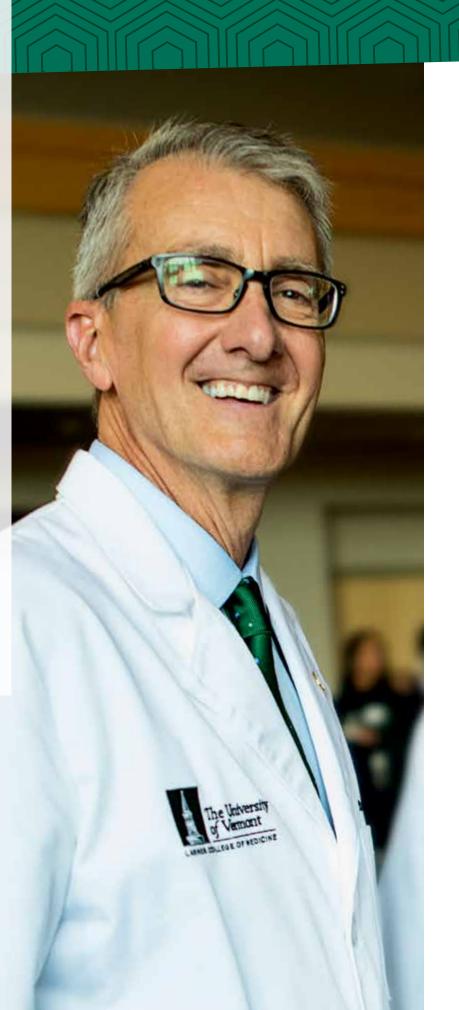
FIRST TAKE

DEAN RICHARD L. PAGE, M.D.,
OFFERS HIS INITIAL THOUGHTS
AS HE BEGINS HIS LEADERSHIP
OF THE UVM LARNER
COLLEGE OF MEDICINE.



In January 2019, Vermont Medicine sat down with Dean Richard L. Page, M.D., to hear firsthand his experiences and impressions as he entered his fourth month as dean of the Larner College of Medicine. Dr. Page formally began work as the 18th dean of the College on October 1, 2018. This interview has been edited for space.

VERMONT MEDICINE:

When did you first learn that the deanship was open at the Larner College of Medicine?

RICHARD PAGE:

I had been at the University of Wisconsin for about eight years when I first heard about this opportunity. I had loved my time in Madison, leading the Department of Medicine. At the same time, my wife and I were beginning to wonder what was next. what new adventure might be out there, what further impact we might have. I had already worked with Dr. Parsons [Larner Department of Medicine Chair Polly Parsons, M.D.l. We were both leaders in the Association of Professors of Medicine, the national group of chairs of medicine. I contacted her and, as she always had in the past, she spoke very highly of the institution. I had already learned about the exciting things going on here in education, through a piece on NPR. The news of UVM's extraordinary innovation traveled throughout the country a year or so before I ever dreamed I'd be considered for this job, and I found the idea of being part of it intriguing.

Any decision like this is made in partnership with my wife of 33 years, Jeannie. She looked into the cultural and lifestyle opportunities in Burlington and became enthusiastic about the idea. She's from North Carolina, and I had originally never thought I would take her to a place as cold as Wisconsin! But over our nine years there, she came to appreciate living in a place with four seasons; so she gave the green light for Vermont. Given our living in New England for three years together when I was in training in Boston, and my growing up in New England, there seemed to be a natural connection to explore.

Where in New England did you grow up?

I grew up in Storrs, Connecticut.

It's a college town. My father was an educational psychologist at the University of Connecticut until about 1979. He retired from that state institution and then taught for the rest of his career, another 15 years or so, at Duke University. So coming back to a New England college town was kind of coming full circle for me.

How has settling into this community been for you?

My days have been filled with excitement, new experiences, new people. Just moving the household, when you've been in a place for close to nine years, is a big endeavor. We still have some boxes in the basement, but we like to tell ourselves that at least we've looked inside all of them by now! We have three grown children, ages 28, 30 and 32, who all have significant others. We were lucky enough to find a house with enough room to fit everyone at holiday times.

Arriving at the College was exciting from the very beginning. The White Coat Ceremony for our Class of 2022 stands out as a highlight of my very first week. It was a truly moving experience. I received my own first Larner white coat that same day. To wear that and be part of that event was tremendously meaningful.

