Better than best friends

Docent team members bond, find crucial support through challenges and fun times.
Features

A grand experiment
The Surgilab isn’t your typical research operation. Its team draws members from many non-medical fields to help find new ways to reduce surgical errors.

Tested by flood and fire
When Hurricane Harvey swamped the Texas Gulf Coast and wildfires turned life upside-down in many parts of California, School of Medicine alumni answered the call with courage, perseverance, great medical care and neighborly caring.

The Gold standard
From the beginning, the school’s docent system has fostered team learning and fast friendships. Hang out with the students in Gold 1 and they’ll tell you that’s still true — and vitally important — today.

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UMKC Medicine is published twice each year for alumni and friends of the University of Missouri-Kansas City School of Medicine. UMKC is an equal opportunity/ADA institution. 816-235-1830.

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UMKC HEALTH SCIENCES DISTRICT
The School of Medicine is a leading partner of the UMKC Health Sciences District, a group of health care institutions collaborating on research, clinical care, community wellness and health sciences education. www.umkchealthsciencesdistrict.org.
SINCE BECOMING DEAN in 2014, I have enjoyed interacting with the many fine individuals who come here every day to work and learn. Together, our efforts not only prepare some of the best physicians and health-care providers of the future, but also position the School of Medicine for continued growth and success.

We have many reasons to be proud:

• The docent system continues to be a source of pride and inspiration to all of us at the school, has been recognized as such by an external accreditation site visit team, and has been featured in several presentations and publications, nationally and internationally.

• The UMKC Health Sciences District is off to a strong start, bringing together 12 institutions on Hospital Hill to focus their collective talent on new and exciting initiatives.

• We continue to attract outstanding faculty members and offer excellent residency programs, including a recently approved neurology residency and endocrinology fellowship.

• Our faculty members are engaging more and more in competitive, externally funded, peer-reviewed research, and our graduate and certificate programs in biomedical informatics and other areas are doing very well.

• The school’s efforts to ensure that patients benefit from a well-educated team of professionals continue with our excellent physician assistant and anesthesiologist assistant programs.

This issue of UMKC Medicine highlights some of this exciting work, including researchers in our new Surgilab using innovative methods to study and improve safety in the operating room, and students from our Gold 1 docent unit building skills and relationships through peer mentoring and coaching. This issue also features alumni who responded to the devastating floods in Houston and the wildfires in California — physicians who exemplify the school’s imparting of the compassion and skills needed in critical situations.

Soon — July 1, 2018 — I will be leaving the School of Medicine to take the role of president and CEO of the Association of Academic Health Centers, a nonprofit organization based in Washington, D.C. But I leave knowing the school and its educational programs will remain in good hands.

My years here have been most rewarding, both professionally and personally, and I am grateful for the opportunity to have served as dean of this wonderful institution. Please continue to support it in every way you can.

Steven L. Kanter, M.D.
Dean, School of Medicine
**School announces associate dean for diversity, inclusion**

**E. NATHAN THOMAS**, a successful educator, entrepreneur and university administrator, has joined the School of Medicine as associate dean for diversity and inclusion.

Thomas has been vice provost for diversity and equity for the University of Kansas since 2014. Before that, he was the first campus diversity director at the University of South Florida Polytechnic and was founder and a consultant with Invictus Human Capital Management in Florida.

At Kansas, Thomas provided leadership in diversity, equity and inclusion for 21 non-academic and academic units. He expanded the program from a campus-wide to a system-wide model that encompasses four of the university’s campuses, including the medical school. He was responsible for implementing a Diversity Leadership Council work group to execute system-wide diversity efforts and developed work groups to coordinate diversity education and training for all new faculty, staff and students.

Thomas holds a bachelor’s degree in psychology, a master’s in community/clinical psychology and a Ph.D. in ecological-community psychology.

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**UMKC Health Sciences District takes on sponsorship of the Hospital Hill Run**

**THE UMKC HEALTH** Sciences District has agreed to serve as presenting sponsor for the 2018 Hospital Hill Run, scheduled for June 1 and 2 in downtown Kansas City.

For years, the School of Medicine, an integral part of the UMKC Health Sciences District, has sponsored the Friday night 5K run that kicks off the race weekend.

Hospital Hill Run has a long history with many of the health-care providers and facilities that make up the UMKC Health Sciences District. Partnership in the city’s oldest running event is a natural extension of those existing relationships.

“The UMKC Health Sciences District includes a dozen health institutions along the Hospital Hill Run race routes,” said Margaret Gibson, the event’s medical director.

Gibson, a UMKC School of Medicine assistant professor of community and family medicine, is affiliated with Children’s Mercy and Truman Medical Centers, and serves as team physician for UMKC Athletics. “Both district partners and the run also share a long history of promoting health and wellness in our community, so it’s a strong, natural partnership.”

Formed in 2017, the UMKC Health Sciences District is a partnership of 12 neighboring health care institutions on Hospital Hill: the University of Missouri-Kansas City and its School of Medicine, School of Nursing and Health Studies, School of Pharmacy and School of Dentistry; Truman Medical Centers; Children’s Mercy; Kansas City (Mo.) Health Department; Missouri Department of Mental Health Center for Behavioral Medicine; Jackson County Medical Examiner; Diastole Scholars’ Center; and Ronald McDonald House Charities of Kansas City. The district collaborates on research, grants, community outreach and shared wellness for employees, faculty, students and surrounding neighborhoods.

Now in its 45th year, Hospital Hill Run has been host to world-class runners, Olympians and more than 170,000 athletes of all levels from across the globe. This new partnership ensures that Hospital Hill Run will continue to enhance its legacy as one of the premier endurance events in the United States.

“The Hospital Hill Run was founded by Dr. E. Grey Dimond, founder of the UMKC School of Medicine, to promote health and fitness in Kansas City,” said Beth Salinger, race director. “This exciting partnership with the UMKC Health Sciences District will continue his vision of bringing health and wellness to the Kansas City region.”

The event now includes three distances: the Friday night 5K fun run, followed by a 7.7-mile race and a half marathon on Saturday morning.

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The School of Medicine has sponsored the Friday night 5K for several years.
UMKC welcomes C. Mauli Agrawal

A CHEERING CROWD of students, faculty, staff and Kansas City community members gathered in the Olson Performing Arts Center Feb. 9 to extend a warm welcome to University of Missouri-Kansas City Chancellor-Designate C. Mauli Agrawal.

“I feel honored and privileged that President Choi and the curators of the UM System have chosen me for this very important position,” said Agrawal. “I feel truly humbled. At the same time, I am very excited about the opportunity to lead UMKC to new levels of excellence.”

Agrawal, the interim provost and executive vice president for academic affairs at the 31,000-student University of Texas in San Antonio, was named chancellor-designate on Feb. 6 after a months-long search following the retirement of Chancellor Emeritus Leo Morton in August. In choosing Agrawal, UM System President Mun Y. Choi noted that he brought experience as an award-winning teacher, a researcher and fellow of the American Association for the Advancement of Science and the National Academy of Inventors, and a top university administrator.

Agrawal said he was impressed by Kansas City and well aware of what UMKC had to offer, including its School of Medicine.

“UMKC, with its top-rated programs in the arts and theater, and its various schools in the medical disciplines, biological sciences, engineering, management and education, has all the elements that are needed to make a great university,” said Agrawal. “But that alone is not sufficient. You also need the right environment.”

He wanted to know if Kansas City could provide such an environment.

“So, I looked at Kansas City. And I nearly fell off my chair. I do not know how you all have been keeping this such a secret, but this place is a city on the rise. It is on so many Top 10 lists: high-paying jobs, entrepreneurship, cities to watch, music scene and, yes, barbecue!”

Agrawal is scheduled to take over as chancellor June 20.

Children's Mercy neonatologist appointed Sirridge professor in medical humanities

BRIAN CARTER, M.D., is the new William T. and Marjorie Sirridge Professor in Medical Humanities. Carter joined the School of Medicine and Children’s Mercy Hospital in 2012 as a professor of pediatrics and bioethics. He serves as co-director of the Children’s Mercy Bioethics Center’s Pediatric Bioethics Certificate Course and practices at Children’s Mercy Hospital as a neonatologist.

