West Jersey Health System Joins Jefferson in the Healthshare Group
World’s First Clinical Trials of Gene Therapy for Cardiac Patients
Unusual Surgery at the Neurosensory Institute
Bone Marrow Transplant Center
Join the Celebration!
The Association’s 125th Year

Established in 1870, the Jefferson Medical College Alumni Association has a unique history behind it, and we will be looking back as well as looking forward in 1995. The Spring Bulletin will be a special issue commemorating these 125 years.

ANNUAL BUSINESS MEETING & DINNER
April 27, Thursday, 6:00 P.M., Jefferson Alumni Hall. Led by Association President William V. Harrer ’62, it will be your opportunity to greet incoming President Edward H. McGehee ’45 (see page 21). All alumni are urged to attend. RSVP to the Alumni Office, Suite M-41, 1020 Locust Street, Philadelphia, PA 19107

ANNIVERSARY WEEKEND
June 8–11—see page 20

Through April
EXHIBIT: “Focus 25”—anniversary of the College of Allied Health Sciences (see page 4). Exhibit on second floor of Scott Building, 1020 Walnut Street

Through June
EXHIBIT: ART WORKS BY ALFRED SALVATO—sixth floor of Scott Building, 1020 Walnut Street—architectural oil paintings and pen-and-ink drawings

March 11–14
Surgery and Rehabilitation of the Hand ’95—annual course sponsored by Jefferson Medical College, cochaired by James M. Hunter ’53, for information call 215 925 4579

March 17, Friday, Atlanta
ALUMNI RECEPTION at the meeting of the American College of Physicians

March 25, Saturday, Tucson, Arizona
RECEPTION to meet University President Paul C. Brucker, M.D.

March 29, Wednesday, 10:30 A.M., DePalma Auditorium, 1025 Walnut Street
BIELE LECTURE—Arthur Kleinman, M.D., Chairman of the Department of Social Medicine at Harvard University and The Presley Professor of Medical Anthropology and Psychiatry, will speak on “World Mental Health: A Medical, Social, and Human Challenge” (open to the public)

April 20, Thursday, 5:00 P.M., DePalma Auditorium, 1025 Walnut Street
THE WARREN LANG (’43) LECTURE—Robert E. Scully, M.D., Professor of Pathology at Harvard Medical School, will speak on “The Origin and Behavior of Early Ovarian Cancer” (open to the public)

April 26, Wednesday, 4:00 P.M., Solis-Cohen Auditorium, 1020 Locust Street
THE HERBERT LUSCOMBE (’40) LECTURE—Eugene A. Bauer, M.D., Chairman of Dermatology at Stanford University School of Medicine, will speak on “Cutaneous Tumors—Mechanisms That Offer Potential Techniques at the Bedside” (open to the public)

May 4, Thursday, 8:00–10:00 A.M., DePalma Auditorium, 1025 Walnut Street (early time because lecture is part of Grand Rounds, Department of Medicine)

THE RAYMOND GRANDON (’45) LECTURE—John K. Iglehart, National Correspondent for the New England Journal of Medicine, will speak on “The Future of Academic Medicine,” followed by responses by Jefferson faculty members William Keane, M.D., Chairman of Otolaryngology, Susan Rattner, M.D., Director of Special Curricular Programs, and Francis Rosato, M.D., Chairman of Surgery (open to the public)

May 4–18
ART EXHIBIT PRESENTED BY THE FACULTY WIVES CLUB—Reception on May 4, Thursday, 5:00–7:00, Mezzanine Balcony, Alumni Hall, 1020 Locust Street (open to the public)

May 8, Monday, San Francisco
ALUMNI RECEPTION at the meeting of the American College of Obstetricians and Gynecologists

May 23, Tuesday, Miami
ALUMNI RECEPTION at the meeting of the American Psychiatric Association
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In This Issue
Students and collaboration are themes of this issue. Members of the Classes of ’95, ’96, and ’97 are profiled on page 12. Edward H. McGehee ’45, portrayed on the cover, devotes his utmost to each medical student and each patient in Family Medicine. Teaching Family Medicine is a top priority for Jefferson Medical College and is at the heart of JeffCARES, a new part of the curriculum described on page 10. Involving both medical students and allied health, JeffCARES is an example of working together, which is featured on page 4. Teaching primary care was at issue across the nation this year; page 22 provides an insider’s view. Page 24 presents a corporate perspective on health policy. In the changing health care climate, collaboration is indeed key, as exemplified by the Healthshare Group reported on page 15 and the Neurosensory Institute on page 17.—M.C.
Looking Back Over 25 Years, College of Allied Health Sciences Celebrates Collaboration with Medical Colleges

Since it was established in 1969, the College of Allied Health Sciences has been closely linked with Jefferson Medical College and the College of Graduate Studies. And the three collaborate today in fulfilling the university's mission of education, research, patient care, and community service.

THE PAST

"When we established the College of Allied Health Sciences in 1969, the concept of using teams of health professionals to treat patients was unorthodox. Now, in 1994, the interdisciplinary nature of the practice of clinical medicine is seen clearly. Allied health professionals are valued members of the health care team."

—John W. Goldschmidt, M.D. '54, first Dean, School of Allied Health Sciences (1967–69) and College of Allied Health Sciences (1969–75); National Director, Rehabilitation Research and Development, U.S. Department of Veterans Affairs (1992–)

In 1952, spurred by concerns of a shortage of health personnel, members of the Executive Faculty of Jefferson Medical College discussed the development and expansion of teaching in paramedics. Among those members was Peter A. Herbut, M.D., Chairman of Pathology, who would later become the President of Jefferson Medical College and Medical Center and in 1969 the first President of Thomas Jefferson University.

In April 1964, the Executive Faculty of Jefferson Medical College identified a need for an academic program in the allied health fields. Two years later, the Special Committee on Paramedical Studies, which had been formed in 1965 and was chaired by Dr. Herbut, delivered a report that recommended the establishment of a School of Allied Health Sciences.

Jefferson's Board of Trustees appointed John W. Goldschmidt '54 Dean of the School in 1967. Chairman of
Rehabilitation Medicine at Jefferson Medical College, Dr. Goldschmidt was a nationally recognized leader in his field.

By 1969, all hospital-based training programs had been transferred to the newly-formed college, and undergraduate college-level courses in general studies were instituted. Certificate programs were upgraded to baccalaureate degree programs, and new programs were added at the baccalaureate level. Medical technology was the first bachelor's degree program in the new college, and the first group of students to receive bachelor of science degrees graduated in the spring of 1972.

Dr. Goldschmidt continued as Dean of the college until 1975. Throughout his eight-year tenure, he emphasized the concept of teamwork for health professionals, a concept that is a given in the current health care environment but was visionary at the time. He wrote, "A basic skill to be learned by all of us in the College of Allied Health Sciences is the skill of interpersonal collaboration... A basic premise of the college is that if we learn together and share experience and responsibility together, we learn to work collaboratively."

The spirit of cooperation and collaboration started by Dean Goldschmidt continued under the leadership of Lawrence Abrams, Ed.D., who was appointed Dean in 1978. Abrams began his career at Jefferson in 1965 as Coordinator of the Education Office in the Medical College's Department of Rehabilitation Medicine. Over the next 13 years, he held positions of increasing responsibility.

By the time Dr. Abrams took the helm of the college, traditional academic programs were being adapted to accommodate a changing health care environment. In addition to the college's four existing schools (Nursing, Practical Nursing, Radiologic Technology, and Medical Technology), as well as the Department of Baccalaureate Nursing, which was created in 1972, the late 1970s witnessed the reorganization of the departments of radiologic technology and cytotechnology into upper-division baccalaureate degree programs. The new department of dental hygiene was also begun as an upper-division program, and the department of general studies was formally established.

From 1978 to 1987, the number of programs in the college doubled to 20. Even as the practical nursing and diploma nursing programs were being phased out in 1980 and 1982, respectively, new programs were being added. The occupational therapy and physical therapy departments opened in 1983, while in that same year the department of radiologic technology introduced a new program in diagnostic medical sonography (ultrasound). Several academic departments had developed advanced placement, postcertificate or postbaccalaureate certificate programs.

In 1986, the College of Allied Health Sciences, working together with the College of Graduate Studies, introduced graduate education in nursing with a Master of Science in Nursing degree, specializing in rehabilitation nursing. The following year, the two colleges combined efforts again to offer a Master of Science degree in occupational therapy. Since then, the two colleges have teamed up to add five other tracks in the M.S.N. program, a second master's degree program in occupational therapy, and an entry-level master's degree program in physical therapy.

By the mid-1980s, the college had emerged as a national leader in allied health education. The emphasis on research and scholarship, established as a priority by Dean Abrams 10 years earlier, bore fruit as faculty, administrators, and students increased dramatically the quantity and quality of research-based publications and presentations.

The college's prestige was further enhanced when Dean Abrams became president of the American Society of Allied Health Professions in 1988. That same year, the college made an impact internationally, being involved in the planning for the First World Congress on Allied Health, held in Elsinore, Denmark, with 12 members of the faculty and administration presenting papers. 

Jefferson Medical College and Medical Center receives charter to become Thomas Jefferson University, May 20, 1969 at City Hall, Philadelphia. Left to right are John Goldschmidt, M.D. '54 (Dean of Allied Health Sciences); Francis Sweeney, M.D. '51 (Hospital Director); James Large (Chairman of the Board); Judge Vincent Carroll; Peter Herbut, M.D. (President); N. Ramsay Pennypacker; George Norwood; William Kellow, M.D. (Dean of Jefferson Medical College).
Also in 1988, the college implemented the nation's first integrated multicompetency baccalaureate-level curriculum in diagnostic imaging, combining radiography and ultrasound. Student enrollment increased from 909 in 1983 to 1128 in 1989. As the 1980's came to a close, dean Abrams convened a task force to plan the focus of the college for the 1990s with education programs that would meet the needs of the public and professional communities and ultimately contribute to the health of the nation.

**THE PRESENT**

The college's accomplishments have always been built on a foundation of careful planning, accountability, and evaluation. Following that tradition, dean Abrams had prepared a strategic document in 1979 that outlined his priorities for the college. Research was emphasized. He wrote: “Quality research is vitally important in allied health as in other health-related disciplines in order to continue to provide the best education and the best patient care possible in light of new developments in science and technology.” Fifteen years after those words were written, the college has become a top allied health research facility.

**RESEARCH**

Last year, the college's faculty generated more than $4 million in research activities, a notably high amount in allied health sciences.

This year, the college continues to be successful in acquiring outside funding and currently has 29 active grants and contracts with a total value of $5.7 million.

In 1990, the college established the Center for Collaborative Research to provide technical assistance to college faculty members interested in developing research and training grant proposals. Part of the mission of the center is to facilitate and conduct collaborative research. A key strategy of the center is to develop research and educational projects through collaboration across disciplines and with other institutions. Center staff facilitate research and scholarship by nursing and allied health faculty by running workshops and seminars on grant proposal development and research, and by monitoring funding priorities in the public and private sectors.

The strategy works. Examples of collaborative research and educational projects secured by college faculty and the center include:

**Grant to Aid Underserved Populations**

The center recently was awarded a three-year, $340,000 grant from the U.S. Bureau of Health Professions to develop partnerships among health professionals to serve underserved populations, and at the same time plan innovative curricular activities for allied health and nursing students. Although the work being done right now focuses on the homeless, the ultimate goal is to develop a model to provide health services to other underserved populations such as rural communities and the elderly.

Students and faculty from the departments of nursing, occupational therapy and physical therapy, and from Jefferson Medical College, in addition to dental hygienists, currently are working at four homeless shelters and hope to expand more. Kevin J. Lyons, Ph.D., Associate Dean, is directing the collaborative effort with Laura N. Gitlin, PhD, Associate Professor of Occupational Therapy. Janice E. Nevin, M.D. '87, M.P.H., Clinical Assistant Professor in the Medical College, serves as liaison between the Medical College and the College of Allied Health Sciences.

The idea for the grant germinated when physical therapy instructor Diane Levy, M.S., who had been doing volunteer work with the homeless, approached a project team at the center who had been

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**Allied Health and Medical College Collaborate on Major Grant to Study Diabetes Prevention**

Jefferson Medical College and the College of Allied Health Sciences are partners in a five-year, $3.4 million grant from the National Institute of Diabetes and Digestive and Kidney Diseases to conduct the first large-scale clinical study of the prevention of Type II, noninsulin-dependent diabetes mellitus. Other institutions involved include Harvard University and The Johns Hopkins University. The team at Jefferson includes José F. Caro IM'78, Chairman of Medicine; Pamela G. Watson, Sc.D., Chairman of Nursing; William W. Fore, M.D., Medical Director of the Joslin Center for Diabetes at Wills and Jefferson; and Barry J. Goldstein, M.D., Ph.D., Director of Endocrinology.

Dr. Caro believes diabetes can often be prevented. He previously studied a group of very overweight patients who lost most of their excess weight. "Our results showed that weight loss can prevent the development of Type II diabetes more than 30-fold," he said, "because far fewer patients than would be expected later developed diabetes."

Diabetes costs the U.S. $20 billion each year in health care and lost productivity, points out Dr. Watson.
working on a grant proposal for geriatric training. The team concluded that they could apply the geriatric model to the homeless community.

**National Center for Dental Hygiene Research**

Working with the center, the Department of Dental Hygiene was awarded a three-year, $545,000 grant by the U.S. Bureau of Health Professions to develop and implement a National Center for Dental Hygiene Research, the model of which can be used as a prototype for other allied health disciplines. The grant is directed by Jane L. Forrest, Ed.D., Acting Chairman of Dental Hygiene, and Linda G. Kraemer, Ph.D., Senior Associate Dean.

**Women's Center for Health Promotion**

Under the leadership of its chairman, Pamela G. Watson, Sc.D., the Department of Nursing received a $297,000, three-year grant from the Independence Foundation of Philadelphia to establish a Women's Center for Health Promotion. The center addresses health promotion and health protective needs of disadvantaged women in the Center City area around the Jefferson campus in a variety of ways, including screenings in the community.

The Women's Center's interdisciplinary team of student and professional nurses and other health professionals is led by Elizabeth J. Forbes, Ed.D., Professor of Nursing, and Diane M. Wieland, M.S.N., Assistant Professor of Nursing. Physicians from Jefferson Medical College's Department of Family Medicine provide a backup referral service to the nurse-managed Women's Center.

**Teaching Trainers to Educate School Personnel to Work with HIV-Infected Children in the Classroom**

Laurie Sherwen, Ph.D., Associate Professor of Nursing, and Roseann C. Schaaf, M.Ed., Instructor in Occupational Therapy, direct a four-year, $509,088 grant from the U.S. Department of Education's Office of Special Education to train social workers, school personnel, and other professionals how to successfully integrate HIV-infected and substance-exposed children into regular classroom settings. The college's Departments of Nursing and Occupational Therapy collaborate on this project with the University of Pennsylvania's Graduate School of Education.

