CLASS ACT

The Larner community keeps mission-focused in extraordinary times
In Memory of Collins Oguejiofor ’22

When COLLINS OGUÉJIOFOR ’22 died unexpectedly in Norwalk, Conn., in June of 2020, where he was about to begin his clinical clerkship at the Connecticut branch campus, the UVM Larner College of Medicine community experienced a deep loss. Collins’ teachers and fellow medical students know what a great physician he would have been.

To honor Collins’ memory in a meaningful way, the Oguejiofor family worked with the Larner Development and Alumni Relations Office to establish a diversity scholarship fund in his honor, with an initial goal of raising $50,000 to endow the fund. By early September family, students, faculty, staff, and friends of the College have made gifts and commitments that, combined with matching funds from the Medical Alumni Association’s Challenge Program, met the initial goal.

Collins’ family deeply appreciates that Collins is remembered in the Larner College of Medicine community for his kind, warm nature. They established the Collins Oguejiofor Diversity Scholarship in the hopes that students with similar backgrounds can benefit from a medical education at UVM. They are grateful to the many students, faculty, staff, and alumni who have supported it, in addition to Collins’ friends and family.

Support the Collins Oguejiofor Diversity Scholarship: go.uvm.edu/collins
FROM THE DEAN

After a gorgeous autumn, most of the leaves have fallen here in Burlington. This comforting, seasonal shift is in contrast to the ongoing disruption caused by the COVID-19 pandemic. The world has changed, and new challenges arise, but that cannot keep us from delivering on our missions of education, research, and clinical care. I am so proud of how UVM and the Larner community have responded, highlighting the resourcefulness and versatility of our faculty, students, and staff.

I saw these qualities in action most recently during the White Coat Ceremony for our newest members of the community, the medical Class of 2024. While we couldn’t hold the usual ceremony in Ira Allen Chapel, with friends and family in attendance, our first-year students were able to enjoy a hybrid event, gathering in carefully sized groups on campus, hearing from faculty and distinguished guests via Zoom, and then donning their white coats with just a few of us in attendance, and a whole world of well-wishers watching them on the livestream. It was new. It was safe. And it was still deeply moving. That’s a combination I have been pleased to find in all our recent special events, be they investitures of new endowed professors, or community Town Halls, or reunion events for our alumni. These online gatherings have retained a feeling of personal closeness for the participants that surprised me. And the size of the audience who get to attend these functions has significantly increased. They may be online, but these are not “virtual” events. I encourage you to view them online on the Larner YouTube channel.

Despite the pandemic, we have medical students and graduate students in our buildings every day, and clinical education continues at our sites in Vermont and Connecticut. Our researchers, many of whom were deemed essential workers and were in their labs throughout the spring and summer, have continued their important efforts. I’m proud that this fiscal year that ended in June saw a record set both for our College’s amount of externally funded research ($280 million) and for the University’s as a whole ($181.7 million). As you can read about in these pages, many scientists were able to pivot their work to address the pressing need for new knowledge related to the pandemic.

COVID-19 has thrown into high relief the vital role our institution plays in fostering research that improved the lives of those in Vermont and around the world—most recently with the news of our Vaccine Testing Center’s involvement in a COVID-19 vaccine trial. That’s why we are proud to proceed with construction of the Firestone Medical Research Building, thanks in large measure to the generosity of donors such as Steve Firestone, M.D., D.V.M., and important funding such as the new $8.47 million shared resource facilities grant from the National Institute of Health (written by our Senior Associate Dean for Research, Dr. Gordon Jensen). Our campus is changing, and the construction will be a bit disruptive for about two years, especially with regard to parking! On the other hand, I trust you will agree that this project, and the important functions described in these pages, demonstrate the commitment and optimism we share for the bright future of our College.

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

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

DEAN
Richard L. Page, M.D.

SENIOR ASSOCIATE DEAN FOR MEDICAL EDUCATION
Christo Zehle, M.D.

SENIOR ASSOCIATE DEAN FOR RESEARCH
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Phase 3 COVID-19 Vaccine Trial Comes to UVM and UVM Health Network

The University of Vermont Medical Center and Vaccine Testing Center at the UVM Larner College of Medicine have been selected to take part in a Phase 3 trial for a COVID-19 vaccine developed by Oxford University and manufactured by AstraZeneca. The study will track the safety and effectiveness of the investigational vaccine. Approximately 30,000 participants from the United States will take part in this study, including at least 200 people locally.

“This is an exciting opportunity for our area to help develop a safe and effective vaccine for COVID-19 and control the ongoing pandemic,” said Beth Kirkpatrick, M.D., a specialist in Infectious Diseases at UVM Medical Center and director of the Larner College of Medicine’s Vaccine Testing Center.

Dr. Kristine Pierce, also a specialist in Infectious Diseases at the UVM Medical Center, who leads the study and the Vaccine Testing Center with Dr. Kirkpatrick, adds, “We have significant experience testing vaccines at the University of Vermont and are proud to take part in this national effort. Volunteers will receive high-quality care throughout their participation and will be helping the global community move beyond the threat of COVID-19 by participating.”

Most people don’t know that, thanks to ongoing research by Drs. Kirkpatrick and Pierce and the Vaccine Testing Center team, our college was already poised to contribute to the fight against this novel coronavirus,” said Richard L. Page, M.D. of UVM’s Larner College of Medicine. “This vaccine trial will combine our research excellence with the outstanding clinical care provided by our partners at UVM Health Network and the UVM Medical Center, to bring us closer to eliminating this pandemic.”

More information on the trial can be found at UVMHealth.org/COVIDTrial.

Cardiovascular and Brain Health Focus of New Center

The University of Vermont is now home to a new Center of Biomedical Research Excellence—the Vermont Center for Cardiovascular and Brain Health—thanks to funding from the National Institute of General Medical Sciences. Co-led by Professor of Medicine Mary Cushman, M.D., M.Sc., Chair and Professor of Pharmacology Mark Nelson, Ph.D., the center will bring together junior and senior researchers to conduct trans-disciplinary research on the causes of cardiovascular disease, stroke and cognitive impairment, saying, “The Center is providing a platform to build sustainable research programs built on the exceptional potential of early career faculty, and addressing vital health problems facing society, in cardiovascular disease, stroke, and cognitive impairment,” said Dr. Cushman.

In addition to Cushman and Nelson, key faculty involved in the project include Neil Zakai, M.D., M.Sc., associate professor of medicine, and Peter Durko, Ph.D., faculty scientist in pathology and laboratory medicine, who will direct the Study Design and Molecular Epide- micology Core. Todd Clasen, M.S., researcher/ analyst in pathology and laboratory medicine, who will direct the Customized Physiology and Imaging Core. Three junior faculty members from the Larner College of Medicine and the College of Nursing and Health Science will direct functions within the center:

• Katharine Cheung, M.D., Ph.D., assistant professor of medicine: “Trajectories and Vascular Mechanisms of Cognitive Impairment in Chronic Kidney Disease.”

• Masayo Koide, Ph.D., assistant professor of pharmacology: “Cerebral and Central Blood Flow Regulation in Chronic Hypertension,” and

• Denise Peters, P.T., D.P.T., Ph.D., assistant professor of rehabilitation and movement science: “Neuromechanisms Associated with Response to Gait Training in Chronic Stroke.”
**Carney Receives President’s Distinguished University Citizenship and Service Award**

**Notable** Jan Carney, M.D., M.P.H., associate dean for public health and health policy, and senior advisor to the dean of the Larner College of Medicine, was named the 2019-2020 recipient of the President’s Distinguished University Citizenship and Service Award in recognition of her innovative teaching, creative leadership and service to the University of Vermont community.