Carter is an internationally recognized expert in medical bioethics and neonatal palliative care. He has received several NIH grants and published extensively on neonatology, neonatal intensive care, palliative care and bioethics. Carter is also the author of three textbooks on neonatal intensive and palliative care.

Carter is a graduate of the University of Tennessee College of Medicine and is a member of the Alpha Omega Alpha Honor Medical Society. He is board certified in pediatrics and neonatal-perinatal medicine. Carter served as an active duty U.S. Army Medical Corps officer and is a decorated Gulf War veteran.
Arnold leaves her mark on medical education

IT WAS 1971, early July. Louise Arnold and her husband, Wilf, were headed to Kansas City, where Wilf had accepted a faculty position at the University of Kansas School of Medicine. The night before arriving, they camped at Knob Noster State Park outside Warrensburg, Missouri. A University of Missouri-Kansas City dental school faculty member and his wife happened to be nearby.

Louise Arnold learned from her campsite neighbor that a new medical school was opening at UMKC in just a few weeks. It would take students straight out of high school and offer a bachelor’s and an M.D. degree in just six years. That was surely unusual, he exclaimed.

“That was our introduction to the UMKC School of Medicine,” said Arnold, who would spend the next 41 years supporting and promoting the school’s merits.

That fall, Arnold found that her training had positioned her as the perfect hire to be the new medical school’s education researcher and, ultimately, the associate dean of medical education and research.

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Arnold beat the clock, published her first major report and was hooked on research.

She cultivated her skills at Cornell University as she worked on a doctorate. Her dissertation explored how graduate students in chemistry and physics learned the non-technical aspects of being a scientist, “how to think, feel and act as scientists.” Her field work included interviews with Nobel Prize winners in physics such as Hans Bethe and classroom observations of other Nobel prize winners such as Richard Feynman.

As a postdoctoral fellow at Cornell’s Sloan Institute of Hospital Administration, she undertook a research project to determine what qualities enable hospitals to provide tender, loving care to patients.

It all combined to prepare Arnold for the UMKC School of Medicine.

“Being a sociologist interested in small groups and having the task of

THE PULSE

DEAN’S POP QUIZ

Every year, the School of Medicine graduates physicians who will be leaders across the medical field, including in general and specialized surgery. Which of the following distinguished surgeons are alumni from the UMKC Class of 1993? Can you identify them? For the answers, see page 27.

A) Certified thoracic surgeon at Mount Sinai St. Luke’s Roosevelt Hospital Center in New York. Associate professor, Icahn School of Medicine at Mount Sinai.

B) Orthopaedic surgery specialist in Scottsdale, Arizona, has treated Mizou Tigers, KC Chiefs and Arizona Cardinals during his residency, fellowship and current practice.

C) Pediatric otolaryngology-head and neck surgery specialist affiliated with several hospitals in southern Florida. Extensive published research.

D) Surgeon practicing trauma surgery and surgical critical care, affiliated with the Truman Medical Centers and Kansas City VA Medical Center. Associate professor at the School of Medicine.

E) All of the above
finding out what the impact this school would have on young people, particularly on developing them to think, feel and act as physicians, the job did marry up exactly with what I had been doing,” Arnold said.

***

A couple of years after Arnold retired as associate dean at the School of Medicine, the school’s new dean, Steven L. Kanter, M.D., approached her with an idea of looking at how the school propelled so many of its graduates into leadership positions at all levels of medicine.

“I had always thought that I wanted to follow up on our school’s graduates in some way. Dr. Dimond, one of the school’s founders, always said that ‘the proof of the school was in the pudding.’ But that was a daunting prospect, and I never had the time while I was working to do that,” Arnold said. “So, when Dean Kanter asked, ‘Are you interested in that?’ I thought, wow, his question makes concrete what has been in the back of my mind for years.”

Arnold and several colleagues surveyed alumni in leadership positions. Their answers pointed to the school’s encouraging culture and docent system as vital elements. Those were the same key elements that Arnold spent more than 40 years helping refine and meld into the school’s curriculum and touted to medical educators nationwide.

***

Very few medical schools offered similar programs when Arnold and Virginia Caulkins, then assistant dean for students, invited colleagues from Boston, Michigan and Northwestern to gather at an Association of American Medical Colleges conference. They compared notes on selecting and supporting students for their accelerated programs, on curriculum and on what was working.

“We found we were all having the same issues,” Arnold said.

As the number of schools with combined baccalaureate-M.D. degree programs grew, so did that group, formally becoming the National Group on Combined Baccalaureate-M.D. Programs in 2002. It has met annually ever since. Arnold was appointed the founding chair and began consulting with other medical schools about their programs.

She helped the City University of New York develop a seven-year combined degree medical school. The University of New Mexico also developed a combined baccalaureate-M.D. program with her help. Arnold encouraged faculty at the University of Washington to use learning communities, patterned after UMKC’s docent system, to deliver part of their clinical curriculum.

By 2011-2012, more than 60 medical schools incorporated some form of learning communities similar to those at UMKC. Many are members of the National Learning Communities Institute that Arnold and other leaders informally organized. It now conducts its own full, stand-alone conference during the AAMC’s national meetings.

Arnold, flanked by Rebecca Pauly, M.D., and Dean Steven L. Kanter, M.D., received the first Louise Arnold Medical Education & Research Award in 2016.

AAMC’s national meetings

“I can’t say enough wonderful things about how the UMKC School of Medicine supported me and gave me the freedom to grow professionally,” said Arnold, who has also lent her expertise to a handful of schools overseas. “It allowed me to become active professionally at the national level, and through that I have had some opportunities to interact with people overseas, and some of the things we did early on have flourished.”

School of Medicine.

“You’d almost have to be crazy to leave, from my perspective,” Arnold said. “I have had wonderful colleagues. I have some really, really good friends on the faculty. I feel very fortunate.”

Having grown up on the East Coast, Arnold admits that she does find it somewhat surprising now to have spent the majority of her adult life in Kansas and Missouri. But there’s a good reason that she stayed.

It’s home.
SURGICAL INNOVATIONS

A research lab at the School of Medicine has a different approach to making surgeries safer. By Kelly Edwards
In the U.S. airline industry, after decades of improvements and strategies designed to reduce the risks of flying, the accepted standard is making risks as low as reasonably possible. Today, airline travel is among the safest forms of transportation in the world.

At the University of Missouri-Kansas City School of Medicine, Gary Sutkin, M.D., professor of surgery and associate dean for women’s health, has adopted the same standard when it comes to errors in the operating room.

“Human error is inevitable,” Sutkin said. “It can’t be eliminated in the operating room, but it can be minimized. So that’s our term — as low as reasonably possible. The airline industry has the exact same motto. They know they can’t get human error down to zero, but they can get it pretty close.”

Sutkin’s efforts have led to the creation of his Surgical Innovations Laboratory at the School of Medicine. Nicknamed the Surgilab, it’s where Sutkin and his team take a different approach to medical research. The team itself is an innovation, drawing from several non-medical disciplines to explore ways to stamp out risks by improving operating room procedures.

Gathered around the lab’s conference table might be a biomedical engineer, a theater professor, a medical student, a mechanical engineer or even a communications specialist, all studying a surgical procedure displayed on a bank of video monitors.

In addition to observing the technical aspects of the medical operation, these researchers watch the movements and non-verbal communications of the surgeons, assistants, nurses and technicians throughout the procedure, looking for ways the OR team can more effectively work together to make the surgery safer for the patient.

“We try to be different in our approaches to science. We try to be

— Gary Sutkin

Left: Gary Sutkin, M.D., brings years of advanced surgical knowledge to his team of mostly non-medical experts.
“iconoclastic,” said Sutkin. “These are big problems that have eluded solutions. They challenge us to ask how we can make surgeries safer. Our belief is the only way we’re going to solve these problems is with new approaches. That’s why we want to be different. That is why our lab looks the way it does.”

Two bean bag chairs sit on a colorful carpet in one corner of Sutkin’s third-floor think tank. A nearby bookcase is filled with props that Sutkin uses to help explain the technical aspects of surgical procedures to the non-medical members of the team. The Surgilab’s video monitors fill one wall at the end of the conference table. Blue, red and orange chairs surround the table, the different colors representing the different ideas that come from team members with various backgrounds.

