

Bridges



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

Spring 2018



PHYSICIAN-
SCIENTISTS
AT
RISK?

INSIDE
THEIR
WORLD



Sharon Anderson, M.D. R '82

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

Celebrating proud rites of passage

FACULTY AND STUDENTS HAVE BEEN IMMERSSED IN SPRING RITES OF PASSAGE AS we near graduation June 3, including a new one in March for graduating M.D. students: presenting their scholarly projects in a capstone event that is part of the *YOUR M.D.* curriculum (see page 8).

The class of 2018 is our first cohort to complete *YOUR M.D.*, and they got a big vote of confidence March 16 during Match Day: all 147 fourth-year students matched to residency programs (see related story page 8). The last time we had a 100 percent match was 2012.

It was a real delight to visit with students during our Match Day celebration. I remember my excitement when I opened my envelope at Louisiana State University Medical Center in New Orleans and learned I'd matched to OHSU. While far from anywhere I called home, my OHSU internal medicine residency changed my life. After training back east in nephrology and research, I came back to Portland in 1991 because I saw unlimited opportunities at OHSU and in Oregon; I've been here ever since.

I am equally proud of our graduate students, including those defending their Ph.D. dissertations this spring. In December, Ph.D. students put to the test the public speaking and communications skills that we are now building into their curriculum. They organized a rally and letter-writing campaign against a federal proposal to end tax-free graduate student tuition, rendering a Ph.D. unaffordable for many (see page 5). "It's so bad, even the introverts are here," read my favorite sign at the courtyard rally outside Mackenzie Hall Café. Within weeks, that piece of the federal tax bill was removed. Coincidence? We choose to think not!

As our graduates make the transition from students to alumni, I want to thank the OHSU School of Medicine Alumni Association for its leadership in fostering our medical, science and allied health communities in Oregon and beyond.

As Joanne Jene, M.D. '60 R '63, a retired anesthesiologist and member of the Alumni Association Council, said at Match Day, "Remember that you will forever be an ambassador for OHSU. And we will cherish the fact that soon you will be a forever alum of this fine institution."

Sharon Anderson, M.D. R '82
Dean

ON THE COVER

Drs. Joshi Alumkal (left) and Cindy McEvoy are physician-scientists with successful research programs – read why we need more of them. Story page 12.

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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. 518(170)

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FEATURE

Their careers will leave you breathless

Physician-scientist Dr. Cindy McEvoy (above right) helps a young study participant prepare for a pulmonary function test, part of Dr. McEvoy's research to improve respiratory health in neonatal and pediatric patients. Physician-scientists like Dr. McEvoy juggle two demanding careers in an increasingly competitive environment. Meet her and other OHSU physician-scientists and learn why the school is working to increase their numbers.

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Through affiliation, OHSU health system is growing

Picture NASA's Mission Control Center. The room is abuzz, and people monitor an oversized display of real-time data. Something similar is happening at OHSU, and if you are a community physician with patients to transfer, you may notice a change.

OHSU Hospital is the first in the nation to use a command center model to manage inpatient occupancy across a system. This may mean your patient will go to an OHSU location in Hillsboro or East Portland.

The revitalized process – called Mission Control – is a win-win for referring physicians and patients. In February 2018, OHSU accepted 62 transfers at Tuality and Adventist, leading to fewer declines due to capacity constraints at the hospital on Marquam Hill. The goal is to transfer patients to the right providers sooner, often at an OHSU location closer to where the patient lives.

Adventist Health Portland and OHSU integrated their

clinical activities and services in the Portland metropolitan area, effective Jan. 1. This agreement makes OHSU and Adventist part of the same Portland metropolitan health system. Adventist's health care enterprise includes a 302-bed medical center, 34 medical clinics and home care and hospice services.

Tuality Healthcare and OHSU finalized a similar agreement in February 2016. Lori Cardwell, M.D. '12 R '17, is assistant professor of surgery, OHSU School of Medicine, and an example of a faculty member who is bringing the OHSU-Tuality Healthcare affiliation to life.

No two days are exactly alike for Dr. Cardwell. She practices two days a week in Hillsboro and three days a week in Portland. The arrangement makes sense for her logistically (she lives between the two locations). It also gives her experience in two professionally diverse environments.

"I like the broad scope of surgical practice, the team-building and close relationships in a smaller community hospital. Then at OHSU, I see a wide assortment of challenging cases and have access to specialists for consultations and advice," Dr. Cardwell said.