Carney, who served as Vermont Commissioner of Health from 1989 to 2003, has been a passionate advocate for preventive medicine and public health throughout her career—at UVM, in Vermont and nationally. Over the past 15 years, her public health projects course—run in collaboration with the United Way of Northwest Vermont—has resulted in the completion of well over 200 public health projects. Carney developed Vermont’s first Master of Public Health degree and other graduate-level online public health programs and directs the Rural Health Research and Delivery Core for the Northern New England Clinical and Translational Research Network.

An active national and statewide leader in the American College of Physicians, Carney is a recent past vice-chair of the ACF Health and Public Policy Committee; she was awarded a Mastership in the ACF in recognition of the significance of her contributions to the field of medicine. She has championed policy efforts to reduce the health consequences of tobacco use and sugary beverage consumption in Vermont and co-chaired the UVM Tobacco-Free Steering Committee, whose work led to UVM’s Tobacco-Free Campus Policy in 2015. In recent months, Carney has stepped up once again, helping educate Vermonters about COVID-19 safety protocols and information through webinars and media interviews, as well as assisting UVM leaders to develop the Return to Campus plan.

**SIGMON AND NEW MODELS OF OPIOID TREATMENT RECOGNIZED**

Associate Professor of Psychiatry Stacey Sigmon, Ph.D., is featured on Fast Company’s 11th annual list of the Most Creative People in Business. Fast Company recognized Sigmon in the “For Designing a Superior Solution” category for her work developing new models of opioid treatment delivery. Sigmon has built a national reputation for developing and testing innovative treatment options to bridge the gap in treatment access for patients in rural areas, including computerized dispensers for controlled medication dosing and interactive voice response systems for remote support.

At left: Illustration of Dr. Sigmon from Fast Company by Erick Davila.

**LARNER TEAM PLAYS ROLE IN NIH COVID-19 BLOOD CLOTTING TREATMENT TRIALS**

Research

UVM is participating in a major national research effort to evaluate the safety and effectiveness of varying types of blood thinners to treat adults diagnosed and hospitalized with COVID-19. Part of the Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV) initiative, the three trials will be coordinated by the NIH’s National Heart, Lung, and Blood Institute and funded through Operation Warp Speed. Collectively known as ACTIV-4 Antithrombotics, the goal is to give doctors critical insights to improve the care of patients with COVID-19 and prevent life-threatening blood clots. UVM’s Laboratory for Clinical Biochemistry Research, led by University Distinguished Professor of Pathology & Laboratory Medicine and Biochemistry Russell Tracy, Ph.D., will serve as the central laboratory for the studies. Professor of Medicine and Pathology & Laboratory Medicine Mary Cushman, M.D., M.S., is a lead investigator on the Rapid COVID COAG-anticoagulation trial that will form a key part of the ACTIV-4 Antithrombotics inpatient clinical trial. Assistant Professor of Surgery Christos Colovos, M.D., Ph.D., will lead the ACTIV-4 Antithrombotics Inpatient Trial at UVM Medical Center, offering Vermont patients with COVID-19 the opportunity to participate in this research.

**$5.4 Million NIH Grant Funds New Shared Resource Center**

A new $5.47 million grant from the National Institutes of Health (NIH) to the Larner College of Medicine will fund the creation of the UVM Center for Biomedical Shared Resources. Larner Senior Associate Dean for Research Gordon L. Jensen, M.D., Ph.D., is principal investigator on the grant.

The new Center will integrate five of the leading UVM laboratory-based, shared resource core facilities, including the Vermont Integrative Genomics Resource, the Vermont Genetics Network, the Flow Cytometry and Cell Sorting Facility, the Microscopy Imaging Center, and the Mass Spectrometry Facility. In fulfillment of UVM’s land grant mission to be a resource for its community, the new center will provide services to institutions across northern New England, and support large, regional research programs. The grant will enhance long-term sustainability through efficiencies of scale, improved access, cross-training of personnel, and sharing of resources.

“To our shared resource cores provide state-of-the-art research equipment and methods to UVM investigators and trainers,” said Jensen. “The funding of this Center will support continued growth in biomedical research spanning our institution and region for years to come.”

The grant will fund completion of the Center’s home on the first floor of the new Firestone Medical Research Building, which will be located on the south end of the Larner College of Medicine complex, connected to the current Health Sciences Research Facility. Initial construction work on the new building began in October.

The Center will be an important asset to UVM’s continuing research success. In an increasingly competitive national research landscape, UVM recently posted a record total of more than $481.7 million in yearly research funding for fiscal year 2020, with $105 million of that coming from biomedical research associated with Larner faculty—a 32 percent increase over the prior year.

Larner researchers also recently received a $12 million multi-year grant from NIH for the Center of Biomedical Research Excellence on Cardiovascular and Brain Health that will also be housed in the new Firestone Medical Research Building. In addition, Larner researchers have risen to the special challenges of 2020, with more than 50 active COVID-19 research projects in progress.

**UVM LARNER COLLEGE OF MEDICINE**

**VERMONT MEDICINE FALL 2020**
“The white coat represented then and now my membership to the field of medicine and all that I was willing to navigate, learn, endure, practice and improve in my role as a physician to promote and protect the health of my patients.”

- White Coat Keynote speaker, Associate Professor of Family Medicine Anya Koutras, M.D.
Three Questions with Beth Kirkpatrick, M.D.

**Viewpoint** An internationally recognized physician-scientist, Beth Kirkpatrick, M.D., has a decades-long history of leadership in the field of vaccine development and testing. In 2001, she launched the UVM Vaccine Testing Center (VTC), and since then, the VTC has grown to assume a prominent role in the development and evaluation of vaccines for globally important infectious diseases. The VTC has garnered support from the National Institutes of Health, the Bill & Melinda Gates Foundation, and the U.S. Department of Defense, among others.

Kirkpatrick is also principal investigator and director of UVM’s Translational Global Infectious Disease Research Center of Biomedical Research Excellence and Chair of the Department of Microbiology and Molecular Genetics.

**VM:** How are past successes in vaccine development informing the work going on across the globe on a COVID-19 vaccine? On the flip side, what is unprecedented about this effort?

**BK:** “We have multiple twenty-first-century tools at our disposal that are transforming the vaccine field. They have grown out of concerns that vaccine development was too slow to respond to epidemics, including influenza and Ebola epidemics. For example, there’s been a lot of progress with computational means of understanding the parts of the pathogen necessary to put in a vaccine. We also have new vaccine platforms or types, including those based on genetic sequences; these allow the rapid construction of new vaccines. The field has also figured out how to overlap clinical trials, which also speeds things up. All of these new measures save us a significant amount of time and make vaccine development much faster and more efficient.”

**VM:** What are the key questions researchers are focusing on as they work towards a vaccine? How can wide use of (and trust in) the vaccine be promoted once we have one that has been thoroughly tested?

**BK:** “The goal isn’t going to be one coronavirus virus. It’s multiple, first-generation coronavirus vaccines. Over the next few years, though, I wouldn’t be surprised if we have better vaccines. The top issue is always safety and efficacy. After that, we want to know about immunogenicity—the immune response your body has that suggests you’re going to be protected. And then, finally, the efficacy. In the vaccine world, this means that when you’re confronted in your real life with the infection, how well will the vaccine prevent you from getting sick.”