These are just a few of the college's ongoing, collaborative research initiatives. Others include research on assistive device use and rehabilitation needs of older adults; research on caregivers of elderly persons with dementia; training programs to help vocational counselors work with traumatic brain-injured patients; and a federal contract to write a manual on grantsmanship for allied health professionals.

**Diploma Nursing Alumni Anniversary**

An additional anniversary being celebrated in 1994–95 is the 100th year of the Diploma Nursing Alumni Association. Jefferson no longer offers a diploma program, but graduates from past years are still active at Jefferson and across the country.

**Education**

"One of the greatest pleasures in my 18 years here is working with the faculty, who are remarkable in their dedication to students. They are committed to their own disciplines, but they are also committed to Jefferson."

—Linda G. Kraemer, Ph.D., Senior Associate Dean, College of Allied Health Sciences

**Curricular Changes**

Besides strategic planning, the keys to the college's success have been accountability and careful evaluation of programs. In response to changes in the needs of the health care system, important curricular changes were made this year.

New programs have been inaugurated, including a Bachelor of Science degree in biotechnology through the Department of Laboratory Sciences. The program focuses on the competencies necessary for technologists to participate in and contribute to the design, research, development, and preclinical application testing of diagnostic and therapeutic agents, methods, and systems. Collaborating with the college on the program's development and fulfillment are faculty from the Jefferson Cancer
In addition to the family nurse practitioner track, the M.S.N. program currently offers five other tracks: nursing administration; adult rehabilitation and chronic care; pediatric rehabilitation and chronic care; critical care/trauma; and home, community, and public health care. Further, the program offers subspecializations in traumatic brain injury and HIV/AIDS.

In the Occupational Therapy Department, a new, professional, entry-level master’s degree program for students with degrees in fields other than occupational therapy has been established. The full-time, 28-month program incorporates coursework from the former postbaccalaureate certificate program, which has been folded into the new degree.

The expansion of academic programs and the rise in interest in the college has resulted in a robust growth in enrollment. Last May, 419 students graduated, the largest class in its history.

Longitudinal Study
As part of the ongoing evaluation process, the college began a longitudinal study in 1990 to track students one year, three years, and five years after graduation. Students are questioned on various aspects of their careers, and their satisfaction with the education they received. The longitudinal study, which is administered through the Center for Collaborative Research, is closely modeled after Jefferson Medical College’s pioneering longitudinal study developed by its dean, Joseph S. Gonnella, M.D.

Center for Faculty Development
To be sure that faculty members remain up-to-date on current trends, the college established the Center for Faculty Development in July 1994. It provides a range of professional development activities. The center is headed by Raymond W. Campbell, Ph.D., Chairman of the Department of General Studies.

Patient Care and Community Service
The College of Allied Health Sciences offers students patient contact through Thomas Jefferson University Hospital and more than 500 other regional, national, and international clinical affiliation sites in a wide variety of settings.

People benefit not only from the students’ formal clinical experiences and from the many collaborative research projects that focus on the community, but also from several interdisciplinary community outreach programs:

• JeffCARES (Community Action Research Education Service), an outgrowth of a city-sponsored community health internship program, serves as the umbrella organization for community-oriented student efforts. Nursing, allied health, and medical students work with Thomas Jefferson University Hospital and outside partners to address the health needs of city residents in neighborhoods surrounding Jefferson, including Chinatown, Ludlow, and South Philadelphia. (See pages 10–11.)

• Students from the College of Allied Health Sciences joined medical students, residents, and faculty in providing treatment, referrals, and education to the homeless at St. Columba’s Shelter in West Philadelphia and the city’s Gateway Shelter. This initiative is called JeffHOPE.
• Jefferson nursing students and faculty worked together this past year to immunize preschool children in some of the city's poorest neighborhoods.

Public Awareness of Health Careers

Since 1968, when the college began its Health Careers Guidance Clinic programs for high school students, college students, and guidance counselors, the college has taken a leadership role in informing the public about health careers. In addition to the clinics, the college has published nine editions of its Health Careers Guidance Manual over a 20-year period, with the last edition having a wider, more regional focus.

In 1988, Dean Abrams initiated a National Health Careers Information Hotline, a toll-free public service whereby individuals can receive current information and specialized guidance about health careers. To date, the hotline has received more than 180,000 calls.

Recently, the college has taken its next step in raising awareness of health careers, particularly allied health, by producing a public service video program designed principally for high school and junior high school students. The 15-minute production, entitled Your Future, Your Choice: Careers in Allied Health, has been distributed to school systems and public television stations around the country by satellite and may reach as many as 27 million people in the first year.

THE FUTURE

"It's pretty clear to anyone in allied health sciences that Jefferson is one of the premier institutions in the country." —Thomas W. Elwood, Dr.P.H., Executive Director, Association of Schools of Allied Health Professions

Role of Allied Health in the Delivery of Primary Care

This past March, the college hosted a national, two-day workshop on the role of allied health in the delivery of primary care. The event was funded by the U.S. Bureau of Health Professions and was planned by the college's Center for Collaborative Research. More than 170 individuals representing 35 allied health disciplines, 28 professional associations, and 65 academic, medical, and state and federal institutions attended the forum.

The results of the meeting will be used by the bureau to chart the future role of allied health, to set future health policy, and to encourage allied health research.

The health policy activities of the center are increasing under the direction of Shirley E. Greening, M.S., J.D.

Center for Student Development

The future of any school depends on its students. Accordingly, the college is in the planning stages of creating a Center for Student Development.

The center would centralize and expand existing student services, such as leadership development and writing skills programs, and at the same time add a research and publication component that builds on the college's reputation as a resource for information on allied health sciences. William Thygeson, M.Ed., Director of Student Affairs and Services, feels programs and services could be marketed for use by other colleges and institutions.

International Involvement

The future of allied health sciences extends to the international community as well. Dean Abrams has been meeting with members of Tianjin Medical University to establish China's first college of allied health sciences.

He has also met with university and government officials in Hong Kong to explore the feasibility of student clinical affiliations with Tianjin Medical University, and with officials in Bangkok and Singapore to discuss possible collaborations on an international research project on education and health care delivery systems.

Dean Abrams recently advised Osaka University's School of Allied Health Sciences in Osaka, Japan on matters relating to curriculum, organizational structure, and facilities planning.

Linda G. Kraemer, Ph.D., Senior Associate Dean, has developed an active partnership with the Hogeschool Nijmegen in The Netherlands. College faculty recently lectured at the Dutch school, and a delegation from the Hogeschool Nijmegen visited Jefferson. Future plans include student exchange and joint research.

The seeds of collaboration and cooperation, planted by Dr. Goldschmidt and nourished by Dr. Abrams, have blossomed. The College of Allied Health Sciences is well positioned for growth in its next 25 years.
Since the establishment last fall of Jefferson's Health of the Public program, JeffCARES (Community Action Research Education Service), students and faculty have been designing projects to meet the health needs of traditionally underserved individuals in the community surrounding the campus.

A significant accomplishment this year has been the development of a collegial atmosphere and institutional infrastructure for collaboration among the various colleges, disciplines, and departments of the university. Under the direction of an internal executive board of Jefferson faculty, students, and administrators and with recommendations from a Community Advisory Panel composed of representatives from local official and voluntary social service agencies, JeffCARES continues to positively impact the health and well-being of the community.

Bridging the Gaps: Philadelphia Community Health Internship Project

Bridging the Gaps: PCHIP, a collaborative project between all the Philadelphia medical schools, is supported by the Pew Charitable Trusts, the National Health Service Corps, and multiple other funders. As a result of JeffCARES administrative support, Jefferson's summer program grew from six medical students in 1993 to 25 medical and 11 allied health students in 1994. Medical, nursing, occupational therapy, and physical therapy students worked side-by-side for seven weeks in a variety of community-based activities under the supervision of volunteer faculty and community preceptors. Bridging the Gaps students conducted community health needs assessments in Chinatown and Point Breeze, facilitated homeless individuals' and families' access to service through advocacy, provided immunizations to children in the Ludlow section of North Philadelphia, and developed educational programs in cardiovascular disease, cancer, child abuse prevention, safer sex, and many related topics.

While homelessness was an initial focus of JeffCARES, our intent was to expand activities to encompass other underserved populations of Center City Philadelphia. Even during our first year, JeffCARES has encouraged students to become interested in other problems: language barriers, teen pregnancy, and child abuse. Two BTG:PCHIP medical students worked with Clement Au FP'R5, a family physician who practices in Chinatown. Students addressed the need to provide culturally competent care for the Chinatown community within the emergency department of Thomas Jefferson University Hospital. With a focused literature search that combined bilingual health assessment tools and emergency medicine, and the cooperation of the nursing and medical staff of the emergency department, the medical students created an explanation of ER procedures in Chinese and a Chinese translation of the ER triage evaluation.

Other work that illustrates JeffCARES involvement with a vulnerable population is student and faculty work at the JOGA Teens'n'Touch Family Planning Clinic in South Philadelphia where a videotape on human papilloma virus was developed for patient education. Several other summer projects, such as the New Parent Support Project aimed at preventing child abuse, are being continued during the academic year.

The New Parent Support Project

During the summer, Amy Elliott '97, Dan Merenstein '97, and Meg Lindsey B.S.N.'95 were sponsored by the United Way to participate in the New Parent Support Project. Students focused on how medical and social services at Jefferson helped to decrease the family stress accompanying the birth of a new baby. Under the guidance of Allan DeJong, M.D. of the Department of Pediatrics, Christine Laine, M.D., M.P.H. of the Division of Internal Medicine, and Pat Redmond of Philadelphia Citizens for Children and Youth, these students gathered information about the Jefferson birthing experience made recommendations to the Department of Obstetrics and Gynecology.

Students found that the project, approved by Jefferson's Institutional Review Board, needed to continue after the summer internship in order to fully evaluate the impact of 24-hour discharge on new mothers. Amy and Dan were able to incorporate this project into their JMC curriculum Sophomore Seminar requirements in order to further research existing services for new families. Their survey of new mothers addresses the wide range of factors contributing to the social and medical health of new families and babies. In order to improve the community's access to existing services, and to develop additional ways of supporting new families, this data will be shared with Thomas Jefferson University Hospital, local social service agencies, and Bridging the Gaps students next summer.
JeffMOMS Teaches First-Year Medical Students the Needs of Maternity Patients

"It's been rewarding to get to know a patient firsthand... to know there's a person behind every file and every lab test. On the one hand, I get to see the excitement of a mom as she describes what the baby's kicks are like. On the other, I have learned how hard it is to be a patient, from finding a babysitter to scheduling an appointment. After spending days in the library or the lab it can be hard to remember why we are working so hard, but after JeffMOMS it's hard to forget."—Gonzalo C. Vicente '98

"Now, four months later, Kim has given birth to a beautiful baby girl, little Eugenia. In these months I have not only gotten to know Kim and her family very well, but I have also learned much about the medical system, the astonishingly complex insurance process, and the difficulties that a single mother may face. These are lessons that no anatomy or physiology course will teach me."—Bruno Petinaux '98

"As soon as it's born, I just want them to take it away... I don't even want to see it." That's what my JeffMOMS patient said to me about her baby, less than one hour after I met her. I think we all had pictured being paired with storybook patients who have the support of their families and are financially secure. That, however, hasn't been the case with JeffMOMS. Most of us students have lived very sheltered lives. This experience has opened my eyes to a completely different realm of life. As a future physician, I believe that in order to best serve any patient, I must first try to understand that patient... JeffMOMS has introduced me to a population that I did not understand, that I probably still do not completely understand. But I am learning, and as a result I will be a better physician than had I not been afforded this experience."—Sanuj K. Ravindran '98

These are student comments about JeffMOMS (Maternity Opportunities for Medical Students), a new project introduced during the Life Cycle course at Jefferson Medical College in the fall of 1994. As part of the Generalist Initiative to introduce students to the role of the physician through a continuing experience with a particular family, first-year students are partnered with maternity patients in the JOGA Clinic in Philadelphia.

Each student has the opportunity to build rapport with a patient, by attending clinic appointments and procedures, and accompanying her to parenting, breastfeeding, and Lamaze classes. Students serve as patient advocates, helping individuals to access care through the confusing medical assistance process. Students also serve as patient educators on physiological changes, fetal development, and prenatal care. Eventually they provide support during labor and delivery. When possible, students will make a home visit after discharge and follow the new family for at least a year through Jefferson's pediatric service.

Throughout the experience the students have the support and guidance of Nancy Zabaga, M.Ed., Clinical Coordinator in the JMC Office of Academic Affairs, Lisa Mills, JOGA Clinic manager, and the medical and nursing staff in obstetrics and gynecology.

JeffMOMS is a collaborative program directed by Sylvia K. Fields, Ed.D., Coordinator of Primary Care and Community Programs in the JMC Office of Academic Affairs, and Thomas Klein, M.D., Vice Chair of Obstetrics and Gynecology. Approximately 50 students have been partnered with patients. More will participate in the future through expansion of the program to the obstetrics practice of the Department of Family Medicine, and collaboration with Jefferson practitioners in the community. If readers would like Jeff students to participate with their patients, contact Dr. Fields at 215 955 7995.
Students Come by Many Routes to Jefferson
by Malcolm Clendenin

From pastoral Maine or from Uganda, after two years as a lab assistant or two decades in a nonmedical career, students come to Jefferson Medical College with a rainbow of backgrounds. Equally diverse are their plans for the future, from paying off a National Public Health Scholarship through service in an underserved setting, to oncology at an academic health center.

"Medical student" may bring to mind a 21-year-old, just out of college. But William F. Dambruoso '96 came to Jefferson when he was twice that age. He and his wife owned a drugstore complete with soda fountain in a tiny town in Maine. Their comfortable lifestyle included three children and a farmhouse in a bucolic setting, but he wanted "to make a larger contribution to medicine," he says. Working as a pharmacist brought him into contact with physicians. One of the reasons he came to Philadelphia and Jefferson was his respect for alumni he knew in Maine.

William's classmate John M. Feehery '96 decided to become a physician because in this profession "I'll continue learning throughout my career, and I'll be regularly practicing the work I've chosen." As an architect, he was forced farther and farther away from the drawing board by the pressure to market his work, becoming more businessman than designer. In oto-laryngology he plans to stay hands-on. But architecture, John says, is a way of thinking which you don't suddenly stop; indeed his ability to picture three-dimensional structures led to his choice of ear, nose, and throat as a specialty. "The head is a complex area spatially," he points out. While maintaining a strong average in medical school, he has continued to do architectural rendering to help his wife Monica make ends meet at home.