I've made a point of listening to as many people as possible since I arrived. This has been done through town halls and through ongoing interactions with the chairs of our departments—both clinical and basic sciences. I've had the privilege of hearing from many different groups: students, staff, residents, fellows, faculty of all sorts, clinicians, educators, scientists, and all in different combinations. We're very fortunate to have

such an enthusiastic, talented group of people here at the Larner College of Medicine.

What I've especially enjoyed is the people I meet while walking around the campus. I've gotten lost many, many times, and even that is fun, because when I'm lost, I knock on the nearest door. I get to introduce myself to the person in the office or the person in the lab. I ask directions and, more often than not, end up chatting with that person about what they do.

Any other standout moments so far?

Oh yes. High points have included meeting members of our local community, such as the chamber of commerce; and I've had the opportunity to meet Lieutenant Governor Zuckerman and our whole Vermont congressional delegation. I was honored to spend time with Senator Leahy at a reception at the Washington, D.C., home of our alumnus, Dr. David Reines, from the Class of 1972, and his wife, Nina Totenberg.

I'm very impressed by the enthusiasm of the alumni of UVM and its College of Medicine. People have a palpable love for this place. They give back in terms of their efforts on behalf of the College, their talking to prospective students, and their philanthropy. I've been inspired by the generosity and the way people stay in touch. The number of alumni who give back to the Larner College of Medicine, I believe, is among the top in the country. Our alumni recognize that their careers were launched by the opportunities they had here.

A high point in these first weeks was hosting a 100th birthday celebration for Dr. Gordie Page—no relation—a member of the Class of 1945, and a prominent surgeon and emeritus professor. To hear his stories from



THE PAGE FILE

RIGHARD L. PAGE, M.D. UNIVERSITY OF VERMONT LARNER COLLEGE OF MEDICINE DEAN ASSUMED OCTOBER 1. 2018 PROFESSOR OF MEDICINE (GARDIOLOGY)

EDUCATION AND TRAINING

- » Duke University, B.S., Zoology, 1980
- » Duke University School of Medicine, M.D., 1984
- » Columbia University, College of Physicians and Surgeons, Stanley J. Sarnoff Fellow in the Department of Pharmacology, 1982-1983
- » Residency in Medicine, Massachusetts General Hospital, Boston
- » Research and Clinical Fellowships in Cardiology and Clinical Cardiac Electrophysiology, Duke University **Medical Center**
- » Certificate in Medical Management, University of Washington School of Medicine, 2007

PRIOR AGADEMIC APPOINTMENTS

- » George R. and Elaine Love Professor and Chair, Department of Medicine, University of Wisconsin School of Medicine and Public Health, 2009-2018
- » Robert A. Bruce Endowed Chair in Cardiovascular Research and Head of the Division of Cardiology, University of Washington School of Medicine 2002-2009
- » Assistant, Associate and Full Professor of Internal Medicine and Dallas Heart Ball Chair in Cardiac Arrhythmia Research, University of Texas Southwestern Medical Center, Dallas, 1992-2002
- » Assistant Professor of Medicine, Division of Cardiology, Duke University Medical Center, 1990-1992

NATIONAL SERVICE

- » American College of Cardiology/American Heart Association **Guidelines Task Force**
- » Chair, Circulatory Devices Panel, U.S. Food and Drug Administration
- » Fellow of the American Heart Association
- » Chair, American Heart Association Council on Clinical Cardiology
- » Fellow, Heart Rhythm Society: President, 2009-2010; Board Member, 2001-2012
- » Past-President, Association of Professors of Cardiology
- » Councilor, Association of Professors of Medicine
- » Member, Association of University Cardiologists
- » Member, American Clinical and Climatological Association
- » Member, Association of American Physicians

across 70 years of practice was a special experience. [Editor's note: see page 32 for more about this meeting.]

And, by chance, Jeannie and I had plans to be in New York City in December and we attended President Sullivan's annual holiday reception at the Penn Club. I loved feeling the excitement in the room from alumni, including a number of the more recent graduates who are just starting their first jobs in the New York City area and already are developing an ongoing relationship with UVM.

I've also been to North Carolina to visit with alumni, Dr. Farrell Collins, and his wife Dr. Ellen Andrews. Dr. Collins was the first UVM alum to congratulate me. The day my appointment as dean was announced, I received a call via the page operator in Wisconsin. The operator told me, "It's a doctor from North Carolina who said he needed to talk to the new dean." I got on the phone, and Dr. Collins said he wanted to make a point of being the first to congratulate me. He also was very proud of the fact that

a couple of occasions.