I would say the foundation for vaccine safety review has been quite robust and been thoroughly tested. After that, we want to help people regain trust in this system because of the politicalization.”

**VM:** How are UVM researchers involved in efforts to develop and test a COVID-19 vaccine?

**BK:** “We are part of a National Institutes of Health group called the COVID-19 Prevention Network, or CoVPN. The NIH has taken its hundreds to thousands of investigators who are funded by the NIH as part of all clinical trial networks related to vaccines or therapeutics and combined them into one quite amazing team of scientists and investigators across the country. Together, the team works on the Phase 3 studies of coronavirus vaccines in a harmonized way. It’s a very impressive network of established and trusted scientists and investigators. We’re lucky UVM is part of that group.”

**The goal of the project is to understand community health and social needs from the community’s perspective to best meet priorities for the coming year.**

**Larner students and faculty have collaborated with United Way of Northwest Vermont for more than 15 years as part of the Larner Public Health Projects curriculum. In this course, second-year medical students work with organizations in the area to help meet community health needs, conducting 17 public health projects to help address those needs.”**

“Three, COVID-19 brought additional community challenges, so the fall project our second-year students are conducting is a survey throughout Vermont,” said Jan Carney, M.D., M.P.H., associate dean for public health and health policy and Public Health Projects course director at the Larner College of Medicine.

*United Way of Northwest Vermont is leading this effort, engaging all United Ways in Vermont.*

*As a community-led organization, United Way’s work is driven by what our neighbors tell us is most important to them,* said Amy Carmola, Ph.D., director of community impact at United Way of Northwest Vermont. “We’re looking for people’s perspectives and priorities on their health to be able to better assess community needs and direct our investments.”

A total of 17 small, medical student groups will each look at one topic in the survey, conduct a literature review, analyze the data for their topic, and present the data and recommendations in research poster form at a December virtual session to celebrate and highlight findings.

*For late-breaking news of VTC participation in a COVID-19 vaccine trial, see page 9: “Phase 3 COVID-19 Vaccine Trial Comes to UVM and UVM Health Network.”*
UVM WELCOMES NEW GRADUATE STUDENTS

UVM graduate students bring a diversity of talents, skills, interests and backgrounds to their studies, helping them to grow into well-rounded scientists and researchers. Meet some of UVM’s newest graduate students entering master’s degree and Ph.D. programs this fall.

Chol Dhoor
Master of Public Health Program

Originally from the Republic of South Sudan, Chol Dhoor moved to Vermont 13 years ago and graduated as a McNair Scholar from the University of Vermont with a bachelor’s degree in Economics and Global Studies in 2016. He is now pursuing a Master’s of Public Health degree at UVM. In 2016, Dhoor founded the Sudanese Foundation of Vermont Inc., an organization which provides college scholarships, mentoring programs, job searching, summer camps, and additional services to the Sudanese community in Vermont. As he begins his studies, Dhoor says that he’s most excited about the diversity of his classmates. “Some of my classmates are doctors [or] Ph.D. candidates and others are taking this program as their second Master’s. The program brings such a richness into one place,” says he says, adding “I’m really excited about what is ahead to learn.”

Paola E. Peña Garcia
Cellular, Molecular, & Biomedical Sciences Ph.D. Program

Paola E. Peña Garcia is from Puerto Rico and recently graduated from the University of Puerto Rico with a bachelor’s degree in cellular and molecular biology. She attended a specialized school from seventh to twelfth grade where she intensively studied music along with her other subjects. During college, Peña Garcia’s self-claimed stage fright led her to seek out a different passion and she found her calling in science. It was a research opportunity during her undergraduate degree that led to her discovery of biomedical sciences and, she says, eventually cemented her decision to pursue a Ph.D. and career in research. Peña Garcia is particularly interested in lung immunobiology, inflammatory processes, and, overall, learning more about the cellular and molecular mechanisms of disease.

Harly Rodriguez
Master of Medical Science Program

Originally from Bronx, New York, Harly Rodriguez received a bachelor’s degree in neuroscience from Syracuse University. After graduation, he explored different career paths including medicine, high school teaching, and community organizing. Eventually, Rodriguez decided to enroll in the Master’s of Medical Science program at UVM and plans on applying to medical school to pursue a career in family medicine and psychiatry. Rodriguez co-founded the Bronx Community Health Leaders (BxCHL) at the Albert Einstein College of Medicine, a pre-health pipeline program. During the height of the COVID-19 pandemic in New York City, he worked as a medical scribe and medical assistant at an urgent care facility. Rodriguez is particularly interested in exploring “how mental health treatment is given to people of color,” and says his background will aid him in doing so. As a Latino from the Bronx, I come from an underrepresented minority background, which I know will set me up to help Spanish-speaking patients and patients of other backgrounds that experience health inequities,” he says.

Shannon Prior
Cellular, Molecular, & Biomedical Sciences Ph.D. Program

A lifelong Vermonter, Shannon Prior received her bachelor’s degree in biochemistry from UVM in 2014. After graduating, she worked in the lab of Kenneth Mann, Ph.D., now an emeritus faculty member, for three years before transitioning to the UVM Cancer Center, where she’s been working as a clinical research coordinator since 2017. Her goal is to become a cancer researcher, with a particular interest in exploring the epigenetic regulation of cancer. She is looking forward to collaborating with her peers and UVM faculty. “It’s exciting to get a chance to work with various investigators and groups who can bring their expertise to the table so we can work in a collaborative way to achieve a similar goal,” says Prior. “I really believe this is what leads to well-rounded, comprehensive research.”

WORKING FOR CHANGE

Through words, photos and videos, Chris Veal ’21 has been chronicling the effects of systemic racism while giving voice to peers who are underrepresented in the field of medicine. He is producing the Larner Stories Project, which features videos of classmates in conversation about challenges they have overcome in pursuing a medical career. A series of posts he wrote for the College’s blog follow his experiences participating in protests in Wisconsin and his home state of Illinois. His essay, titled “At the Intersection of Fear, Grief and Love,” was published online by the Annals of Internal Medicine in July. The following is an excerpt from his blog post, titled “We Are Ready for Change: United We Stand in Milwaukee.”

“Why did they shoot him so many times?” Jacob Blake asked his father as he began to regain consciousness in the ICU after he was shot seven times by the Kenosha Police. His father fought back tears as he struggled to answer a question so innocent yet so remarkably tragic. “Why did they shoot him so many times?” Maria Hamilton thought to herself as she sat at a memorial service for her son, Dontre Hamilton, who was shot 14 times by the Milwaukee Police six years ago. “Why do they shoot us so many times?” I shouted, with all the ferocity that question deserves, in union with over 100 protesters, on a sunny day as we marched through the streets of Kenosha, Wisconsin. This question became the newest chant for a movement that has turned the final words and names of Black lives cut short by police brutality into a rallying cry for justice. As my voice began to crack from the four hours of continuous shouting through my N-95 mask, I found myself breathless. The irony of my brothers and sisters in arms chanting “I Can’t Breathe!” was certainly not lost on me. I stepped away from the group and pulled down my mask. With my eyes closed, I enjoyed every bit of the Lake Michigan-infused air that effortlessly coursed through my lungs as I deeply inhaled.
VISION 2025

A UNIFIED STRATEGIC PLAN FOR THE LARNER COLLEGE OF MEDICINE

Over the past year, through open forums and with input from faculty, students and staff from across the institution, the College’s strategic plan has been refined to define who we are, what we care about, and to serve as a guide to our progress in the coming years.