Collaboration is also essential to ensuring one standard of patient care at all OHSU locations. Clinicians are developing health system guidelines under the direction of the Office of Clinical Integration and Evidence-based Practice. Topics include opioid prescribing for chronic pain and colorectal cancer screening. – JS

Students dialogue, rally, walk out

ENERGIZED

Students lent their voices to a number of social movements and conversations on campus in recent months. Graduate students organized a rally in December to speak out against a federal tax proposal that would end tax-free tuition for graduate students, forcing many out of their doctoral studies (top). Congress later dropped the proposal. Beginning in January, students and faculty took part in a series of university-wide conversations about sexual harassment and discrimination, calling for greater support of women and improvement to OHSU's culture. In February, students met with Harvard sociologist Dr. David Williams, a pre-eminent scholar of social determinants of health, to discuss pathways to health equity as part of an OHSU visit and public lecture (middle right). Then on March 14, students led simultaneous walkouts across campus concurrent with the National School Walkout, flanked by faculty and staff; organizers called on Congress to take action on gun violence and fund related research (middle left, bottom).



School leadership team expands

Dean Sharon Anderson appointed Atif Zaman, M.D., M.P.H., professor of medicine, OHSU School of Medicine, and professor of public health and preventive medicine, OHSU-PSU School of Public Health, senior associate dean for clinical and faculty affairs. Dr. Zaman joins the dean's senior leadership team to support faculty recruitment, advancement, engagement and wellness. He will also develop programs to optimize faculty diversity, equity and inclusion, with additional responsibilities supporting clinical integration across the evolving OHSU health system.



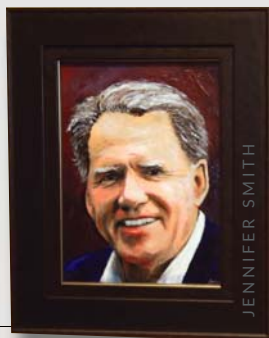
COURTESY OHSU

Portrait of a colleague

“That’s how I always saw him, and that’s what I wanted to paint,” said Jung Yoo, M.D., professor and chair of orthopaedics and rehabilitation, OHSU School of Medicine. “It’s the gestalt of joy that I like best about the painting. Even after a tough discussion, Mark always made you feel good. That was the secret to his success, and I think the portrait captures that.”

Dr. Yoo is the artist behind the portrait of Dean Emeritus Mark A. Richardson (1949–2016) now adorning the Dean’s office fourth floor hallway of Mackenzie Hall. It is

the newest in a long tradition of dean portraits, dating back to Simeon E. Josephi, M.D., the first dean who served from 1887 to 1912.



JENNIFER SMITH



UNDER DEVELOPMENT

(Left to right) Engineer Patrick Jurney, George Giraud, M.D., Ph.D., professor of medicine, OHSU School of Medicine, and Igor Dykan, M.D. '12, research associate, test a total artificial heart prototype.

OHSU develops prototype for total artificial heart

OHSU physicians and researchers are developing what they hope will be the first total artificial heart, designed to permanently replace a failing heart for most adults and children age 10 or older.

The device has the potential to be a permanent replacement because of its simple design. It replaces two ventricles with one titanium tube that contains a titanium alloy-coated hollow rod that shuttles back and forth, creating a blood flow that mimics a natural human pulse. Current artificial hearts are largely viewed as a temporary therapeutic while patients wait for a human heart transplant.

“Considering the human heart beats 14 million times a year, it’s crucial that an artificial heart is durable and robust,” said Sanjiv Kaul, M.D., director, OHSU Knight Cardiovascular Institute, and professor of medicine, OHSU School of Medicine. “The simple, efficient design of our total artificial heart makes its potential for failure very low.”

The team will continue to test the prototype in animal models to understand its physiology, and if those studies are successful, move it into clinical trials. The device was originally designed by the now-retired Richard Wampler, M.D. R '77, who was inspired to help those experiencing heart disease when he was a surgical resident at OHSU. – FW



Aiming for 100 new residency slots in Oregon

A 2017 report for the Association of American Medical Colleges found that, for the third year in a row, physician demand will outstrip supply, leading to a projected total shortfall of between 40,800 and 104,900 physicians in the United States by 2030.

