race, queerness, and institutions.

Readers will find in *Red at the Bone* a deep exploration of the many facets of the Black American experience accessible only through fiction, unavailable through testimony and educational material alone.



Omar Khan  
M.D.'03  
President,  
University  
of Vermont  
Larner College  
of Medicine  
Alumni  
Association



## UVM LARNER COLLEGE OF MEDICINE ALUMNI ASSOCIATION

### Alumni Executive Committee

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Seth Dorsky, M.D.'10 (2020-2026)  
Janice M. Gallant, M.D.'89 (2021-2027)  
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Suzanne R. Parker, M.D.'73 (2016-2022)  
Heidi K. Schumacher, M.D.'10 (2021-2027)  
Pramila R. Yadav, M.D.'99 (2021-2027)

##### EX OFFICIO MEMBERS

Richard L. Page, M.D., Dean  
Ginger Lubkowitz, UVM Foundation

As we continue to navigate the ever-changing face of the COVID-19 pandemic, I find myself reflecting on how important it is to have a team of people to rely on—whether that is in a healthcare setting, in a family, or through a network of friends. At the UVM Larner College of Medicine, we are thrilled to celebrate, through the Alumni Association Awards, an outstanding group of alums who have gone above and beyond to support the College, their community, and the broader field of medicine. From innovative research to volunteer work to years of service to patients, they have all put their heart and soul into the work that they do.

Our 2021 A. Bradley Soule Award winner, Dr. Betsy Sussman, exemplifies this dedication to service over the past three decades. She has a storied history as a superb mentor for new radiologists; the five teaching awards she's received speak to the impact she has had on students and residents. Dr. Sussman was recently awarded fellowship in the American College of Radiology, one of the highest honors bestowed on a radiologist, and a fitting tribute to her influence at the national level. She also has a family connection to the College: Her uncle, Ralph Sussman, M.D.'38, was a founding member of the MAA. Read more in this issue about Dr. Sussman and all of our 2021 MAA award winners. See their full bios at: [med.uvm.edu/alumni](http://med.uvm.edu/alumni).

*It's never too early to start thinking about fellow alums you'd like the College to consider for the 2022 awards! Visit: [med.uvm.edu/alumni](http://med.uvm.edu/alumni) to submit your nominations.*

Also in this issue of *Vermont Medicine*, we celebrate the life and legacy of one of our most treasured alums, past A. Bradley Soule Award winner Dr. Jackie Noonan. A 1954 graduate, she passed away in July of 2020. Not only did she transform the field of pediatric cardiology—she discovered a rare congenital heart condition known as the Noonan Syndrome—she selflessly gave time and energy to the College by serving on the Alumni Executive Committee for many years. I will always remember meeting her at Larner reunions. She was gentle, gracious, and insightful. Dr. Noonan chose to give back to her medical alma mater through a generous estate gift, which is helping the College to recruit the best and brightest new faculty and realize important strategic priorities.

Lastly, as the details of Medical Reunion are still being worked out, I am pleased to let you know that it will be **hosted live and in-person** on campus this fall! (How long have we waited to see those words?) Mark your calendars now for October 8-9, 2021. Stay tuned for additional information while we continue to fine-tune the weekend, to meet the changing needs of our environment—we consider it creativity born of crisis!

As always, I look forward to connecting with alums from across the years. I am proud to serve with you as a fellow physician, helping advance our science and craft through improved health for all we serve. Stay well, and I look forward to seeing you very soon!

*Omar Khan*

✉ [medalumni.relations@med.uvm.edu](mailto:medalumni.relations@med.uvm.edu)  
🐦 @HomerKahn

### PRESIDENT'S CORNER

### CLASS NOTES

Share your news or updated contact information at [go.uvm.edu/infoupdate](http://go.uvm.edu/infoupdate), or contact your class agent, or the Larner Development & Alumni Relations office at [medalumni.relations@med.uvm.edu](mailto:medalumni.relations@med.uvm.edu) or (802) 656-4014.

## Submit Class Notes Online

The UVM Alumni Association now offers an easy-to-use online form to submit class notes. You can also browse class notes by year, school or college, or note type.

Submit your class note and read more from classmates:

[go.uvm.edu/medclassnotes](http://go.uvm.edu/medclassnotes)

## 1950s

REUNION 2021: 1951 + 1956

'52 **Arthur Kunin** writes: "Few of us are left, but we still celebrate our years at UVM. There are changes in classrooms, but the enthusiasm of present students is heartwarming and unmistakable."

## 1960s

REUNION 2021: 1961 + 1966

'63 **Arnie Kerzner**, child psychiatrist, continues to love his work, and currently is a consulting psychiatrist at the Lighthouse School, interviewing children, supervising residents, and meeting with parents. At times, he consults with his daughter, Leslie Kerzner, M.D.'85, oncologist at MGH. For R'n'R and lobster, they retreat to their cottage in Cape Elizabeth, Maine. Arnie received the Distinguished Senior Fellow Award from the American Academy of Child and Adolescent Psychiatry. He would love to hear from his UVM buddies, as med school was "one fantastic experience."

'63 **Ronald Nadel** writes: "I retired in December 2020. I now spend about six months of the year in Boca Raton, Florida, and the residual time in my home in Longmeadow, Massachusetts. I continue to enjoy golfing, gardening, cooking, and reading."