Vision 2025 unifies plans within the College and aligns with the University of Vermont’s strategic vision for Amplifying Our Impact and the implementation of that vision through achievement of the Academic Success Goals.

LARNER COLLEGE OF MEDICINE MISSION

To educate a diverse group of dedicated physicians and biomedical scientists to serve across all the disciplines of medicine; to bring hope to patients by advancing medical knowledge through research; to integrate education and research to advance the quality and accessibility of patient care; and to engage with our communities to benefit Vermont and the world.

VALUES

• Professionalism at the heart of patient care, research, and education
• Diversity, equity, and inclusion as essential components of all we do
• Commitment to the wellness of students, staff, and faculty
• Innovation of clinical care, research, and education
• Advocacy to promote public health and improve social conditions, including rural health disparities
• Building on our land-grant heritage to improve the health of Vermont and our region
• Excellence in all we do
• Stewardship of resources
• Service to our patients, our university, and our community

STRATEGIC FOUNDATION

• Caring for our people (students, faculty, staff)
• Commitment to a culture of continuous quality improvement in all we do
• Getting the word out to the Larner community, UVM and beyond
• Commitment to a culture of continuous quality improvement in all we do
• Caring for our people (students, faculty, staff)
• Getting the word out to the Larner community, UVM and beyond

COMMUNITY

Commit to the health of our state and region

1. Build on the land-grant tradition of UVM in commitment to accessibility across economic class and leveraging our knowledge in support of the community
2. Focus on primary care and public health
3. Further strengthen partnership and synergy with the UVMHN
4. Strengthen policy and advocacy to promote public health and health equity: improve social conditions, including rural health disparities

RESEARCH

Advance scope and impact of research

1. Improve infrastructure: Firestone Building, Center for Biomedical Shared Resources, Given Building renovation; sustained access to shared resource services; enhanced data processing/storage capabilities
2. Focus on current strengths and future opportunities: strengths in mechanistic, translational, and clinical research domains; support for innovation and entrepreneurship
3. Strengthen mentorship and career development for faculty, graduate students, post-doctoral fellows, medical students, and staff; maximize recruitment and retention
4. Diversify funding portfolio for research support: foundations, industry partnerships, and philanthropy

EDUCATION

Prepare the physician of the future (M.D. 2030)

1. Incorporate missions of research and education into full implementation of network departments
2. Commitment to public health, population health, and health services research and value-based population care
3. Fully develop the role of Director of Research to increase the availability of clinical trials across the UVMHN; focus on rural healthcare delivery across our region
4. Fully develop the role of Director of Education to enhance clinical clerkship sites within the network; support graduate medical education; support innovation in continuing medical and interprofessional education

STRATEGIC PRIORITIES

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2. Focus on current strengths and future opportunities: strengths in mechanistic, translational, and clinical research domains; support for innovation and entrepreneurship
3. Strengthen mentorship and career development for faculty, graduate students, post-doctoral fellows, medical students, and staff; maximize recruitment and retention
4. Diversify funding portfolio for research support: foundations, industry partnerships, and philanthropy

1. Preserve the fundamentals of being a physician: professionalism; first, do no harm; joy of caring; wellness
2. Promote interprofessional education and care; incorporate personalized medicine (genomics, proteomics, etc.)
3. Enhance communication through telemedicine, social media, and digital health devices
4. Incorporate public health, environmental change, population health, health services research, big data, informatics, and artificial intelligence

1. Build on the land-grant tradition of UVM in commitment to accessibility across economic class and leveraging our knowledge in support of the community
2. Focus on primary care and public health
3. Further strengthen partnership and synergy with the UVMHN
4. Strengthen policy and advocacy to promote public health and health equity: improve social conditions, including rural health disparities

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In the late 1990s, a group of UVM medical students produced a pamphlet-sized journal in which they shared their poetry, prose, photographs and other artwork. Titled The Red Wheelbarrow, the publication took its name from the most famous poem of William Carlos Williams, the 20th century American poet—honored with both the Pulitzer Prize and the National Book Award—who was also, for more than 40 years, a family medicine physician in his native New Jersey.

At the Larner College of Medicine, The Red Wheelbarrow has developed into a yearly literary and visual arts journal that showcases the talents and insights of people associated with an institution dedicated to the science and art of medicine. These pages showcase a sampling of work from The Red Wheelbarrow 2020. The full issue can be found online at: med.uvm.edu/redwheelbarrow.
A Trio of Breast Cancer Stories

ELLEN ANDREWS, M.D.'75

I.
Angie was a racer.
Raced cars. The faster, the better.
Afraid of nothing, not even
the knot in her breast
the size of a lug nut and about as hard.
If she drove fast enough
it might just pop loose someday.
Drive fast enough, you know,
and things fly right out of a car.
You see lots of debris on the track.
Centrifugal force.
Things just go flying. Gone.

II.
After watching her grandmother go through this,
it was the one cancer she was most afraid of.
Even the label on her favorite bottle of wine
a sketch of two mountains in silhouette
sure looked like breasts to her now.
Hard to see only mountains anymore.

III.
When they said her breast cancer had spread,
Lucille wondered what would happen next.
Is that like cloning? Her breast is making more breasts?
But in the wrong places now?
Is that like when the birds carry seeds
and drop them anywhere, like into someone else’s garden?

SUSAN LUCE
Office of Medical Student Education
Bathed in Summer Sun

Heroics
BRADLEY SOULE, M.D.'59

That year of internship in medicine
we ran around all over saving lives—
or so it seemed. Resuscitations fail.
Survivors could be comatose or else
confused and could not tell me who they were,
let alone who I was. Who was I
in those starched whites, running to put out fires
which still burn, flames seen in the night?

MEL WOLK, M.D.'60
Canine America

KAYLA STURTEVANT
Class of 2022

ISI BEACH
Class of 2022
Moon Child

PETER A. BLACKSBERG
Member of the family of Robert Larner, M.D.'42
Stethoscope and Sphygmomanometer

VERMONT MEDICINE FALL 2020
My sister Jess takes a generous amount of ibuprofen for her cramps and there are often rogue ibuprofens floating around her dresser drawers, coat pockets, the cup holders of her car, under her bed.

My two little nieces were in her bedroom one evening and they pulled a conch shell from her nightstand and began admiring it. A snail used to live in there, Jess told them while folding a pair of pants, and they looked at her in disbelief and with wide eyes before returning their attention to the shell, turning it over in their hands. When they turned it one way, something clinked inside and a crusty ibuprofen fell out and onto the bed. They both fell silent and looked at it curiously. Jess glanced up from her basket of clean laundry. That’s an ibuprofen, she told them.

One niece picked up the ibuprofen slowly and held it up to the light between two fingers while the other looked closely at it, squinting her eyes. The snail became an eye-bee-profen, the one holding it said.
THE COVID-19 PIVOT

BY JENNIFER NACHBUR

LARNER RESEARCHERS CHANGE DIRECTION TO ADDRESS THE PANDEMIC
cross the globe, an international COVID-19 research movement was fast gaining traction, fueled by the immediacy afforded by the social media platform Twitter, which allowed scientists and clinicians to ask questions; share findings, treatments, and investigational approaches; and create collaborations in real time. Early research findings started popping up on preprint servers, like Cold Spring Harbor Laboratory’s bioRxiv.org, a platform that allows researchers to post complete, but unpublished, manuscripts—providing critical timely information to scientists. At UVM, administrative offices, departments, and centers quickly dedicated funds to the work, including those that had NIH funding applications under review. With more than a decade of experience conducting both basic science and clinical vaccine development research, many investigators in the UVM Vaccine Testing Center seized the opportunity to switch gears when COVID-19 entered the landscape, with funds available through the University’s Translational Global Infectious Disease Research (TGIR) Center at the ready.