A year of postbaccalaureate preparation in the sciences is a medical school prerequisite for students like William, John, or Emilymarie Grandey '97, who sought her M.D. after what she terms a "midlife crisis" following a close call in an auto accident. Sitting in the Porsche she had earned through a dynamic career as a stockbroker and saleswoman, she says, "after the other car ran into me and I was so close to terrible injury, I realized I wanted to take care of people who, say, are in an accident and have no insurance at all." She is at Jefferson on a National Public Health Scholarship.

Emilymarie has never hesitated with a new idea. A couple of weeks before turning 19, she became the first underage person in the United States to be licensed as a broker. After successfully playing the market for several years, she went back for more college and worked her way into marketing mainframe computers, expert systems, and artificial intelligence.

One of the systems she placed was used at the University of Pittsburgh in developing the sophisticated medical diagnostic software Caduceus. Stratus Computers, though, was "the most fun" of her ventures; she designed applications for on-line transaction processing equipment. It is used for massive volumes of calculations in "real time," such as split-second Stock Exchange fluctuations.

"Computers have always been a mental playground for me," Emilymarie says, "and I know I'll become involved in computer planning in the hospitals where I work. Economies of scale can bring huge dollar savings when the right systems are applied intelligently." Despite her ingenuity, medical school has not been a breeze. "I cried often last year. The amount of work seemed overwhelming. I would not have had the self-discipline for medical school 15 years ago when I was 25."

Changing careers, she says, "strips you of the status you may have earned in another field. But it also strips you of ways of thinking and allows other ones to show. To balance the pressure of the workload, I discovered a joy in reaching back to talents I had possessed as a child but hadn't used in my other professions."

Unlike Emilymarie, George K. Henry '95 had always set medical school as a goal. But after childhood and college in Jamaica he decided to earn a Ph.D. in chemistry in the United States first. Next he met with big success as a research chemist with the duPont Company, earning two separate patents in five years before coming to Jefferson. He has two more patents pending.

George is glad now to be in the clinical years of his training. "I enjoy talking with patients, plus it makes me happy that I've learned enough to form a treatment plan that will truly help the problems they describe to me." At the same time he intends to continue research. He has chosen obstetrics and gynecology because "I love the operating room, but I also was attracted to internal medicine because of the sustained patient contact that can
last over years. And participating in a birth gave me a high that I had never experienced before.”

The urge to teach, too, is something “I can’t get out of me” since he taught chemistry while a graduate student. He was selected for a teaching award at the University of Southern California.

Experience at the bench gave Edward W. Kiggundu ’96, like George, a love of research. Edward was an assistant in virology at the Wistar Institute for several years between college and medical school. His name was on papers in noted journals such as Proceedings of the National Academy of Sciences. He has arranged to resume research next winter in Jefferson’s Department of Radiation Oncology, having already studied cancer patients at Wistar.

When not studying medicine Edward travels (he has seen many parts of the world, having been raised in Uganda) and competes in national forensics tournaments. His articulateness is a resource in his position as a Resident Assistant at Jefferson, where he counsels classmates in need of peer support.

Even students who matriculate here in their twenties, like Edward or Amy E. Wagner ’96, have broad interests. Amy worked on a television crew for C-span in the nation’s capital, covering the Senate and House of Representatives. During college she had interned at a public TV station, and spent a summer with an independent filmmaker in Berkeley, editing a documentary he had shot in Tibet.

With video and multimedia being used increasingly in education, long-distance transmission of surgical procedures, and communication with remote practice sites, does Amy plan to combine her knowledge of video production with medicine? Definitely, she says; “I’m very interested in how scientific knowledge is conveyed.”

Each Jefferson student has explored a different route to medical school. What do they have in common? An eagerness to challenge their minds—and to reach others.  ■

Programs Introduce Students to the Specialties

The middle of the sophomore year of medical school, when students are looking ahead to clinical rotations in the third year, is an ideal time for them to learn about the various specialties. The alumni fill this need for mentoring and guidance with Career Day, at which dozens of speakers from the spectrum of fields tell students what they find rewarding about their practices.

The alumni held a Reception for Freshmen on December 1 as an opportunity to greet the next generation of graduates. Russell W. Schaedler ’53 introduced them to the school’s history and the revered portraits of Jeffersonians in the Eakins Gallery.
Evaluations in Medical School Do Predict Physician Effectiveness in Practice, Center’s Publication Shows


Jefferson has added to her already strong reputation in the area of research in medical education with the publication of Assessment Measures in Medical School, Residency, and Practice: The Connections. Originally published in monograph form as a February 1993 supplement to Academic Medicine, the journal of the Association of American Medical Colleges, this material, now presented as Volume 17 in the Springer Series on Medical Education and already called a classic reference work in the field, highlights research in medical education performed at Jefferson and elsewhere. The book editors are Joseph S. Gonnella, M.D., Senior Vice President and Dean; Mohammadreza Hojat, Ph.D., Director of the Jefferson Longitudinal Study of Medical Students and Graduates (see the Fall 1992 Bulletin); James B. Erdmann, Ph.D., Associate Dean; and J. Jon Veloski, M.S., Director of Medical Education Research at Jefferson’s Center for Research in Medical Education and Health Care.

Contributors are nationally and internationally known medical educators and researchers who have produced, under the guidance of the editors, the most thorough compendium to date of research on the question of the relationship between performance measures in medical school and performance beyond medical school. The book’s contents spotlight the longstanding argument over the relevance of medical education, particularly basic science education, to medical practice. Debate over the relevance of medical education to performance in clinical practice has raged for decades. The cry is frequently heard that evaluations made in medical school, particularly in the basic sciences, are irrelevant to subsequent performance as practicing physicians. This book refutes that argument and provides evidence that, in the words of Dean Gonnella, “the product can be measured.” Research presented in the book chapters proves that associations do exist between performance measures in medical school and those made after graduation. This evidence should reassure medical school faculty and residency program directors that their judgments are valid, and provides explanations for dispelling the myth that no association exists between assessment measures made during medical school and those made after graduation. This book is the only one published to date that has attempted to explain the numerous and contradictory results reported in the literature by focusing on the methodological and conceptual problems in collecting, analyzing and interpreting data in these types of studies. In addition, the editors’ recommendations for future inquiry provide an agenda for medical education research. Everyone with an interest in medical education will profit from and enjoy reading this stimulating and original book.—J.J.G.

Readers will also be interested in a new 110-page booklet issued by Jefferson’s Center for Research in Medical Education and Health Care, Abstracts: Jefferson Longitudinal Study of Medical Students and Graduates. To obtain a copy, contact Dr. Hojat at 215 955 8907.
West Jersey Health System Joins Jefferson in the Healthshare Group

West Jersey Health System has joined the Healthshare Group, the regional, integrated delivery system established by Thomas Jefferson University and Main Line Health System. "In today's environment, providers must offer communities, regional employers, and all insurance companies a network of quality services covering a large geographic region," stated Barry D. Brown, President of West Jersey Health System (WJHS).

WJHS's strength in southern New Jersey complements Jefferson's presence in Center City Philadelphia and Main Line Health System's four hospitals in the western suburbs (Lankenau Hospital, Bryn Mawr Hospital, Bryn Mawr Rehab, and Paoli Memorial Hospital). (See the Spring 1994 Bulletin, page 13.)

WJHS, Jefferson, and Main Line Health System are each not-for-profit and committed to educating health care providers. While each hospital's medical staff will continue to function independently, the physician leadership of each organization will have a direct role in planning and implementing programs of the Healthshare Group.

"The addition of WJHS to the Healthshare Group will enhance Jefferson's ability to carry out its research and academic missions," feels University President Paul C. Brucker, M.D. "It will create new opportunities to bring clinical innovations and research findings more quickly to the wider public, resulting in better patient care."

WJHS's President Brown said, "For our communities in southern New Jersey, this affiliation will open a far-reaching set of services that have not been so readily available in the past."

Integrated delivery networks like the Healthshare Group provide all types of care for patients. Ideally, forming a large network such as this improves the efficiency of health care delivery and thus lowers costs.

WJHS was established in 1966 when West Jersey Hospital in Camden purchased Edgewood Community Hospital in Berlin, New Jersey. In 1973, West Jersey Hospital-Voorhees was established and in 1982, Garden State Community Hospital in Marlton joined the system and was renamed West Jersey Hospital-Marlton.

The alliance that Jefferson has formed with Pennsylvania Hospital is not affected by Jefferson's partnerships with Main Line Health System and West Jersey Health System. Pennsylvania Hospital may in the future become part of the Healthshare Group.

### Figures fiscal year 1994

<table>
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<th>West Jersey Health System</th>
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Bone Marrow Transplant Center Established Under Flomenberg’s Direction

A bone marrow transplant center is being established at Jefferson. Neal Flomenberg ’76 has been recruited to direct it and serve as a Professor of Medicine.

The program expands the university’s array of research and treatment for cancer patients. The new facility will occupy the 14th floor of the Foerderer Pavilion.

Flomenberg most recently was Director of the Bone Marrow Transplant Program at the Medical College of Wisconsin. At the beginning of his career, as a fellow at Memorial Sloan-Kettering Cancer Center, he was honored as the young investigator showing the most promise in the laboratory. He later served at Sloan-Kettering and Cornell University Medical College as an Associate Professor. His research concentrates on allogeneic bone marrow transplants.

Farber Elected Chairman of Board as Stratton Steps Down

James W. Stratton has stepped down after four years as Chairman of the Board of Thomas Jefferson University, and Jack Farber has been elected to this position.

Mr. Farber has been a Trustee since 1984 and Vice Chairman of the board since 1989. He chaired the Finance Committee from 1985 to 1994, and served on the Capital Projects Task Force and the Scientific and Academic Affairs Committee.

"Mr. Farber brings to the chairmanship vast business experience and a rich involvement and familiarity with Jefferson," said University President Paul C. Brucker, M.D.

"With Mr. Farber’s election as Chairman," Mr. Stratton said, "the financial skills he brought to the chairmanship of the Finance Committee for so many years will be of even greater benefit to Jefferson."

Farber is Chairman, President, and Chief Executive Officer of CSS Industries, a Trustee of the Pennsylvania Real Estate Investment Trust, a Director of the Hunt Manufacturing Company, and a Director of the American Jewish Committee.

The Board of Trustees has voted to limit the term of the Chairman of the Board to four years.

Another important vote by the board was to add one trustee who will be elected by the alumni of the College of Allied Health Sciences, in the same way that there are three board members elected by the alumni of Jefferson Medical College.

Boehne and Ksansnak Join Board

Aside from alumni trustees, who will be elected shortly, the Board of Trustees has elected two new members, Edward G. Boehne and James E. Ksansnak.

Mr. Stratton and Mr. Farber

Mr. Boehne is President and Chief Executive Officer of the Federal Reserve Bank of Philadelphia, which acts as banker for the United States Treasury, and supervises bank holding companies in much of Pennsylvania, New Jersey, and Delaware. He is active in determining the nation’s monetary policy through the Federal Open Market Committee and in setting the discount rate.

Boehne is Chairman of the Board of Managers of Pennsylvania Hospital, Vice Chairman of the University City Science Center, and a Director of the Ben Franklin Technology Center. He earned his doctorate in economics from Indiana University.

James E. Ksansnak is Executive Vice President of Finance and Personnel for ARAMARK Corporation. Previously he was a partner, and manager of the Philadelphia office, of the accounting firm Arthur Andersen and Company.

Ksansnak is a board member of the American Cancer Society, Philadelphia Division, the Greater Philadelphia Urban Affairs Coalition, and CSS Industries. He has served as a Trustee of Presbyterian Medical Center in Philadelphia, and has chaired the board of the 12-branch Metropolitan Philadelphia YMCA.
Spitzer Appointed Pediatrics Chairman

Alan R. Spitzer, M.D. has been appointed Chairman of Pediatrics, succeeding Robert L. Brent, M.D., Ph.D. Dr. Spitzer also becomes Pediatrician-in-Chief of the Alfred I. duPont Institute, Jefferson's affiliated children's hospital in Wilmington, Delaware. He was previously Director of Neonatology and Vice Chairman of the department.

A graduate of the University of Pennsylvania School of Medicine, he remained on that campus for residency at Children's Hospital where he became Chief Resident. After a two-year fellowship at the University of California at San Francisco in Neonatal-Perinatal Medicine, he returned to Penn and Children's Hospital. He rose to Associate Professor before joining Jefferson's faculty in 1989.

The new chairman is a former Chairman of the Pennsylvania SIDS (Sudden Infant Death Syndrome) Center, and a past President of the Philadelphia Perinatal Society. He is a reviewer for numerous journals and an Editorial Board member of Clinical Pediatrics.

Under Dr. Spitzer's direction, Jefferson's Neonatology Division became a leading research program, with special expertise in neonatal pulmonary disease. New therapies such as high-frequency ventilation, extracorporeal membrane oxygenation, liquid perfluorocarbon ventilation, and inhalation nitric oxide therapy have been evaluated and used in the hospital.

Spitzer believes that neonatologists, in collaboration with perinatal obstetricians, will soon be able to apply medical and surgical treatments to the fetus. Frequent medical problems of the neonate, such as surfactant deficiency in the premature infant, should respond to prenatal treatment. Genetic manipulation will be a strong interest for neonatologists as some of the more problematic inherited diseases of childhood, like sickle cell disease and cystic fibrosis, yield to gene replacement therapy in the near future. A primary future goal for neonatologists will be to seek a reduction in the incidence of cerebral palsy and developmental delay. □

DeHoratius Directs Managed Care

Raphael J. DeHoratius '68, Professor of Medicine, has been appointed Director of Managed Care for Jefferson's Practice Plan. He is responsible for developing and implementing the medical college's managed care strategy for the Practice Plan. This calls for him to develop working relationships with the chairmen of the clinical departments, faculty members, and third-party payers. Dr. DeHoratius also must coordinate strategy with the rest of the Jefferson community including physician practices, physician-hospital organizations, and affiliated hospitals. He will be heavily involved in negotiation and review of managed care contracts. And he will assist in research into more effective ways of delivering managed care services. □

Neurosensory Institute's Unusual Surgery Saves Infant

A newborn boy who suffered from a rare malformation in his brain that would have caused fatal congestive heart failure was treated successfully by a team of physicians and surgeons at Jefferson and Wills Eye Hospital.

The baby was born with an arterial venous fistula in his brain that was severely limiting the ability of his heart to pump blood and subsequently would have killed him. Children's Hospital of Philadelphia sent him to Thomas Jefferson University Hospital in a last-ditch effort to save his life using the neonatology team and interventional neuroradiology expertise that is available here.