All of it is by design, Sutkin explains, to foster an atmosphere of creativity.

During a work session, Fizza Mahmud, Sutkin’s research assistant, hands him a can of Play-Doh from a box on the bookshelf. Sutkin shapes it into a model of part of the human anatomy and then uses that to describe to his team how a surgical instrument is used — or misused — during an operation.

“We’re one big community here trying to make surgery safer by cutting down on errors and improving communication,” Sutkin said. “The operating room is such a high-risk environment. You have all these people from different backgrounds trying to work together, all with the same goal: to have an effective, safe surgery. But they have to communicate well to do that.”

Margaret Brommelsiek, Ph.D., brings her different perspective to the research team as a communications
Research assistant Fizza Mahmud brings Play-Doh to Gary Sutkin, M.D., during a discussion around the Surgilab conference table. Different chair colors represent different disciplines that come together there.

professional. An associate research professor in the School of Nursing and Health Studies and director of Interprofessional Education for the Health Sciences, Brommelsiek has extensive experience in applying interprofessional communication to health professions education and interprofessional clinical practice.

Her surgical experience, on the other hand, is limited to the two times in her life that she was a patient.

“I’m looking at things more from the patient’s perspective than from the surgeon’s perspective, and that brings a different lens to the research,” Brommelsiek said. “It’s a different kind of critical thinking. We’re learning to look for non-verbal cues that occur during a surgery. What is the context of what happened in the operating room? What informed the conversation that goes on during the surgery?”

Sutkin said it was his interest in the social sciences that led him to the idea of the Surgilab. It brings together researchers from different disciplines that wouldn’t typically seem to have a correlation to medicine.

“Sometimes it’s when you take two different ideas that you come up with something really interesting and novel,” he said. “That’s what I like about having people from different backgrounds come together.”

Sutkin’s work began while he was a member of the faculty at the University of Pittsburgh School of Medicine. It was there that he began working with a cognitive psychologist who, he said, brought a different way of thinking to the research arena.

Those differences helped spark new thoughts about how to approach surgeries and patient safety.

“Some of our best ideas came from those different approaches,” Sutkin said. “Usually it happened where she’d say something and I’d say, ‘Well, that’s just crazy.’ Then, I’d think about it and realize, wait a second, that’s crazy smart.”

One high-risk surgery Sutkin’s team is scrutinizing inserts a supportive mesh sling under a woman’s urethra. The procedure requires only a small incision but can result in a bladder injury or, worse, a potentially fatal perforation of a bowel or blood vessel.

“The most serious injuries occur in less than 1 percent of these surgeries, but that’s still too much,” Sutkin said.

To see which surgical motions most often result in such errors — and better teach how to avoid such motions and injuries — the team will use motion
sensors to detect and analyze Sutkin’s motions as he performs the procedure repeatedly on a 3D model.

Sutkin’s team also is working with third-year medical student Debolina Kanjilal to create a theoretical model that links surgical techniques to adverse operating room outcomes. The idea is to find common themes among errors in all types of surgeries and find a way to eliminate them.

Sutkin and Kanjilal have developed a flowchart that fills a whiteboard on one wall. Arrows outline the progression of a typical surgery and deviations from prescribed techniques that lead to errors and adverse patient outcomes. The information is derived from a continuing series of interviews with local surgeons that Kanjilal has spent hours conducting.

“What we see is that surgeons more often tend to do a procedure the way they’re taught, or the way they’ve been doing it for a long time, even if there may be evidence for doing it another way,” Kanjilal said. “As humans, it’s difficult for us to change if we’ve been doing something one way for years.”

In 2016, Sutkin moved to Kansas City and joined the UMKC School of Medicine. With the support of the school’s dean, Steven L. Kanter, M.D., he immediately went to work establishing his Surgilab.

“Coming to UMKC, I was trying to replicate that relationship between surgeon, scientist and social scientist,” Sutkin said. “We’ve come up with more good ideas here.”

The overall goal of the Surgilab, Sutkin said, is to find the links between variables involved in surgeries and adverse effects and make corrections that will help surgeons maintain the immense trust that patients place in them every time they walk into an operating room.

“Human error is a part of any high-risk industry,” Sutkin said. “Whether it’s aviation, the railway industry or surgery, safety incidents are going to happen. You’re never going to get it down to zero, but you’re always trying to make it lower and lower.”

Researchers look to shorten the learning curve in the operating room

FIZZA MAHMUD CALLS IT an “ah-ha” moment. It’s that epiphany that happens when a medical resident in training is struggling to learn a surgical move and the light bulb suddenly clicks on.

“We have film clips proving that there are certain moments that happen in the operating room, where the attending is telling the resident how to do something but the resident is trying to figure out on his own how to do it,” Mahmud said. “And then it just happens, in a second. They figure it out, ‘Oh, that’s how I’m supposed to do it.’”

A research assistant in the UMKC School of Medicine Surgical Innovations Lab, Mahmud works closely with lab director Gary Sutkin, M.D., professor of surgery and associate dean for women’s health. They have watched numerous surgical procedures to better understand the learning curve that occurs in the operating room.

It’s something every surgeon experiences, Sutkin said, learning how to not make surgical mistakes. “I definitely experienced that early in my surgical career,” Sutkin said. “I look at how long it took me to learn from my mistakes and I think, that’s too long.”

That’s why Mahmud and Sutkin spend hours studying videos of surgeries, looking for something that can help young surgeons shorten that learning curve and discover the correct and safest methods as quickly as possible.

Mahmud and Sutkin attended an Association of American Medical Colleges conference in March where they were invited to present their latest findings in a meeting of the Central Group on Educational Affairs.

One issue among surgeons, Sutkin said, is consistency in performing challenging surgical techniques that are hard to replicate time after time. Back in the Surgical Innovations Lab, he and Mahmud continue to search for new ways to make surgical procedures more standard, more consistent and ultimately more safe.

“Our scientific ‘ah-ha’ moments come here at this conference table more than they come in the operating room,” Sutkin said.
When hurricane rains flooded Houston and wildfires devastated parts of California, School of Medicine alumni including Kayla Lash, M.D. ’15, stepped up.
Training physicians to treat any patient under any circumstance is one goal of the UMKC School of Medicine. Developing caring, collaborative health professionals is another. Last year, several alumni showed those capabilities and qualities in the face of massive flooding in Houston and deadly wildfires in California.

For one physician, that meant working at her hospital for five days straight; for another, coping with a crushing patient load when she could finally get back to work. Still others dealt with the personal and professional aftermath of the floods and fires for weeks as it rippled through their practices. For most, it meant gratitude for not losing their own homes and extra compassion for patients and colleagues more directly affected.

**Riding out Hurricane Harvey**

As an obstetrics and gynecology resident, Kayla Lash, M.D. ’15, is used to working long hours. But when Hurricane Harvey hit Houston last Aug. 25, Lash really was put to the test.

“I went to work on a Friday night at Memorial Hermann Hospital in the Texas Medical Center, for a shift until 8 a.m. Saturday,” she said. “I left around 10 a.m. Tuesday.”

During that time, Harvey, a Category 4 hurricane, brought 130-mph winds and a year’s worth of rain — 30 to 60 inches — to various parts of Houston.

“The hospital was essentially on lockdown with our teams working, sleeping and living at the hospital and trading off shifts,” Lash said. “The roads leading to and surrounding the hospital were flooded most of that time. We were stranded but also couldn’t leave until our relief teams were able to get in.”

The number of new patients coming in wasn’t large, but the staff was plenty busy tending to the mothers and infants stranded there with them.

“Many of these patients didn’t have a safe way to leave, and many had suffered flood damage to their homes, making it unsafe to take a brand new baby home,” Lash said. “So we had an overflowing floor full of moms with newborns and nowhere to go who stayed a few extra days until they could get out safely to family or friends.”

More patients did make it in, including one who named her baby Harvey.

“One patient’s water broke at home, and she drove halfway to the hospital but couldn’t make it the rest of the way by car,” Lash said. “She walked through knee-deep floodwater and was in active labor when she got to labor and delivery. She delivered a beautiful baby girl within 20 minutes of her arrival.”

Another patient was stranded in an apartment complex where a general surgery resident and an internal medicine resident also lived.