One of those faculty members is Sean Diehl, Ph.D., an associate professor of microbiology and molecular genetics, who leveraged his lab’s extensive experience to explore the immune response in SARS-CoV-2.

SARS-CoV2 and the Immune Response

“We turned on a dime to work exclusively on COVID-19, adapting our expertise in measuring antibodies to such viruses as dengue and Zika to see if we could find out how this novel coronavirus activates the antibody response,” explains Diehl.

He’s quick to point out that it literally took a village to bring the research to life. His colleague Florian Krammer, Ph.D., of Mount Sinai’s Icahn School of Medicine in New York City, had published a preprint of a serological assay that Diehl deemed appropriate for his team’s work. Krammer mailed Diehl the tools needed to build the assay—some DNA spotted onto a piece of filter paper. Diehl’s lab got to work quickly: he notes that Nancy Graham, a technician in the lab, with support from technician Ben McElvany and graduate student Kip Strother, “had this assay up and running in less than a month, with our first results on April 14!”

Pathologist Jessica Crothers, M.D., a TGIR research project leader, played a strategic role in several Larner COVID-19 projects, including Diehl’s. Crothers secured Institutional Review Board approval to obtain as many blood samples as she could from March through May from the UVM Medical Center’s COVID-19 patients. Medical student Dale Griese and clinical research coordinator Ashley Miles compiled patient info so that Diehl and his technicians could design a serological assay that Diehl deemed appropriate for his team’s work.

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Pivot Once, Pivot Twice

In some cases, great concepts for adapting existing research were halted, due to lack of funding. Stapleton, a pulmonary and critical care specialist, was already three years into a National Institutes of Health-funded clinical trial examining the use of cycle ergometry and amino acid supplementation in ventilator-dependent patients with acute respiratory failure. She and her collaborators at Johns Hopkins and Queens University realized an opportunity to target their focus on COVID-19 patients who had been on ventilators. She applied for a supplement to the R01 grant for a cohort study investigating these patients’ inflammation and immune response outcomes over the course of a year and, using existing resources, she and her colleagues began enrolling participants.

Ultimately, the supplement did not secure funding, but with the blood samples her team had already obtained, she teamed up with Professor of Medicine and Chief of Cardiology David Schneider, M.D., to develop a study on biomarkers for thrombosis in COVID-19 patients. “Recent reports have noted that thrombosis complicates 16 percent of hospitalizations and thrombosis is a key contributor to respiratory failure,” says Stapleton.

While the grant won’t be reviewed until April 2021, Stapleton continues to be involved in SARS-CoV2 research. In collaboration with Botten, she’s enrolling COVID-19 positive patients for his lab’s work developing human monoclonal antibodies as a therapeutic for COVID-19.

A Virus that Robs Cells’ Ability to Sound Alarm and Defend

In addition to their many other projects, Botten and Bruce also collaborated with Dev Majumdar, Ph.D., assistant professor of surgery, and Mitchell Guttmann, Ph.D., a professor of biology at the California Institute of Technology. Working in the shared UVM - Vermont Department of Health BSL-3 facility, they examine each of the roughly 30 viral proteins in SARS-CoV-2 and helped map out how they interact with host human cells within a cell-culture dish. The results, published in October in the journal Cell, found that SARS-CoV-2 proteins attack three critical cellular processes that serve as the cell’s alarm system to call for help or warn nearby cells of infection. This new information provides insights into how to fight the virus.

“We understand so little about this virus compared to HIV or Influenza,” says Majumdar. “I’m looking forward to more basic science work so we can get a first draft of how this virus replicates and takes over the cell. Armed with that kind of information, we can think meaningfully about targeted therapeutics, monoclonals, and vaccines.”

A Vermont Model for Rural COVID-19 Communications

Launched in 2017, the Northern New England-Clinical and Translational Research (CTR) Network supports a wide range of clinical and translational studies that emphasize health problems endemic in the rural populations of Vermont, New Hampshire and Maine, where many of the residents are over 65 years of age and barriers can compromise rural health care delivery.

Associate Dean for Public Health and Health Policy Jan K. Carney, M.D., M.P.H., who co-leads the Rural Health Research and Community Engagement Core for the network, saw an opportunity to supplement this work in the face of the COVID-19 pandemic. She proposed and has been leading development of a unique, virtual two-way Rural Health Communications Network (RHCN), engaging all 11 U.S. CTR programs and working in collaboration with state departments of health to provide rapid, evidence based health communication to vulnerable rural populations for COVID-19 and all future epidemics. Vermont’s RHCN project features an inventory of communications channels in Vermont towns; a tracking system for evidence based health information delivery and receipt; tele-health and online technologies for education; outreach to vulnerable rural populations; and will host a Virtual Rural Health Communication Forum.

“CTR programs are serving as a regional and national resource to promote rural health communication,” says Carney. “Our goal is to develop a sustainable communications infrastructure with innovative technology and a ‘how to’ model for our predominantly rural populations that can be used today and long into the future.”

As Mud Season had, eventually given way to spring and summer, and spectacular early-Autumn foliage season faded into “Stick Season,” Vermonters, like people across the globe, looked warily toward the year ahead. On UVM’s campus, more than 50 COVID-19 related projects continued, in the hope that, with diligent research and successful vaccine trials, future Mud Seasons would once again be a time when the greatest worry for most people would be a rutted driveway.
When the SARS-CoV-2 pathogen began to spread across the globe in early 2020—country after country responding with shelter-in-place orders, mask mandates, and calls for solidarity with overstretched physicians and nurses—Davidson Hamer, M.D.’87, watched the virus’ emergence with a grim determination.

As co-principal investigator of the GeoSentinel Surveillance Network, a project of the Centers for Disease Control and Prevention (CDC) and the International Society of Travel Medicine (ISTM), Hamer has seen the beginnings of infectious disease outbreaks take shape many times, sometimes while monitoring from his office at Boston University, other times while he is out in the field. With 68 locations in 28 countries, the network compiles data from travelers, immigrants and refugees presenting at clinics with various illnesses, using the network’s reach across the globe to track the emergence of infectious disease and prevent its spread.

In the early days of the COVID-19 pandemic, reports from network locations began to show that this outbreak was different—and not the seasonal flu. GeoSentinel uses a special code for new diseases or particularly dangerous established diseases—called an “alarming final diagnosis”—and the core team receives an email when this type of report is recorded. Hamer, who had just returned to the U.S. from Japan, remembers the first emails coming in for COVID-19.

On February 1, a person in New York City from Wuhan, China, was reported with a COVID-19 diagnosis. A few days later, another traveler from China was diagnosed. Then two diagnoses in Tokyo, and one half a world away, in Liverpool.

“It was late February that it started to go haywire,” Hamer says. “The volume of cases reported by our sites grew really rapidly. We knew from what was happening globally that there was a problem.”

