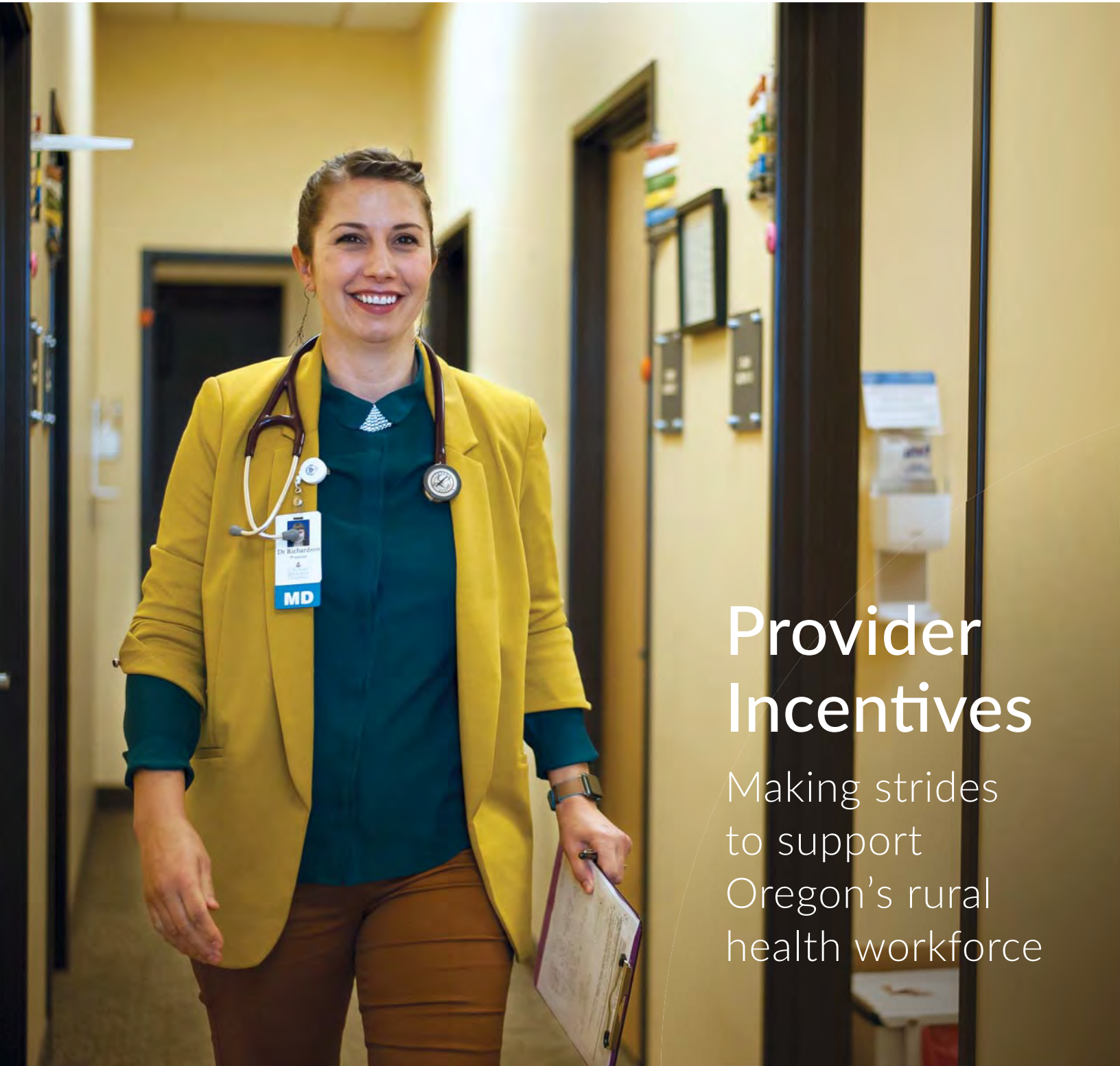


Bridges



A magazine of people, connections and community for alumni of the OHSU School of Medicine

Fall 2018



Provider Incentives

Making strides to support Oregon's rural health workforce



Sharon Anderson, M.D. R '82

I invite you to learn more at www.ohsu.edu/som and contact me at somdeansoffice@ohsu.edu.

A commitment to continuous improvement



WE CELEBRATED PREPARATION FOR OUR LIAISON COMMITTEE ON Medical Education (LCME) 2020 accreditation site visit Aug. 30 with LCME Co-Secretary Veronica Catanese, M.D., M.B.A., and a slogan encouraging an “all in” commitment: See the “me” in LCME.

Our students and faculty are leading the way by stepping up for committees for our self-study. Tracy Bumsted, M.D., M.P.H., associate dean for undergraduate medical education, set the tone by defining success not as a perfect appraisal (though, of course, we'd welcome that) but as a chance to learn and improve.

This opportunity to embrace continuous improvement applies across the institution. Wellness, diversity and inclusion and faculty development are other areas we're working on in the school to enhance our academic culture.

We are especially looking at how to change the climate of our clinical settings to become more resilient and less relentless. In September, the school's Resident and Faculty Wellness Program hosted Stuart Slavin, M.D., the senior scholar for well-being at the Accreditation Council for Graduate Medical Education. His advice: focus on wellness for everyone but especially focus on faculty; residents and students can't be well if faculty aren't. Some of our initiatives aim to do just that, including improving workflows in clinics and other strategies to lighten the load, enhance physician engagement and increase the time spent on the most meaningful aspects of clinical work.

Fostering a diverse and inclusive academic environment is also linked to wellness. Everyone needs to feel seen, supported and respected to contribute their best work.

In response to discussions initiated by our M.D. and Graduate Studies students last year, we are now taking a whole range of steps, including hiring an assistant dean for diversity and inclusion, developing pipelines with undergraduate science programs that focus on diverse students and launching post-baccalaureate offerings like the Wy'East Post-Baccalaureate Pathway that you'll read about on page 5.

I've got to tell you, it feels good to link arms, roll up our sleeves and make things better. Thanks for the ways that you support the school to do that.

Sharon Anderson, M.D. R '82
Dean

ON THE COVER
Family physician Dr. Anisa Richardson at work in Astoria, Oregon. Story page 12.