'64 **Anthony Belmont** writes: "Linda and I have spent the year of the pandemic hunkered down here on the Maine coast—a very nice place to hunker down. Although we both have escaped COVID, clinical problems have occurred. Plans for elective knee surgery were postponed when new onset angina prompted a CABG last March from which I am recovering uneventfully, but my knee still hurts. A bumper crop of tourists is expected this summer and support staff from overseas will not be available, so classmates in the Wiscasset area are welcome to drop by our little house by the sea."

'64 **Lester Wurtele** writes: "Retired from practice of radiology in 2009 after nearly 39 years. Did some consultation for an insurance company for three years. Married to Irma 58+ yrs. Have three

wonderful children and five terrific grandchildren. Have traveled. Still enjoy tennis and spending winters in Florida."

'65 **Jamie Jacobs** and **Jean Pillsbury Jacobs** (UVM '62) remain in Lexington, Kentucky. They moved from a three-level home to a one-level home on the other side of town and love the new place. Since March, they've hunkered down, leaving only for their granddaughter's wedding in Cleveland, Ohio, in October. Thank goodness for golf this summer, allowing them to get out of the house three days a week and be safe. Jamie shares, "Like most of you, we had to cancel trips. It was two to Argentina, and one each to Russia, Scandinavia, Canada, and Colorado. I'm starting to reschedule some of these as I write. I hope this finds all of you safe and well. Best of everything to all in 2021, which won't have to work very hard to be better than 2020."

'66 **Jeremy Alperin** says: "Still living in Dallas... recently moved to Independent Living Facility. My son now lives in London and daughter moved to Dallas."

# Thank Moooo Again!

LARGEST NUMBER OF  
DONORS IN A CLASS

Class of  
1991



LARGEST AMOUNT  
RAISED BY A CLASS

Class of  
1957

NUMBER OF YOUNG  
ALUMNI DONORS

95

NUMBER OF FIRST  
TIME DONORS

45

## Match Challenge Reaches 700 Donors

The 2021 Match Challenge had a lofty goal of reaching 500 donors from late February through Match Day. Thanks to the generosity of our loyal alumni, parents, faculty, staff, and friends, the Challenge exceeded that number well ahead of Match Day, reaching over 700 donors by its completion! Hundreds of donors are proudly wearing their limited

edition Dr. Moo socks as a thank you for their participation. Although the Match Challenge is complete, there is always a reason to give—today's students and researchers! Gifts of ANY size make a difference in student success. In addition, each alumni gift increases our alumni participation, an important indicator of alumni support.

To make your gift, please visit <http://go.uvm.edu/givemed> today.



**'66 Robert G. Sellig** writes: “I have been retired fully for 10 years now. Sara and I still live where we have been for the last 31 years, but we may move soon. It has been interesting to see the changes in the last few years. I have been a class agent for over 50 years and think that is enough.”

**'67 Jeffrey Black** says: “We are all well. My wife, Terry, is head of senior services for Lafayette, Calif. We have five grandchildren who are a delight.”

1970s

REUNION 2021: 1971 + 1976

**'70 Philip Buttaravoli** writes: “After retiring from clinical practice at the beginning of the pandemic last year I began working with the emergency physician staff at the UVM Medical Center to complete the fourth edition of our medical textbook, *Minor Emergencies*. In addition, after working for the past several years with Kalev Freeman, M.D., Ph.D., associate professor of surgery and pharmacology at UVM, the research on a device that I developed has been published in the *Journal of the American College of Emergency Physicians Open*. The research is titled ‘An oropharyngeal device for airway management of conscious and semiconscious patients: A randomized clinical trial.’ As an aside, Jenny Stanley and I just bought a 22’ Bay cruiser together that we will be exploring the Chesapeake Bay in over the next several summers :-).”

**'72 Phillip Canfield** shares a note after seeing a picture of Science Hall where he proudly spent many hours during all four years as an undergraduate. He writes, “I remember looking out of top windows towards Lake Champlain on almost always cold days. I remember as a freshman undergrad looking over from fourth floor of Converse Hall towards Mount Mansfield and the medical complex.” After four years, he got “the coveted acceptance” to the UVM medical class of 1972. Phillip will never forget his teachers and classmates who cared for him in times of dismay and gave him the best medical fund of knowledge that served him for 45 years of medical practice. Phillip retired in 2017 and sends blessings to all.

**'73 Jim Betts** shares the following note: “As I pen this in mid-January, the post-holiday surge of the pandemic is on the rise. There is a vaccine, and distribution here in California is gradually increasing. I’m sure all of you are having the same challenges. Hopefully, by the time you read this, there will be many(!) millions who have received their doses, and we can be on the mend as a country, both medically and politically. I’m so impressed with our university as UVM has adapted to both a virtual and on-campus format to educate our student learners. Contributions to UVM through our Foundation have been challenged this past year. Everyone’s finances have been impacted. The students, faculty, and all facets of UVM’s operation depend on charitable gifts. In these extraordinary times, I encourage everyone to send whatever is possible to support the university, which provided us an outstanding education. Although our 55th is still a few years away, I’ll look forward to being on campus with everyone. Stay well!”

**'75 David Morin** says: “38 wonderful years in general pediatrics, now retired. Six grandchildren all living within 10 minutes.”

**'75 Charles Norris Jr.** writes: “I finally retired after 46 years. At 72 years old I finally get to take it easy in the morning. I can read, be creative and get in better physical shape. The last couple of years were challenging with death of a partner, dealing with the pandemic and a sudden switch to telehealth. I do not envy the younger docs as they move forward with government regulation, interference from insurance and the politics of who gets to call themselves a doctor without time spent in medical school. I am continuing to teach at local medical school and enjoy the interaction with the students.”