Davidson Hamer, M.D.’87, keeps tabs on the world’s most dangerous diseases.

By Erin Post
“COVID-19 has raised awareness of how vulnerable the global population can be in the context of a new disease arising.”

— DAVIDSON HAMER, M.D. ’87

In March, Hamer and colleagues watched the epicenter shift from Asia to “cases of people who had been exposed in Italy and Spain and other parts of Europe, traveling within Europe.” As we now know, the pandemic didn’t end there. COVID-19 traversed the globe in a matter of months, leaving hundreds of thousands of people dead and many more critically ill. And the fight continues.

Kristina Angelo, D.O., M.P.H., an infectious disease physician at University School of Public Health and School of Medicine. He’s taken on dozens of media requests for interviews, has become a consultant to organizations including Major League Soccer, and has played a key role in crafting Boston University’s plan to bring students back to campus safely in the fall.

“One of the things that makes him exceptional in this role is his collegiality and his ability to make friends wherever he goes,” Angelo says. “He has a natural gift for camaraderie.”

It would be an understatement to say that this year has been busy for Hamer, a professor of global health and medicine at Boston University School of Public Health and School of Medicine. He’s taken on dozens of media requests for interviews, has become a consultant to organizations including Major League Soccer, and has played a key role in crafting Boston University’s plan to bring students back to campus safely in the fall.

For the past two-plus decades, Hamer has been putting that multitasking ability to good use, with roughly 275 publications and probably better than anyone I’ve ever known.”

Hamer’s interest in answering this type of question—at the intersection of infectious disease and child health—dates back to the late 1970s, when he was working in Bangladesh as a medical epidemiologist with the CDC and Geosentinel Surveillance Network, says the network is beginning to shift under Hamer’s direction to projects related to COVID-19, while keeping existing research going as best they can. The relationships he’s developed over his decades of work in the field—bridging cultures and countries—have helped to move the organization forward even in this unsettled time.

“Not only is he brilliant, but he can synthesize a lot of information, bring the right resources to bear. He’s taken on improving neonatal and child health in addition to research on more than 50 projects in 20-plus countries, with a particular focus on developing countries.”

Hamer and Coffin are now starting to plan projects to safety allow other groups, like orchestras and bands, to resume tours. Kozarsky—a longtime collaborator years after graduating medical school with him. Back in 2011, Hamer found himself wavering.

“Figuring this out speaks to the next level of interventions,” says Coffin. “We might act differently for a chronic outbreak as compared to multiple reintroductions.”

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“We use this to look at both trends in infectious disease acquisition outside the hospital in institutional settings and also to track the emergence of new strains of disease and outbreaks,” says Coffin. “We can show how antibiotic resistance varies in different parts of the world and also show how intense a problem it is,” he says. Now that the scope of COVID-19, the network has sought supplementary funding for several projects, including one focused on identifying biomarkers for the disease. Another monitors for sentinel cases to help identify the risk, leveraging the network’s extensive reach to respond quickly. Hamer has been “instrumental in helping to coordinate and execute” these large, complex COVID-19 projects, says Angelo, his Geosentinel colleague.

As the world waits and hopes for a vaccine, Hamer points to widespread testing as critical to control COVID-19. Unfortunately, in many parts of the world, the resources and infrastructure are just not available to make testing widespread. "The end result is that they’re seeing a lot of people get sick and die from COVID-19, but never making that diagnosis,” he says. And in a metropolis like Dhaka, Bangladesh, where Hamer has colleagues and friends, the need to practice social distancing meets a reality that may not support it.

“If you’ve got a city of 17 million people that live on top of each other,” he says. “How do you tell them to keep apart or not to go to work if they’re in the service industry? There are a lot of challenges in terms of delivering testing, but also trying to deliver public health messages that people can follow.”

If there is a bright side, says Hamer, it’s that the world is now paying attention. His hope is that investment in disease surveillance and prevention will follow. “COVID-19 has raised awareness of how vulnerable the global population can be in the context of a new disease arising,” he says. Through it all, Hamer and his colleagues will be closely monitoring the landscape, trying to stay at least one step ahead of the infectious diseases threatening humanity.
I want to express my gratitude to all of you, my fellow alumni and physicians, for the resilience and leadership you continue to show as we grapple with the COVID-19 pandemic in different ways. I have been impressed with how our alma mater has made the best of a difficult and uniquely challenging situation by rapidly developing remote learning options for our students, ensuring that they can continue their medical education in the safest way possible. We are truly leading the nation in this regard! We are also hearing much positive feedback about Reunion 2020, our first virtual event. Although I certainly missed seeing all of beautiful Vermont in the fall, it was a great chance to connect. Much like our alumni near and far, the Class of 2024—our newest medical students—are rising to the challenges this pandemic presents. They’ve had to quickly adapt to a medical education that is different from what they expected, yet they remain enthusiastic, gracious, and ready for the challenges ahead. They also need your support. The College of Medicine Fund remains a critical source of unrestricted funds, in the last year, Dean Page was able to quickly allocate dollars for important student needs like enhanced wellness activities and psychological services. If there was ever a time for our community to pay it forward and support the College, it is now. Every gift matters—we want to show our students that their Lumen alumni stand by them as they navigate these difficult times.

Another way to make a difference: consider supporting the College’s ongoing commitment to diversity, equity and inclusion by contributing to the Collins Oguejiofor Scholarship Fund. Founded in memory of Collins Oguejiofor ’22, you can read more about Collins’s life and this important effort on the inside front cover of this magazine. We wish to honor Collins’s memory in a meaningful way by helping generations of future medical students achieve their dreams. Read more and give here: go.uvm.edu/collins

As always, I am humbled by the College’s long tradition of alumni supporting future generations of students. Your commitment to physician leaders of tomorrow is strong, and for that, I thank you all.

Share your news or updated contact information at go.uvm.edu/infoupdate, or contact your class agent, or the Lumen Alumni & Relations office at medalumni.relations@med.uvm.edu or (802) 655-4014.

1970s

Jim Bettis ’74: “I am proun this, we are all engulfed in this pandemic. California is burning now, with another shutdown looming for the state. I’ve been avoiding public events, hoping by the time you read this, there will be some form of vaccine to at least begin developing a degree of herd immunity. We are slammed at Children’s Hospital, as this is also the middle of trauma season, if dealing with COVID-19 is not enough. I’m looking forward to our spring vacation to continue to dodge the viral hit! We will have to choose between virus, as Syria has translocated out of her beautiful home and moved onward. Still in practice, now with a UCSF faculty appointment, as Children’s Hospital Oakland was merged with UCSF two years ago, we have 80 percent government-insured children, and our incomes were comparable with a $30,000 (!) loss in 2017 alone! I was married last year to Liz Cochran, a pediatric anesthesiologist with whom I trained at CHOP 40 years ago. We almost went then, but she was returning to Omaha, her home, and I came instead. We figured we’d work it out, at a remote site. Well, 38 years later we did. She’s still in full time practice. We were commuting, but the pandemic has been the brakes on travel. Lots of calls and zooming… for UCSF. ’I still serving with the Big Sur Fire Department, as I have a home in Big Sur. Weekend not on call are spent there. Also a privilege to continue to the tactical physician with the USMC Reserve. Lots of really good people out there causing mayhem. I hope everyone will continue to contribute to the endowment of our alma mater. They need our assistance more than ever in these financially challenging times. Everyone’s (SAF E, and we’ll gather again.) In the oysters we will be one.”