“They called us and we talked them through preparing to deliver the baby,” Lash said. “They had a whole delivery room set up, but a few hours later the Coast Guard was able to fly the patient in to us and we delivered her son.”

Despite the unusual birth stories, what Lash remembers most was the incredible way her hospital family — residents, attending physicians, nurses, techs — all came together. “We worked as a team and did our best to provide the best care possible to our patients.”

So once she got home, Lash didn’t stay there long.

“I made cupcakes and took them back that night for a surprise birthday party for one of the nurses who was still stuck working,” Lash said.

Marianna Sockrider, M.D. ’83, also was stranded for several days in Houston, but at home rather than at work. That wasn’t too bad personally because she and her husband had power from a generator and solar panels, and their house didn’t flood.

But it was a problem professionally, because Sockrider is chief of pulmonary clinics for Texas Children’s Hospital. Those clinics run five days a week at three hospital campuses and four satellite locations. Their staff is made up of 26 pediatric pulmonologists, nine fellows and a nurse practitioner.

“I spent a lot of time on the phone with updates on which clinics we could open, and how to staff them,” she said.
Sockrider, a member of the American Academy of Pediatrics, also has a doctorate in public health. She is particularly interested in treating chronic lung diseases and works with many families whose children have cystic fibrosis and asthma. She knew the storm’s aftermath would be a huge challenge, given that mold would be widespread, and the oil and petrochemical industries in Houston had not been able to protect their facilities.

“I realized we needed resources for families,” said Sockrider, who also is associate editor for patient and family education with the American Thoracic Society. She helped solicit and edit a patient information piece titled “Mold-specific concerns associated with water damage for those with allergies, asthma and other lung diseases.”

Another Houston physician, Kavita Shah, M.D. ’06, also noticed a surge in such respiratory cases after the storm. Shah, a hospitalist at Baylor St. Luke’s Medical Center, was not on duty during the flooding but came back to work soon after.

“I noted a significant increase in cystic fibrosis patients. As the water was rising in their homes, they just left, forgetting to take any of their medications or nebulizers with them,” she said. “One patient was living displaced,
The first week after the flooding was particularly challenging, said Shah. Admissions were up as more people could get to hospitals and more people needed to — from new illnesses caused by the flooding and from chronic conditions made worse.

“The staff — physicians, nurses, social workers, ancillary staff — came together to do what we could for the patients, slowly healing them physically and, we hope in some ways, mentally.”

Mental healing also is the work of Joyce Davidson, M.D. ’79, a psychiatrist at the Menninger Clinic and the Baylor Psychiatry Clinic in Houston. Her neighborhood was flooded, but her house, on high ground, was spared.

“I had parked my car on the highway and used a boat to get to it and back each day,” she said.

What she saw when she got to the Baylor clinic, which treats outpatients, was a surge in those traumatized by the events that came after the storm.

“Several were left homeless,” she said. “Many needed to be rescued from their houses by boat or transported to shelters in the back of a dump truck.”

The most vulnerable patients were hit the hardest, said Davidson, some in unexpected ways.

“My specialty is anxiety disorders and OCD. Some hoarding patients had their houses flooded and all of their possessions needed to be disposed of. At first, this may sound fortunate. But these people were devastated more than the average person because of their attachment to all their stuff.”

Fire fears and toxic smog

A few months later across the country, another disaster was bearing down — out-of-control wildfires in California. Sue Hall, M.D. ’83, was spared the immediate terror when wildfires struck her neighborhood in Ventura in the early hours of Dec. 5.

“My neighborhood was evacuated the first night of the fire, and I happened to be in San Francisco, so I didn’t go through that trauma,” said Hall, a neonatologist based at St. John’s Regional Medical Center in Oxnard, northwest of Los Angeles. “But when I called my neighbor the morning after, he told me, ‘There’s a 75 percent chance your house is gone.’ ”

When she got home the next day, her house was intact. But just down the street and in many surrounding blocks, 500 homes had been reduced to concrete, stone and ash, and 27,000 people had been evacuated.

The Thomas Fire, so named because it started near Thomas Aquinas College, eventually claimed 440 square miles in Ventura and Santa Barbara counties. And it wasn’t fully contained until mid-January. The fire affected Hall’s practice and others across Southern California for weeks.

Hall said the staff at her hospital in Oxnard and its neonatal intensive care unit scrambled continually.

“One by one, people in different neighborhoods had to evacuate as the fire spread from Ventura to Ojai to Santa Barbara,” she said. “Homes of different staff became threatened, and more nurses and doctors had to evacuate. Our practice had to alter its schedule several times.”

Hundreds of houses were destroyed in Sue Hall’s Ventura neighborhood.
After the fires came the mudslides. “The community was amazing figuring out transportation solutions as Highway 101, the only thoroughfare between Ventura and Santa Barbara, was closed for two weeks,” Hall said.

“One of my physician partners was able to take a private plane, which community members generously donated, to get from Santa Barbara into Oxnard. The alternative was taking a boat or doing a 6-hour drive around, which was out of the question given the urgency at the medical center.”

Hall, who was medical director for neonatal intensive care at Stormont-Vail HealthCare in Topeka from 2007 to 2014, has written and presented on the importance of supporting families of infants in intensive care. So she knew it was crucial to reassure parents that their infants were in controlled environments and receiving whatever care they needed.

“My hospital restricted entry to the front door for several days to help keep smoke out,” Hall said. Fortunately, her little patients didn’t suffer from the staffing challenges inside the hospital or the smoke-filled skies outside.

California’s wildfires were even worse to the north, starting in April and turning deadly in October. The most damaging ones were in Sonoma County, where nearly 7,000 structures across 145 square miles were destroyed. Those fires accounted for 25 of the state’s 47 fire deaths last year.

Far beyond the land they scorched, the fires also made the air bad enough to trigger skin conditions, said Vikas Patel, M.D. ’13.

“My office was in the danger zone of the Sonoma County wildfires,” said Patel, whose dermatology practice is in Walnut Creek, about 25 miles northeast of San Francisco. “These fires led to weeks of unhealthy air quality alerts. We had many patients come in with exacerbations of chronic skin conditions.”

Patel said the conditions fed on themselves for weeks: “The smog, along with the great emotional stress, created a pro-inflammatory environment. We had many late days helping people deal with these issues; both eczema and psoriasis have negative feedback loops

“Chronic skin conditions flared up for many patients of Vikas Patel, M.D. ’13.

hardship, having volunteered at a shelter in 2007 when wildfires claimed homes in his area. So he was ready to volunteer again.

“The Lilac Fire was relatively small but affected 150-plus homes,” said Ho, a geriatric neurologist specializing in memory disorders and Alzheimer’s. He runs a large private memory disorders and concussion center in San Diego, involved in treatment and research in dementia.

“These are our neighbors, so I volunteered with a charity, the Tzu Chi Foundation. We distributed thousands of dollars to 41 families, many who had lost everything.”

In Houston, home-stranded Sockrider could spend only so much time helping manage her clinics online and by phone. “I sew and quilt, so I headed to my sewing room and got busy.”

One of her colleagues was flooded out of his house while he was on hospital duty for six straight days, riding out the storm. He got a “Texas Strong” quilt based on the Lone Star State’s flag.

Another colleague whose home was underwater got special pillowcases for her three children.

“I thought, they can’t sleep in their own beds,” Sockrider said. “Maybe having Cinderella or Spider-Man on their pillowcase would help.”

Across town, Shah, the hospitalist, said she and her colleagues continued to work closely together in the hurricane’s aftermath, bolstering their patients and in turn being inspired by them.

“Despite the devastation that hit Houston, Houstonians remained strong and resilient,” Shah said. “Even now, as we still recover, the positive outlook remains.”

“The community was amazing figuring out transportation solutions.”

– Sue Hall
It's not unusual for three conversations to be going on at once in Truman Medical Center's Gold Clinic, especially when David John, M.D. '77, and his students in the Gold 1 docent unit are on duty.

“He's a 66-year-old male experiencing some respiratory distress. He was prescribed Cipro but he hasn't been taking it because he says he can’t afford it.”

“The blistering could indicate pemphigus vulgaris. How do you treat that?”

“What movie should we see? I haven’t seen a movie in a long time.”