**'75 Lorraine Parent Racusen** has received the 2021 Robert H. Heptinstall Lifetime Achievement Award from the International Renal Pathology Society. She is an emerita professor at the Johns Hopkins University School of Medicine, where she did her residency in pathology, fellowship in renal pathology, and served on the faculty for over 30 years. She and her husband, Richard Racusen (PhD ’75), divide their time between their home in Maryland and a family home on Lake Champlain, with occasional visits to children and grandchildren in California.

UVM CONTINUING MEDICAL AND INTERPROFESSIONAL EDUCATION

PRIMARY CARE SPORTS MEDICINE

September 16, 2021

Virtual Streaming Only

WILDERNESS MEDICINE

September 17, 2021

Sugarbush Resort  
Warren, VT

WOMEN’S HEALTH & CANCER CONFERENCE

October 1, 2021

Virtual Streaming Only

DERMATOLOGY UPDATE FOR PRIMARY CARE

October 7-8, 2021

Doubletree by Hilton  
Burlington, VT

PRIMARY CARE BEHAVIORAL HEALTH INTEGRATION

October 21-22, 2021

Virtual Streaming Only

NEUROLOGY FOR THE NON-NEUROLOGIST

October 22, 2021

DoubleTree  
Portland, ME

NORTHERN NEW ENGLAND NEUROLOGICAL SOCIETY ANNUAL MEETING

October 22-23, 2021

DoubleTree  
Portland, ME

ANY ON-CAMPUS EVENTS IN THE NEAR FUTURE MAY BE SUBJECT TO CHANGE DUE TO COVID-19 PRECAUTIONS.

For Information Contact:

UNIVERSITY OF VERMONT CONTINUING MEDICAL AND INTERPROFESSIONAL EDUCATION

401 Water Tower Circle, Suite 102 • Colchester, VT 05446

(802) 656-2292 • UVMCMIE@med.uvm.edu • med.uvm.edu/cmie

**'77 Mark Novotny** writes: “Been in practice now for 40 years! Twenty in primary care, 20 in hospital medicine, and overlapping 15 years in various leadership positions. Now winding down as part-time hospitalist. Still camping every year with Michael Polifka (Class of 78). Kids all grown, three in Vermont and one in Chicago, and two adorable grandchildren living in Stowe. My wife Sandi and I look forward to venturing out with hiking and travel again this year.”

**'77 Mark Popovsky** says: “My daughter is now a professor of pediatrics at Northwestern. My medical device start-up is about to enter first-in-human trials of a product—if successful—will save 40,000 lives a year in the U.S. alone.”

**'78 John Alexander** says: “My wife and I retired at the end of March 2021. It is very freeing.”

**'78 Michael Hermans** writes: “I made the decision to fully retire in February 2021 due to lingering issues after contracting COVID in Scotland in March 2020. When my residents told me I was not the same energetic and peppy Dr. Hermans, I knew it was time to stop practicing. I have issues with fatigue, insomnia, nightmares, irritable bowel, dyspnea on exertion and ‘brain fog.’ I have had a wonderful career in urology, being able to retire from the United States Army Medical Corps, Scott and White Health Care System, and the Veterans Administration. Fellow 1978 classmate Roy Kaplan has been a tremendous supporter throughout this time. Thanks again Roy. I would love to hear from my classmates at michaelhermans6@gmail.com.”

**'79 Thomas Boduch** says: “I’m still in solo private practice in Kingston, Tenn., and serving as our county’s medical examiner. I’ve just released my fifth album of solo piano music (available on iTunes).”

**'79 David Cohen** writes: “Working now at a NYS Mass Vaccination Site, otherwise, partially retired. My husband, Alan, and I are looking forward to our new home in Burlington for 2022! Presently, loving being so close to our second grandchild!”

1980s

REUNION 2021: 1981 + 1986

**'80 Susan Burroughs** says: “Happy to have moved back to Vermont during the pandemic after retiring in 2019. Enjoying volunteering in the Medical Reserve Corps with Becky Foulk. Neither of us have aged a day!”

**'81 Andrew Weber** says: “Looking forward to reunion, hopefully in person. I am practicing golf game, so Bruce—watch out!”

**'82 Ronald Blatt** writes: “Hi everyone. Still living in New Canaan, Connecticut, with a second home in Naples, Florida. My office is The Manhattan Center for Vaginal Surgery. I specialize in cosmetic genital surgery. Hope you are all well.”

**'82 David Wlody** writes: “Just finished my third year as chair of the Department of Anesthesiology at SUNY Downstate. So if the average chair serves a little more than five years, I’m on the glide path to obsolescence. I’m sure each of us were affected by COVID-19 but my hospital was hit earlier and arguably harder than most other places. We were declared a COVID-only hospital by New York State and at one point we had close to 60 patients on vents and a dozen deaths a day. But our staff, especially my residents, did an amazing job, sometimes at significant personal risk. I’m really proud of them. Looking forward to 2022 and our 40th reunion.”

**'83 Robert Quimby** retired from primary care medicine on December 29, 2019.

**'84 Susan Pories** writes: “I am the director of the Hoffman Breast Center and associate chair for Academic Affairs for the Department of Surgery at Mount Auburn Hospital in Cambridge, Massachusetts. I am also associate co-director of the Arts

and Humanities Initiative at Harvard Medical School. It has been a joy to connect with physician writers and artists who bring their passion for the arts to medical education.”