Jefferson surgeons used the interventional neuroradiology suite at Wills Eye Hospital to operate on the child. In a technique similar to an angiogram, the medical team fed a catheter through an artery in the baby's leg and up into his brain. Imaging technology helped to guide the surgeons as they positioned the catheter at the site of the fistula. They then injected liquid acrylic agents into the abnormal blood vessels in order to seal off the excessive flow of blood.

The successful operation is thought to be the first of its kind in the Delaware Valley. “Having a team in place to take on this case paid off,” said Jay Greenspan, M.D., Associate Professor of Pediatrics, who helped manage the baby's care. “Only the right combination of doctors and staff could do the job and give the infant a chance at life. We’re very proud and excited that we were able to help.”

Robert Rosenwasser, M.D., a Jefferson neurosurgeon and chief of cerebrovascular and neuroendovascular surgery, performed the surgery and noted that the odds were against the baby to begin with.

continues on page 18
Addictions Program Studies How to Match Coping Styles, Treatment Strategies, and Counselor Characteristics

The addictions program of the Department of Psychiatry and Human Behavior has received a five-year, $1.7 million grant from the National Institute on Drug Abuse. It will fund a study of what difference varying types of treatment, and counselors with different approaches, make on patients with varying styles of coping with problems.

Edward Gottheil, M.D., Ph.D., Professor of Psychiatry and Human Behavior, is principal investigator of the grant.

The patients in the study, who suffer from addiction to a variety of different substances, are being enrolled in 12-week, individual counseling programs.

"We will compare the effectiveness of two types of individual counseling—highly structured and less structured—by having the same counselors provide both types of therapy to patients assigned to them on a random basis," Gottheil said.

Secondly, the researchers will compare the progress of patients whose coping styles match the type of treatment they receive with those whose styles differ from the type of treatment they receive.

"We already have some evidence that people whose coping styles are more dependent and who have lower conceptual and developmental levels respond better to a more structured treatment approach, while those who are more independent and have higher conceptual and developmental levels fare better with less structured approaches," said Stephen P. Weinstein, Ph.D., a co-investigator.

The study's third objective is to determine the extent to which differences in the effectiveness of individual counselors combine or interact with both treatment styles and patient coping styles to affect patient outcome.

"We'll examine the relationships between these factors and compare their validity in predicting success with this group of multi-substance abusers," said Charles C. Thornton, Ph.D., co-principal investigator.

Finally, the investigators will analyze the patients' perceptions of their counselors and of the benefits received from them. They will study factors that may predict whether patients stay in treatment programs. And they will consider how the counselors' own coping styles may affect the clients.

Neurosensory Institute continued from 17

"This is a very rare condition. Although these fistulas can form anywhere in the body, it is unusual to have to deal with them in the brain. The option of not operating, however, would have been 100 percent mortality."

Dr. Rosenwasser explained that because the patient was so small, the doctors were limited in how much contrast agent could be used to guide the catheter. "We could only apply the equivalent of two tablespoons of contrast to get the job done. We also have to be very careful about how and where we inject the liquid acrylic. If we do it too soon, it can miss the mark and be fatal or if it hardens too late, it could travel to the lungs and also cause death."

Dr. Rosenwasser is one of five neurosurgeons in North America who can do the procedure.

"The risks are significant, but we knew we had the best chance of success with the technology and expertise we have available here," said Dr. Rosenwasser. "We've used this surgical procedure with other types of arterial venous fistulas. But when the malformation grows in the brain like this, the patient usually dies of congestive heart failure. We were able to mobilize everyone we needed—neonatologists, cardiologists, radiologists, and neurosurgeons—to approach the problem in the best way possible."

Thomas Jefferson University joined forces with Pennsylvania Hospital and Wills Eye Hospital over the past year to form the Neurosensory Institute. Its nine faculty members constitute the largest neurosurgical department in the Philadelphia region. The institute offers the full range of neurosurgical procedures using equipment designed to offer more noninvasive cures, with a substantial reduction in the cost per case. This equipment includes a gamma knife, a brain-dedicated stereotaxic linear accelerator, and a biplane stereo angiography suite capable of performing the most sophisticated interventional radiological occlusions of arterial malformations and aneurysms, making this the most advanced such unit in the Delaware Valley.
World's First Clinical Trials of Gene Therapy for Cardiac Patients Begin at Jefferson

The first clinical trials in the world to use antisense technology in heart patients are beginning at Jefferson soon. Associate Professor Andrew P. Zalewski CD'84 and Research Assistant Professor Yi Shi, M.D., Ph.D. had found that 40 percent of balloon angioplasty patients experience restenosis—reclosing of heart arteries—within six months. A major cause is the vessels' healing response to the intervention. Rather than reclear the artery walls with follow-up angioplasty procedures, doctors have been exploring ways to prevent restenosis in the first place. Drs. Zalewski and Shi believed that it might be avoided if the gene stimulating the growth of scar tissue cells in the affected arteries were “blocked.” In recent months they have produced evidence that this “antisense” technology works in practice.

Since November, about 30 patients undergoing angioplasty have been receiving antisense dosages in clinical trials at three sites in Buenos Aires. The purpose of this Phase I clinical trial, the data from which is being analyzed at Jefferson, is to determine the safety of the antisense.

Clinical trials in the United States involving 2,000 patients will begin this fall, with Jefferson serving as the lead site in conjunction with several other major medical centers.

The trials will probably last three years. If their outcome is successful, gene therapy for restenosis will become available to thousands of heart patients every year.

The gene which Zalewski and Shi identified early in their research as contributing to restenosis is the c-myc gene, which stimulates growth of smooth muscle cells following angioplasty. Their key finding was that the gene's action could be blocked using pieces of synthetic DNA called antisense oligomers. The physicians deliver the oligomers into the vessel wall where they interact with the c-myc gene's messenger RNA.

Faculty Find New Variants in Hepatitis B

Writing in the journal Hepatology, Jefferson virologists reported that some cases of hepatitis infection resulting from blood transfusions are associated with variants in the hepatitis B virus, and that these variants aren't detectable in the patients studied, using current blood screening tests.

The patients in the study were all children with a type of anemia called B-thalassemia. All had had many transfusions and many of them developed hepatitis; although none of them had markers of hepatitis B virus in their blood. The children were then vaccinated against hepatitis B.

As usually happens, they developed protective antibodies against the virus. The Jefferson scientists found, however, that before vaccination many had evidence of the hepatitis B variants in their bloodstream and that many became or remained infected with hepatitis B variants despite vaccination.

“These results suggest that while current vaccines for hepatitis B are highly effective against the common form of the virus, vaccination doesn’t appear to protect against infection from the variants,” said Mark A. Feitelson, Ph.D., Associate Professor of Pathology and Cell Biology and principal investigator.

“Our results also suggest that hepatitis B contributes to the development of liver disease under these circumstances, where it previously wouldn’t have been expected to occur,” Dr. Feitelson said. Furthermore, he and his colleagues have found ways to detect specific variants of hepatitis B in patients with unexplained hepatitis after transfusion.

“The findings are important for diagnosis and treatment of post-transfusion hepatitis,” Dr. Feitelson said. More than 250 million people worldwide are infected with hepatitis B virus. For each known carrier, or person with the virus in his or her bloodstream, there are several more who are infected but show few if any markers for the virus in their blood.

“This suggests that there’s a large reservoir of people who carry variants of this hepatitis virus and implies that contaminated blood transfusions may be the source of these infections,” Dr. Feitelson said.

He believes that if many hepatitis B virus infections consist of predominantly mutant virus strains, these strains may genetically recombine during the course of infection, resulting in the spontaneous appearance of the normal strain of virus.

“This is another reason that additional testing to detect such mutations may be desirable,” he said.
JUNE 8-11, 1995
125TH ANNIVERSARY CELEBRATION
JEFFERSON MEDICAL COLLEGE ALUMNI ASSOCIATION

JUNE 8    THURSDAY
WOMEN'S FORUM DINNER
FOR ALUMNAE, FACULTY, AND WOMEN STUDENTS
5:30 Reception, 6:30 Dinner
EAKINS LOUNGE, JEFFERSON ALUMNI HALL
Speaker: Loretta Finnegar, M.D., Director, Women's Health Initiative, National Institutes of Health

JUNE 9    FRIDAY
COMMENCEMENT
PRESENTATION OF THE PORTRAIT OF JOE HENRY COLEY, M.D. '34
3:00 P.M., CONNELLY CONFERENCE HALL, BLUEMLE LIFE SCIENCES BUILDING
JOE HENRY COLEY LECTURE
Murray N. Silverstein, M.D. '54, Professor of Medicine and Chairman Emeritus of Hematology, Mayo Medical School, will speak on
"MYELOFIBROSIS: IN SEARCH OF THE CURE"

GALA ALUMNI BANQUET
7:00 Reception, 8:00 Dinner
HOTEL ATOP THE BELLEVUE, BALLROOM
PRESENTATION OF THE ALUMNI ACHIEVEMENT AWARD

JUNE 10    SATURDAY
REUNION CLASS SPEAKERS
9:15 A.M., SOLIS-COHEN AUDITORIUM, ALUMNI HALL

DEAN'S LUNCHEON, 12:45 P.M.
FOLLOWED BY
A VISION OF 2020:
A LOOK AT MEDICINE IN THE FUTURE
Moderated by Joseph S. Gonnella, M.D., Senior Vice President for Academic Affairs, Thomas Jefferson University, and Dean, Jefferson Medical College
Speakers: Carlo M. Croce, M.D., Chairman of Microbiology and Immunology, Jefferson Medical College, and Director of the Jefferson Cancer Institute and Jefferson Cancer Center; Richard A. Insel, M.D. '69, the George Washington Goler Professor of Pediatrics, and Director of the Strong Children's Research Center, University of Rochester School of Medicine and Dentistry; and Darwin J. Prockop, M.D., Ph.D., Chairman of Biochemistry and Molecular Biology, Jefferson Medical College, and Director of the Jefferson Institute of Molecular Medicine

CLASS REUNIONS, 7:00 P.M.

JUNE 11    SUNDAY
FAREWELL BRUNCH
10:00 A.M., EAKINS LOUNGE, JEFFERSON ALUMNI HALL

SPECIAL ARCHIVES EXHIBIT: 125 YEARS OF THE ALUMNI ASSOCIATION
VIDEO CELEBRATING THE ALUMNI ASSOCIATION AND JEFFERSON MEDICAL COLLEGE
McGehee Becomes Association President at Annual Business Meeting on April 27

The Alumni Association's next President is a consummate teacher and primary care physician. Edward H. McGehee '45 is known for allowing no distractions to come between him and the individual patient or student. A role model for many Jefferson classes, he will be installed for a one-year term as President at the Annual Business Meeting on April 27.

A Southerner by birth who still retains a unique accent, McGehee came north for college at the University of Pennsylvania. After medical school, he trained at Jefferson in pathology during Dr. Peter Herbut's first two years as chairman of that department. Dr. McGehee then trained in internal medicine and hematology at Pennsylvania Hospital, and spent a year in London as a McRae Fellow in Medicine at Guy's Hospital. His brother John graduated from Jefferson in the Class of '52 and returned to live in Mobile, Alabama.

For many years Dr. Edward McGehee enjoyed a busy family practice in the Chestnut Hill section of Philadelphia. For a time he chaired the Department of Medicine at Chestnut Hill Hospital, and his office was crowded with students.

In 1974 he was recruited to Jefferson to teach in the Department of Family Medicine which had been established the preceding year. From the beginning he made a strong impression in the classroom; the Class of '76 chose him for the portrait they presented to the university. A year later he received the Lindback Award for teaching. In 1984 he was named the first occupant of the Garber Professorship in Family Medicine.

Dr. McGehee served as Treasurer of the Alumni Association from 1988 to 1995. As President, Dr. McGehee says he seeks to "promote an understanding of the profound organizational changes that Jefferson must undergo in the next few years in order to thrive in the rapidly changing health care world. Keeping a tight belt financially is essential in all aspects of the university, including the Alumni Association."—M.C.
Experiences in Washington as a Robert Wood Johnson Health Policy Fellow

by Howard K. Rabinowitz, M.D., Professor of Family Medicine

Each September, six faculty members from academic health centers who have been chosen as Robert Wood Johnson (RWJ) Health Policy Fellows come to Washington, D.C. to gain an understanding of major health policy issues and how they are addressed in our political system. Last year, I had the opportunity to participate in this unique program, and had the privilege of working as a Health Policy Fellow for Senator John D. (Jay) Rockefeller IV (West Virginia).

The RWJ Health Policy Fellowship was established in 1973, and is administered by the Institute of Medicine (IOM) of the National Academy of Sciences. The fellowship consists of a one-year program of orientation and full-time working experience in the nation's capital. The purpose is to provide mid-career faculty with an in-depth and hands-on educational program in health policy. The year allowed me to learn the process of how health policy is made, to broaden my own perspective regarding health care, to enrich my background in areas such as medical economics and political science, and to develop a real understanding of how Congress and the legislative process works in this country. Because of the remarkable nature of last year's legislative agenda—comprehensive health care reform—an added attraction was to be intimately involved with the national health care reform debate.

The health policy fellowship began with an intensive 11-week orientation program arranged by the IOM, with assistance from the American Political Science Association. The orientation was structured as a series of three to four seminars each day (over 150 in all) with many of the individuals and organizations in Washington who influence and help formulate national health policy. We met with key White House advisors, top administrators of agencies responsible for health activities, congressional committee staff members, health policy experts from "think tanks," and representatives of trade associations, lobbying groups, and other health interest groups. In addition, we participated in a series of didactic seminars on areas such as health economics and political science. Concepts such as ERISA, risk adjustment, and insurance market reforms became the building blocks for our later Congressional work. The orientation was an excellent transition from academe to Washington, and a way to network in a town where networking is critical.

The majority of the fellowship consisted of working as a Health Policy Fellow in Senator Rockefeller's personal office, the perfect practical complement to the orientation. Senator Rockefeller is a unique and remarkable human being, a leader in health care issues, and a true public servant. I am sincerely grateful for having had the opportunity to work for him. Senator Rockefeller frequently went out of his way to ask for my thoughts, advice, and recommendations. His staff is incredibly bright, dedicated, and hard working; their 10-to-15-hour intense and pressured work days are a far cry from the popular perception of government employees, and was far more reminiscent of my own internship days than I had imagined.

Working in a Congressional office was challenging, and an incredibly different experience than working as a physician or medical school faculty member. My first day's assignments were: 1) to learn about "health alliances" in the Clinton Health Security Act, to find out about any similar models which existed (such as the Federal Employees Health
Benefits Program and the public employees benefits programs in California, Minnesota, and Wisconsin), to learn about the number of employees and the administrative costs of running these programs, and to prepare a memorandum for Senator Rockefeller on this issue; 2) to help brief Senator Rockefeller for his upcoming visit to a small hospital in rural West Virginia; and 3) to look into the concerns of hospitals and community health centers in underserved areas regarding the possible ways in which the Health Security Act might affect their ability to provide unique health care services to the underserved. I learned to solve problems quickly and to type.