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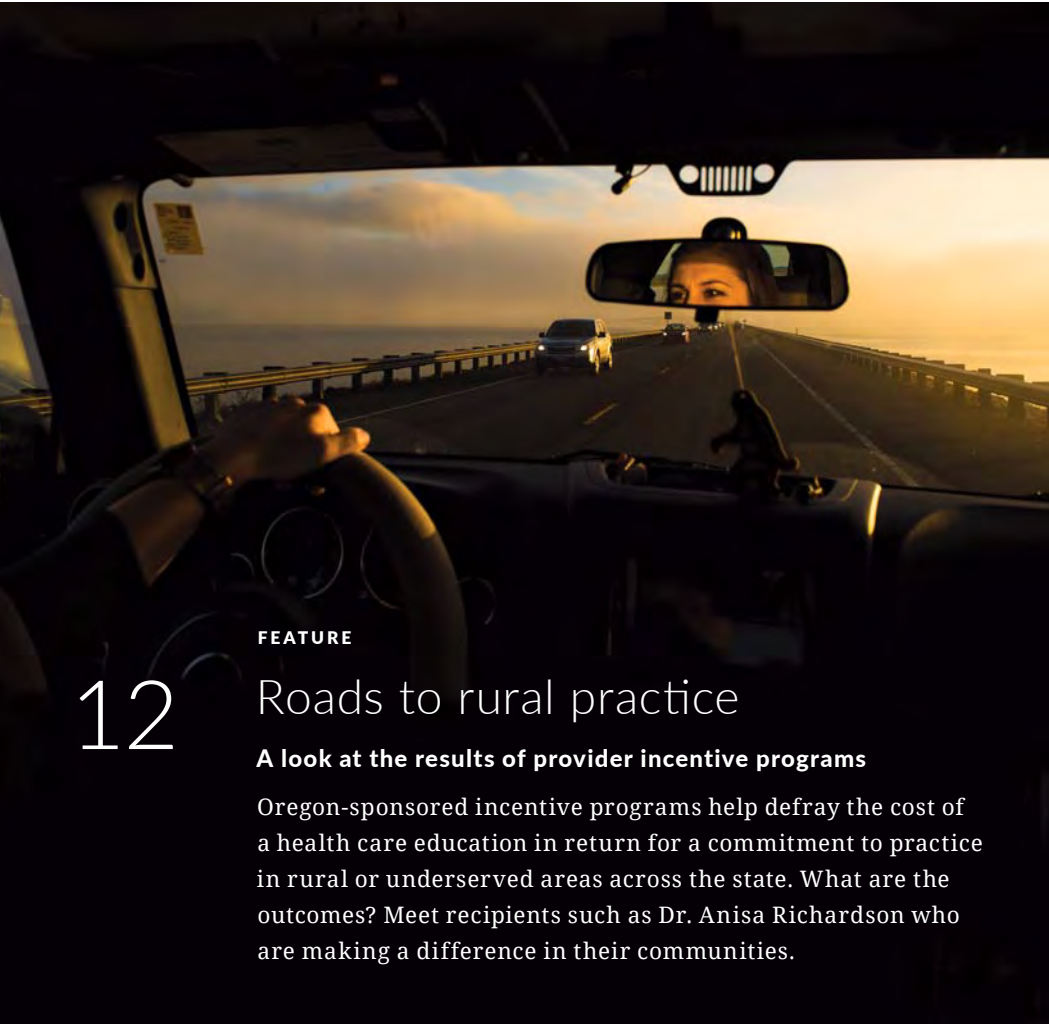
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Change can't happen if we see things just one way. That's why diversity is important to who we are. We are proud to be an equal opportunity, affirmative action employer. 1118(170)

In this issue



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Oregon-sponsored incentive programs help defray the cost of a health care education in return for a commitment to practice in rural or underserved areas across the state. What are the outcomes? Meet recipients such as Dr. Anisa Richardson who are making a difference in their communities.

4 **UP FRONT** Get to know President Danny Jacobs

6 Rebuilding OHSU's cardiovascular program

8 Her words: life on borrowed time



17 **ALUMNI NOTEBOOK** The making of Marquam Hill



Finding new approaches to old problems

Danny Jacobs, M.D., M.P.H., F.A.C.S., began his tenure Aug. 1 as OHSU's fifth president.

Prior to that, Dr. Jacobs served as executive vice president, provost and dean of the School of Medicine at the University of Texas Medical Branch. At UTMB, Jacobs was also the chief academic officer, responsible for approximately 3,800 employees and trainees for its schools of Medicine, Nursing, Health Professions and Biomedical Sciences. A surgeon by training, Dr. Jacobs oversaw the institution's research programs.

What are the greatest challenges facing academic health centers like OHSU?

A significant challenge that I find most worrisome is burnout and how to build resiliency, for all of the members of our academic health center. Everything else fails if we don't address this issue successfully, and the solution will be a local one. We need to create an environment that allows us to take care of ourselves and to find tranquility and stability in the midst of chaos so we can best take care of others.

Why is diversity important to an academic health center and what does it mean to you personally?

Inclusion is fundamental to OHSU's mission of improving the

REACHING OUT

OHSU President Danny Jacobs (center left) greets (left to right) Drs. Elena Andresen, Kristin Lutz and Karen Eden at a faculty awards luncheon.

health and well-being of Oregonians – all Oregonians. The business case for diversity and inclusion is sound. If you talk about creating an innovative environment – a place where it is safe for folks to learn, a place that is forward-looking in finding new approaches to old problems – then you must have a diverse and inclusive environment that is welcoming.

Not only is the business case there, but for me, personally, it is also the human thing to do, the right thing to do.

What role do alumni play in OHSU's future?

Actually, I see three roles where alumni have been, are, and will continue to be, indispensable. Simply put, these roles are to help our students, to help OHSU and to help each other. The ways in which a graduate can do this will, of course, depend significantly on her or his personal circumstances. But our alumni surveys tell us that over 90 percent of our 40,000 alumni feel OHSU has prepared them well for their chosen careers, and we know that many graduates give back to OHSU generously in a variety of ways. I aspire every day to earn the trust and the support of our alumni, whether as donors, preceptors and mentors, admissions volunteers, volunteer faculty, legislative advocates, reunion ambassadors or any one of a number of areas where strong alumni engagement is critical to our success. – *THB, MK*

Doorway to a patient's world

Because she's paired with OHSU patient Charles Wood (right), second-year M.D. student Kayla Erspamer (middle) is gaining a fuller understanding of what it's like for patients with medically complex conditions to utilize health care services. Erspamer participates in the Student Navigator Project, an innovative, preclinical program led by Reem Hasan, M.D., Ph.D., assistant professor of medicine and pediatrics, OHSU School of Medicine (left). As a student navigator, Erspamer calls Wood every other Sunday to discuss his health goals and help him prepare for upcoming appointments with Dr. Hasan; she then accompanies him to appointments over the course of the 18-month program. "Kayla encourages me," said Wood, who is working on weight loss and exercise goals and obtaining mental health services for depression. He lost six pounds recently, he said, and recently reconnected with his sister. "I think it is turning things around for me." – *RS*

The power of student advocacy

OHSU has been awarded an Oregon Department of Justice grant to launch a Confidential Campus Advocate Program this academic year to support survivors of sexual assault and harassment across the institution.

The \$364,000 grant (plus \$116,000 in-kind waiver) resulted from the work of three M.D./Ph.D. students who teamed up with OHSU leaders as an outgrowth of faculty-led listening sessions about sexual harassment this winter.

"We went from feeling like we were banging on the door to being invited to the table to make a positive system change at OHSU," said Kelsey Priest, M.P.H., who joined fellow M.D./Ph.D. students Caroline King, M.P.H., and Jacqueline Emathingier in bringing the idea for the grant forward. King learned of the grant through her service on the Oregon Attorney General's Sexual Assault Taskforce. – *EHB*

WHAT'S NEW IN THE SCHOOL

- The school began accepting applications for its inaugural class of students seeking a Ph.D. in clinical psychology. The new doctoral program, the only one in Oregon located at an academic health center, will begin in 2019.
- The FDA approved a first-of-its-kind enzyme therapy for the rare and debilitating genetic disease known as phenylketonuria or PKU. The treatment was developed in part through a clinical trial led by Cary Harding, M.D., professor of molecular and medical genetics, who specializes in metabolic diseases.
- The school's senior leadership team welcomed Daniel Marks, M.D., Ph.D., professor of pediatrics, as new senior associate dean for research.
- Two new post-baccalaureate initiatives launched this fall. The Wy'East Post-Baccalaureate Pathway, led by the OHSU Northwest Native American Center of Excellence, prepares American Indian and Alaska Native students to excel as medical students and physicians. In research, a pilot post-baccalaureate training opportunity in neuroscience immerses diverse students in labs in preparation for Ph.D. programs and science careers.



- Organizers are preparing for the school's full-scale accreditation review by the Liaison Committee on Medical Education in 2020, featuring a call to action – see the 'me' in LCME. Faculty, students (pictured above), trainees and staff will review all aspects of the M.D. program, assess challenges and chart a course for enhancing it. – *RS*



Cardiovascular program rebuilds for continued excellence

HSU is pursuing a multi-pronged strategy to chart the next phase of the Knight Cardiovascular Institute, including rebuilding the Heart Transplant Program that was inactivated Aug. 31 due to key cardiologist departures.