**'87 David Zuckerberg** says: “Currently working as an EM physician at Northern Westchester Hospital as well as director of our observation unit. My oldest kid, Jules, is a freelance illustrator living in Providence and I am excited that our youngest, Gabe, is moving to Providence to start a Ph.D. in musicology and ethnomusicology at Brown. My wife, Elisa, and I enjoy cycling together and have nearly perfected the at-home quarantine pizza and spend some free time volunteering at the Westchester County Center giving COVID-19 vaccinations.”

**'88 Therese K. White** was hired as the director of the breast care center at Central Maine Healthcare Oncology Institute. She joins them from her most recent position as president of Plastic and Hand Surgical Associates in South Portland, Maine.

1990s

REUNION 2021: 1991 + 1996

**'81** As of December 2020, **Rich Russell** has joined classmate Dawna Eastman-Gallo in the Retire and Play Tennis Program in Boulder, Colo. Looking forward to Reunion!

**'92 Jennifer Woodson** writes: “**Peter Woodson, M.D.**, is doing his twilight tour with the U.S. Navy in Naples, Italy. We moved here amidst COVID-19, which caused some hiccups. I am trying to navigate being medical director remotely for a non-profit that serves men and women who find themselves with potential unplanned pregnancies and STD risks. The youngest of four kids is still at home, so the nest is getting smaller! We live in the heart of downtown Naples and have a guest bedroom! Once it is safe for Americans to travel, feel free to email and visit!”

**'95 Leslie Kerzner** writes: “So happy to see so many at the Zoom reunion. So impressed with what everyone is doing and how many made charitable donations this year! Lots going on around here—Elana is a junior at UVM and hoping to go to medical school! Adriana just gave word she will be going to Florida State to study nutrition science and how it relates

to medical illnesses! I am still at MGH, running the NICU developmental follow-up program and working with mother/baby dyads affected by opioid use disorder. Also, I am engaged to be married to a cute Coloradian, Mike O’Neal (yes, that means he is a Broncos fan!) He brings two teenage boys and an adorable golden retriever.”

**'96 Jules Duval** has been promoted to chief medical officer having primary responsibility for managing the health and wellness of World Bank Staff. In this capacity Jules leads a global team of doctors and nurses working in several international locations implementing multidisciplinary regional Hubs in Senegal, Kenya, Bulgaria, India, and Singapore. He also provides COVID-19 guidance and support to senior leaders, managers, and staff of the World Bank Group and International Monetary Fund working in over 140 country office locations across the globe.

**'96 Anders Holm** was voted a Top Doctor in otolaryngology in New Hampshire for 2021 by *New Hampshire Magazine*.

**'97 Steven Battaglia** writes: “My practice in Pasadena has matured, with the addition of two new partners. I enjoy hiking in the San Gabriel mountains and occasionally surfing near Huntington Beach. I look forward to the UVM Class of 1997 class gathering in Reno-Tahoe.”

2000s

REUNION 2021: 2001 + 2006

**'01 Jennifer Majersik** was accepted as a Distinguished Chair of Health in the Fulbright Scholars Program, an international education exchange program funded through the U.S. State Department. Her host institution is the University of Newcastle, Australia, and her research work will focus on using telestroke networks for clinical trials enrollment and follow-up across large distances. The program is on hold due to the pandemic but she hopes to go with her family in early 2022—just one more reason to get this pandemic over with!

**'01 Elizabeth Welch Marsh** writes: “The Welch Marsh family is spending a year in New Zealand. We arrived mid-January, and I am working for a District Health Board in Gisborne. So far we have had a

wonderful experience learning about NZ, its national health service, and all of its amazing outdoor places.”

**'03 Emily Hannon** writes: “In June 2020, I moved from my job at Duke as medical director of the Newborn Nursery to join an independent pediatric group in Cary, N.C. I love connecting with patients and the increased flexibility has allowed me to get more involved with my state chapter of the AAP and my role as AAP Chapter Breastfeeding Coordinator for North Carolina. I am excited to have been elected to serve on the executive committee of the national AAP Section on Breastfeeding starting Nov 2021. My three kids are loving North Carolina with lots of playtime and trips to the beach.”

**'04 Priti Patel** has been appointed chief medical officer at Neoleukin Therapeutics. Dr. Patel joins Neoleukin Therapeutics after working at AstraZeneca as vice president, head of hematology, clinical development since 2019.

**'04 Rachel B. DiSanto** has joined Statesville Family Practice in Statesville, N.C., which is part of the Iredell Physician Network. She has served on multiple boards, including the Christian Medical & Dental Associations, North Country Hospital, United Christian Academy and Kenya Children’s Fund. She served as the COVID coordinator for United Christian Academy in Newport, Vt.

2010s

REUNION 2021: 2016

**'10** Congrats to **Joe Pare** for receiving the Academy of Emergency Ultrasound (AEUS) Rising Star in Research Award! It recognizes an early career attending physician (less than five years since completing fellowship) who has demonstrated commitment to the field of emergency ultrasound and to SAEM and AEUS through education on a local, regional, and national scale.

2020s

**'20 Scott Mitchell** says: “Very happy out here in Indianapolis for my residency! If anyone’s ever traveling through Indianapolis please let me know and will try to hang out or I can host you!”