Daily activities included writing background and policy memos to help Senator Rockefeller prepare for his daily meetings, hearings, speeches, and trips to West Virginia, all related to health care. I also participated in writing speeches, helped brief the Senator for the Finance Committee hearings, and assisted the Senator at speeches, daily meetings, and committee hearings. I met with many constituents from West Virginia each week, as well as with numerous lobbyists. And there were frequent meetings with staff from other Congressional offices, to educate each other and to share policy and process issues regarding health reform.

Because of the broad nature of the health reform process last year, Senator Rockefeller's office was involved with a wide range of policy issues. I had the opportunity to be primarily involved in many of the issues which directly affected the medical profession and medical schools, including health plan standards (e.g., "any willing provider," Centers of Excellence, access to specialty care), quality of care, medical research, experimental treatments, the benefits package, and rural and urban underserved areas.

In addition, I had the opportunity to work with Senator Rockefeller in developing and refining the Health Professions Workforce section of the health care reform bill presented in the final weeks of the Congressional session by Majority Leader George Mitchell. This section included reform of the nation's graduate medical education system and support for academic health centers and medical schools. It provided for a national mechanism to control the total number of physicians being trained, but increase the number of primary care physicians, in a flexible manner which was able to incorporate the rapid changes taking place in the health care environment.

In addition, it included: an "all-payer" fund to support residency training in this country, by having all health care insurers share equally in the cost of graduate medical education; increased funding to medical schools for ambulatory and primary care education; and increased funding for medical research through the National Institutes of Health (NIH) and the Agency for Health Care Policy and Research (AHCPR). This section of the Health Security Act was the result of negotiations with other key Senators, as well as a large number of outside medical organizations, and was supported by the Association of American Medical Colleges, representing all of the medical schools and teaching hospitals in the country. Ultimately, this section of health care reform died with the overall demise of health reform legislation.

Finally, I took primary responsibility for developing legislation for Senator Rockefeller to create a Center for Primary Care Research within AHCPR, which Senator Rockefeller introduced as bill S. 2513 in the final days of the 103rd Congress.

The year as a Health Policy Fellow was remarkable as education and as life experience, despite the frustration that Congress was unable to pass any health care legislation last year. Personally, I believe the country missed an historic opportunity to try to improve the health care system, and that the outcome—no legislation—was the worst of all possible outcomes for patients, physicians, and medical schools. I am also concerned that the current philosophy in Washington will result in budget-driven health policy, which will likely lead to further Medicare and Medicaid cuts to doctors, hospitals, and academic health centers. In addition, a lack of regulation of the insurance industry and managed care organizations will likely create an environment of "unmanaged" competition.

Having returned to Jefferson, I hope to be able to share my health policy knowledge and perspective, in order to help the medical college and university in a time of rapid change in the health care environment. Armed with a broader perspective of health care, with the language and skills to effectively participate in health policy discussions at a national level, with "legislative clinical judgement" and the ability to translate legislative activity, and with an understanding of the role of Congressional staff and the flow of information in the process, I also plan to participate in the teaching of health policy to students, residents, and fellows.
Anstadt Sees Focus on Health as a Route to Savings

George W. Anstadt '70, Senior Medical Officer for Eastman Kodak Company, has served for a year as President of the American College of Occupational and Environmental Medicine (ACOEM). Founded in 1916, ACOEM represents the interests of occupational, environmental, and preventive medicine. It has 7,000 members, of whom about one-third are corporate physicians. Dr. Anstadt brings a corporate perspective to health and health care delivery, which is being driven further into a competitive, market-based, managed care environment.

Occupational medicine, he explains, has evolved from industrial medicine emphasizing acute care of workplace injury and sickness, to its present focus on occupational health emphasizing prevention and wellness. He sees it as uniquely positioned at the crossroads between business, medicine, and prevention. He points out that the Fortune 500 companies have downsized by about 100,000 jobs over the past decade, yet the number of corporate physicians has remained fairly stable. He believes most companies predict that future health care reforms will be market-driven and realize corporate physicians can help them make appropriate health care decisions. As this new health care marketplace evolves, corporate physicians can help companies become more efficient in their health care decision making. Dr. Anstadt is convinced that corporate medical directors and occupational physicians will continue to be needed, particularly in view of their advisory role in corporate health decisions. He points out that corporate health correlates strongly with the health of workers because of the effect of sickness and disability on productivity, on costs, and ultimately on the company's bottom line.

Anstadt argues that medicine's efforts to date to influence health care reform fail to recognize the importance of returning individuals to productive capacity, an outcome measure he believes all occupational physicians should emphasize to other physicians. He is recommending, through ACOEM, that the following statement be added to future health care legislation: "Because illness-related productivity losses have the same economic impact on society as direct health care expenditures, it is also valid and appropriate to consider the productivity related costs of providing or withholding treatments." Anstadt points out that an optimally healthy workforce is a tremendous competitive advantage for this country, and believes the economic security and self-esteem of individual workers relates significantly to productive capacity.

In addition to health care reform legislation, ACOEM continues an active role in supporting legislation to improve the quality of indoor air and to control environmental tobacco smoke (ETS). ACOEM also has made comments to OSHA on the control of environmental tobacco smoke and has supported separating the ETS standard from the indoor air quality proposal to expedite prompt finalization of the ETS standard. In another matter, ACOEM has recognized for a long time that confidentiality of employee medical records is a problem at some workplace locations. If workers are to have faith in employer-sponsored health care programs, confidentiality of medical records is an absolute necessity. ACOEM will sponsor the introduction of federal legislation with the purposes of protecting the privacy of individual workers and of bringing order to the morass of conflicting federal and state laws now regulating this issue.

Dr. Anstadt favors taking the concept of occupational health with its emphasis on prevention and wellness a step further. He wants to encourage the whole medical profession to change the emphasis of medicine from disease treatment to disease prevention and patient wellness. He elaborates on this viewpoint in a recent President's Message in the ACOEM's journal: "Eighty years of perfecting scientific disease treatment has allowed medicine to perform miracles approaching that of raising Lazarus from the dead. But miracles come at a high price, draining dollars from more cost-effective approaches. This disease treatment pendulum has swung too far. The American public now supports a trillion-dollar hodge-podge funding of disease treatment. And perhaps a greater sum is lost because of disease-related impaired productivity. Business and the public now understand, in an intuitive way, that a focus on disease treatment is no longer the correct paradigm, and are demanding a true health care system, a system organized around individuals rather than around treatments, and which has optimal health, rather than disease, as its focus."

He goes on to write: "Those practicing in corporations must embrace all health-related issues in the corporation as an integrated whole; act proactively; use systems approaches; emphasize the productivity value of optimal health; and remind medical colleagues of the salutary effects of work and the catastrophe for individuals and society associated with dependency."

Anstadt is a strong advocate of a concept of health care delivery known as demand management. He firmly believes that physicians who work on the demand side of health care rather

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than on the supply side can help lower health care costs without degrading patient outcomes. They will do this, he believes, by emphasizing preventive measures.

He wants ACOEM to provide leadership in the area of prevention—through traditional clinical preventive medicine efforts, behavioral preventive strategies, and environmental preventive strategies—particularly as these efforts relate to the community and to the workforce. If personal self-care and wellness efforts are improved, Dr. Anstadt believes, people will be in a better position to influence their own health and to make appropriate uses of health care resources, with a net financial saving to society.

Demand management initiatives include wellness activities aimed at optimal health, self care of trivial problems, true patient informed choice of care in cases of significant illness, self management of chronic disease, and minimization of futile heroic measures at the end of life. Because “fewer than 25 percent of the variability in encounters with the medical care system are related to pathology,” according to Dr. Anstadt, many of these encounters can be avoided without harm to patients. He believes that if the principles of demand management were to be applied to health care delivery, people would be better able to fit available medical options to their own lives and occupational situations and the need for care in many chronic disease situations could be decreased. However, Dr. Anstadt is realistic enough to admit that general acceptance in this country of the concept of demand management will require a mind set-change for most doctors and patients.—J.J.G.

Berger Appointed Neurology Chair at University of Kentucky

Joseph R. Berger '74 has been appointed Chairman of the Department of Neurology at the University of Kentucky College of Medicine and Chandler Medical Center in Lexington. Dr. Berger had been on the faculty of the University of Miami School of Medicine since 1981, rising to the rank of Professor. In 1991 he was named the first occupant of the Thomas Whigham Professorship, named in honor of one of Berger's patients. At Miami, Berger was the principal investigator in neurology at the Center for AIDS Research from 1989 to 1994. His research is funded by the National Institutes of Mental Health. An Editorial Board member of AIDS, the Journal of Neurovirology, and the Journal of NeuroAIDS, he is co-editing the second edition of AIDS and the Nervous System for Raven Press.

A Portrait Celebration at Jefferson's Eakins Gallery on November 11 honored a distinguished group: individuals whose portraits have been presented to Jefferson. The celebration was organized by Frederick B. Wagner, Jr. '41 and Julie S. Berkowitz, University Art Historian. University President Paul C. Brucker, M.D. presented a specially made pin to each living portrait subject.

Old Yearbooks Available

Extra copies of Clinic yearbooks from the following years are available: '76, '78, '79, '80, '81, '82, '83, '85, '87, '89. Call Annette Borger '95 at 215 592 7096.

Benjamin Bacharach '56 and Lewis W. Bluemle, Jr., President Emeritus of the University

John H. Hodges '39 (right) greets Charles Wilmer Wirts, Jr. '34
Dr. E. Marshall Goldberg, Professor of Medicine and former Director of the Division of Endocrinology and teacher of a writing course in the medical college, became intrigued with the institution's inherited traditions when he joined the staff six years ago and created a video history of great Jefferson physicians with Frederick B. Wagner, Jr. '41. Now it has influenced his second career as bestselling novelist, which he says “I can't stop: I begin creating scenes in my mind as soon as I begin the walk to or from my house” nearby. His latest tale, The Family Scalpel, chronicles a fictional dynasty of Jefferson doctors. Some actual members of the medical staff are named, including Dean Joseph S. Gonnella, M.D. and Chairman of Medicine José F. Caro IM78, but Dr. Goldberg assures us it is a favorable portrait.

Marshall Goldberg's Newest Thriller is the First Novel Set at Jefferson

As far as is known, it is the first novel that takes place at Jefferson.

His publisher is also reissuing his eight previously published medical novels, which include The Karamanov Equations, The Anatomy Lesson, Critical List, and Nerve. Together, he feels, they capture various aspects of the medical scene over the past four decades. His next novel (working title: Spontaneous Remissions) is nearing completion, and yes, it is also set here.

Frederick B. Wagner, Jr. '41 has stated that The Family Scalpel “concerns the strange but credible happenings to the 10 members of the Blackman family, ranging in age from the 80-year-old patriarch to the 23-year-old medical student. The action takes place in Philadelphia, Jefferson Medical College, the Main Line suburb of Gladwyne, the Orly Airport of Paris, and aboard a private jet plane. The complex plot involves international intrigue against a South African diplomat, murders and attempted murders, detective cunning, marital discord, and even a few puffs of steamy sex.

“The medical thread, never lost, takes one authentically into heart surgery as well as sophisticated diagnosis of exotic diseases.”

Dr. Wagner feels that the author’s “insight into the workings of the criminal mind and its counterpart in the detective world creates wonderment how a single author could weave such a tapestry in so balanced and congruous a plot. His secret lies in the fact that many of the actions are taken or modified from his personal experiences and research into actual events.

“The element of surprise never lessens in the fast-moving story. . . colorful descriptions.”

May 1995 release.


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Nominations for Achievement Award

Readers are encouraged to submit nominations for the Alumni Achievement Award. Although the award carries no monetary stipend, each recipient's name is permanently affixed to a plaque prominently displayed at the entrance to Jefferson Alumni Hall. The recipient is presented with a handsome silver tray, suitably engraved and bearing the seal of the medical college, as the highlight of the Alumni Banquet in June. The Achievement Award Committee of the Alumni Association is charged with the final selection; the committee's decisions are not subject to review. Please direct curricula vitae and bibliographies of alumni whose professional activities are sufficiently outstanding to warrant consideration to “Attention: Achievement Award Committee,” 1020 Locust Street, Suite M-41, Philadelphia, PA 19107.
CME and Ski Trip Promises to Become an Annual Event

Forty alumni and faculty registered for the February meeting in Colorado, "What Every Doctor Should Know: A General Medical Update." And the receptions hosted more than 75 individuals, including graduates from across the nation. The Continuing Medical Education lectures were scheduled in the morning and late afternoon, leaving seven hours in midday to enjoy downhill skiing, cross-country skiing, and relaxing in the Aspen-Snowmass area. The trip was organized by Joseph L. Seltzer '71 and Pauline K. Park '82.

Combining Category One Continuing Medical Education credit with fun on the slopes, the program covered such essential topics as metastatic liver disease, pituitary tumors, Alzheimer's disease, low back pain, chronic pain, sinus disease, sports injuries, shoulder problems, basics of hand surgery, breast disease, endoscopy, chronic fatigue, stroke treatment, and how to insure quality in managed care.

Alumni are already planning a date for the second annual trip in February 1996. Look for information and registration forms in future Bulletins.

Alumni and faculty and their partners took the Jefferson banner to the top of the mountain.

Lehigh Valley Welcomes President Brucker

Dr. and Mrs. Earl K. Sipes '46 with University President Paul C. Brucker, M.D. at a reception for Lehigh Valley area alumni on November 9

Dr. and Mrs. Craig T. Haytmanek '72

Dr. and Mrs. Stephen F. Balshi '45 with Dr. and Mrs. William V. Harrer '62

Stephen A. Volk '72 and Dr. and Mrs. James J. Martin '84
Volunteering as a Physician in Developing Nations

by Robert K. Finley, Jr. '48

Dr. Finley wrote from Webuye, Kenya where he was volunteering from May to December 1994. For many years Dr. Finley practiced surgery at Miami Valley Hospital in Dayton, Ohio. In January he goes to Rwanda to help put a hospital back into operation in the capital, Kigali.

When a physician retires he faces many choices. Most doctors at retirement want to continue some form of work, as evidenced by the fact that most retain the license to practice for years, attend meetings of scientific interest, and subscribe to journals. The physician has skills which are uniquely valuable and enable him to contribute to society. This gives a sense of self-worth. Most of us feel better if we can be part of the working society. It is hard for a doctor to stop suddenly and just sit at home.

Many may have an interest in traveling to different lands and meeting different people. Working as a volunteer overseas will allow the physician to continue to contribute, travel to all parts of the world, and meet many different people. The opportunities to do this sort of work are endless.

Many organizations will support one while working and pay for part or all of the travel.