A self-study, financial analysis, organizational assessment and external peer review, heavily informed by faculty and staff input, are underway. Resulting recommendations will inform strategic planning around leadership, structure, scope and future direction of the Heart Transplant Program and Knight Cardiovascular Institute, including patient care, research, education and administrative support.

Sanjiv Kaul, M.D., the Knight Cardiovascular Institute's founding director, announced in October that he will complete a transition he began a year ago by stepping down as director Dec. 31 to focus on research and make way for a new leader who will take the institute to the next level. Dean Sharon Anderson will become interim institute director Jan. 1.

Following the transplant program's inactivation, OHSU covered the costs to transfer all 20 patients on the heart transplant wait list to another center if they requested to do so. The OHSU team continues to assist other patients impacted by the inactivation of the program, which is only one aspect of cardiovascular clinical care offered at OHSU.

"The OHSU Heart Transplant Program team continues to care

for and support our patients, in collaboration with Providence, the University of Washington and our community partners," said OHSU President Danny Jacobs. "We are grateful for their generous assistance as we work to rebuild a sustainable Heart Transplant Program and structure the Knight Cardiovascular Institute for the long term."

The institute, launched in 2012 through a visionary \$125 million gift from Nike founder Phil Knight and his wife Penny, is dedicated to achieving world-class excellence in cardiovascular clinical care and research. It's been recognized as a top heart center nationally for the last three years by *U.S. News & World Report*, a ranking based on quality metrics, outstanding outcomes and a reputation for cutting-edge heart procedures, such as complex valve replacements and surgical techniques, and advanced imaging and prevention strategies.

The institute's cardiovascular research program is focused on improving patient outcomes by achieving earlier diagnosis of disease, more accurate monitoring of its progression and tailoring therapy to the molecular basis of disease. Today, in addition to basic and translational research, the institute is conducting over 100 cardiovascular clinical trials and is a top enroller of multi-site trials.

The institute's education program is comprised of 19 fellows in cardiovascular medicine, electrophysiology, adult congenital heart disease, interventional cardiology and advanced imaging. – THB, EHB

Alumni take part in expanding clinician employment model

More and more members of the OHSU Practice Plan – including School of Medicine alumni – are practicing within OHSU-affiliated hospitals and clinics. Eighteen clinicians at Mid-Columbia Medical Center in The Dalles, Oregon, recently became clinical associates. They are part of the family medicine, internal medicine and pediatrics teams at MCMC, and include nurse practitioners, physicians and physician assistants. At least four have alumni connections to the school.

The Office of Community Engagement and Support serves as an administrative hub for the clinical associates at MCMC and for other clinicians practicing at OHSU-affiliated hospitals and clinics. Clinical associates are essential to OHSU's clinical mission in that they devote 100 percent of their time to patient care. The affiliation between OHSU and MCMC builds on a longstanding collaboration to serve residents of the mid-Columbia region. – JS



The art of traversing over mountain passes and through deserts, carrying all your belongings on your back and time being dictated by the rise and setting of the sun – this is a simple, ancient practice that connects all of us as humans.

– Dr. Owen McCarty

A long-distance achievement

In September, Owen McCarty, Ph.D., F.A.H.A., interim chair and professor of biomedical engineering, OHSU School of Medicine, joined 334 others who have completed the "triple crown" of U.S. long-distance hiking by completing the Appalachian, Pacific Crest and Continental Divide Trails. He logged more than 10,000 miles over the course of 21 years. In his lab, Dr. McCarty researches the interplay between cell biology and fluid mechanics in the cardiovascular system.

"Every year, my work is too busy and too hectic to even contemplate taking two or three weeks off to disconnect and go on a walk," he said. "But, then again, my work is too important to not take that time to reset my perspective and evaluate my priorities and rejuvenate my spirit and drive. The struggles I endure on my walks are necessary for me to maintain the focus and drive for the rest of the year. It is part of my fabric. The art of traversing over mountain passes and through deserts, carrying all your belongings on your back and time being dictated by the rise and setting of the sun – this is a simple, ancient practice that connects all of us as humans." – RS



Borrowed time

Essay by Jenna Davison, M.D./M.P.H. class of 2022, photos by Aaron Bieleck

Have you ever heard the phrase *borrowed time*? The dictionary defines it as the uncontrolled postponement of something that is inevitable. When someone is diagnosed with a terminal illness – it often feels like they are living on *borrowed time*. What they don't tell you is that their loved ones are living on it, too.

My father was diagnosed with cancer a month after I took my MCAT, and I spent the last two and a half years of my life watching him slowly succumb to an illness that no person on earth should ever have to come to know.

I decided to attend medical school long before my father got sick. Even so, in my first year of school, I still received questions like, "How can you be here when your father is so sick?" Those who spoke the questions always meant well. It is not every day that a classmate reveals their parent has a terminal illness, and gut reactions – just like the situation itself – are not frequently controllable. My answer was the same every time: that he wanted more than anything for me to be here. The reply was undeniably the truth, because he had been involved in every single step of this grueling process.

He was an English teacher of over 30 years forced into retirement by his cancer. In April of 2016, I started my primary application to medical school. He read and edited every single essay. It wasn't only that I had asked him to do it, but that

he wanted to. It became our daily devotional to each other. I would pass short answers to him, asking him to make sure every comma was in the right place. Some days were harder than others. "You aren't going to like this one," I would say. In finding out the essay I had written was 204 words over the count, he sent me back several emojis rolling their eyes. "I got carried away, I was just so passionate!" I said. He would send back several more emojis, and a note that he hoped I didn't use the word "passionate" in yet another essay.

Sixty-five essays and far too many secondaries later, there is one that sticks out. He asked me sometime in June what I had for him that evening to look at. "You don't have to read this one," I said in a phone call that was about to be likely one of the deepest ones I would have with my father in my lifetime. "It's my adversity essay. I wrote it about becoming a sexual assault survivor. It's okay, you don't have to read it." He knew about my experiences prior to the essay, but simply stated that I should send it anyway. The next day I received an email response, an expanse of six paragraphs detailing how proud he was of me. It was the first of many times over the next two years I would think to myself how much I was going to miss my father.

I spent a lot of time in airports over the next year. I would call him at every layover detailing the flight and the time of my medical school interview the next day. His only request was that I get him a baseball hat in every state that had a



I knew my father was not going to live long enough to see me graduate from medical school, but I attended anyway because this was the dream my parents and I had held for nearly a decade.

— Jenna Davison, M.D./M.P.H. class of 2022

Major League Baseball team. At every delay, he would tell me about the time he spent on planes as a baseball player for the American Legion. He always told the same story about a friend who joked that there was a bomb in his bag during a layover. His friend arrived back in their hometown over a day later, with his own story to tell.

In December, I held a check in my hand for a school that was close to home. It was a very large non-refundable deposit, and I had not gotten into any of my top schools yet. He called me. “You cannot just go to a school you don’t want to, because I am sick.” He was right.

He was in chemotherapy when I got into the OHSU M.D./M.P.H. program. The *borrowed time* was starting to feel more uncontrollable than it ever had before.

In March this year, after far too many radiations, surgeries and chemotherapy treatments, his cancer came back again. In April, he transitioned to hospice.

On Father’s Day, I bought him a remote-controlled plane we

could fly together. We went to the local junior high and flew it for about 30 minutes before he unceremoniously crashed the plane into a tree. He looked at me apologetically, but all I could do was laugh more than I had in months.

Two weeks later he passed away.