I've enjoyed getting to know my fellow deans. We have our unique challenges, but we have great opportunities for interaction. I'm currently looking into how we might collaborate further with the College of Nursing and Health Sciences, the College of Engineering and Mathematical Sciences, the Grossman School of Business, and with other groups throughout the University.

What has impressed you most **UM** about this place?

I'm impressed by the tremendous spirit of collaboration. And I'm impressed by the quality of clinical care. As I was being recruited, I emphasized that I would only want a position where I could truly be a "three-mission dean." By that I mean committed to, and directly involved in partnership with the clinical operations, in addition to education and research. In medicine, we use the analogy to a threelegged stool with those three missions supporting the academic medicine enterprise. The clinical operation is very strong, and we're tremendously fortunate to have an excellent relationship with the UVM Medical Center and Health Network, as well as the medical group. Dr. John Brumsted and Dr. Claude Deschamps have welcomed me and them in the clinical mission.



I that dimension of your profession?

It was critical.

/ Because there are many deans who are M.D.s who step away from clinical practice.

DD Right. Even some chairs of medicine don't stay clinically involved. Earlier in my career, I did invasive procedures that included ablations and implantation of pacemakers and defibrillators. Those are procedures that you must perform regularly or you can't do them well. A number of years back, I took myself out of an invasive practice. So now mine is purely outpatient, noninvasive practice, specializing in heart rhythm disturbances. For me, in addition to the rewards of patient interaction, there are other advantages to maintaining my clinical practice. For example, as I'm talking with our clinical faculty, I can better understand their day-to-day challenges.



What are your thoughts about our education and research missions?

Because of the commitment to active learning that has been undertaken at UVM, the education mission is internationally famous here. I find that to be very exciting. The Larner gift for medical education. It is a remarkable and unique gift, and it's given us a unique opportunity. As Dr. Larner said, we want our college to be second to none, and we are educational pioneers. At the same time, we're continuing to strengthen our clinical education partnerships throughout the UVM Health Network and at our branch Headwaters Health Network in New York.

And in my first few months, I've been students. These are talented individuals who are critical to the College. No medical school can be excellent without excellent basic science, and basic science departments cannot be excellent unless they have excellent graduate programs that attract excellent graduate and postdoctoral students.

I'm learning more every day about our research portfolio. Not unlike many other institutions, money is tight and support of science has been constrained by financial realities. That being said, already there are crucial investments being made here. We have approval from the Board of Trustees to continue to explore building a new medical research building here on campus, and combining that project with the renovation of the Given building is going to be tremendously important for the College. We'll be creating a state-of-the-art, open floor plan research space that will enhance collaboration and cross-disciplinary research. That's a very exciting opportunity. We have some terrific basic science and terrific translational research. We also have areas of excellence in clinical, in health services research, in outcomes research, and in population health. Regarding population health, we can learn specialty care to Vermonters, ideally where more rural areas, and we can share these lessons throughout the country.

DD Everyone should feel that they are in M an environment where they can do a are committed to treating each other—our colleagues and collaborators, our patients, people who work for us, and the people we work for—in a professional manner. It makes patient care better when individuals are setting a fully realized example for others.

This is an area that first became a focus for me when I was chief of cardiology at the University of Washington; I carried this priority with me to Wisconsin as well. Professionalism has to be a core value of educators, scientists, and caregivers. Because of medicine's great importance in people's lives —in literally sustaining people—that power has to be handled responsibly, and with humility. It's what we have to expect of ourselves, and it has to be the environment we provide for each other. I've been delighted with the resonance that I've found here for this

emphasis, and appreciative of the work of our Professionalism Statement Task Force and many other members of our community on

only amplified here in Burlington and tight-knit. There are issues in every in terms of food, housing, and health care that we need to be aware of so that we might advocate for solutions. While we can't fix all those problems within the College, we need to be part of the discussion and part of the resolution. We need to help educate our students to the importance of the health of the community, and we need to continue to

work to build the most diverse community we can in an environment where everyone can feel welcomed and primed for success.

Dr. Page and Jeannie Page

at the 2018 White Coat

Ceremony reception.

students' commitment to social medicine and social justice in medicine. We have an obligation: I consider health care a right, and inclusive, culturally humble health care is mandatory. We want all patients to feel comfortable and welcome here, and we need to know how to provide the best possible environment for each and every individual who looks to us for care, and who comes here to learn. That has to do with all of us being aware. That work is ongoing, though a good deal has already occurred, including curricular enhancements and modifications to address social issues. I've been encouraged by the commitment of the faculty to community engagement. It's our obligation. We are embedded here, and we need to make a difference in the community in every way we can. VM



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