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UVM LARNER COLLEGE OF MEDICINE 29

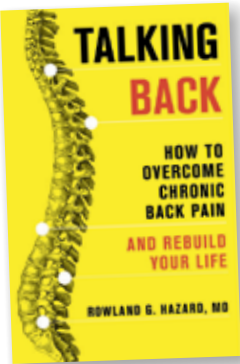


Morrison Appointed Director of Major Gifts

**Mark Morrison** joined the UVM Foundation and the Larner College of Medicine as the director of major gifts on June 1. Mr. Morrison comes to UVM with a notable background in development, having most recently served as the director for development at



the Virginia Tech Carilion School of Medicine in Roanoke, Virginia for the last four years. Prior to that had an eight-year tenure as the vice president of development at HumanKind in Lynchburg, Virginia. Mr. Morrison also has an extensive background in journalism. He will be responsible for securing philanthropic support of initiatives and priorities at the College.



Alum’s Book Focuses on Managing Chronic Back Pain

**Rowland G. Hazard, M.D. ’78**, emeritus professor of orthopedics at the Geisel School of Medicine at Dartmouth, has published a new book, titled *Talking Back*. Published by Rowman and Littlefield, the book “brings the reader into the classroom with people disabled by chronic back pain to experience the insights and lessons that have helped thousands of them to regain the physical and emotional capacities to resume productive lives and wellness.” Hazard has devoted his over 30-year clinical and research careers to the understanding and care of people who are disabled by chronic low back pain. He has been a pioneer in the field of rehabilitation, and he is internationally known for developing the goal achievement model for overcoming painful disability.



(L to R): Jaesung Sim, Ji Jeon, Young Bo Sim

*In this ongoing series, Vermont Medicine shares a note of thanks from a student for the support they’ve received from alumni. Young Bo Sim ’23 sends his gratitude for the Dahl-Salem Family Endowed Scholarship. He also received the Dwight C. Deyette Scholarship:*

Dear Dr. Dahl,

I hope you are staying safe and healthy during these uncertain times. I want to take this opportunity to sincerely thank you for your kind gift that has contributed to my education at LCOM. Although medical school has come with its own challenges, I constantly reflect on the privilege I have as a medical student, let alone receiving a scholarship that has greatly lessened the financial burden that comes with medical education. Your generosity has allowed me to receive education at a school where I can say I am truly happy and am surrounded by other compassionate and aspiring physicians under the supervision of wonderful faculty. Although the delivery of the curriculum has changed given the unique circumstances of COVID, words cannot adequately describe how grateful I am for your generosity. I simply hope to follow in your example and pay the generosity forward to the next generations of aspiring physicians. I have also attached one of the photos from white coat last year as it reflected one of the biggest moments so far in my education. Thank you once again.

Best,  
Young Bo Sim  
LCOM Class of 2023

To support students like Young, visit  
[go.uvm.edu/givemed](https://go.uvm.edu/givemed)

ALUMNI LEAD THE WAY FOR FIRESTONE CAMPAIGN



A group of dedicated Larner College of Medicine alums are playing pivotal roles in the development of the new Firestone Medical Research Building, a 62,500-square-foot, four-story structure set to open in the fall of 2022. The building, which will accommodate over 200 faculty, post-doctoral fellows, staff, and students, will feature cutting-edge modular facilities to improve efficiency and

help interdisciplinary teams of researchers collaborate more effectively. **David Reines, M.D. ’72**, is serving as chair of the Campaign Committee, a 13-member group tasked with leading fundraising efforts and sharing news about the project with alums and community members. **Steve Firestone, M.D. ’69**, serves as honorary co-chair. He provided the lead gift for the new building, which is to be named **Dr. Frederick and Mrs. Bobbie Firestone Medical Research Building** in honor of his parents. Alums from across the class years have volunteered to serve on the committee.

Committee members include:

**Ray Anton, M.D. ’70, James Betts, M.D. ’73, Marilyn Cipolla, Ph.D. ’97, Mary Evslin, Arnold Goran, M.D. ’58, James Hebert, M.D. ’77, Frank Ittleman, M.D., Jeffery Lawson, M.D. ’90, Ph.D. ’92, Jennifer Lawson, M.D. ’90, Karen Meyer ’70, John Persing, M.D. ’74, Claudia Serwer ’67.**

For more information on the project, visit:

[med.uvm.edu/FirestoneBuilding](https://med.uvm.edu/FirestoneBuilding)

For more information about giving opportunities, contact:

Manon O’Connor, associate vice president, major gifts, at [Manon.Oconnor@uvmhealth.org](mailto:Manon.Oconnor@uvmhealth.org) or (802) 734-0711

FRIETZE NAMED GREEN AND GOLD PROFESSOR



On May 6, 2021, **Seth Frieze, Ph.D.**, associate professor of medical laboratory science in the College of Nursing and Health Sciences, was invested as the inaugural **Dr. Ronald W. Pero International Research Green and Gold Professor in the Department of Biomedical and Health Sciences**. Established by **Margaretha Pero, M.D., Ph.D.**, in honor of her late husband, **Ronald Pero, Ph.D.**, a

1962 graduate of UVM, the professorship will support research related to the onset and spread of cancer and innovations in effective cancer treatment and prevention. Ronald Pero spent the bulk of his career at the University of Lund in Sweden, where he became a world-renowned expert on the role of DNA repair and DNA damage in regulating toxicological mechanisms important to normal and tumor cell survival. Margaretha Pero, a child and adolescent psychiatrist, worked alongside her husband in his lab at Lund. Frieze joined the UVM faculty in 2015. In addition to running a large research program, his expertise in cutting-edge cancer genomic techniques is sought out by researchers internationally.