They don’t tell you how *borrowed your borrowed time* is. You don’t get to decide when the greatest tragedies of your life are going to happen. They unfortunately don’t get announced with thunderous clouds before a lightning strike. I knew my father was not going to live long enough to see me graduate from medical school, but I attended anyway because this was the dream my parents and I had held for nearly a decade.

I no longer live on my father’s *borrowed time*. In many ways, it is a relief. I can now receive a phone call without being sent into a certain level of terror about what news might be on the other end. In all of the other ways, it is an inconceivable sadness. As a medical student, all I can do is trudge on and know that my father is still with me every step of the way. **B**



Open for discovery

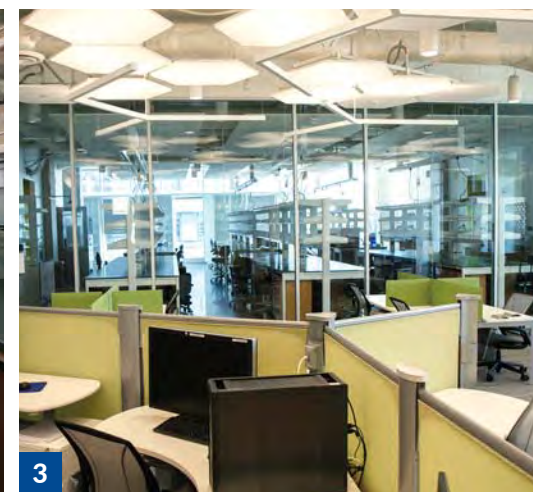
Scientists settle into the Knight Cancer Research Building



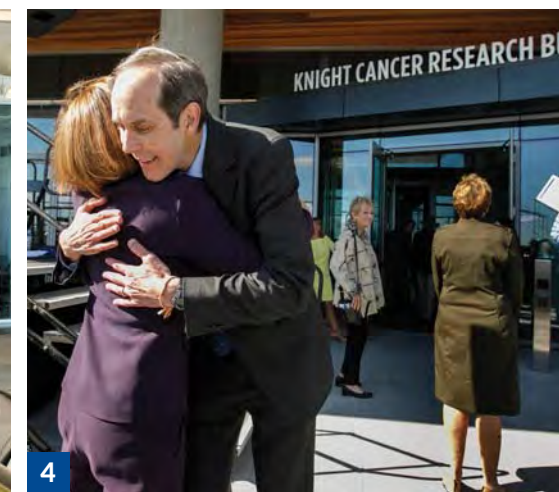
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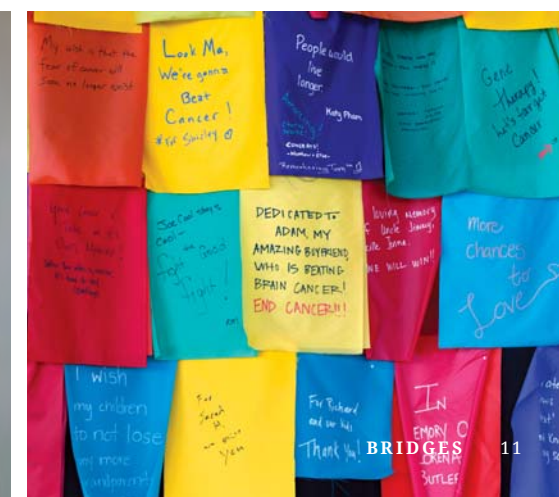
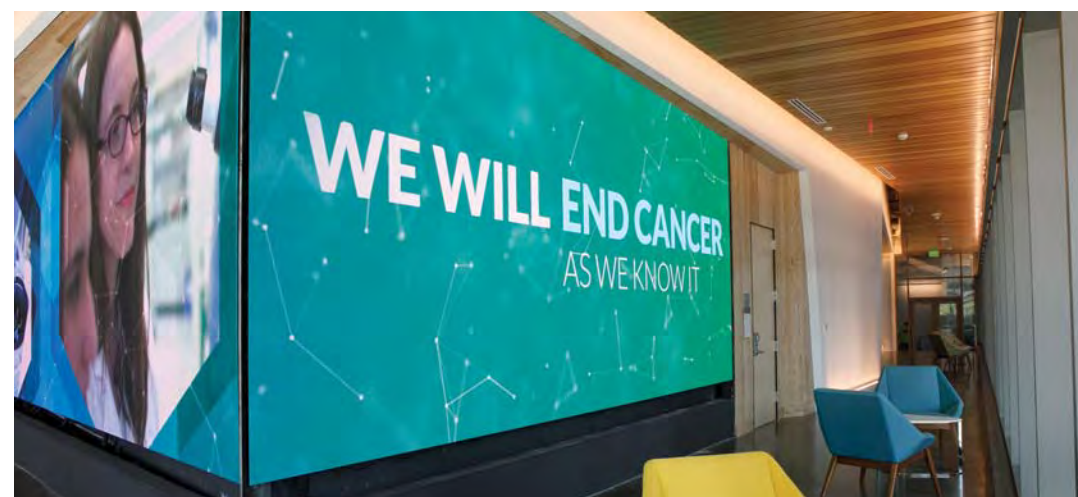
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HUB OF HOPE

1 The 320,000-square-foot Knight Cancer Research Building's unique design brings together people from different scientific disciplines with the goal of accelerating research progress. With a capacity of 650 occupants, the building houses the majority of researchers contributing to the Knight Cancer Institute's mission, including CEDAR – Cancer Early Detection Advanced Research Center – the first large-scale early cancer detection program of its kind, led by nanotechnology expert Dr. Sadik Esener. **2** Dr. Dmitri Rozanov, research assistant professor, helps set up a lab. **3** Building features include intellectual and social hubs; centralized, shared equipment and research core facilities; and open wet and dry laboratory design, all with the intent to foster collaborative work. **4** Dr. Brian Druker, director of the OHSU Knight Cancer Institute, hugs Gov. Kate Brown at the opening of the Knight Cancer Research Building.



Building bridges to rural practice

Thanks to state-sponsored rural health incentive programs, the next generation of providers is finding a match in rural practice.

Story by Suzi Steffen, photos by Fred Joe

Family physician Dr. Anisa Richardson in Astoria, Oregon.

A

Rosie the Riveter poster greets you at the reception desk of Evergreen Family Medicine in Roseburg, Oregon. The iconic WWII factory worker speaks through a text bubble, asking patients who check in: “Is this work-related?”

Douglas County’s main businesses are in timber – including logging operations and plywood mills. Job-related injuries and chronic pain are common enough to warrant that reminder.

In the family medicine area, another poster advertises walk-in well-child exams and vaccines. This is where Scott Goebel, M.P.A.S. ’17, P.A.-C., works. He’s very, very busy, but he takes time out to talk about the joys and challenges of working where he grew up.

Goebel understands the importance of preventive care for his community. Douglas County is one of the unhealthiest counties in Oregon, according to a report by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. It also grapples with a poverty rate of 18.6 percent, according to DataUSA. About 15 percent of adults and a startling 25 percent of children deal with food insecurity, reports the Oregon Center for Public Policy.

Goebel and other first-line health care staff, including physician assistants and nurse practitioners, play a big role in ensuring Douglas County citizens get the care they need. That includes traveling to smaller communities to staff outreach events such as Evergreen’s inaugural Student Wellness and Game Night in August. “There were games, food and prizes, but the most enjoyable part for me was that 80 students from the community were seen for their sports physicals and wellness visits,” Goebel said.

Goebel’s commitment to rural Oregon is exactly what the Primary Care Loan Forgiveness (PCLF) program and Scholars for a Healthy Oregon Initiative (SHOI) are all about. These are state-sponsored health care workforce incentive efforts, which connect health care students with rural and underserved practices and pay for some or all of their tuition and fees, provided that recipients work in a state-approved rural health care program

for a certain number of years after they finish their education and/or training. (Learn more about SHOI page 16.)