I have had opportunities to work in Jamaica, Samoa, and most recently Kenya. Each place has its own special flavor and each has been interesting.

I went on a mission with the Christian Medical Society as part of a group to work in Black River Jamaica. That mission lasted two weeks. I paid my own way and contributed to my board and room. We were encouraged to bring medical supplies with us since the local facility had very limited resources. On that mission I served as a surgeon operating on a number of hernias and other elective cases which had been seen by the last group who came about three months previously. On that mission we had two surgeons, one orthopaedic surgeon, two gynecologists, and two anesthetists. There were dentists who

served in outlying clinics, nurses, physical therapists, and many volunteers who served in the hospital or at the clinics. We also had a number of construction workers who erected a much needed storage facility in just two weeks.

That was a well organized project and a good introduction to serving in foreign territory. I had colleagues to consult and help me through the adjustment process.

My next assignment was one that I worked out myself through a list published in the Journal of the American Medical Association. I contacted the Tropical Medical Center in Pago Pago, American Samoa. They needed someone to work on the surgical service at that institution. It is a 130-bed hospital which

serves the needs of the people in the region. It has a staff of about 30 with specialists in most disciplines. I functioned as a surgeon. The surgery was more varied than I had practiced in the U.S. It included orthopaedics, urology, and some neurosurgery. They wanted a longer commitment but I hesitated because I had not experienced such a long period away from home and friends. I worked there for five months enjoying every minute of it.

Since I was in the area, I traveled to New Zealand and Australia, two places I had always heard of but never had a chance to visit.

I had applied to and been accepted as a volunteer by the Friends United Meeting in Richmond, Indiana. They have a number of missions abroad, including several in Africa. They had need for a physician to serve in Lugulu Mission Hospital in Webuye, Kenya. The physician who was there wanted to come home for family reasons. The mission needed someone to fill in for a time until a new physician could be recruited. I was happy to come.

The hospital is a 100-bed facility in a rural community in northwest Kenya. The area has a large population of small farmers who eke out a living by intense cultivation of what land they have. Almost all the work is done by hand. I saw few tractors.

There is universal health care in Kenya and there are fine government institutions. As in so many lands, the concentration of health care is centered in the metropolitan community, in this case Nairobi. The rural areas are underserved. To compound the problem, the economy has been poor for the past 10 years. This has put a strain on the government to provide health care. Currently the physicians who work for the government have gone on strike over multiple issues. Money is, of course, a major problem, but the doctors have many more grievances.

The result of all this is that health care is scarce and the private sector and mission hospitals like this one are taking up the slack. This hospital maintains an over-capacity census
constantly. The pediatrics ward keeps two patients to a bed—that is, two mothers as well. In the adult wards patients are on mattresses between beds and up the center isles. With such a press of patients, one certainly feels needed.

On a personal basis I have had to make a lot of adjustments. I spent my life in academic surgery. Now I am expected to be a doctor in every sense of the word. I have been assigned to the pediatrics ward. Most patients here have malaria. I had no experience treating malaria before I came, and had not treated children since internship. I have had to do a lot of refresher type on-the-job training. It has almost been like starting over again, carrying notes on drug doses, strings of symptoms, methods of therapy, and Swahili phrases. I get calls about intravenous lines that the nurses cannot start. It takes me back to my earliest days in medicine.

I take care of obstetrical cases, do Caesarean sections, and listen to fetal heart tones—something I have not done since internship. One fact comes home every day: if I don’t do it, it won’t get done. While there are three of us working here, we all are busy. I am the last stop. Referring patients to regional hospitals is difficult for the patient and the physician. Transportation is by matatu, a pickup truck with a “cap” and wooden benches along the sides of the bed. They charge by the fare and pack the vehicle as tight as possible using rooftop seating at times. Buses are infrequent and crowded. Many patients simply have to walk. The distances, expense, and inconvenience make referral hard. With the government hospitals on strike, it becomes even more difficult.

Living with the people is a great way to get to know them and their culture. Since most of my patients speak only Swahili, I have to learn a bit of that language in order to care for them. Most natives receive my Swahili with a puzzled expression. The nurse usually comes up and says what sounds like exactly the same thing I just said but they understand immediately. They say it is my accent.

Living in a foreign land is an experience I have not had until these

volunteer assignments. I was in the Navy in Trinidad for almost two years, but we lived on the base and really didn’t meet many local residents. There is always a certain amount of anxiety and confusion that goes with living abroad. The locations are different, the language is different, the dress is different, the money is different, the stores are different, the climate is different.

I sometimes wish I had done something like this years ago. But the practice of medicine in the U.S. does not lend itself to taking long periods off. Short missions are possible, but to gain real insight into a culture, a longer stay is much better. This may only be possible after retirement. I am now enjoying that chance.
Kenneth B. Geddie, Sr. '21 died October 29, 1994. He practiced general medicine in Raeford, NC from 1922 to 1927 when he left to obtain postgraduate education in pediatrics. Board certified in 1936, he practiced pediatrics in High Point, North Carolina. A Fellow of the American Academy of Pediatrics, he received the Distinguished Service Award from the University of North Carolina in 1973. He is survived by a son and a daughter.

Ralph L. Drake '26 died September 22, 1994. He began a medical practice in Philadelphia but moved to Wichita, KS in 1937. He was on staff at Wesley, St. Francis, St. Joseph, and Veterans Administration Hospitals in Wichita, KS. He established a Multiple Sclerosis Clinic at Wesley Hospital in 1959 and served as its director until 1976. He is survived by his wife, Anna Lee, and a daughter.

Milton Harrison '29 died December 29, 1994. He obtained his surgical training at Jefferson Hospital and became an Assistant to Thomas A. Shallow '11. After returning from World War II service, he practiced general surgery at Jefferson and St. Joseph Hospitals and was appointed to the surgical faculty of Jefferson Medical College. He relocated to St. Petersburg, FL after retiring from practice. He is survived by son Anthony '64 and another son.

Oscar R. Deutel '31 died February 16, 1993, it has been ascertained. He served in the Army Medical Corps during World War II, then practiced medicine in Bloomfield, NJ. He was living in Hollywood, FL at the time of his death.

Gerard S. Servino '32 died October 21, 1994. A board certified general surgeon, he practiced in Wilmington, DE. He was on staff at St. Francis and Wilmington General Hospitals and served as Chief of Surgery at St. Francis Hospital. He is survived by his wife, Kathleen.

Frank D. Conole '34 died January 13, 1995. He was a board certified general surgeon and practiced in Binghampton, NY. A Fellow of the American College of Surgeons, he earned three battle stars as a combat surgeon during World War II.

Israel O. Silver '34 died December 11, 1994. He had a general practice in Steelton, PA until 1986. Locally, he was widely recognized as the medical backbone of the athletic program at Steelton-Highspire High School. He is survived by two sons and a daughter.

George L. Erdman '36 died September 16, 1994. A board certified pathologist, he was Director of Laboratories at Overlook Hospital, Summit, NJ for 27 years and served as President of the Medical Staff in 1972. He was President of the Union County Medical Society in 1950. He is survived by his wife, Ann, and four sons, including Robert '66.

Joseph W. Gatti '36 died November 21, 1994. He was in general practice in Indiana, PA and was on staff at Indiana Hospital. He was President of the hospital staff in 1958 and was a past President of the Indiana Medical Society. He is survived by his wife, Lena Elizabeth, three sons, and a daughter.

June U. Gunter '36 died November 14, 1994. A board certified pathologist, he was Pathologist and Director of Laboratories, Watts Hospital, Durham, NC until retirement in 1976. He became an amateur astronomer of international reputation, published a newsletter on asteroids, and in 1980 had an asteroid named after him. He is survived by his wife, Elizabeth, two sons, and a daughter.

Alexander E. Penneys '36 died November 16, 1994. A board certified radiologist, he practiced in Los Angeles for 50 years. He was on staff at Cedars Sinai and Doctors Hospitals in Los Angeles. He is survived by his wife, Rose, one son, and a daughter.

Harold P. Sortman '36 died December 7, 1994. He was in family practice in Wilmington, DE for 54 years. He was an Army combat surgeon during World War II and was awarded a Silver Star and a Bronze Star. In 1990 the Governor of Delaware presented him with the Order of The First State in recognition of meritorious service to Delawarians. He is survived by a son and two daughters.

John M. Flumerfelt '37 died May 5, 1994, it has been ascertained. He was a psychiatrist and psychoanalyst. At the time of his death he was living in Willoughby, OH.

Howard A. Vost '38 died November 1, 1994. He was in general practice in Fremont, OH for 36 years. He was a former Chief of Staff of Fremont Memorial Hospital. He is survived by a son and a daughter.

Stephen Repta, Jr. '39 died October 12, 1994. He was in family practice in Union, NJ and was associated with Overlook Hospital and Union Hospital.

Thomas E. Forbes '40 died September 21, 1994. He was in family practice in Reidsville, NC for 51 years. He is survived by his wife, Tymesia, two daughters, two stepsons, and a stepdaughter.

William W. Kitchin '40 died November 27, 1994. A board certified general surgeon and a Fellow of the American College of Surgeons, he practiced in Clinton, North Carolina until 1985. He was on staff at Sampson County Memorial Hospital, Clinton, NC. He is survived by his wife, Nancy, two sons, and a daughter.

Enrique L. Matta '40 died October 23, 1994, it has been ascertained. At the time of his death he was living in Altamonte Springs, FL. He is survived by his wife, Purita, a son, and a daughter.

Harvey P. Feigley, Jr. '42 died September 24, 1992, it has been ascertained. He was in general practice in Quakertown, PA.
for 35 years, retiring in 1981. He was a former Chief of Staff at Quakertown Community Hospital. He is survived by his wife, Lois, a son, and a daughter.

Robert A. Heinbach '42 died October 19, 1994. He was in family practice in Selinsgrove, PA for 53 years. He won a Bronze Star as a combat surgeon during World War II. He is survived by his wife, Jerussel, two sons, and a daughter.

Hildreth B. Elwell, Jr.'43 died November 12, 1993, it has been ascertained. He was a family practitioner in Huntsville, AL. He is survived by a son and two daughters.

J. Treacy O’Hanlon J'44 died November 11, 1994. A general surgeon, he practiced in Waynesboro, VA until retiring in 1985. He was a Fellow of the American College of Surgeons. His special professional interest was spinal cord injury and he contributed time and talent to spinal cord injured patients. He is survived by his wife, Elizabeth, four sons, and a daughter.

Thomas L. Wilfong J'44 died December 14, 1994. He was in general practice in Bethel Park, PA for 40 years. He is survived by his wife, Helen, and a daughter.

Eugene H. Kain S'44 died November 6, 1994. He was a board certified general surgeon and practiced at Cooper Hospital, Camden, NJ. He was Chief of Surgery at Cooper Hospital from 1968 to 1975. He served as President of the Camden County Medical Society and President of the New Jersey chapter of the American College of Surgeons. He is survived by his wife, Patricia Ann, three sons, and a daughter.

H. Blake Hayman '45 died November 21, 1994. A board certified obstetrician-gynecologist, he began practice in Levittown, PA in 1953. By the time he retired in 1991 he was widely known as “Levittown's baby doctor.” He was on staff at Lower Bucks County and St. Mary Hospitals. He was Chief of Obstetrics-Gynecology at St. Mary Hospital and President of the Medical Staff in 1985. He is survived by his wife, Emelia, a son, and three daughters.

Douglas W. MacKelican '45 died December 25, 1994. He was in family practice in the Wilmington, DE area for over 40 years. He was on staff at the Medical Center of Delaware and St. Francis Hospital. He was a past president of the Delaware Academy of Family Physicians. He is survived by his wife, Martha, three sons, and two daughters.

Jesse Schulman '45 died September 29, 1994. He began a general surgical practice in Lakewood, NJ in 1950 and continued until retirement in 1985. He was Chief of Surgery at Kimball Medical Center, Lakewood, NJ and, in 1993, received the Kimball Humanitarian Award. He is survived by his wife, Agnes, four sons, including William Schulman '74, and three daughters.

William A. Terheyden '47 died October 17, 1994. A board certified orthopaedic surgeon and a Fellow of the American Academy of Orthopaedic Surgeons, he practiced in Miami, FL. He was an Assistant Clinical Professor of Orthopaedic Surgery, University of Miami School of Medicine, and a staff member at St. Francis and North Miami General Hospitals. He is survived by his wife, Flora, three sons, and four daughters.

Emanuel Tulsky '48 died November 28, 1994. He was board certified in radiology and was Chief of Radiation Medicine at Abington Memorial Hospital, Abington, PA for 20 years. He later practiced in Chalfont, PA and was on staff at Doylestown and North Penn Hospitals. A member of numerous radiologic societies, he is survived by his wife, Helene, a son, and a daughter.

Jean Fetzer Spigel '80 died June 21, 1994. A pediatrician, she became Director of the pediatric clinic at Children's Hospital, Albuquerque, NM in 1983. She developed successful programs to help sexually abused children and, in 1990, founded the Children's Safehouse, a haven for abused children. She is survived by her ex-husband, James Spigel '80, a son, and a daughter.

David N. Baer '91 died October 7, 1994 from injuries received in a motor vehicle accident. He had just begun an internal medicine practice in Greer, SC. He is survived by his mother, two sisters, two stepsisters, and a stepbrother.
Oscar H. Cohen of Sun City, AZ was elected a Fellow Emeritus of the American College of Radiology.

George A. Silver of New Haven, Connecticut is honored by the University of Miami each year when it presents the George Silver Health Policy Lecture. This year's presentation, "Will Outcomes Research Fulfill its Promise?" was delivered by Sheldon Greenfield, Ph.D., Professor of Medicine at Tufts.

Jack T. Gocke has been inducted into West Virginia University's Sports Hall of Fame at the Milan Puskar Center, Clarksburg, WV.

Harold Wilf, an otolaryngologist, was honored by the Philadelphia County Medical Society for 50 years of practice.

Kent P. Cooper is still active in medicine as a volunteer at the Senior Friendship Clinic in Ft. Myers, FL.

Harry W. Fullerton, Jr. is enjoying his retirement in Carneys Point, NJ.

William T. Lineberry, Jr., a surgeon, is still running an industrial medicine clinic but may retire next year.

Harry A. Stone returned to Erlanger Hospital, Chattanooga, TN to supervise the medical center's outpatient surgical clinics.

Elmer H. Funk had a "wonderful" trip with the Smithsonian to Provence, Brussels, Bruges, and Trier enjoying the people, history, and architecture. In February Dr. and Mrs. Funk head for Cuernavaca.

Joseph E. Bartos of Bethlehem, PA, a family practitioner, is "slipping into retirement."

Alan L. Michelson retired from his internal medicine practice and is now "golfing in Palm Beach."