In response, new medical schools have opened and existing medical schools have expanded their class sizes. OHSU’s entering class is now 160 medical students, up from approximately 120 in 2011. Meanwhile, international medical graduates continue to seek clinical training in the United States; approximately 15,000 trainees from around the world applied for 276 positions in OHSU’s GME programs in 2017. Yet, the decades-old Medicare funding cap makes it difficult for teaching hospitals to increase training slots at the same pace as the growing pool of expectant physicians.

This confluence of factors means residency slots are more competitive than ever.

Workforce data show GME training is more influential on practice location than undergraduate medical education training. Oregon retained 45 percent of its physicians trained in state from UME, and 54 percent of its physicians trained in state from GME, according to the AAMC.

Jim Anderson, M.D., is keenly interested in the propensity for a GME experience to predict practice location. In his role as assistant dean for graduate medical education, he and school leaders hope to build 100 new GME slots in Oregon over the next 10 years.

For the third year in a row, physician demand will outstrip supply, leading to a projected total shortfall of between 40,800 and 104,900 physicians in the United States by 2030.

– 2017 AAMC report

Creating 100 new GME slots in Oregon will take time. OHSU will start with expanding existing programs; a handful of trainees will soon rotate within Tuality facilities. Independent programs in Hillsboro will begin as early as 2021. (See related story page 4.)

Do you have ideas for expanding GME capacity? Contact Dr. Anderson at andejame@ohsu.edu. – JS



COURTESY OHSU

OHSU, PNNL launch co-laboratory

OHSU and the U.S. Department of Energy’s Pacific Northwest National Laboratory in Richland, Wash., took an important new step to improve their collaborative research environment with the launch of the OHSU-PNNL Precision Medicine Innovation Co-laboratory, or PMedIC, in February.

PMedIC enhances researcher and trainee access to technologies and expertise to advance the science of precision medicine. It’s taking an existing collaboration in ‘omics – how genes, proteins and various metabolic products interact in health and disease – and broadening it to include imaging and data science.

“Expanding our collaboration with this cutting-edge national lab only deepens our shared potential for innovation to advance human health,” said Dean Sharon Anderson. – RS



COURTESY PNNL

The new Doctor of Medicine

We upended traditional medical school with a bold curriculum. What's the result?

By Rosina Grove

MD. students Katie Main and Shira Einstein spent 11 weeks in Peru in 2016 working with Health Bridges International to develop a standardized manual for health care ambassadors who represent children and families in extreme poverty as they navigate complex health care systems.

The pair, class of 2018, will pursue residencies in emergency medicine and pediatrics, respectively, but they share a passion for global health.

"We had the flexibility [to do this] because this new curriculum made it possible," said Main. "Had it not been for that time between the [USMLE] Step exam and core rotations, we wouldn't have been able to travel for quite as long or get as much out of it."

Their efforts became an award-winning scholarly project, a requirement for *YOUR M.D.*, the school's bold new curriculum that is graduating its first class this June. It's that kind of customized experience that exemplifies the new curriculum's learner-centric philosophy.

Students are required to complete scholarly projects in order to hone research and presentation skills and perform critical analyses of the literature. Such skills haven't traditionally been evaluated as part of a medical degree but are critical to physician lifelong learning.

For his project, Peter Engdall utilized a survey on social determinants of health to discover circumstances in patients' lives that impact their well-being. Partnering with Winding Waters clinic in Enterprise, Ore., Engdall tallied patient responses to questions about housing, food insecurity and access to transportation or a phone as a way to emphasize the need for these conversations.

"The more that your care team knows about these [circumstances] and can help tailor specific treatments, the better the outcomes," he said.

Fourth-year students also had to demonstrate another key skill: delivering news of a death to distraught family and friends during a simulated exercise with standardized patients.

"Medical schools have been teaching communications for some time," said George Mejicano, M.D., senior associate dean for education, OHSU School of Medicine. "But while most of the emphasis has been on what I would call the more simplistic aspects of communications, OHSU is now focusing more on the ethical aspects of sharing information in emotionally charged situations."

With graduation approaching, education leaders have started reflecting on the new curriculum and early outcomes.

One major indicator was Match Day. The class of 147 students achieved a 100 percent match, the first since 2012. Students, families, friends and faculty members waited nervously, then erupted into cheers and tears as students found out where they were going for residency.

This year's group of soon-to-be-minted physicians matched in 25 different disciplines at 76 institutions across the nation. Twenty-six percent will train in Oregon, and 41 percent will go into primary care residencies (internal medicine, family medicine and pediatrics).