Goebel, a PCLF recipient, is one of 30 primary care practitioners at Evergreen Family Medicine. But Evergreen Chief Operating Officer Kim Tyree says 22 more practitioners are needed to meet access goals for the area's population. Incentive programs such as SHOI and PCLF, Tyree concludes, are vital to helping clinics attract and retain the workforce they need.

Alaska to Astoria

Up in Astoria, Oregon, PCLF recipient and family physician Anisa Richardson, M.D. '14, gets ready for work at Columbia Memorial Hospital Primary Care Clinic just down Hwy. 101 in Warrenton. She and her family live in Astoria, and she drives over a big bridge for work. No, not *that* big bridge over the Columbia River to Washington, but the bridge over the Youngs River between Astoria and Warrenton.

On her drive, she does what many Oregonians do during their commutes: she appreciates Oregon's natural beauty. "The drive is so spectacular," she said. "The tide is always changing, and I pass through a bird sanctuary."

On her way to work, she can transition into professional mode, and on her way home from work, she can let the stresses

of the day fall away as she heads back to her family. "These are the bookends, the beginning and the end of every day," she said.

That's part of the reason she and her family live on the North Coast. She grew up in a fishing village in Alaska and took what she calls "a long and circuitous path toward medicine." The PCLF program and a lot of child care support from her parents helped her through medical school and her residencies caring for underserved populations in Vancouver, Washington, and Astoria.

PCLF awards up to \$35,000 per award year. M.D. students are eligible for up to two years of funding, and N.P. and P.A. students

are eligible for one year. PCLF students must complete a service obligation that is equal to the years of funding they receive.

To be sure, PCLF only partially defrays the cost of a medical education. "It was a little tiny garnish, which was lovely," Dr. Richardson said. "But is this really something that is going to motivate people to move to rural Oregon? There should be fewer roadblocks."

For Dr. Richardson, it was finding her place in rural Oregon that sold her. She and her family visited many rural sites before she got the job offer from Columbia Memorial. "Every day since we got here, it's been so ridiculous, I can't believe this is our life!" she said. "I'm not a cheesy person, but I have such a visceral connection to this place."

And she knows that the nature of rural life means that the personal and professional can intertwine. "Sometimes I don't look [professionally] appropriate, but I just need to go to Fred Meyer to get something," she said. "Don't call me out! I know I look terrible, I'm covered in paint!"

Commitment to community

Out east in Baker City, Oregon, a town of about 10,000 people in the middle of Baker County – between the Wallowa and Elkhorn Mountains, with the Powder River running through downtown – PCLF recipient Dean Nathan Defrees, M.D. '14, practices family medicine in the town nearest to where he

grew up on a cattle ranch. Baker County is one of the "frontier" counties where the population numbers six or fewer people per square mile, and access to health care isn't easy.

"It's difficult to travel; it's complicated to travel," Dr. Defrees said. Baker City is on I-84, and the closest area with access to specialists is Boise, Idaho, 130 miles away, in a different time zone. Portland is 300 miles away by interstate; when the interstate is closed because of forest fire or snow, Portland might be accessible via windy, mountain two-lane highways.

Three of the doctors and one of the physician assistants that Dr. Defrees works with in Baker City graduated from OHSU, and he says the university's rural health programs and related scholarships make it possible for people like him to stay in the area when urban areas could offer a much larger paycheck.

"It's a beautiful area," he said. There's skiing, fishing, hiking and so much more – and even though his job is intense, he appreciates being able to take care of people he grew up with and cares about.

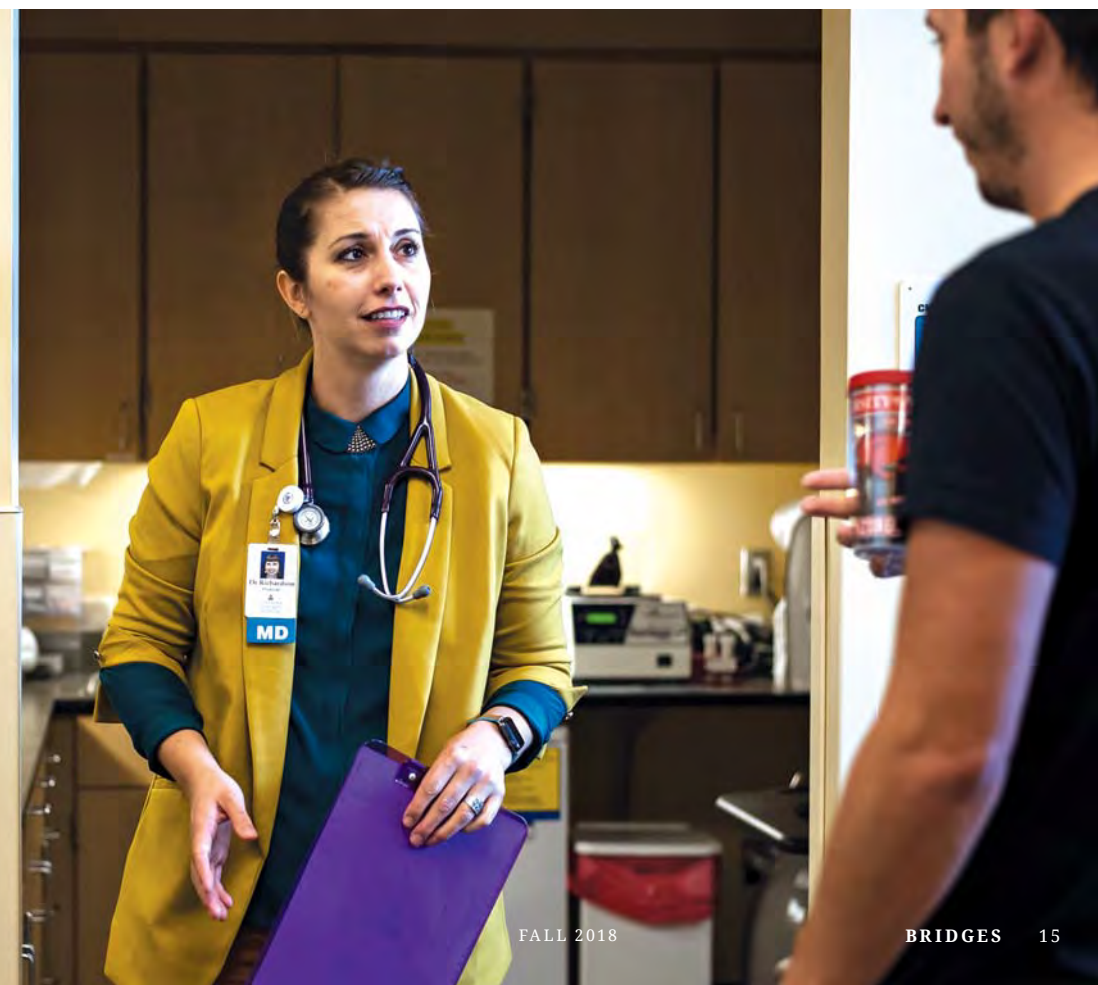
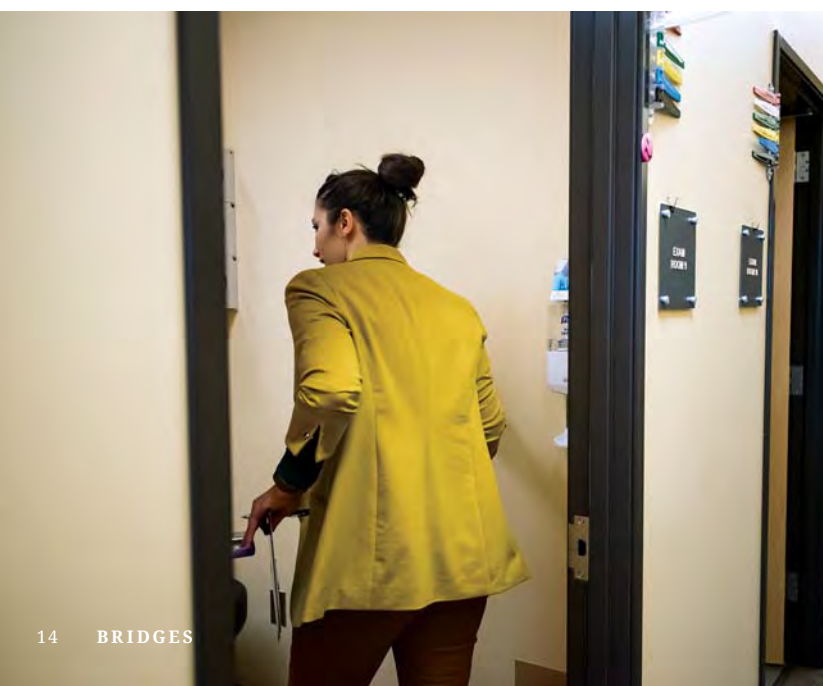
SHOI scholar Pedro Abdala, a third-year M.D. student, agrees. Abdala grew up in the small town of Imbler, Oregon, north of Baker City and near La Grande. He and his mom immigrated there when he was nine, and "the community of Imbler adopted me and took me in; they became my new family."