It’s a Thursday morning in January, and John and seven students are packed into an office made for four people. John has a dozen patients to see by noon at the Gold outpatient clinic, one of four at the hospital served by docents and their students. Plus, it’s the first day back in clinic after winter break for some of the students, and there’s catching up to do.

Words ricochet around the office as fourth-year B.A./M.D. student Austin Harris debriefs with John after an initial patient interview. Deven Bhatia, a fifth-year student, is sharing his copious notes on skin diseases with Tony Esswein, a third-year student. A couple of others are figuring out how to fit a movie break into the coming weekend.

It’s all part of staffing the clinic — and of the docent unit experience, a unique feature of the UMKC School of Medicine since its founding in 1971. In each unit, guided by a supervising physician “docent,” a group of third-year through sixth-year students learns by working and studying together in outpatient clinics and on in-patient rounds, and by sharing a study and office area in the School of Medicine.

From observing the Gold 1 students several times in clinic spring semester — half of them work Thursday mornings and the other half work Friday mornings — it was clear they were developing leadership, learning from one another and, perhaps most importantly, building strong personal bonds.

“In their docent unit, students find crucial support, friendships and lessons — and then pass them on

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“Medical school is challenging, and your 20s can be a tough time,” said Katie Payne, a fifth-year student who’s in the Thursday group. Friends who understand what you are going through are crucial, and Payne said the students in Gold 1 support one another well.

Besides being under John’s guidance, each third- and fourth-year student has a fifth- or sixth-year “senior partner” for one-on-one help and advice. Esswein and Bhatia are one such pair, which is one reason Bhatia wants to make sure Esswein is ready for the next big pathology test.

“It’s part of my job, but I also want to do it because Suzan did it for me in the past, and she has the most awesome notes,” Bhatia said, smiling toward Suzan Lisenby, who’s on track to graduate in May.

“I do! I want to publish my notes,” said Lisenby, perched on the ledge by the room’s only window, next to a carton of bagels she brought to share with everyone.

On the receiving end of the help is Esswein. “Everyone in our docent unit is always willing to help me understand anything I ask them about, including drugs, diagnoses or terms I have never seen before,” he said. “They are also
David John, M.D. ’77, and some members of his Gold 1 docent unit.
super-helpful in understanding how to apply for elective rotations and how to prepare for future coursework. As older students, they have done it in the past and relied on their senior partners.”

Connecting one class to the next

“We are a close group,” said Lisenby. “We look out for each other, and you can always find someone to help or just hang out with. We do things together at holidays and birthdays, and do a group outing every few months.”

Besides helping Bhatia in the past, Lisenby now partners with fourth-year student Drew Lecuru, “so we have four generations right here” in Thursday clinic, she said. That draws a smile from Lecuru, as well as from Esswein and Bhatia as Lisenby gets the four of them together for a quick group photo.

It also gets an approving look from John, who has emphasized teamwork since taking over as Gold 1 docent in spring 2017.

“We’re better when we work together and learn from each other.”

– David John

“I inherited a great group of students, but we’re better when we work together and learn from each other,” John said.

He pushes the students to develop their competence and confidence, along with their intuition and empathy — to use everything they have. In discussing a patient, whether in clinic or on inpatient docent rotation, John constantly shares his thought process and knowledge gained in more than 30 years of rheumatology practice and teaching. His questioning is incisive but never harsh, designed to add to students’ knowledge and to make them think and apply what they already know to their current patient.

“Medicine is an art and I’m always learning, too,” John said.

He also gives Gold 1 students a living link to the school’s history and tradition as one of its early graduates. During a rare lull in the clinic chatter, he shared some of his memories.

One student mentioned reading that women outnumbered men in U.S. medical school enrollment for the first time in fall 2017. But UMKC was way ahead of that curve, having its first female-majority class in the early 1980s. John offered one possible reason for that.

“Dr. Marjorie Sirridge was someone for women medical students to look to for inspiration,” John said.
“She graduated first in her class at KU, back when women didn’t go to medical school. And at UMKC she was one of the original docents; later, she was the dean. The school has always had women in leadership. She was the first.”

John spent most of his career practicing and teaching in Hawaii, but when he heard in 2014 that Dr. Sirridge was in failing health, he came back to Kansas City to see her shortly before she died. “She made time for me, when she knew she might not have much time left, and I spent a wonderful afternoon visiting with her,” John recalled. “She was an extraordinary presence, a great advocate for including the humanities in medical education, and a big influence in my life.”

John said that visit probably led to his current job, too. “I had been away a long time, but some people remembered me, maybe because I had come back to see Marjorie Sirridge. So, when there was an opening, Steve Waldman saw me at a reunion function and said, ‘Why don’t you come back and be a docent?’”

Many ways to bond

The Gold 1 students are glad that John took the offer from Waldman, the school’s associate dean of international programs, chair of the Department of Medical Humanities and Bioethics, senior docent for year-one and year-two students and, like John, a member of the school’s Class of 1977.

Waldman knew John would be a good fit, and Esswein agrees. “My favorite thing about Dr. John is that he realizes we are all still learning as we go through clinic, so he takes the time to help us understand what he is doing and how to do it ourselves in the future,” Esswein said. “For example, when he is looking at X-rays, it only takes him a couple of seconds to find what he needs. However, he then takes the time to explain to us what he was looking for and how he found it. He talks about the different bones and joints on the screen and explains what common things we should look for.”

Another third-year student, Faith Mueller, added, “I appreciate how clearly Dr. John loves both medicine and his job. This makes his teaching both genuine and engaging.”

The students said John expected a lot from them and let them do more than they had expected in clinic. That pays off in learning more and then having more to share with their peers.

According to senior-partner Payne, “That can be a lot of practical things, such as inputting orders ourselves when a patient needs tests or an X-ray, with Dr. John looking over our shoulder to make sure everything is correct. He shows us things about billing and coding, too, that we don’t need to know for class but will be really helpful after we graduate.”

Maliha Bhatti, a fifth-year student, added, “Dr. John shares a lot of ‘life stuff,’ not just the sciences. He teaches us a lot about appreciating each other and our patients, and he makes it fun.”

Speaking of fun, Bhatti then checked her smartphone and answered a
The other half

For all their bonding, though, there is one question that divides the students of Gold 1: Which is better, the Thursday clinic group or the Friday crew?

“Oh, definitely Friday,” fifth-year student Amaka Ofodu said at the beginning of a recent Friday clinic. The other students in the room all smiled and nodded their agreement. And for the next three hours, Ofodu and her colleagues demonstrated the teamwork and inquisitiveness John encourages — complete with continually overlapping conversations.

“I don’t think the rash indicates Lupus. Lupus rashes tend to be in unexposed areas.”

“When did you take Step 1? I think I’ll be ready in a couple of months if I can just finish the work for my undergrad courses soon.”

“Be sure to include that the patient has a family history of the illness. That’s relevant here, and it can help with insurance coverage.”

“This winter has been so dry and my hands get so chapped. What hand cream do you use?”

The Friday group includes one particularly aligned junior-senior partnership, fourth-year student Keaton Altom and sixth-year student Adam Kisling.

“We’re both going the military route,” Altom said. “We commit to a year’s service for each year of medical school the Army pays for.”

Kisling, who will start an internal medicine residency at Tripler Army Medical Center in Honolulu after graduation, said, “The school tries to match junior-senior partners with some things in common, and Keaton and I were a natural.”

Altom agreed. “Adam always knows what will be coming up next for me.”

The Friday group’s teamwork also is evident when its two third-year students, Mueller and Tejal Desai, need help. They both work easily with John and aren’t shy about asking questions of the other students.

On a recent Friday, Desai saw a patient with several health conditions to address, a frequent occurrence at Truman’s clinics, and her senior partner was absent. But Ofodu and then Altom discussed the conditions with her, including back pain and high blood pressure, before she debriefed with John. She and John then revisited the patient and decided on treatments, and Altom helped her get started on her report on that patient.

Mueller also had seen someone with multiple medical conditions, so the patient’s write-up was anything but straightforward. But fourth-year student Elizabeth Onishchenko had seen the same patient before, a few Fridays ago, and she and Mueller worked through the report quickly. They also got some help from Ofodu, who is Mueller’s senior partner.