In an article for *Academic Medicine*, the journal of the Association of American Medical Colleges, Dr. Mejicano and Tracy Bumsted, M.D., M.P.H., associate dean for undergraduate medical education, OHSU School of Medicine, described key learnings. One is that students want their feedback to improve the experience for future classes. Administrators responded with multiple new feedback systems such as town halls, surveys and advisory meetings with faculty and student leaders.

Drs. Mejicano and Bumsted wrote, "While the journey is ongoing and we continue to innovate, especially with respect to realizing a true time-variable curriculum, we have confidence that this initiative will result in a better experience for students, facilitate their progression through the continuum of medical education and ultimately produce better physicians." **B**



What students learn



Safety and improvement

Culturally-sensitive care

INTERPROFESSIONALISM

Critical evaluation | Scholarship

ETHICS | **Accountability**

Patient-centered care

Science of health care delivery

Epidemiological sciences

Translational research

POPULATION HEALTH

Honesty



Lifelong learning

Enter orders

PERFORMANCE IMPROVEMENT

Information technology

Personalized health care

PATIENT MANAGEMENT PLANS

Communication | Competencies

Social-behavioral sciences

DATA INTERPRETATION

APPLICATION

OF EMERGING

KNOWLEDGE



Patient handover

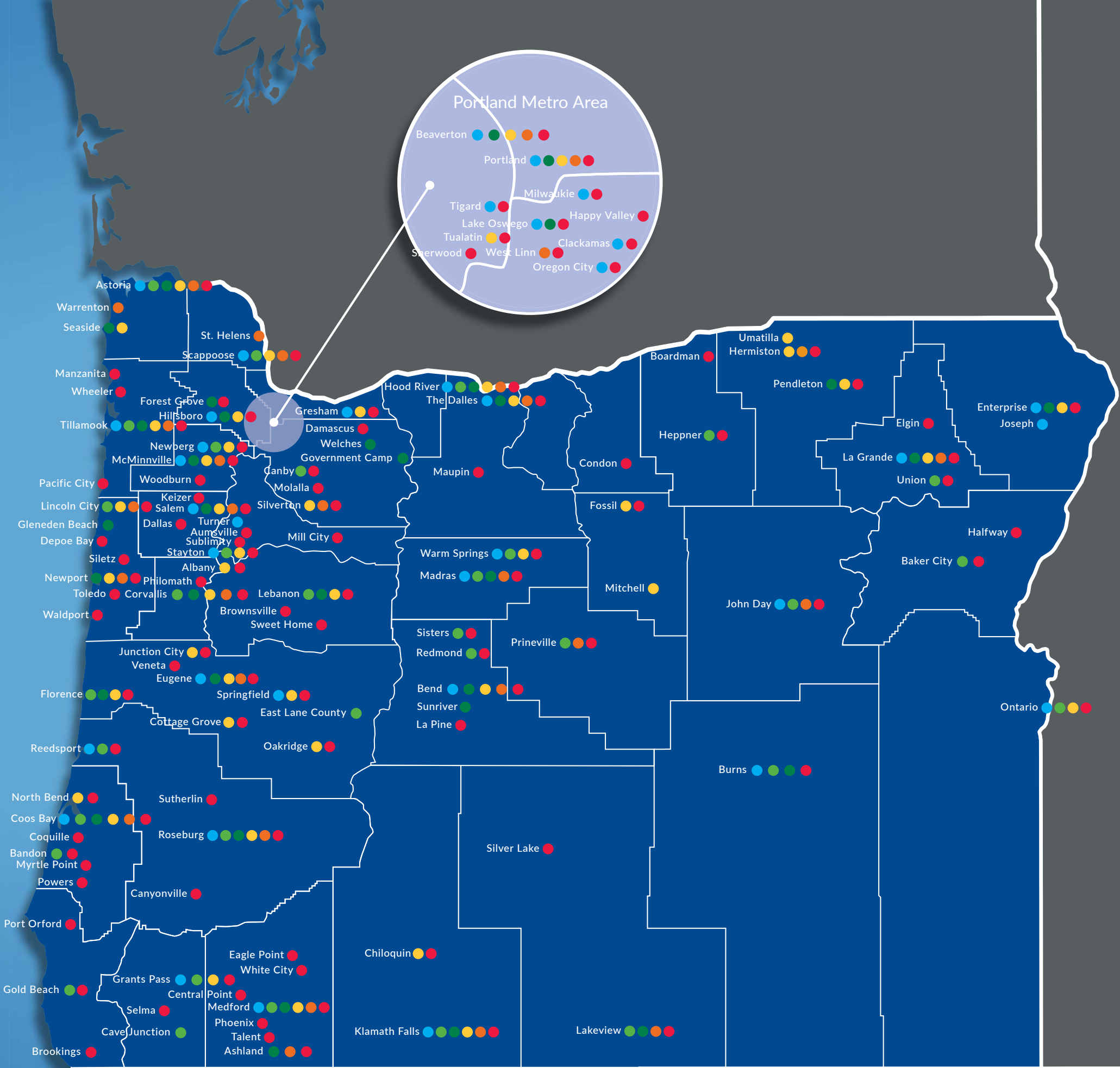
Serving OREGON

What’s the school doing across the state this year? Browse the map to discover a snapshot of activities.

Get a more detailed glimpse of a sampling of communities at www.ohsu.edu/som/map.

<div></div>	Residency training sites*
<div></div>	Student rotations or clerkships
<div></div>	Continuing medical education
<div></div>	Clinical practice and/or telemedicine
<div></div>	Research
<div></div>	Oregon Rural Practice-based Research Network (ORPRN)

*Includes existing and planned sites for residencies in coming years.





CLINICAL RESEARCH IN ACTION

Physician-scientist Dr. Cindy McEvoy (in black sweater) helps a young study participant take a pulmonary function test, part of Dr. McEvoy's research to improve respiratory health in neonatal and pediatric patients. Above, a hair sample is collected as part of the research study.

One of the hardest roads in medicine

They juggle two demanding jobs. Their numbers are in decline. The case for physician-scientists and why this tiny branch of medicine merits safeguarding.

By Rachel Shafer

Susan Rowell, M.D. F '07, M.C.R. '12*, considers the question: Why does she do two demanding jobs at once? The trauma surgeon and brain injury researcher normally thrums with energy. But now she grows contemplative.

"It's hard to lose people, especially a child," she said, after a moment. "The opportunity to impact the lives of my patients beyond the operating room – that's why I do research."