That's one reason he'd love to work in La Grande as a surgeon. SHOI scholars receive full scholarships to cover the cost of tuition and fees at OHSU and must complete a service



CARE ON THE COAST

Dr. Anisa Richardson sees patients at Columbia Memorial Hospital's Primary Care Clinic in Warrenton, Oregon. She joined the Astoria health system in September 2017, focusing on integrative medicine, prenatal care and women's health.





PUTTING DOWN ROOTS
Dr. Richardson steals a moment at home with her daughter.

obligation that is equal to the years of funding they receive, plus one year. Medical students, for example, will have a five-year service obligation.

“It’s wonderful here,” said Abdala, describing Eastern Oregon. He had classmates at Imbler High School who are now working at the Grande Ronde Hospital and Clinics, and during his clinical rotation in La Grande, he saw patients “who are people I knew growing up or patients who are friends of family or family of friends.”

Abdala likes that. “It’s really rewarding to be able to treat people that you have a good relationship with,” he said. “It makes for better conversation when you’re in clinic. You can say, ‘How’s your daughter doing, and how’s the wheat harvest doing?’”

Scott Goebel, 438 miles away in Roseburg, agrees. “You see how OHSU is really affecting rural health care,” he said.

Goebel’s first job as a young adult was at a local mill, so he knows how to converse with patients who work in the timber industry. “Every time I see a patient,” he said, “they’re like, ‘You’re not going to leave, are you?’” The answer, he says, is no. And not just because of his PCLF service obligation. It’s his connections to the community.

“They can be confident that I’m going to stick around.” **E**

Spotlight on SHOI

In Oregon, more than half of our state is designated as having a health professional shortage, covering more than 40 percent of our population,” said Marc Overbeck, Oregon Health Authority’s Primary Care Office director. “Incentives attract more providers to Oregon and help keep providers in the communities that need them the most.”

One of those incentives is the Scholars for a Healthy Oregon Initiative (SHOI), which the state established in 2013 to address two challenges: the high cost of tuition for health profession students and the uneven distribution of providers throughout the state.

SHOI scholars receive full scholarships to cover the cost of tuition and fees and must complete a rural or underserved service obligation that is equal to the years of funding they receive, plus one year.

Research suggests that students who are from a rural community are six times more likely to practice in a rural community. Preference in the SHOI program is given to Oregon students who are from a rural heritage, are from a diverse or underrepresented community, are first-generation college students, or are graduates from one of Oregon’s four regional universities. – **RS**

99	total awardees to date	65	SHOI students are currently in their training program or residency	34	SHOI providers have graduated and entered the workforce
29	physicians	29	physicians	13	nurse practitioners
26	nurse practitioners	13	nurse practitioners	13	physician assistants
23	physician assistants	12	dentists	4	certified registered nurse anesthetists
14	dentists	10	physician assistants	2	dentists
4	certified registered nurse anesthetists	1	nurse midwife	2	nurse midwives
3	nurse midwives				



Dean Kenneth A. J. Mackenzie

Putting Marquam Hill on the map

Early campus memories 1915-1932

Story by Meg Langford, photos courtesy OHSU Historical Collections and Archives

After its establishment in 1887, the University of Oregon Medical School (OHSU’s predecessor) first operated out of a former grocery store, and then in a compact building in the Northwest area of Portland. The building was moved again in 1889 and 1893 as road and campus improvements were made.

Dr. Kenneth A. J. Mackenzie became dean of the medical school in 1912. As a founding faculty member of UOMS, Dean Mackenzie saw a growing need for larger labs and better

equipment with each successive graduating class.

Dr. Mackenzie, who had served as chief surgeon for the Oregon-Washington Railroad and Navigation Company and had strong connections to the company board, persuaded the railroad company in 1914 to donate 20 acres atop Marquam Hill for the medical school. The land, unusable to the railroad company, came to be known as “Mackenzie’s Folly” in reference to its location on an inaccessible hilltop, a mile and a half away from the city center. But Dr. Mackenzie saw it from



a different perspective: He envisioned a medical center far away from the noise and grime of the city, where learning and healing could carry on undisturbed.

Having secured the land, Dr. Mackenzie set about obtaining the funds to construct the new campus on the hill. University officials engaged in a concerted lobbying effort, enjoining state and city officials to support the project.

Construction of the Medical Science Building, the first campus building on Marquam Hill which was later incorporated into Mackenzie Hall, finished in 1919. The incoming class comprised 50 students, taught by a faculty of 10. Even in the new location, the facilities were immediately

overtaxed. Dr. Mackenzie quickly went to work publicizing the need for further development funds from state and local government in support of expanding the campus.

In 1921, the state legislature approved \$113,269.50 in funds for an addition to the original three-story Medical Science Building, to be called Mackenzie Hall, on the condition that like funds be secured from other sources. The Rockefeller Foundation provided those funds, and Mackenzie Hall was dedicated on Jan. 13, 1923.

Multnomah County Hospital, built on a free site offered by the University of Oregon Regents, opened on the hill a few months earlier. At the time, some citizens raised concerns that the proposed location would prove too distant for indigent patients, who might not afford car or bus fare. In addition, Dr. Mackenzie had to assuage fears that, because the new UOMS campus was touted as a research center, the poor would be subjected to “experimentation” at the hands of the medical school (see newspaper op-ed at right).

Doernbecher Memorial Hospital for Children opened in 1926, and the first 13 buildings of the Veterans Hospital were dedicated in 1929.

The relocation of the medical school to a wooded campus changed

the dynamics of university life; students enjoyed a more bucolic and secluded environment. On pleasant days, students and faculty might be found playing a game of baseball or horseshoes on campus.

After the construction of the Medical Science Building, a building boom commenced in the vicinity. Several national medical fraternities requested permission to construct homes on Marquam Hill, offering members more convenient living arrangements.

The new campus required additional staff to maintain the facilities, equipment and landscape. To help defray costs, the medical school charged a “breakage deposit” to every student for general breakage of university equipment.

Driving the efforts to build a new campus was the belief that an academic health center should act as an integrated center of healing, with clinics, laboratories and classrooms in close proximity. Clinical experiences in the hospitals advanced student learning, while nearby research in the

university’s laboratories translated to better patient care. It is a vision that continues to hold true today. **B**

The full version of this article first appeared in the OHSU Library’s summer 2018 exhibit. Read it at <https://tinyurl.com/marquam-hill>.