“I learn best in a team, having a larger pool of experience and knowledge to draw from,” Mueller said. “My senior partner is fantastic, a wonderful partner.”
combination of challenging and supportive.”

The Friday group blends diverse talents, interests, backgrounds and academic strengths. One week, the seven students present counted nine languages they could speak or read.

“It seems that no matter what your question is, someone here knows the answer,” Onishchenko said.

**A Thursday group ending**

March 1 was Lisenby’s last scheduled shift in Gold Clinic. Her Thursday colleagues, led by the fifth-years, Bhatia and Payne, made sure Lisenby knew she would be missed.

A big farewell card opened, accordion-style, filled with their well wishes. A multi-layer cake (“Costco is the best,” Bhatia said) provided the sweet in the bittersweet clinic shift. And group photos were taken, well before most of the morning’s patients arrived and everyone had to get down to work.

After graduation, Lisenby will head to Salt Lake City for her residency at the University of Utah Affiliated Hospitals. She will miss her colleagues, she said, but take her Gold 1 lessons, experiences and friendships with her.

Smiling, she lingered over the jokes and messages on her farewell card and then looked up and said, as if it were her diploma, “This is an honor.”

**A Friday group beginning**

One recent clinic session started with Ofodu reciting “Recuerdo,” an 18-line poem by Edna St. Vincent Milay that John had assigned her. It describes a couple’s lovely night together, riding a ferry back and forth across a channel, and gazing at the moon from a hilltop, and at each other from across a table, until the sun rises “dripping a bucketful of gold.”

John is a product and proponent of the school’s use of art and the humanities to touch the hearts of physicians-to-be in ways the sciences don’t. And whether or not everyone that morning grasped the poem’s meaning, the students all had experienced a piece of art about making memories together. And then they went about their work — absorbing, assembling and applying medical knowledge, yes, but also creating memories, forging human connections and becoming healing artists.

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**THE UMKC SCHOOL of Medicine** is known for developing leaders, and recent research identified the docent system as an important reason for that. The study originated from Dean Steven L. Kanter’s observation that the school had produced a substantial number of graduates who have ascended to leadership positions in patient care, research, education, the military, organized medicine, industry and government. “I was curious to know why this medical school is graduating so many individuals who achieved so much,” he said.

School of Medicine graduates from 1976 through 1999 in leadership positions were interviewed. The study was led by Louise Arnold, Ph.D., former associate dean for medical education and research, and Paul Cuddy, Pharm.D., vice dean. The graduates, who had received no formal leadership instruction, said the docent system played a critical role in their success. They noted it had contributed to the development of their leadership skills though years of clinical training, combining of third- through sixth-year students, junior-senior partnerships and team experiences.
Third-year teams dive into research projects

THE EXPANSION OF student research at the UMKC School of Medicine got a big boost this school year with the addition of an in-class research project for all third-year medical students. Their work, in teams of four, resulted in dozens of study posters filling the school lobby for presentation, judging and discussion.

The teams used data from the Cerner HealthFacts database to try to answer a unique question they identified related to various diseases and conditions. Those examined included Alzheimer’s disease, stroke, obsessive-compulsive disorder, epilepsy and diabetes. After analyzing the data and drawing conclusions, each team made a poster displaying its question and hypothesis, telling how the team members went about testing their hypothesis, explaining their findings, and identifying questions for further study.

The idea behind the exercise was to give students an early research experience, and for many it was their first medical research. Several students said that before the exercise they were worried about how difficult it would be to do research, but now they looked forward to being able to do more.

“The process was as important as the results,” said one of the students, Tom Matthews. “Learning how to do this and present our findings was valuable.”

The exercise was devised by Jennifer Bickel, M.D. ’01, associate professor of pediatrics and chief of the headache section at Children’s Mercy Hospital; Julie Banderas, Pharm.D., BCPS, professor and associate dean for graduate studies; and Paula Monaghan-Nichols, Ph.D., professor and chair of the Department of Biomedical Sciences and associate dean for research.

Each team also had a faculty mentor and a supporting biostatistician from the Department of Biomedical and Health Informatics, professor and associate dean for graduate studies; and Paula Monaghan-Nichols, Ph.D., professor and chair of the Department of Biomedical Sciences and associate dean for research.

John Foxworth, Pharm.D., was one of several judges who rated the research projects and asked the students about their findings.

Two students selected for national American College of Physicians positions

SIXTH-YEAR MEDICAL STUDENT Rahul Maheshwari and fourth-year medical student Diana Jung have been selected to take part in national initiatives with the American College of Physicians.

Maheshwari was chosen to participate in a four-week ACP Health Policy Internship in May. That allowed him to travel to Washington, learn about the legislative process and help in the research and analysis of current health and medical issues and policies. He also had the opportunity to attend congressional hearings, work on lobbying efforts and help lead discussions of medical issues of particular interest to medical students, residents and fellows.

Jung has been selected to the ACP’s national Council of Student Members. The group works closely with the ACP Board of Regents and Board of Governors to review programs, products and services. ACP is a national organization of more than 150,000 internists, internal medicine subspecialists, medical students, residents and fellows. It is the largest medical-specialty organization and the second-largest physician group in the United States.
Six hospitals band together in patient safety consortium

THE UNIVERSITY OF Missouri-Kansas City School of Medicine is launching a consortium focused on patient safety in collaboration with its affiliated teaching hospitals.

The UMKC Healthcare Quality and Patient Safety Consortium, an initiative created by the UMKC School of Medicine, includes faculty and teaching programs at Children’s Mercy, the Center for Behavioral Medicine, the Kansas City VA Medical Center, Research Medical Center, Saint Luke’s Hospital and Truman Medical Centers. These six hospitals are the affiliated teaching hospitals for the UMKC School of Medicine and already work closely with the medical school, providing residents, fellows and students clinical education and training.

“This is an exciting opportunity to bring together our hospital affiliates in a coordinated effort to raise the bar even higher on the safety and quality of care we provide patients throughout our community and our region,” said Steven L. Kanter, M.D., dean of the UMKC School of Medicine.

Peter Almenoff, M.D., UMKC professor of medicine and the Vijay Babu Rayudu Endowed Chair in Patient Safety, agrees. “Together, we are combining our strengths to reduce preventable harm and ultimately improve health outcomes in Kansas City and beyond.”

Betty Drees, M.D., UMKC professor of medicine and dean emerita, oversees the development of the Healthcare Quality and Patient Safety Consortium at UMKC School of Medicine, which also aligns with the purpose of the UMKC Health Sciences District, formed in 2017 as a cooperative partnership of 12 neighboring health-care institutions on Hospital Hill. The UMKC Health Sciences District supports research, grants, community outreach and shared wellness for employees, faculty, students and surrounding neighborhoods. In addition, UMKC is one of only 18 institutions nationwide that offers a medical school along with dental, nursing and pharmacy schools on a single campus.

United in leadership, expertise and resources in education and research, the consortium will lead scholarship and dissemination of local, regional and national activities directed to improve the quality of health care and patient safety.

The consortium will focus on four key areas in quality improvement and patient safety: a robust curriculum; infrastructure support for projects and collaboration; promotion of research and scholarship; and improving community safety.

Students make the most of emergency medicine skills conference

STUDENTS INTERESTED in emergency medicine took part in a day-long conference at the School of Medicine Clinical Training Facility, learning and practicing a variety of emergency procedures in the Youngblood Skills Lab.

The fifth-annual Emergency Medicine Interest Group Skills Conference drew 33 medical students to the February event. They participated in work stations that included chest tubes insertions and intraosseous infusion, lumbar punctures, suturing, emergency ultrasound, airway management and emergency radiology.

Emily Hillman, M.D., assistant professor and emergency medicine clerkship director, organized the conference with the help of interest group student officers Caroline Baghdikian, Joseph Bennett, Deven Bhatia, Jordann Dhuse, Brendan Kurtz and Alie Reinbold.

“Students truly value this experience,” Hillman said. “They put immense time and effort into planning this event. We will begin planning for next year soon.”
## Destinations revealed

**AN EARLY MORNING** rain shower couldn’t dampen the Match Day excitement March 16 at the UMKC School of Medicine. More than 110 graduates-to-be gathered with family and friends to find out where the next chapter of their medical careers would unfold. Their residencies will range across 31 states and the District of Columbia and include placements at the Mayo Clinic, Johns Hopkins, Emory, Duke, Vanderbilt, Northwestern and the University of Chicago. Thirty-three of the residencies are in the Kansas City area, mainly through UMKC and its affiliate hospitals.