TABAKIN FELLOWSHIP EDUCATION FUND SUPPORTS CARDIOLOGY

In the 1950s, **Burton Tabakin, M.D.**, founded UVM Medical Center’s medical cardiology unit and cardiovascular clinical, research and training program with support from his beloved mentor and chair of the Department of Medicine, **E.L. Amidon, M.D.** Tabakin’s deep dedication to cardiology



clinical care and education continues through a bequest to establish the Burton S. Tabakin Fellowship Education Fund. It is designated to support education and research activities of the fellowship program in the Division of Cardiology, a fitting tribute to Tabakin’s legacy as an influential teacher. In 1975, he was selected as the College of Medicine Teacher of the Year, and was a three-time winner of the Cardiac Fellows Teacher of the Year. On September 2, 2018, Tabakin died of natural causes at the age of 97. He earned his bachelor’s and medical degrees from the University of Pennsylvania. Following the completion of his residency training in internal medicine and a fellowship in physiology at UVM in 1952, Tabakin spent two years as a medical officer in the U.S. Air Force Hospital Thoracic Center in San Antonio, Texas. In 1954, he returned to Vermont where he became a member of the Mary Fletcher Hospital staff. Apart from two sabbaticals, he spent his entire career at UVM and served in many leadership roles, including chief of cardiology and president of the medical staff.



The University of Vermont  
Larner College of Medicine  
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(802) 656-4014  
[medical.giving@uvm.edu](mailto:medical.giving@uvm.edu)  
[med.uvm.edu/alumni](https://med.uvm.edu/alumni)





# AWARDS

The UVM Larner Alumni Association Awards are presented every year at the Celebration of Achievements Ceremony during Reunion weekend.

This year's event is scheduled for Friday evening, October 8, 2021, on the UVM campus. All Larner Alumni are invited to attend. More details regarding this event can be found at [med.uvm.edu/alumni](https://med.uvm.edu/alumni).



## ROBERT LARNER, M.D.'42 STUDENT AWARD

*Presented to a current student(s) for his or her outstanding leadership and loyalty to the College and one who embodies Dr. Larner's dedication to not only supporting his medical alma mater, but to inspiring others to do so as well.*

### Luke Higgins

UVM Larner College of Medicine,  
Class of 2022



### Betsy Sussman, M.D.'81

Radiologist and Professor, Department of Radiology, UVM Medical Center and UVM Larner College of Medicine; 2021 American College of Radiology Fellow

In grade school, Betsy Sussman, M.D.'81, was inspired to study medicine after reading a biography of Elizabeth Blackwell, the first woman to graduate medical school in the U.S., in 1849. A Burlington, Vt., native, Dr. Sussman was also encouraged on this path by her father, Joe Sussman. Although he did not attend college, he had great respect for his brother, Ralph Sussman, M.D.'38, a local pediatrician and founder of the Century Club of the UVM Medical Alumni Association.

After training in internal medicine and diagnostic radiology in Rochester, N.Y., Dr. Sussman returned to Vermont in 1987 as a body-imaging fellow in radiology. Encouraged by her mentor, Dr. John Tampas, she never left. She started as assistant professor in 1988, rising through the ranks to associate professor in 1994 and professor in 2001. Her interest in women's imaging led to dual appointments in radiology and obstetrics and gynecology. Dr. Sussman has enjoyed teaching, serving on many local and national committees and volunteering on federal Indian reservations. She has joined classmate Peter Millard, M.D.'81, to teach ultrasound to medical students attending the Catholic University of Mozambique and has worked with her mentor, Kristen DeStigter, M.D., on the Imaging the World program scanning protocols in obstetric and breast ultrasound to improve healthcare in developing countries.

Dr. Sussman always emphasizes the importance of work/life balance to new physicians. When in medical school, she attended a panel that included Marga Sproul, M.D.'76. As a young attending physician with a family, Dr. Sproul spoke about how, although she could not always read the latest journal articles when they came out, she managed to keep up and provide great care to her patients and her family. At the time, this was a revelation to Dr. Sussman. She has since mentored residents and medical students to choose a specialty they love and to do the best they can to achieve a healthy work/life balance.

Dr. Sussman feels humor and curiosity have served her well in her career. After looking up Elizabeth Blackwell for this bio, it came to light that Dr. Blackwell had befriended Florence Nightingale. Dr. Blackwell was interested in educating women to be physicians and nurses. Ms. Nightingale believed women should only be educated as nurses, causing a fallout between the two friends. Wouldn't both of these famous women of medicine be surprised to know that just over half of all medical students in the U.S. today are women? Dr. Sussman is so grateful for the opportunity to have had a fulfilling career, which started and continues at the Larner College of Medicine with so many teachers and mentors along the way. One of her greatest joys is when one of her students achieves success which surpasses her own.



## 2022 NOMINATIONS

Do you know a class member deserving of recognition?  
Send your nominations for the 2022 awards to: [med.uvm.edu/alumni](https://med.uvm.edu/alumni)

## DISTINGUISHED ACADEMIC ACHIEVEMENT AWARD

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



### Timothy S. Carey, M.D.'76, M.P.H.

Research Professor of Medicine, University of North Carolina Chapel Hill



### Patricia King, M.D.'96, Ph.D.

Professor, Department of Medicine, Division of General Internal Medicine and Geriatrics, Larner College of Medicine, University of Vermont



### Jennifer McNiff, M.D.'86

Professor, Departments of Dermatology and Pathology; Director, Yale Dermatopathology Laboratory; and Director, Yale Dermatopathology Fellowship Program



### Frederick Rogers, M.D.'81

Adjunct Professor of Surgery, University of Pennsylvania Perelman School of Medicine