MAKERS OF MARQUAM HILL

Top left: Multnomah County Hospital interns 1928-1929. Middle: at work in the Physiology Lab. Bottom left: Mackenzie Hall circa 1925.

TOGETHER

Advantage of Marquam Hill Aids Our Student - Doctors

Side by side on the campus of the Portland Medical Center, on Marquam hill, stand Multnomah county's new hospital and the medical school of the University of Oregon.

Why are these two institutions affiliated?

A hospital, alone, is a human repair shop.

A medical school, alone, is a place where young people get the theory of medicine from books.

Either, alone, has a limited usefulness. Combined?

The objects of the affiliation are three in number.

1. The prevention of disease through collective study of a large number of cases in a hospital and through investigations in the laboratories in the medical school.

One doctor studying a single case of cancer in a hospital or in private practice could arrive at no definite, intelligent conclusion as to the prevention or cure of cancer. What could ten scientists studying 30 cases of cancer do?

2. The training of future doctors to practice in the Northwest who will have the knowledge gained in such a hospital, and, therefore, be better doctors and the insurance that the sick and injured poor in Oregon will have the best there is in diagnosis and treatment.

Typhoid, diphtheria, the hook worm disease, malaria —these a few years ago were “incurable,” and it had not occurred to anybody that they could be prevented. Now they are listed among the “preventable” diseases. Medical research has done this.

Recently even diabetes has been rendered relatively benign.

There remain cancer, pernicious anemia, infantile paralysis, influenza and other diseases. There is still much work to do.

3. Care of the sick, with better treatment than could otherwise be secured because (a) the medical school must secure the best men for teachers and (b) the doctor who is teaching is not only under the critical eye of the student but also under the eagle eye of his colleagues on the faculty.

An erroneous popular impression persists that a public clinic is a place where inquisitive surgeons cut the sick poor into bits for the instruction of students.

The exact contrary is the happy truth.

At medical centers, such as ours, which is soon to function, the sick and injured poor, get perhaps a little better treatment than money can buy. Only doctors and surgeons of acknowledged skill and learning would dare appear at such a center as teachers.

The student is an interested spectator at these clinics, nothing more.



1925



FOUNDATIONAL YEARS

Above: Portland newspaper op-ed by Dean Mackenzie dated Jan. 5, 1923. Left: Veterans Hospital rendering from the 1920s.

From private practice to a large health system

Q&A

You might say Jeffrey Fullman, M.D. '80, was destined for a career at Portland's Legacy Health System. The internist was, after all, born at Legacy Emanuel Medical Center. And, even before medical school, he worked at the hospital in several jobs.

After completing residency at University of Missouri-Columbia in 1983, Dr. Fullman returned to Oregon to practice and has served on the medical staff at Tualatin's Legacy Meridian Park Medical Center ever since.

As the Legacy system grew, Dr. Fullman was tapped for greater responsibility. Today, he's chair of the Legacy Health System Board of Directors and sees patients four days a week. *Bridges* sat down with him to discuss his long career.

On changes Dr. Fullman has seen

One of the biggest changes is the employment of physicians. It's difficult to go into private practice today. Increasing numbers of physicians are employed by a hospital or health system. I used to round on patients in the hospital, but now hospitalists deliver that care. I stopped hospital care three or four years ago. This has simplified my life, and the hospitalists are very good. But we've developed these silos of care where we lose some continuity, and that's not always best for patients.

On workforce needs

We need more people going into primary care. We need more primary care mentors for residents, and we also need an economic incentive for primary care – such as debt relief – that will ease the financial burden of medical education. When I was in medical school, tuition was \$900 a term. Debt forgiveness may be an incentive for residents to choose primary care.

On quality

When we talk about how to best deliver care, we now pay attention to social determinants of health. For example, we should look at where people live, what they eat and their levels of education. We're asking: How do we keep people healthier? Physicians are very much into quality and doing the right thing. But what is quality? Is it getting a mammogram? Instead, we should look at how often a person is homeless or if they finished high school, for example.

On finding joy in medicine

The best part of my day is when I sit down with patients and interact with them. I also have great partners at work. Medicine is still a great avocation. To me, it is an *avocation*, not a job. It's a remarkable privilege and honor when people let you into their lives at their most personal moments. The rewards are in the relationships. Nothing is better than hearing, "You listened to me. Thank you." – RS



Welcome new Alumni Council members

The School of Medicine Alumni Association Council (pictured above) welcomes three new members to its ranks: Kimberly Cummings, M.D. '10, a pediatrician in Beaverton, Oregon; Natasha Polensek, M.D. '90 R '94, associate professor of pediatrics, OHSU School of Medicine; and Peter Sullivan, M.D. R '98, associate professor of medicine, OHSU School of Medicine. Learn more about the council's activities for 2018-2019 at www.ohsu.edu/som/alumni.

The award goes to...

The Alumni Awards program recognizes exceptional members of our 18,000-member alumni community. The accomplishments of alumni deserve to be recognized – which is why your participation in this program is crucial. Throughout the year, we accept nominations in several categories. Nominate a classmate or a colleague by Dec. 14 for the 2019 awards. Instructions and more details can be found at www.ohsu.edu/somalumniawards.

Continuing education marks a milestone

Did you know? For half a century, the OHSU School of Medicine has contributed to the lifelong learning of providers. The school's Division of Continuing Professional Development will present the 50th Annual Primary Care Review in February. The conference agenda includes topics such as cardiovascular disease, adult mental health and cancer. Details and registration at www.ohsu.edu/som/cme.

Matt McNair >

New OHSU Foundation president

Matt McNair became president of the OHSU and Doernbecher Foundations in August. The foundations raise money to support OHSU and Doernbecher's multifaceted missions. McNair comes from Ohio State University, where he served as president of the Ohio State Innovation Foundation and vice president for economic and corporate engagement. Over the past 10 years, McNair has led successful campaigns of nearly \$400 million for the Ohio State College of Engineering and, prior to that, more than \$550 million for the University of Nebraska Foundation. "I have experienced first-hand the impact and the importance of an engaged alumni community both at Ohio State and Nebraska," McNair said. "I look forward to meeting and working closely with OHSU's alumni in the months to come."



FRITZ LIEDTKE

Class notes

WE WELCOME
YOUR NEWS AND PHOTOS

Email alumni@ohsu.edu or write a note to *Bridges* Class Notes c/o Rachel Shafer, OHSU School of Medicine, 3181 S.W. Sam Jackson Park Rd., MC L102, Portland, OR 97239. Please write a maximum of 250 words and include your name, degree/training information and graduation/completion year. We may not be able to publish all items and may edit for length and clarity.



1960s

▲ **John Tysell, M.D. '67**, shared this photo taken around 1965 of the University of Oregon Medical School basketball team. Dr. Tysell identified the players, all members of the M.D. class of 1967, as the following: front row from left to right, Drs. Bob Hakala, Casey Blitt, Terry Yamauchi, Art Zbinden and himself. Back row from left to right, Drs. Don Wade, Gary Dahl, Bob Sack, Terry Walters and Scott Starlin. “It was great to have sports on campus,” Dr. Tysell wrote. “They took the edge off the stress of our training. I spent many hours on the squash court.”