1980s

Dana Ames Millis ’85 has been appointed to the board of directors for the Good Shepherd Bank, Maine’s largest hunger relief organization. Since 2018, she has served as the chief health improvement officer for MaineCare, Maine’s largest health system. She previously served as the Medicare CCD director for 15 years.

2000s

Jill Samale recently returned to her role as the staff of Community Health Programs Barrington OB/GYN in Barrington, Mass. She is affiliated with Berkshire Medical Center and Fairview Hospital’s Family Birthplace. She practiced previously with the CHJH group and then joined Berkshire OB/GYN, a Berkshire Medical Center practice. From 2004 to 2014, Samale practiced at South County Hospital’s Comprehensive Women’s Health in Wakefield, R.I. Earlier, she provided general OB/GYN care at Alice Peck Day Memorial Hospital in Lebanon, N.H. From 2000-2005, she worked in private practice at Baystate OB/GYN Group.

2020s

Emily Harrison has joined the Network Health Care in Warwick, R.I., as a family medicine physician. Her clinical expertise includes women’s health and family medicine. She is fluent in Spanish and has spent most of her career working in the Latino community. She previously served as the medical director of the family medicine practice at Care New England Medical Group Women’s Care. She served as medical staff president at Manager of the OB/GYN division of Women’s Care and on Care New England’s Board of Directors.

Rebecca Bove (Mahony) has joined Boston IVF, one of the nation’s top fertility networks. Board-certified in both obstetrics/ gynecology and reproductive endocrinology/infectious, she is the chief reproductive endocrinologist at Boston IVF’s full-service fertility center and IVF laboratory in Quincy, N.Y.

Jonathan Pan recently joined Hanover Regional Medical Center Physician Specialists—Internal Medicine. He completed his residency in internal medicine and fellowships in cardiovascular disease and interventional cardiology at UVM. He is board-certified in cardiovascular disease, interventional cardiology and nuclear cardiology.

WANTED: STUDENT WELLNESS

Help students face the new and unique challenges of today with a gift to the College of Medicine Fund.

A global pandemic, economic uncertainty, and social and political upheaval—toadays students need your help. Your gifts will enhance wellness activities, tutoring, advising, peer support, diversity, and inclusion initiatives, and psychological services. It will also provide scholarships, travel and research grants, white coats, and more.

Give online at: go.uvm.edu/studentsbwell
A Note of Thanks

In this ongoing series, Vermont Medicine shares a note of thanks from a student for the support they’ve received from alumni.

Jhaimy Fernandez ’21 sends her gratitude for the William C. Street, M.D.’59 and Lorraine Hassan-Street Endowed Scholarship:

Dear Alumni,

Thank you for supporting my medical school education. My name is Jhaimy Fernandez and I’m a third-year medical student currently on my OB/GYN clerkship. I was born in Los Angeles to Mexican immigrant parents and I am the first in my family to attend medical school. I chose to attend Larner College of Medicine because of their commitment to teaching us to provide holistic care. Whether that be recommending yoga, breathing exercises or acupuncture in addition to pharmacologic interventions, I enjoy having a holistic education. Plus, I enjoy practicing yoga as well. I hope to become a primary care physician for underserved communities and incorporate holistic care in my practice.

It’s hard to believe I’m halfway through my third year in medical school. Medical school has continually broken me down and built me back up. This molding process has taught me patience, objectivity, and that we need to be versatile in all we do. I am thankful for my mentors and classmates who have supported me along the way.

Thank you once again for your generous contribution and opportunity to become the person I’m meant to be.

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Thank you once again for your generous contribution and opportunity to become the person I’m meant to be.

Sincerely,
Jhaimy Fernandez

A City United

Justin Genziano, M.D.’17, found himself at the front line of the COVID-19 pandemic in the spring of 2020 as an anesthesiology resident at New York-Presbyterian/Columbia University Medical Center. The following is his reflection on that intense time, which was first published on the Larner College of Medicine blog.

IT HAS BEEN TWO MONTHS SINCE the pandemic crept into our lives here in New York City. Back in March, I steeled myself for a waking nightmare after hearing about the dire situation faced in Wuhan, then Italy, then Seattle, a virus that became contagious and quickly spread around the globe.

There was no crash of a tidal wave, no sudden loss of balance on the ground. It was a slow, methodical process, similar to a virus spreading into a city and, in this case, the one in which we lived. As the numbers recede, our work continues. Normal will never be what it was several months ago, and it will still be a while yet before we know what “normal” will even look like. In the meantime, we have a responsibility to take a deep breath and reflect. One of our attending, at a recent meeting, stated that we will have come out of this as the world’s experts in managing COVID-19. It is a somber accolade. However, it means we are well-positioned to help. That same mission that guided our decision to become physicians holds firm—even in a pandemic.
✓ Reconnect.
✓ Remember.
✓ Celebrate!

MEDICAL REUNION 2020—WE DID IT

Even a worldwide pandemic could not keep UVM medical alumni from joining together virtually to see old friends and teachers, and share fond memories of the place where their medical careers began. Over the course of the first ten days of October, alumni from across six decades took part in Zoom webinars, meetings, recorded tours, and award recognitions, using technology to overcome distance and share each other’s company again. And overcome it they did: this “virtual” reunion attracted over 50 percent more alumni participants than most past in-person events.

“I know this is not how you imagined your 50th celebration and would prefer to be on campus today—I know I certainly would prefer that we were coming together in person. But, like good physicians, we are doing what is best for our patients and our communities and staying physically distanced.”

—Dean Richard L. Page, M.D., speaking at the Class of 1970 50th Medallion Ceremony

It’s not over yet!

Many of the reunion sessions are viewable online. See what all the excitement was about at go.uvm.edu/medreunion
DEVELOPMENT NEWS

PETERSON NAMED INAUGURAL GOLDMAN PROFESSOR

Thomas Peterson, M.D., chair of the Department of Family Medicine, has been invested as the inaugural Morris Goldman ’29 M.D.’32 Professor of Family Medicine. The ceremony was the first of its kind to be held remotely, via Zoom, on August 13, 2020.

Harriet Goldman and Michael Kaplan established the professorship in honor of Dr. Goldman’s late father, Dr. Morris Goldman, a member of the UVM class of 1929 who went on to receive his medical degree in 1932. As a Jewish man, Morris Goldman was always deeply grateful to the Vermont Medical Board in 2019. He went on to a career as the quintessential family physician. 

Like Morris Goldman, Peterson has dedicated his medical career to caring for multiple generations of families. He has twice been voted Family Practice Teacher of the Year and was honored as Family Physician of the Year in 2003 by the Vermont Academy of Family Physicians.

“T’im very proud to represent Dr. Morris Goldman and his contributions to healthcare. His example is an inspiration and in alignment with modern family medicine. Dr. Goldman provides a vision and a North Star for us all.” — Thomas Peterson, M.D.

The Larner College of Medicine community has come together to honor the memory of alumnus Jeffrey Schumacher, M.D.’74, through contributions to a fund created by his family to benefit the Department of Pediatrics. Over 80 households—including many classmates—have contributed to the fund, which has now surpassed $40,000. The fund, founded by the Schumacher family, supports students, residents, fellows and faculty “in their personal wellness, in the continued search for best practices in care and teaching, and in the commitment to the health of the children and families in our beloved Vermont.”