## SERVICE TO MEDICINE AND COMMUNITY AWARD

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



### Paul Morrow, M.D.'76

Forensic Pathologist, Auckland, New Zealand



### Kelley Saia, M.D.'01

Assistant Professor of Obstetrics and Gynecology, Boston Medical Center and Boston University School of Medicine; Founder and Director of Project RESPECT



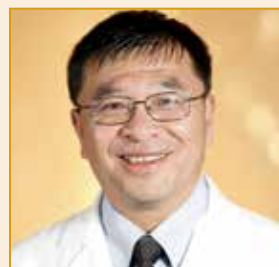
### Philip Chan, M.D.'06, M.S.'04

Associate Professor in the Department of Medicine and Department of Behavioral and Social Sciences at Brown University; Chief Medical Officer at Open Door Health; Medical Director at the Rhode Island Department of Health



### Alexa Craig, M.D.'06

Director of Neonatal Neurology Program, Department of Pediatrics, Barbara Bush Children's Hospital at Maine Medical Center, Portland, Maine; Assistant Professor, Pediatrics, Tufts University School of Medicine, Boston, Mass.



## DISTINGUISHED GRADUATE ALUMNI AWARD

*Presented to an alumnus/a from the UVM Larner College of Medicine's Ph.D. or M.S. programs who has demonstrated outstanding achievement in basic, clinical or applied research; education; industry; public service/humanitarianism; and/or outstanding commitment to the Larner College of Medicine community.*

### Junjie Chen, Ph.D.'93

Professor and Chair, Department of Experimental Radiation Oncology, Division of Radiation Oncology, The University of Texas MD Anderson Cancer Center



## Swing Time

For many years, the UVM Ropes Course was a regular part of Orientation Week for new students. We're guessing that's what's going on in this image, but just exactly who's on the rope(s), and who's trying to lend a hand?

Send your thoughts to [erin.post@med.uvm.edu](mailto:erin.post@med.uvm.edu) and we'll include them in the next issue of *Vermont Medicine*.



### ← FROM THE PREVIOUS ISSUE

Two alums responded to our last photo. First came Peggy Cyr, M.D.'98, who identified the doctor in the center as Ed McCarthy, a psychiatrist who worked in Portland, Maine. Next came a message from the photographer herself—Halleh Akbarnia, M.D.'98, who relates: *"I got a good laugh when I saw the picture in the alumni magazine on the Flashback page. In fact, several people sent it to me first, before I even got my magazine in the mail! I took that picture in February of 1996 during my psychiatry clinical rotation at Maine Med. That was my first clinical rotation ever, and that was our attending for the month, Dr. McCarthy. From left to right: Jeff McKenna, Reono Bertagnolli, myself (Halleh Akbarnia), front row: Anne Brena, Dr. McCarthy, Matt Hsieh."*



### In Memoriam

#### Dean William H. Luginbuhl

Dr. Luginbuhl, the thirteenth dean of the UVM Larner College of Medicine, died June 21, 2021, at age 92, in Pennsylvania, where he had lived for many years.

Born March 11, 1929, in Des Moines, Iowa, the son of a physician and a schoolteacher, Dr. Luginbuhl attended Iowa State University and received his medical degree from Northwestern University in 1953, after which he completed an internship and residency in pathology at Northwestern. He pursued additional training in Cleveland and was drafted into the U.S. Army, spending two years as the only pathologist in Fort Bragg, North Carolina.

Dr. Luginbuhl joined the UVM faculty in 1960, in what was then known as the Department of Pathology and Oncology. He served the College as assistant dean in the 1960s, during the deanship of Edward Andrews, M.D., and was a leader of the significant curricular reforms during that decade—work that paved the way for today's Vermont Integrated Curriculum at the College.

Upon Dr. Andrews' becoming president of the University in 1970, Dr. Luginbuhl became dean of this institution, as well as dean of what was then the Division of Health Sciences, and led the College for 21 years—the second-longest tenure of all the College's deans—through an era of great change and expansion of both the student body and research enterprise.

Dr. Luginbuhl also had a profound effect on the delivery of patient care in Vermont, as the key driver of the formation of the University Health Center in 1971.

He and his wife, Viola ("Vi") Larimore Luginbuhl, a former Vermont legislator and UVM trustee, retired to a home that he designed and built on Lake Champlain in Panton, Vermont, where he pursued his passions of gardening, travel and enjoying his family. Among his many interests and hobbies, he was particularly focused on horticulture, and grew extensive fruit and vegetable gardens, including 100 varieties of apples, and developed and patented his own apple, the "Vermont Gold." He was an expert on trees, and collected and grew every variety of oak and hickory tree native to New England.

The Luginbuhls moved to Kendal at Longwood in Pennsylvania in 2011.

Dr. Luginbuhl's service to the College and University was recognized at Commencement 2016 with an honorary degree from UVM. Viola Luginbuhl was similarly honored at the same time. The Luginbuhls' connection with the College is deep and enduring: two of their children and two grandchildren are alums.

*In lieu of flowers, the family requests donations be made to the William H. Luginbuhl Education Fund at UVM.*

#### '58 Olin D. Samson, M.D.

Dr. Samson died April 27, 2021, in Hingham, Mass. He received his medical degree from UVM in 1958 and practiced internal medicine from 1963 to 1991. He began his career at Beverly Hospital in Beverly, Mass., and then spent many years at Hunt Memorial Hospital in Danvers, Mass., where he served as chief of staff. He also served on the board of trustees at Hunt Memorial Hospital before retiring in 1991. After medical school, Doc became a captain in the U.S.