Daniel L. Shaw, Jr. of Villanova was recognized by the College of Physicians of Philadelphia, an honorary academy, as its Distinguished Honoree at a ceremony of the National Society of Fund Raising Executives on November 15. Dr. Shaw is a past President of the College of Physicians and has been a leader in fund raising for it.

Joseph E. Bartos

Jasper G. Chen See '51 was honored recently by the Philadelphia County Medical Society with its C. Nelson Davis Award for educating physicians regarding alcoholism. Dr. Chen See served as Chief of Pathology at St. Joseph Hospital in Reading from 1970 to 1989. He chaired the Physicians Task Force of the Pennsylvania Department of Health, Office of Drug and Alcohol Programs, was President of the American Society of Addiction Medicine, and served on the Board of Directors of the National Council on Alcoholism. The Davis Award was presented just four years ago to another Jeffersonian, Ronald D. Serota '68. William E. Sheeley of Alexandria, VA is now retired from his radiology practice and enjoys playing the trombone in a small jazz group. He also plays golf and travels.

Thomas C. Turner of Jackson, MS retired from a very active orthopaedic practice to have time to travel, play tennis, and be with his grandchildren. He also has taken up photography and sculpture.

Stanley F. Nabity of Grand Island, NE retired on January 1, 1994 from family practice.

Robert J. Critchlow of Glen Mills, PA has retired from radiology practice. He enjoys oil painting.

Charles S. DeBonis of Wilkes-Barre, PA was "forced by failing health into semi-retirement from his practice of internal medicine."

Leonard S. Girsh has printed a personal interpretation of Rembrandt's art and Dr. Girsh's own cultural heritage entitled From the Attic of Civilization.

Victor F. Greco of Drums, PA, a surgeon, has been elected Vice President of the Pennsylvania Medical Society. In October 1995 he will become President-Elect and in 1996 he will take over as President.

Benjamin R. Paradee and his wife Shirley of Mt. Laurel, New Jersey travel extensively, visiting their children and eight grandchildren.

Simón Piovanetti of San Juan, PR was presented with the first Presidential Award of the Ashford Presbyterian Community Hospital. His specialty is pediatrics.

Leon Shmokler of Rydal, PA has retired after 42 years in family practice. His
practice will be continued by his brother-in-law and partner, Milton L. Friedman '60.

'52

Nelson P. Aspen of West Chester, PA retired as Senior Orthopaedic Surgeon at Paoli Memorial Hospital and enjoys carpentry, gardening, and writing.

Eugene E. Kegel of Lancaster, PA has retired from obstetrics and gynecology practice.

'53

Joseph J. Armoo of Springfield, PA retired from family practice in September and is working part-time at Fair Acres Nursing Facility, Lima, PA.

Robert J. Hekking has moved permanently to Venice, FL. He volunteers in a senior friendship center.

'54

Charles H. Greenbaum of Rydal, PA retired as of January 1, 1995. He remains active on committees of the American Academy of Dermatology.

Stanley R. Kern of northern NJ, a psychiatrist, took a "wonderful" trip this past autumn through China and met with Chinese physicians.

Charles A. Rankin, Jr. of Asheville, NC retired from the practice of obstetrics and gynecology on April 1, 1994 and is enjoying travel and family.

'55 40th Reunion June 9–11, 1995

Howard Cravetz is still in full-time family practice in Bridgeport, PA.

Theodore G. Duncan has been appointed a Clinical Assistant Professor of Medicine at Jefferson.

Reginald B. Gemmill of Stewartstown, PA is now retired from family practice and is looking forward to more time for reading, traveling, and golf.

Guy L. Schless was appointed a Clinical Assistant Professor of Medicine at Jefferson.

'56

William E. Clendenning, a dermatologist, retired November 1 after 27 years with Dartmouth Medical School and the Hitchcock Clinic, Lebanon, NH.

J. Mostyn Davis is still working and teaching family practice at Geisinger Medical Center, Danville, PA.

C. Warren Koehl recently retired after a pathology and nuclear medicine practice of 31 years at Wilkes-Barre General Hospital, Wilkes-Barre, PA.

Joseph A. McCadden of Wallingford, PA was recognized for 32 years of membership in the American Academy of Family Physicians.

Ronald M. Melmed is still Chief of the Department of Psychiatry, Stanislaus Medical Center, Modesto, CA and Medical Director of the County United Health Department which includes a 67-bed hospital.

Henry L. Yim of Kaneoke, HI has been joined in his practice of pediatrics by son Gregory K. Yim '88. Gregory also practices pediatric neurology.

'57

Herbert G. Aaronson of Horsham, PA is still working for Prudential Insurance Company as Director of Medical Services doing psychiatric utilization review.

Abram M. Hostetter has been awarded the 1995 George Ginsburg Award by the New York State Psychiatric Association.

Emil S. Trellis of Pittsburgh, PA is enjoying time with his family, especially his grandchildren, since his retirement from his psychiatry practice.

'58

William F. Bauer of Pittsburgh, PA retired July 1, 1994 from his surgery practice.


George A. Griggs is practicing geriatric medicine at Hampton VA Medical Center in Hampton, VA.

Jay M. Hughes was appointed Medical Director for Community Health Centers in Apopka, FL. His specialty is internal medicine.

Bertram D. Hurowitz, an internist, is still working for the Joint Commission on Accreditation of Healthcare, Oakbrook Terrace, IL.

Jay A. Kern retired from clinical practice in internal medicine in 1994. He is working part-time at Monmouth Medical Center, Long Branch, NJ in the "Patient Care Redesign" program.

Marvin Z. Rotman of Kings Point, NY was elected President of the American Radium Society.

'59

Ronald E. Cohn has been appointed a Clinical Associate Professor of Medicine at Jefferson.

John J. Coughlin has been promoted to Associate Clinical Professor of Obstetrics and Gynecology at Brown University, Providence, RI. His daughter Cynthia M. Coughlin-Hanna '85 has joined him as a practice partner.

Sandy A. Furey, an internist, has been appointed to the Board of Directors of Johnson Technical Institute, Scranton, PA.

George Pappas is a Clinical Professor of Surgery at the University of Colorado Health Sciences Center.

Albert C. Price received a Pennsylvania Division Award from the American Trauma Society and the Distinguished Service Award from the Lancaster County Medical Society.

Class Notes Will Resume After Spring

The Spring 1995 Bulletin will be a special issue commemorating the 125th anniversary of the founding of the Alumni Association. Regular Class Notes will appear as usual in the Summer and Fall Bulletins.
Stanley L. Spielman has traveled recently to equatorial rainforests to treat “river blindness” and, in his free time, to make paintings of the indigenous peoples there.

'60 35th Reunion June 9–11, 1995

Robert W. Connor, an ophthalmologist who lives in Lansdale, PA, completed a 5,100-mile transcontinental bicycle trip across the U.S. and into Canada.

Richard L. DeCato of Paradise Valley, AZ has retired from the practice of urology.

Milton L. Friedman has been appointed medical director of the Alzheimer’s unit of Township Manor Nursing Center in Montgomery County. He has been reelected president of the Rittenhouse Astronomical Society which meets monthly at the Franklin Institute. He continues as science and health correspondent for the Times Chronicle newspapers that serve the Philadelphia suburbs and has had over 550 columns published. His son, Mark, graduates from Jefferson this spring.

'61

James A. Brecht, Chairman of the Quakertown Community Hospital Psychiatry Department, has successfully completed the certification examination of the American Board of Adolescent Psychiatry.

'62

Edward A. D’Orazio was appointed a Clinical Assistant Professor of Radiology at Jefferson.

Henry Gelband has been appointed Vice Chairman for Clinical Affairs, Department of Pediatrics at the University of Miami School of Medicine.

G. Stephens Nicoll of Bozeman, MT retired from his surgery practice and is “very happy.”

Joseph Snyder of Potomac, MD has been reelected as a delegate to the American Medical Association. His specialty is ophthalmology. His daughter Lori will graduate from Jefferson this spring.

Joseph W. Sokolowski, Jr. was presented with the Sir William Osler Award for humanitarianism by the American Lung Association’s New Jersey branch. He is Chief of the Division of Pulmonary Diseases at Our Lady of Lourdes Medical Center in Camden.

Robert W. Connor, an ophthalmologist who lives in Lansdale, PA, completed a 5,100-mile transcontinental bicycle trip across the U.S. and into Canada.

Richard L. DeCato of Paradise Valley, AZ has retired from the practice of urology.

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'63

Rober M. Davis of Felton, PA recently made a medical trip to Ho Chi Minh City, Vietnam with Operation Smile, a plastic surgery outreach for children with cleft palates.

Louis A. Karp has been appointed a Clinical Professor of Ophthalmology at Jefferson.

E. Donald Kotchick, a family practitioner, has been elected President of the Medical Staff of Mercy Hospital, Pittsburgh.

'65 30th Reunion June 9–11, 1995

Carolyn P. Decker has been appointed a Clinical Assistant Professor of Radiology at Jefferson.

James R. Dingfelder of Chapel Hill, NC notes proudly that his stepson Matthew Torrington is in his first year at Jefferson, and Arthur N. Triester is equally pleased that his son Stuart is in the freshman class also. Dr. Triester has left private practice of cardiology to practice and teach in the Department of Medicine at Jefferson.

'66

Joseph A. Girone of Telford, PA, a pediatrician, is now Director of the Division of Developmental Medicine at Albert Einstein Medical Center, Philadelphia.

Robert H. Kirschner has moved to Chicago and is Director of the International Forensic Program of Physicians for Human Rights. He teaches in the Pathology Department at the University of Chicago.

'67

Richard B. Keohane has been appointed a Clinical Assistant Professor of Radiology at Jefferson.

Kenneth L. Kershbaum has been appointed a Clinical Assistant Professor of Medicine at Jefferson.

Elliot J. Rayfield coauthored a chapter on “Diabetes and Obesity” in the book Atherosclerosis and Coronary Artery Disease, just published by Raven Press.

'68

Stephen R. Kozloff has relocated to Bloomsburg, PA where his wife assumed the presidency of Bloomsburg University. He is employed by Geisinger Medical Center, Danville in obstetrics and gynecology.

James D. Turchik has returned to academic medicine as Professor of Medicine, SUNY Health Science Center, Syracuse. He is still Director of Infectious Disease at Crouse Irving Memorial Hospital.

Harold A. Yocum was elected to the American Academy of Orthopaedic Surgery’s Board of Councillors in Colorado.

'69

Richard F. Grunt has been appointed an Instructor in Medicine at Jefferson.

Jesse H. Wright III of Louisville, KY has written what may be the first multimedia publication of psychotherapy, Cognitive Therapy: A Multimedia Learning Program, just released by MindStreet, Inc.

'70 25th Reunion June 9–11, 1995

William D. Bloomer of Winnetka, IL was elected Vice President and President-Elect of the American College of Radiation Oncology.

Richard L. Nemiroff has been appointed a Clinical Associate Professor of Obstetrics and Gynecology at Jefferson.

'71

Carol A. Dolinskas has been appointed a Clinical Associate Professor of Radiology at Jefferson.
Arthur K. Smith has been appointed an Instructor in Medicine at Jefferson.

Julie K. Timins was elected President of the Radiological Society of New Jersey. She lives in Morristown.

Stephen P. Flynn is now Vice Chairman and Residency Director in the Department of Family Practice, Metro Health Medical Center, Cleveland.

Bruce L. Gewertz writes that he is "enjoying the challenge of balancing my practice and research with administrative duties as department chairman at the University of Chicago," where he is the Dallas B. Phemister Professor and Chairman of Surgery. Dr. Gewertz is also serving on the Association of American Medical Colleges' Advisory Panel on the Mission and Organization of Medical Schools. On this panel, he chairs the Working Group on Tapping the Power of Information, which is charged with "exploring how medical schools can harness information technology, informatics, enhanced accessibility of information, and outcomes and health services research to support the daily practice of medicine and improve communication with distant practice sites."

Stanley J. Goldberg was appointed Medical Director of Surgical Services at Boswell Memorial Hospital, Sun City, AZ.

John S. Naulty has been appointed a Professor of Anesthesiology at Jefferson.

Kenneth R. Barmach has been appointed a Clinical Assistant Professor of Medicine at Jefferson.

Mark S. Pascal of Teaneck, NJ represented the Oncology Society of New Jersey on the Clinical Practice Committee of the American Society of Clinical Oncology.

Antonio M. Granda has joined Lewisburg Community Hospital in Tennessee. He is board-certified in internal medicine and gastroenterology.

James H. Kessel, after 11 years in private practice of trauma surgery, has joined the University of West Virginia in Charleston.

Larry R. Leichter of Hollywood, FL is in his second year of law school.

Mark L. Dembert is a staff psychiatrist and Captain in the U.S. Navy Medical Corps at National Naval Medical Center, Bethesda, MD.

Joseph J. Korey, Jr. is Director of Obstetrics and Gynecology at St. Joseph's Hospital in Reading.

David G. Berry has been elected Chairman, Department of Surgery at Mease Hospital in Dunedin, FL.

Robert J. McCunney has been appointed Chief of Occupational and Environmental Medicine at the Massachusetts Institute of Technology, Cambridge. He will serve as Director of the Environmental Medical Service.

John A. Ferriss was promoted to Associate Professor of Medicine, Division of Rheumatology at Pennsylvania State University College of Medicine in Hershey.

David M. Mintzer has been appointed a Clinical Assistant Professor of Medicine at Jefferson.

Sandra M. Wolf has been appointed an Assistant Professor of Obstetrics and Gynecology at Jefferson.

Your diploma is from Jefferson Medical College of Thomas Jefferson University—please refer to your degree in this way.

Harry A. Frankel has been appointed an Instructor in Medicine at Jefferson.

Rudolph M. Krafft has joined Hermitsge Family Medicine Center, PA.

Raymond B. Leidich is Associate Professor of Urology at the University of New Mexico in Albuquerque.

John W. Patterson of Zionsville, PA was named 1994 EMS Physician of the Year by the Pennsylvania Emergency Health Services Council and the Pennsylvania State Department of Health. His practice is Internal Medicine.

Neil H. Shusterman of Wynnewood, PA is enjoying his career in pharmaceutical medicine. He traveled to Australia, England, and Scandinavia during the past year.

Jeffrey C. Brandon was promoted to Associate Professor at the University of California, Irvine, where he is Acting Chairman of the Department of Radiological Sciences.

Janet B. Leventhal and husband David White of Vallejo, CA are the proud parents of their first child, Jonathan Alexander White, now one year old.

Lise N. Mungul, an internist, is now living in Oklahoma and working in a large multispecialty clinic which is "quite a change" from her solo practice.

Ira R. Sharp has been appointed an Instructor in Medicine at Jefferson.

Joseph R. Spiegel has been promoted to Associate Professor of Otolaryngology-Head and Neck Surgery at Jefferson.