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### PEDIATRICS
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- **Joshua Gollub**  
  Eastern Virginia Medical School – Norfolk, VA
- **Bridget Hall**  
  St. Louis Children’s Hospital – St. Louis, MO
- **Simran Jutla**  
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- **Bridget Hall**  
  St. Louis Children’s Hospital – St. Louis, MO
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  Eastern Virginia Medical School – Norfolk, VA
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- **Radhika Manne**  
  Hospital of the University of Pennsylvania – Philadelphia, PA
- **Denesh Ratnasingam**  
  Detroit Medical Center-Wayne State U. - Detroit, MI

### PLASTIC SURGERY
- **Shikhar Tomur**  
  U. of Kansas School of Medicine – Kansas City, KS

### PRELIMINARY GENERAL SURGERY
- **Shweta Nelluri**  
  Montefiore Medical Center/Albert Einstein College of Medicine – Bronx, NY

### PRELIMINARY MEDICINE
- **Gaurav Anand**  
  U. of Kansas School of Medicine – Kansas City, KS
- **Ravali Gumm**  
  UMKC – Kansas City, MO
- **Ahsan Hussain**  
  U. of Tennessee College of Medicine – Memphis, TN
- **Brooks Kimm**  
  UMKC – Kansas City, MO
- **Eric Merrill**  
  George Washington University – Washington, DC
- **Omar Qayum**  
  St. Vincent Hospital Center – Indianapolis, IN
- **Denesh Ratnasingam**  
  UMKC Programs – Kansas City, MO
- **Nidhi Reddy**  
  Presence Saint Francis Hospital – Evanston, IL
- **Katherine Suman**  
  U. of Utah Affiliated Hospitals – Salt Lake City, UT

### PRELIMINARY SURGERY
- **Vishal Thumar**  
  Lankenau Medical Center – Wynnewood, PA
- **Christopher Tomassian**  
  Kaiser Permanente – Los Angeles, CA

### PSYCHIATRY
- **Henry Bai**  
  University Hospitals – Columbia, MO
- **Aparva Bhatt**  
  UMKC Center for Behavioral Medicine
- **Anchana Dominic**  
  University Hospitals – Columbus, MO
- **Justin Garcia**  
  UMKC Center for Behavioral Medicine
- **Elizabeth Jarvis**  
  U. of Iowa Hospitals and Clinics – Iowa City, IA
- **Jonathan Kuhlman**  
  UMKC Center for Behavioral Medicine
- **Jacob Lee**  
  UNMC Center for Behavioral Medicine
- **Sumita Sharma**  
  BI Deaconess Medical Center – Boston, MA

### RADIATION ONCOLOGY
- **Danielle Cunningham**  
  Mayo Clinic School of Graduate Medical Education – Rochester, MN

### RADIOLOGY
- **Fatima Sharif**  
  U. of Washington Affiliated Hospitals – Seattle, WA

### TRANSITIONAL YEAR
- **Race Creeden**  
  Naval Medical Center – Portsmouth, VA
- **Danielle Cunningham**  
  Mercy Hospital – St. Louis, MO
- **Radhika Manne**  
  St. Vincent Hospital Center – Indianapolis, IN
Technology helps us get together and be involved

I’M REMINDED DAILY of the value of personal commitment and human connection, both in medical practice and in serving as your alumni president.

For example, it was gratifying to see so many of you in person in February at the Swinging for Sojourner event at Topgolf, which raised more than $9,000 for our student-run health clinic serving the homeless. Then, just a few short weeks later, I witnessed many more connections being made or renewed at the Alumni Reunion in April.

And it’s good to see technology making it easier for all of us to stay connected — with one another and with our School of Medicine. There are so many resources for staying informed, as well as volunteer opportunities to stay involved, at med.umkc.edu/alumni. If you haven’t visited the website lately, I encourage you to do so.

Looking for a classmate, or trying to remember everyone you saw at this year’s reunion? Check out the school’s online alumni directory.

Wondering what lectures, symposiums and other activities are coming up on campus? Try the school calendar.

Want to sign up to be an alumni board member or an alumni advisor, or just help at our next event? That information is available online, too.

Your alumni board members are committed to giving you the resources needed to stay informed and connected, and we thank you for your continued support and involvement.

Let us know what else we can do to make your alumni experience even more rewarding.

Tracy L. Stevens, M.D.
President, National Board of Alumni and Partners

Stay connected!

UMKC Medicine publishes information submitted by alumni, news released by employers of alumni and selected news stories that mention alumni and their affiliation with UMKC. Please send updates to medmagazine@umkc.edu or complete an online form at med.umkc.edu/magazine/submit.

DEAN’S POP QUIZ ANSWER
E) All of the above

A) Sandhya K. Balaram, M.D. ’93, Ph.D., FACS
B) Frank Moussa, M.D. ’93
C) Debra Jaffe, M.D. ’93, FAAP
D) Stanley M. Augustin, M.D. ’93

For the question, see Page 4.
Alumni weekend

PAST, PRESENT AND FUTURE came together April 20-21 during alumni weekend. The reminiscing and reconnecting commenced Friday evening with a reception at the Diastole Scholars’ Center. A tour of the school Saturday morning let alumni revisit their docent units and see what students are up to today, represented in part by dozens of research posters throughout the school. A reception and dinner Saturday evening at the Rockhill Grille capped the weekend’s events and gave alumni time to look forward to continuing their support for the school in the 2018-’19 school year.

All names left to right as pictured. 1) Mark Dick, M.D. ’93; Mario Benavides; George Hsin, M.D. ’93. 2) Ralph Harold, M.D. ’83; Carla Harold. 3) All M.D. ’93: Sean McLaughlin, Sunanda Reddy Vadapalli, Stan Augustin, John Wesley Ruffin. 4) Members of the Class of 1993. 5) Melissa Lawson, M.D. ’93; Beth Harvey, M.D. ’93. 6) Julie Wood, M.D. ’93; Ralph Wuebker, M.D. ’94. 7) Timothy Lee, M.D. ’94; Tony Sun, M.D. ’93; Mark Kuo, M.D. ’93. 8) Mangesh Oza, M.D. ’96; Michelle McKee Oza, M.D. ’98; Heather Walton Wuebker, M.D. ’98; Ralph Wuebker, M.D. ’94. 9) All M.D. ’98: Tim Weber, Mario Castro, Cynthia Kardesch, Jeffrey Matthews. 10) Dennis Greer, M.D. ’78; Deborah Greer; Daniel Cline, M.D. ’78; Jeremy Baptist, M.D. ’78; Avis Garrett Baptist, M.D.
Golf outing raises more than $9,000 to support Sojourner

MORE THAN 100 PEOPLE showed up on a warm February afternoon to take part in a golf outing that raised more than $9,000 to support the UMKC School of Medicine’s Sojourner Health Clinic.

Sponsored by the school’s National Board of Alumni and Partners, the Swinging for Sojourner event drew a broad group of supporters and golf enthusiasts.

“Our School of Medicine Alumni Board did a fantastic job creating this event,” said Fred Schlichting, School of Medicine director of advancement. “It was great to see UMKC alumni, students, friends and family swinging the clubs and having fun. It was a picture perfect day for an incredible cause.”

Participants filled 19 playing bays at the Topgolf driving range in Overland Park, Kansas, and its banquet room after the golf competitions. Several individuals and community partners, as well as UMKC athletics, UMKC Foundation and UMKC Charter Schools, pitched in to host teams or serve as event sponsors.

Tracy L. Stevens, M.D. ‘90, president of the School of Medicine alumni association, welcomed the participants during the banquet. Merriam Massey, program assistant for Sojourner Clinic, also addressed the crowd. Second-year student Mrudula Gandham, one of the more than 200 student volunteers who operate the clinic, also spoke about the effect of the Sojourner Clinic on the community and the education of UMKC students.

Sojourner Clinic opened in 2004 in downtown Kansas City to provide free health care for the inner-city homeless. Each year, volunteers provide more than 1,500 hours of service to treat some of the city’s most vulnerable patients.