Army and was stationed in White Sands, N.M., between 1959 and 1961. After moving to Danvers, Dr. Samson set up his medical practice and his wife, Lyn, worked as the business manager. He was easygoing, funny, and kind to his family, friends, and his patients.

#### '60 Charles Rudolph Brinkman III, M.D.

Dr. Brinkman died Feb. 21, 2021, at the age of 87. Born April 8, 1934, he graduated from Springfield

College in Massachusetts and received his medical degree from UVM. After completing his residency at Yale University Medical School, Dr. Brinkman worked at the UCLA School of Medicine as a professor in obstetrics and gynecology for 30 years, rising to be chief of obstetrics and gynecology. He was a veteran of the U.S. Army, having served as captain, medical corp., at Ft. Ord Military Base in Monterey, Calif., during the Vietnam War. He retired as a professor emeritus from the UCLA School of Medicine.

#### '63 Philip A. Goddard, Jr., M.D.

Dr. Philip Anthony Goddard, Jr. (Tony) died August 1, 2020, at the age of 82. He received his undergraduate degree and medical degree from UVM. After completing his year of internship at George Washington University Hospital in Washington, D.C., Dr. Goddard volunteered for the Army's 82nd Airborne Division at Fort Bragg, N.C. He was trained as a paratrooper and served as a medical doctor for his division, deployed for 14 months of combat duty in the Dominican Republic. After completing his two years of service, Dr. Goddard began four years of surgical training at Dartmouth Hitchcock Medical Center in Hanover, N.H. Ultimately, he was chosen to be the chief resident surgeon. He thoroughly enjoyed surgery, especially how quickly operations could fix patient's ailments. He said more than once, "If they didn't pay me to do surgery, I'd pay to do it." Once his surgical residency was completed, he set up his practice at Copley Hospital in Morrisville. There he was able to share his love of surgery and zeal for medicine with his father, who also worked at Copley. They became "Dr. Phil" and "Dr. Tony" to distinguish the two Dr. Goddards. When his father died in 1976, much of his father's practice became his. Tragically, at the age of 48, he was diagnosed with multiple sclerosis and could no longer perform surgery. For a few years he continued with his general practice patients on a part-time basis and later served on the admissions board for the UVM Larner College of Medicine and on the Vermont State Medical Review Board.

#### '63 Frederick P. Hobin, M.D.

Dr. Frederick (Fred) P. Hobin died December 19, 2020. He grew up in Boston, Mass., and received his undergraduate degree from Tufts University and his medical degree from UVM. After residency, Dr. Hobin served as an Army captain in the

Vietnam Evac 85 Hospital for one year. He then began his career in pathology, first in Jacksonville and then Palm Beach County, Fla. Dr. Hobin transitioned into forensic pathology where he spent the last twenty plus years of his career as a medical examiner in south Florida. He loved forensic pathology work so much he did not fully retire until he was 81 years old.

### In Memoriam

#### William D. Belville, M.D.'71

Dr. Belville died Jan. 2, 2021, in Olympia, Wash., at the age of 75.

### Faculty

#### Robert D. Orr, M.D., C.M.

Dr. Orr died May 20, 2021 in Burlington, Vt., at the age of 80 after a five-year battle with cancer. Born March 16, 1941, he studied at McGill University Faculty of Medicine, earning the M.D., C.M. in 1966. After service in the U.S. Navy, he practiced family medicine in Brattleboro, Vt., for 18 years. He established Brattleboro Memorial Hospital's first ethics committee and helped to found the Brattleboro Area Hospice, serving as its first president and volunteer medical director. He pursued a postdoctoral fellowship at the Maclean Center for Clinical Medical Ethics at the University of Chicago. He served for 25 years in various professional roles including professor of medical ethics and director of clinical ethics at Loma Linda University Medical Center; professor of family medicine and director of clinical ethics at UVM Larner College of Medicine; professor of bioethics at Trinity International University; and professor of bioethics at Union University Graduate School. His numerous awards include Alpha Omega Alpha Honorary Medical Society (McGill); University Scholar (McGill); Vermont Family Doctor of the Year; the American Medical Association's Isaac Hayes and John Bell Award for Leadership in Medical Ethics and Professionalism; the Servant of Christ Award from the Christian Medical and Dental Associations; and several teaching awards from various academic institutions.







**April 27, 2021**

**1:44 P.M.**

Dean Rick Page adds his signature to dozens of other Larner faculty, staff and students who signed the last beam of the framework of the Firestone Medical Research Building, now under construction on the south end of the medical campus. Minutes later the beam was hoisted aloft and welded in place.





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PHOTO: KRISTIN CARR, M.D.'15

## COME CELEBRATE AT MEDICAL REUNION 2021!

Your reunion will be here before you know it  
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### 1 SAVE THE DATE

Mark your calendars for October 8-9, 2021 to join your classmates for a special celebration. It's not too early to let us know you plan to attend! Add your name to the see who's coming list at [med.uvm.edu/alumni/reunion](https://med.uvm.edu/alumni/reunion)

### 2 BOOK YOUR HOTEL

It's foliage season, and rooms fill quickly—but we have reserved special blocks for you and your classmates. Visit [med.uvm.edu/alumni/reunion](https://med.uvm.edu/alumni/reunion) for more information.

### 3 RALLY YOUR CLASSMATES

Now is the time to reach out to your friends and build excitement about reunion. Get in touch with our office for a class contact list by emailing: [medalumni.relations@med.uvm.edu](mailto:medalumni.relations@med.uvm.edu).