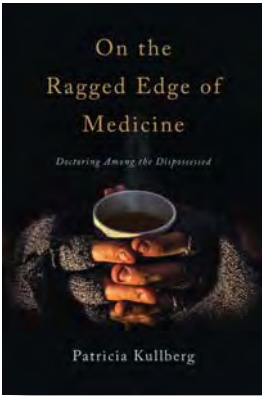
Having attended his 50th class reunion in June, **Robert Heinig, M.D. '68**, wrote: “What a joy to spend parts of three days with great friends. Our class trained

at a time when a number of scientific advances were just starting. To name a few: much improved laboratory testing, cervical cancer screening, concern about inappropriate use of antibiotics and appreciation that glycemic control in patients with diabetes was likely very important. We had a dedicated faculty with some truly outstanding role models: Drs. William Krippaehne, Howard Lewis, Robert A. Cooper Jr., and many more.”

1970s

Wayne Burton, M.D. '74, received the 2018 Inaugural REBA Employee Wellbeing Vanguard Award. The award recognizes professionals who are leading the way in implementing well-being programs. Dr. Burton is retired as global corporate medical director for American Express and associate professor of clinical medicine, Feinberg School of Medicine, Northwestern University Medical School.

► **Patricia Kullberg, M.D. '79**, M.P.H., published *On the Ragged Edge of Medicine: Doctoring Among the Dispossessed*, a personal glimpse into a medical practice for the homeless and urban poor in Portland, Oregon. More information is available at patriciakullberg.com.



1990s

Kim R. Guy, M.D. '97, wrote, “I completed my adult psych residency in Phoenix, Arizona, then did a child psych fellowship at Harbor-UCLA. I completed a four-year federal loan repayment obligation by working in Gallup, New Mexico, next to the Navajo Nation. I eventually moved back to Los Angeles and have been working for the past 10 years at the Los Angeles County jail, which serves the largest number of mentally-ill patients in the United States.”

2010s

Annie Logan, P.A.-C., Ph.D. '15, is a physician assistant in inpatient neurosurgery at Harborview Medical Center in Seattle, Washington. After completing the OHSU Neuroscience Graduate Program, she enrolled in the physician assistant program at Rosalind Franklin University in North Chicago, Illinois.



▲ **Joshua Lum, M.D. '17**, a resident in family medicine in Richland, Washington, and his wife Janell, welcomed identical triplets July 23. Enoch Daniel was 3 pounds, 10 ounces and 16 inches long; Isaiah Job 3 pounds, 8 ounces and 16.5 inches long; and Malachi Noah 3 pounds, 6 ounces and 16.2 inches long. Dr. Lum recalled learning the news at the couple’s first ultrasound appointment. “I looked around with the ultrasound and found a third head ... triplets!” He was so shocked he dropped the ultrasound probe, he said. Congratulations, Lum family!

Dominic Siler, M.D. '14, Ph.D. '16, is a second-year resident in neurosurgery at OHSU. Recently, Dr. Siler co-developed a new surgical training simulator that is now incorporated into the Society of Neurological Surgeons’ educational curriculum for every neurosurgical resident nationwide. When not in the hospital or the laboratory, Dr. Siler enjoys spending time with his wife and stirring up trouble with his two kids.

After earning a master’s in clinical dietetics, **Jordan Sylvester, M.C.D. '17, R.D., L.D.**, took a position as a sports dietitian at Clemson University and then became an assistant nutrition consultant for the Chicago Cubs. She is currently a sports dietitian at the University of Oregon.

Holly Caretta-Weyer, M.D. F '18, took a position as assistant residency program director and assistant clerkship director at the Stanford University School of Medicine Department of Emergency Medicine.

In memoriam

Michael Baird, M.D. '57, of Portland, Oregon, died May 27, 2018, at age 87.

Ben Burgoyne, M.D. '48, of Lake Stevens, Washington, died July 14, 2018, at age 101.

Thomas Case, M.D. '68, of Edmonds, Washington, died March 12, 2018, at age 77.

Alan Chaimov, M.D. '54, of Corvallis, Oregon, died July 8, 2018, at age 92.

Byong-uk Chung, M.D. '61, of Barrington, Illinois, died April 28, 2018, at age 83.

James Donnelly, M.D. '55, of Longview, Washington, died June 3, 2018, at age 89.

Herman Frankel, M.D. R '68, of Portland, Oregon, died July 11, 2018, at age 80.

David Harrison, M.D., Ph.D. R '07, of Seattle, Washington, died Aug. 3, 2018, at age 61.

Wesley Hoskins, M.D. '47, of Eugene, Oregon, died May 14, 2018, at age 95.

Otto Loehden, M.D. '58, F.A.C.S., of Beaverton, Oregon, died April 22, 2018, at age 85.

John Mather, M.D. '45, of Boise, Idaho, died May 28, 2018, at age 98.

Margaret McNichol, M.D. R '99, of Portland, Oregon, died May 18, 2018, at age 62.

Robert Nichols, M.D. R '80, of West Richland, Washington, died May 30, 2018, at age 82.

Delbert Remy, M.D. '64, of Bandon, Oregon, died March 9, 2018, at age 83.

Paul Russell, M.D. '84, of Canoga Park, California, died June 14, 2018, at age 65.

In memoriam is also online at www.ohsu.edu/som/alumni.

Calendar

Celebrate the Season

School of Medicine Alumni Association Holiday Reception For more information and to RSVP, please call 503-552-0667.		
DEC. 2	2–4 p.m.	THE TOWN CLUB, PORTLAND, OREGON

Save the Date for OHSU Alumni Reunion 2019!

Classes celebrating milestone reunions are invited to an evening celebration in downtown Portland, Oregon. More information to come.		
MAY 17	PORTLAND, OREGON	

For the latest information and more events, go to www.ohsu.edu/som/alumni.

Continuing Professional Development

50th Annual Primary Care Review		
FEB. 11-15	SENTINEL HOTEL, PORTLAND, OREGON	

2nd Annual Pediatric Mental Health: Equipping the Primary Care Provider		
MARCH 8	OREGON MEDICAL ASSOCIATION, PORTLAND, OREGON	

3rd Annual Mental Health: Challenges and Treatment in Adult Primary Care		
MARCH 15	OREGON MEDICAL ASSOCIATION, PORTLAND, OREGON	

26th Annual Internal Medicine Review		
APRIL 11-12	SENTINEL HOTEL, PORTLAND, OREGON	

Sommer Memorial Lectures/ OHSU School of Medicine Alumni Scientific Session		
MAY 9-10	MULTNOMAH ATHLETIC CLUB, PORTLAND, OREGON	

Schedules are subject to change. Please contact 503-494-8700 or cme@ohsu.edu for brochures and program updates. For the latest information on these and other CME events, visit www.ohsu.edu/som/cme.



Alumni Relations Program
1121 SW Salmon Street, Suite 100
Portland, OR 97205



John Walsh, M.D.



Kate Runkel

A LEGACY LIVES ON

An internationally-known pioneer in geriatric medicine, John Walsh, M.D., served as chief of medicine at the VA Portland Health Care System and as a professor of medicine at OHSU School of Medicine. His spirit of cooperation is commemorated with a plaque on the OHSU-VA pedestrian sky bridge. Sadly, Dr. Walsh passed away from cancer in 1995. To honor his legacy and commitment to health care, his family established the John R. Walsh Scholarship Fund to support medical students at OHSU.

M.D. student Kate Runkel, the 2017-2018 recipient, shares Dr. Walsh's profound interest in geriatrics. She recently partnered with the geriatrics faculty to conduct a research study on the risks of falls in older populations. "The Walsh Memorial Scholarship has helped me acquire medical knowledge, conduct geriatric research and attend national conferences focused on geriatrics," said Runkel. "The honor of receiving the Walsh Scholarship has provided encouragement and financial support to become the doctor I have always wanted to be."



OHSU & Doernbecher
FOUNDATIONS

To find out more about scholarships at OHSU, contact Megan Knowles at 503-412-6376, knowleme@ohsu.edu, or visit www.ohsufoundation.org.