Stephen A. Geraci is now Assistant Professor of Medicine and Pharmacology at the University of Tennessee, Memphis.

Arthur W. Mellen IV has been appointed a Clinical Assistant Professor of Obstetrics and Gynecology at Jefferson.
CLASS NOTES

Carol A. Wheeler and husband Robert Parker of Warwick, RI are the proud parents of Brent Wheeler Parker, now one year old.

81

Kenneth A. Buckwalter and wife Marica of Indianapolis, IN are pleased to announce the birth of their daughter Anne.

Christine D. Emery has been appointed a Clinical Assistant Professor of Radiology at Jefferson.

David N. Gingrich of Bellefonte, PA was appointed Director of Emergency Services at Philipsburg Area Hospital, PA.

Donald L. Kramer is Associate Medical Director of the Pain and Health Management Center at Tomball, TX.

Richard F. Spaide of New York, an ophthalmologist, was inducted into both the Macula Society and the Vitreous Society.

82

Timothy P. Clare has opened a family practice in Newport, OH.

Steven W. Cohen has joined the gastroenterology staff at St. Mary Medical Center, Langhorne, PA.

Wm. Bryan Gamble, a surgeon stationed at Fort Meade, MD, has been promoted to the rank of Lt. Colonel in the Army.

Larry M. Gersten and wife Susan of Laguna Niguel, CA are the proud parents of their third child, Allison Claire, now two years old.

Michael E. Goldberg has been reappointed Chairman of Anesthesiology at Lower Bucks Hospital, Bristol, PA.

Robert M. McNamara and his wife Mary of Lafayette Hill, PA are the proud parents of their fourth child, William Martin, now one year old.

Joseph P. Walls, an orthopaedic surgeon, and his wife Ellen are now settled in Carson City, NV. They spend their free time hiking and skiing in the Sierra mountains. They also enjoyed scuba diving on their trip to Honduras.

83

Jeffrey R. Chain has joined the orthopaedic surgery staff at the Winston County Community Hospital in Louisville, MS.

Robert M. Chang has opened a gynecology practice in Frederick, MD.

Peter A. Cognetti and wife Marianne of Waverly, PA are the proud parents of their fifth child, William Salvatore, now two years old.

Todd L. Demmy joined the surgery staff at the Lake of the Ozarks General Hospital in Eldon, MO.

Steven A. Edmundowicz has been appointed a Clinical Associate Professor of Medicine at Jefferson.

Timothy M. Heilmann has been promoted to associate director of the Family Practice Residency Program on The Williamsport Hospital campus of Susquehanna Health System.

Matt L. Kirkland III has been appointed a Clinical Assistant Professor of Surgery at Jefferson.

Leonardo S. Nasca, Jr. and wife Sandra now have seven children in ages from one to seven. They are living in their dream home in Ponte Vedra, FL.

Frederick W. Ruthardt, Jr. and wife Diana are the proud parents of their first child, Brennan Frederick, now two years old. He invites anyone who is going white water rafting in Ohiopyle, PA to give him a call.

84

Frederick J. Cook is practicing ophthalmology at Robinson Eye Associates in Lewes, DE.

J. Christopher Daniel is now Head of the Family Practice Department at the Naval Hospital in Sigonella. He and his wife, Lorraine, are enjoying life in Italy.

Cheryl A. Hlavac has been appointed an Instructor in Family Medicine at Jefferson.

Louis A. Kazal, Jr. was appointed Associate Medical Director at Sage Medical Hospital in Ganado, AZ.

John J. Kelly III has joined the Department of Cardiology at Paoli Memorial Hospital, Paoli, PA.

Robert W. Meikle has completed his tour in the Army and is now living in Pacific Grove, CA and practicing family medicine.

Randle H. Storm has been appointed an Instructor in Medicine at Jefferson.

Catherine P. Vanderwilt and husband William of Little Rock, AR are the proud parents of their first child, Seth William, now two years old.

Kenneth S. Yonemura is enjoying his second year of neurosurgery practice at Northwest Hospital, Seattle.

85

Daniel K. Bregman has opened a practice of ophthalmology in Springfield, IN.

Amit Goyal completed a fellowship in interventional cardiology at St. Luke's Hospital, New York.

Mark J. Hummel and wife Joanne '86 of Marlton, NJ announce the birth of their daughter, Madeline Marie, on June 3, 1994, which was her sister Katie's second birthday.

Marlon T. Maus chairs the Ophthalmology Division at Graduate Health System's Parkview Hospital in Philadelphia.

Lawrence C. M. Wang has been appointed a Clinical Assistant Professor of Radiology at Jefferson.

86

David N. Brotman, a specialist in general and vascular surgery, joined the medical staff at St. Mary Medical Center in Langhorne, PA.

John Fulginiti III has joined the staff of Holy Spirit Hospital, Carlisle, PA in general surgery with a subspecialty in vascular surgery.

Robert L. O'Connor, was appointed to the surgical staff of Doylestown Hospital.

Carl L. Overmiller, a surgeon, has finished his Air Force commitment in South
Dakota. He and his wife, Sue, extend an invitation to classmates to visit them in Daniels, West Virginia.

Robert S. Ream completed his fellowship in critical care pediatrics at Children's Hospital of Philadelphia. He is now Assistant Professor of Pediatrics, Division of Pediatric Critical Care at Cardinal Glennon Children's Hospital in St. Louis.

'87

Errol M. Aksu and wife Wendy of Middletown, PA are the proud parents of Samantha Lynn, now one year old.

Alyn R. Caulk has been appointed an Instructor in Medicine at Jefferson.

Michael L. Cohan is practicing nephrology in the suburbs of Chicago.

John F. Henzes III and wife Denise Robinson of Clarks Summit, PA are the proud parents of Jamie Christian, now one year old.

R. Michael Siatkowski is still working at Bascom Palmer Eye Institute and enjoying life in Miami.

Catherine M. Silva and husband Thomas of Nahant, MA are the proud parents of their second child, Tony, now one year old.

'88

Joseph P. Bering has joined the cardiology staff on the Williamsport Hospital and Medical Center campus of the Susquehanna Regional Healthcare Alliance.

Richard F. Caruso has assumed the position of Medical Director at Lewes Convalescent Center, Lewes, DE.

Glenn S. Cooper has been appointed a Clinical Professor of Medicine at Jefferson.

Jason C. Cwik has been appointed an Instructor in Anesthesiology at Jefferson.

Christopher C. Dankmyer has joined the physiatry staff (specializing in physical medicine and rehabilitation) of West Jersey Hospital System. He is still part of Associated Physiatrists of Southern New Jersey.

Stephen D’Orazio of St. Louis, MO will complete his cardiothoracic surgery fellowship in June and will join a practice in Topeka.

Diane M. Flynn and husband Dennis of Monterey, CA are the delighted parents of their fourth child, Ryan Patrick, now one year old.

Eric C. Gokcen joined the department of orthopaedic surgery staff at Mercer Medical Center in Trenton.

Gregory E. Herman, a family physician, is now on duty at Kelly Air Force Base, TX.

Thomas A. Londergan has joined the urology staff at Lutheran Hospital, LaCrosse, WI.

Christine J. Stanley has been appointed an Instructor in Obstetrics and Gynecology at Jefferson.

Randall V. Wong has a practice in Baltimore which is limited to vitreoretinal disease.

'89

Gregory M. Braccia has been appointed an Instructor in Anesthesiology at Jefferson.

Douglas S. Coslett has joined the obstetrics and gynecology staff of Berwick Hospital Center, PA.

Arturo N. DiNicola and wife Maureen of Schuylkill Haven, PA are the proud parents of Jason Edward, now one year old.

Joel P. Gordon was granted privileges at Mary Lane Hospital, Ware, MA in the specialty of dermatology.

Soth A. Kaplan has joined the gastroenterology staffs of West Florida Regional Medical Center and the Medical Center Clinic in Pensacola.

Robert A. Kitei has joined the department of ophthalmology at St. Luke's Hospital in Bethlehem.

Thomas G. Morales is now living in Tucson and has been named Assistant Professor of Clinical Medicine, Gastroenterology Section, at the University of Arizona.

Theodore A. Nukes completed a fellowship in clinical neurophysiology at West Virginia University and is now in private practice as part of the St. Vincents Community Health Network in Indianapolis.

Mark R. Sarfati of Tucson, AZ is completing his last two clinical years of general surgery residency after a two-year research fellowship.

Andrew P. Sirotak is Medical Director of the Family Crisis Center, Denver and the child welfare consultant for the County Department of Social Services. He is a pediatrician on staff at Denver General Hospital and The Children's Hospital.

'90 Fifth Reunion June 9-11, 1995

Ronald S. Berne is enjoying his private practice of dermatology in Elk Grove, IL.

Vikram S. Kashyap is doing atherosclerosis research at the National Institutes of Health in Bethesda, Maryland.

Mark J. Sangimino started a fellowship in pediatric orthopaedics at the University of Colorado Denver Children's Hospital.

'91

John W. Caruso has been appointed an Instructor in Medicine at Jefferson.

George E. Gibbons, Jr. and Michele L Marziano '93 were married on June 25, 1994. Dr. Gibbons has been appointed an Instructor in Anatomy, Pathology, and Cell Biology at Jefferson.

Brad A. Hinrichs and wife Susan OBG '92 of Menlo Park, CA are the proud parents of Bret Austin, now one year old.

Kevin R. Muzzio has been appointed an Instructor in Medicine at Jefferson.
Sanjiv C. Patel has been appointed an Instructor in Family Medicine at Jefferson.

Joan D. Ringham is a cardiology fellow at UCLA, Los Angeles. She and her husband, Vincent Duke, celebrated the first birthday of their son, Gray Vincent.

David G. Weismiller and wife Suzanne of Providence, RI are the proud parents of their second child, Meredith Leigh, now one year old.

'93

Manal M. Soliman is enjoying his psychiatry residency at the University of South Florida in Tampa.

Mark J. Symns, a surgeon, has started his VA-sponsored civilian residency at Tripler Army Medical Center in Honolulu.

George R. Zlupko and his wife Lani of Wilmington are the proud parents of their first child, Gian Michael.

'94


Postgraduate Alumni

Morton W. Shragr N'59 has been appointed a Clinical Assistant Professor of Medicine at Jefferson.

Donald A. Fonte ORS'70 has joined the White River Orthopaedic Clinic in Mountain Home, AR.

Richard E. Surgent ORS'71 has moved to Bay City, Texas and opened an orthopaedics practice.

Yogish A. Patel ON'76 has been appointed an Instructor in Medicine at Jefferson.

Gilbert L. Zuckerman CD'77 has been promoted to Clinical Assistant Professor of Medicine at Jefferson.

Linwood R. Haith, Jr. GS'81 has been appointed a Clinical Assistant Professor of Surgery at Jefferson.

Ronald J. Carabelli IM'82 has been appointed an Instructor in Medicine at Jefferson.

Charles H. Hux MFM'87, a maternal-fetal medicine specialist, is practicing at Jersey Shore Medical Center.

James Stanch P'85 has joined Southern Ocean County Hospital, Manahawkin, NJ in geriatric psychiatry.

Anne C. Bowen IM'88 has joined the Department of Medicine at Paoli Memorial Hospital, Paoli, PA.

Carol Ann Filomena PCP'90, who is Medical Director of residency training in pathology at Methodist Hospital of Indiana in Indianapolis, has been elected a Fellow of the College of American Pathologists.

F. Marina Russman AN'90, a pain management specialist, now has a practice in Westchester, CA.

Erik S. Marshall IM'91 has joined the cardiology staff at Union Hospital in Elkton, MD.

Eric R. Ratner A'93 has been appointed an Instructor in Anesthesiology at Jefferson.

Ellen S. Kaitz PM'93 has joined Children's Hospital, Richmond, VA in the practice of pediatric physical medicine and rehabilitation.

Victor M. Almeida EM'94 has joined the staff at Shore Memorial Hospital, Somers Point, NJ in emergency medicine.
### Order from the Bookstore

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#### Adults' Clothing

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<tr>
<td>B. T-Shirt: cotton; M, L, XL, XXL</td>
<td>$11.95</td>
</tr>
<tr>
<td>C. Sweat Shirt: cotton; M, L, XL; wine, beige</td>
<td>$34.95</td>
</tr>
<tr>
<td>D. Shorts: cotton; M, L, XL; white, gray</td>
<td>$16.95</td>
</tr>
<tr>
<td>E. T-Shirt: cotton; S, M, L, XL; white, gray</td>
<td>$12.95</td>
</tr>
<tr>
<td>F. Water Bottle Holder</td>
<td>$6.99</td>
</tr>
<tr>
<td>G. Heavyweight Sweat: cotton/poly; M, L, XL, XXL</td>
<td>$57.95</td>
</tr>
<tr>
<td>H. Winged Ox Sweatshirt: cotton/poly; M, L, XL</td>
<td>$34.95</td>
</tr>
<tr>
<td>I. Baseball Cap: wool/suede; one size; white/navy, cream/beige</td>
<td>$14.95</td>
</tr>
<tr>
<td>J. Caduceus Sweatshirt: cotton/poly; M, L, XL, XXL</td>
<td>$39.95</td>
</tr>
<tr>
<td>K. Turtleneck: cotton; S, M, L, XL; white, beige</td>
<td>$21.95</td>
</tr>
<tr>
<td>L. Heavyweight Sweat: cotton/poly; M, L, XL, XXL</td>
<td>$57.95</td>
</tr>
<tr>
<td>M. Alumni T-Shirt: cotton; M, L, XL, XXL; wine, navy, gray</td>
<td>$15.95</td>
</tr>
<tr>
<td>N. JMC Water Bottle 32oz</td>
<td>$3.99</td>
</tr>
<tr>
<td>O. Postcards: Winged Ox; Gross Clinic; Otter Fountain</td>
<td>$.50</td>
</tr>
</tbody>
</table>

#### Children's Clothing

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Hooded Jacket: cotton/poly; 4T, 5, 6/8, 10/12</td>
<td>$20.95</td>
</tr>
<tr>
<td>B. Baseball Jacket: cotton/poly; 4T, 5, 6/8</td>
<td>$28.95</td>
</tr>
<tr>
<td>C. Scrub Set: cotton/poly; 2T, 4, 5/6, 7, 8/10; pink, green, navy</td>
<td>$14.95</td>
</tr>
<tr>
<td>D. T-Shirt: cotton; 6M, 12M, 18M, 2T, 4T, 5; white, gray</td>
<td>$10.95</td>
</tr>
<tr>
<td>E. Baseball Cap: cotton; one size toddler; navy, orange, cream</td>
<td>$8.95</td>
</tr>
</tbody>
</table>

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*USE ORDER FORM ON PAGE 38*
College of Allied Health Sciences Collaborates with Medical College