The clinic has expanded to include volunteers and services from the school’s physician assistant program, the UMKC School of Dentistry, the physical therapy program at Rockhurst College and others.

“One of the major assets of Sojourner is collaboration,” Schlichting said. “Our School of Medicine students had the foresight to include other schools and community partners to create and sustain a first-class clinic. Next year we will be inviting all of our partners in the UMKC Health Sciences District to get involved with Swinging for Sojourner.”

Tournament sponsors: Corey Iqbal, M.D. ’03; Diana Dark, M.D. ’80; Tracy L. Stevens, M.D. ’90; Ahmed Awad, M.D. ’89; Valerie Rader, M.D. ’05; Blue KC.

Team sponsors: Susan Storm, M.D. ’85; Lisa Fitzpatrick, M.D. ’92; Steven Waldman, M.D. ’77; Julie Brown-Longly, M.D. ’00; UMKC Foundation; UMKC Athletics; UMKC Charter Schools Center; Truman Medical Center/University Health; Truman Medical Center Lakewood; Department of Community and Family Medicine; Polsinelli.

Class notes

WES STRICKER, M.D. ’79, is the 2018 UMKC Alumni Award winner from the School of Medicine. Stricker founded and manages Allergy & Asthma Consultants, which has been treating patients in central Missouri for more than 35 years. He also owns Ozark Allergy Laboratory, Clinical Research of the Ozarks and an aviation company, Ozark Management.

JOHN BEALER, M.D. ’86, has joined Children’s Hospital Colorado’s outpatient specialty clinic in Colorado Springs. He is a professor of surgery at the University of Colorado School of Medicine and has a specialty in fetal surgery.

JENNIFER ELLIOTT, M.D. ’96, was inducted into the Lee’s Summit High School Hall of Fame in April. She is director of chronic pain management at Saint Luke’s Hospital of Kansas City, associate professor of anesthesiology at the School of Medicine, and lead editor of the “Handbook of Acute Pain Management.”

COLE FITZGERALD, M.D. ’12, a board-certified anesthesiologist and pain specialist, has joined Houston Methodist Pain Management Associates in Texas at Houston Methodist Willowbrook Hospital.

LESLEE BALL-SCOVEL, M.D. ’98, who practices internal medicine in San Antonio, was installed as a fellow of the American College of Physicians at the organization’s Fellows Convocation Ceremony in April in New Orleans.

GREGORY WITKOP, M.D. ’90, has a new book out, “Dignified Leadership: Curing the Cancer of Objectification.” Witkop, a board certified ophthalmologist, is an affiliate research scientist at the University of Washington’s Applied Physics Laboratory in Seattle and since 2002 has been a special agent of the FBI.
Surgical innovator Michael Hinni wins 2018 Take Wing

"FOR MANY MEDICAL STUDENTS, the specialty picks the person, and not the other way around," said Michael Hinni, M.D. ’88, the 2018 winner of the E. Grey Dimond, M.D., Take Wing Award.

If that’s the case, surgery made a great choice with Hinni, a pioneer in performing and then teaching innovative head and neck surgery, all while building an academic department.

“I needed to fix things, so surgery attracted me,” Hinni said.

“When I was on an otolaryngology rotation and first walked into an OR and observed a middle ear reconstruction — using a microscope, and all its precision, so cool — I was hooked!”

After Hinni graduated from UMKC’s B.A./M.D. program, his internship in general surgery and residency in otolaryngology were at Mayo in Rochester, Minnesota. After that, he was hired at the Mayo Clinic in Arizona, where he now is a professor of otolaryngology and head and neck surgery and head of the Department of Otolaryngology.

He also had a year’s fellowship in Germany studying transoral laser microsurgery — surgery that removes head and neck tumors through a patient’s mouth rather than cutting through the neck and jaw. Hinni brought the technique back in 1994 and became one of the first two U.S. surgeons using it.

“There was great resistance, because head and neck tumors had always been removed by opening people up,” Hinni said. “But I ran with it, and eventually we had a record of success.”

Hinni said the surgery offers great benefits to a patient, cutting hospital stays from 10 days or two weeks to three days, greatly reducing the difficulty of recovery and allowing patients to eat and speak by avoiding a tracheostomy and extensive reconstructive surgery.

“Now there are minimally invasive surgeons in most academic centers throughout the country,” Hinni said.

Along the way he has treated some well-known patients, including U.S. Sen. John McCain and Buddy Bell, the former Kansas City Royals manager and Major League third baseman.

Hinni also built the otolaryngology program at Mayo in Arizona, which had little research or academic offerings when he was hired.

“Building a program from scratch has been gratifying and humbling. You don’t build something like that without great collaboration and motivated partners.”

He expanded the Arizona location’s thyroid surgery practice, and Mayo Rochester residents came for some of their thyroid surgery experience. He also trained residents from the military, first from the U.S. Air Force and then the Army and the Navy. Eventually that meant he had two residents training year-round.

In 2006 the Department of Otolaryngology Head & Neck Surgery/Audiology launched an independent otolaryngology residency program with Hinni as its founding director.

“If I retired tomorrow,” Hinni said, “starting that residency is what I would be most proud of.”

Hinni also looked forward to returning to UMKC to receive his Take Wing Award, give the annual lecture at its presentation and address the 2018 School of Medicine graduating class.

“I made the best friends of my life,” Hinni said, ticking off names from his Class of ’88. “Jimmy Hartman and Tom McGinn, John McKenzie and Marty Emert. I had the good fortune to be roommates and hallway buddies with them at the old 5030 Cherry Street dorm. They’re just wonderful people and caring doctors, all at the top of their field.”

He also credited “my great senior support partner,” Cindy Chang, M.D. ’85, “and more great faculty members than I can name.”

“I’ve been very blessed in my career at Mayo,” Hinni said. “But UMKC was my launching pad. The camaraderie and the education were phenomenal.”
A historic transition at the top

FORTY YEARS AGO, in 1978, the UMKC School of Medicine changed deans for the first time. Harry S. Jonas, M.D., succeeded the founding dean, Richardson K. Noback, M.D. Jonas, who served as dean until 1987, started in academic medicine as a volunteer teaching in the residency program at Kansas City’s General Hospitals 1 and 2. He was recruited to serve as the first chairman of the hospitals’ Department of Obstetrics and Gynecology, a post he later held at Truman Medical Center. At the School of Medicine, he was an assistant dean and chairman of the Council on Evaluation before becoming dean. Jonas said he found his greatest reward in his work with students, but he also helped the school overcome skepticism about its unconventional docent system and six-year program. Jonas eventually became national secretary of the Liaison Committee on Medical Education and an assistant vice president of the American Medical Association.
Plan Your Next Getaway

Adventure and memories await as you explore destinations around the world.

UMKC alumni and friends receive exclusive discounts on trips through Go Next, one of the best tour companies in the United States. A portion of each booking supports UMKC student scholarships and programs. Find details for these and other trips at umkcalumni.com/travel

Summer Down Under  
Australia & New Zealand  
February 13-March 1, 2019

American Charm  
Southern Mississippi River  
April 7-April 15, 2019

Majestic Frontiers  
Alaska & Canada  
June 12-June 19, 2019

Castles and Countryside  
British Isles & Ireland  
June 26-July 5, 2019

Paradise Uncorked  
Wines of the Pacific Northwest  
September 15-September 23, 2019

European Variety  
Italy, France & Spain  
September 30-October 11, 2019

RECONNECT...  
NETWORK...  
ENGAGE

Connect with fellow alumni through the School of Medicine Alumni Directory + access professional and career resources!

Start using these tools at: med.umkc.edu/alumnidirectory
Some love — and roses — for Valentine’s Day patients

A dozen students with dozens of roses brightened Valentine’s Day for patients at Truman Medical Center-Hospital Hill. The students, members of the UMKC School of Medicine’s chapter of the Gold Humanism Honor Society, delivered the roses along with Valentine’s Day cards. The activity was part of National Patient Solidarity Week, which, like the honor society, is promoted by the non-profit Arnold P. Gold Foundation. Carol Stanford, M.D. ’79, has been the UMKC chapter’s faculty sponsor in recent years.