The Schumacher family has a long-standing connection to UVM and the field of pediatrics: Jeffrey and his wife, Caja, both graduated in the Class of 1974 and went on to become pediatricians. Two of their children, Erika and Heidi, graduated from the College in 2008 and 2010, respectively, and are also pediatricians. 

Jeff” by patients and families in Albany, N.Y., Dr. Jeffrey Schumacher is an emergency medicine resident physician in Utah. Known as “Dr. Jeff” by patients and families in Albany, N.Y., Dr. Jeffrey Schumacher leaves a legacy of three decades of compassionate patient care.

END-OF-YEAR GIVING AT A GLANCE

Between July 1, 2019 and June 30, 2020, more than 9,000 donors made gifts to support clinical care, research and education at the UVM Medical Center, the UVM Larner College of Medicine and the UVM College of Nursing and Health Sciences, for a total of over $25 million.

TANDOH APPOINTED GAMELLI GREEN AND GOLD PROFESSOR OF SURGERY

Margaret A. Tandoh, M.D., associate professor of surgery and associate dean for diversity, equity and inclusion, was invested as the inaugural Richard L. Gamelli, M.D.’74 Green and Gold Professor in Surgery during a virtual ceremony on September 22, 2020.

Established by Richard Gamelli, M.D.’74, and his wife Mary, this professorship honors his accomplished 40-year medical career and aims to support the work of Dr. Tandoh and her colleagues in the Department of Surgery.

Dr. Gamelli earned a medical degree from UVM, completed a five-year surgical residency at what is now the UVM Medical Center and was an attending surgeon caring for burn patients at the medical center for 11 years, serving as vice chair of surgery; monitoring countless medical students and residents, and conducting research. His burn care expertise led him to a distinguished career at Loyola University Chicago, where he served as senior vice president and provost of Health Services, the Robert J. Freeark Professor of Surgery, and director of the Burn Center at Loyola University Medical Center before retiring as professor emeritus in 2014.

Known for her extraordinary commitment to the local, regional and global community, Dr. Tandoh has dedicated her medical career to acute care surgery and the treatment of trauma and burn patients. She serves as the medical director of the Burn Program at the UVM Medical Center. A member of both the Advisory Council and the Learning Environment and Professionalism Committee, Dr. Tandoh also serves on the New England Surgical Society Task Force on Diversity in Surgical Leadership and was appointed to the Vermont Medical Board in 2019.

Attention, Please

FROM THE PREVIOUS ISSUE

The University of Vermont Larner College of Medicine
Medical Development & Alumni Relations Office
(802) 656-4014  |  medical.giving@uvm.edu  |  med.uvm.edu/alumni

The Summer 2020 Flashback drew a great number of responses from alumni in classes from the late 1970s. There was a wide range of suggestions for the students in the photo. The consensus seems to be that Class of ’79 members Tom Boduch, Sally Shulman, and Tom Harrington, along with Jim Senacquilo from the Class of ’80, are the students in the foreground. There were thoughts that the instructor could be Dr. Roy Korson, but most respondents voted for his being Dr. Jackson Clemmons (Dr. Clemmons was featured in the Summer 2019 Vermont Medicine when he received an honorary degree from UVM).

Thanks to alumni Tom Boduch, Cynthia Christy, Michael Herman, Jim Jarvis, Jon Keller, David Little, Gerard Nuono, Doroni Plante, and Maggie Spaul for their contributions.

We’re guessing the lecture was over, or not yet begun, in this photo that seems to have been taken in the “New” Hall A that existed on the second floor of Given from 1968 till the early 2000s. Is that person in front meditating on all the knowledge he’s just ingested? And who are his classmates?

Send your thoughts to Erin.Post@med.uvm.edu and we’ll include them in the next issue of Vermont Medicine.
Edward Byington Crane

Edward Byington Crane was born in Great Falls, Mont., on April 27, 1920, in Bedford, N.H., at the age of 89. Born in Barre, Vt., on Feb. 12, 1932, he earned his medical degree at UVM and completed internships at the University of Pennsylvania. In 1970, he moved to Waterville, Maine, to begin a hybrid acquisition of operation medicine and hospital administration at Mid Maine Medical Center, eventually serving as its president. He worked with colleagues on an ambitious project called Cancer 2000, which became the Alfond Cancer Center in Auburn. He retired from MMC to get into private practice of medical practice. Lastly, he served as the chief of medicine at the VA Togus Hospital in Augusta, Maine. He facilitated an overhaul of the management structure and facility improvements to help our veterans and families to receive better care. James Edward O'Brien

James Edward O'Brien, 77, died June 28, 2020, at his home in Great Falls, Mont. He graduated from UVM in the class of 1965 and served in the Army ROTC. Dr. O'Brien gained a master’s degree in cell biology from UVM in 1973 and has been a practicing physician in Great Falls, Mont., since 1977. He completed a residency in obstetrics and gynecology at Tufts University School of Medicine and a fellowship in gynecologic oncology at Dana-Farber Cancer Institute in Boston. Over the course of his professional life, he was a faculty of Tufts University, Harvard University and Brown University and on the staff of the Brigham and Women’s Hospital, and director of obstetric and gynecologic services at Mississippi and director of obstetric services in the Department of Anesthesiology. His bout in pediatrics brought him in touch with children. Edward Byington Crane was born in Great Falls, Mont., on April 27, 1920, in Bedford, N.H., at the age of 89. Born in Barre, Vt., on Feb. 12, 1932, he earned his medical degree at UVM and completed internships at the University of Pennsylvania. In 1970, he moved to Waterville, Maine, to begin a hybrid acquisition of operation medicine and hospital administration at Mid Maine Medical Center, eventually serving as its president. He worked with colleagues on an ambitious project called Cancer 2000, which became the Alfond Cancer Center in Auburn. He retired from MMC to get into private practice of medical practice. Lastly, he served as the chief of medicine at the VA Togus Hospital in Augusta, Maine. He facilitated an overhaul of the management structure and facility improvements to help our veterans and families to receive better care. James Edward O’Brien, 77, died June 28, 2020, at his home in Great Falls, Mont. He graduated from UVM in the class of 1965 and served in the Army ROTC. Dr. O’Brien gained a master’s degree in cell biology from UVM in 1973 and has been a practicing physician in Great Falls, Mont., since 1977. He completed a residency in obstetrics and gynecology at Tufts University School of Medicine and a fellowship in gynecologic oncology at Dana-Farber Cancer Institute in Boston. Over the course of his professional life, he was a faculty of Tufts University, Harvard University and Brown University and on the staff of the Brigham and Women’s Hospital, and director of obstetric and gynecologic services at Mississippi and director of obstetric services in the Department of Anesthesiology. His bout in pediatrics brought him in touch with children.
Students in the Class of 2024 wait in a physically-distanced line outside of the Larner College of Medicine to begin their first day as medical students. While Orientation had a different look and feel this year, the poignancy of the moment was no less significant.
14 The Red Wheelbarrow

The Larner College of Medicine’s yearly literary and visual arts journal, The Red Wheelbarrow, showcases the talents and insights of people associated with an institution dedicated to the science and art of medicine.

20 The Covid-19 Pivot

As the COVID-19 pandemic began its march across the globe in the spring of 2020, Larner physicians and scientists quickly adapted their investigations to focus on diagnostics, therapies and basic science research.

26 On Track

As co-principal investigator of the GeoSentinel Surveillance Network, Davidson Hamer, M.D.’87, has been at the front line of tracking the spread of COVID-19 and coordinating a response to the pandemic.