Her drive is palpable. Brain injury is the leading cause of death from trauma injury, according to the American Association for the Surgery of Trauma. As Dr. Rowell knows, the highest standards of care aren't enough.

So when she's not running the surgical intensive care unit at OHSU Hospital or rounding on trauma patients or teaching residents or parenting three children, Dr. Rowell squeezes in an NIH R01-funded research program investigating new treatment strategies for traumatic brain injury.

For decades, physician-scientists – who typically devote 80

percent of their time to research, 20 percent to patient care – comprised a small subset of the physician workforce with an outsize role in medical advances. The curiosity of OHSU's Brian Druker, M.D.*, for example, wondering why his chronic myeloid leukemia patients weren't responding to standard treatments, led to new lab experiments and the breakthrough drug Gleevec, turning a fatal cancer into a manageable disease. (Notable physician-scientists are alumni, too. Meet two of them on pages 19 and 21.)

"If you look at places doing transformational work, they are heavily populated by physician scientists," explained oncologist and physician-scientist Joshi Alumkal, M.D.* "These types of researchers take critical problems they see in clinic and bring those questions back to the lab. That's fewer obstacles to making a discovery, but it's one of the hardest roads you can take in medicine."

Today, the number of physician-scientists – already small – is declining further, beaten down by a number of factors, including an ultra-competitive funding environment for research and pressure to maximize clinical productivity. A 2014 report by the NIH Physician-Scientist Workforce Working Group found that of almost 1 million U.S. physicians, 1.5 percent reported research as their primary focus. At OHSU during that same period, an estimated 4 percent of physicians focused on research.

That's too low for Dean Sharon Anderson, who herself ran labs at Brigham and Women's Hospital and the V.A. Portland Health Care System and continues to care for patients at OHSU and the V.A. "The school needs all kinds of faculty, from full-time providers and scientists to physician-scientists in order to fulfill our mission to rapidly translate new knowledge into better health for all," she said.

Linking science and medicine

Research is a natural fit for anesthesiologist and neuroscientist Eric Schnell, M.D., Ph.D.*, who studies neuronal dysfunction in disease. Dr. Schnell describes himself as a tinkerer, someone who likes to understand how things work. After doing research in college, he pursued an M.D./Ph.D. rather than a Ph.D. because he surmised medical school would be an ideal way to learn how neuroscience relates to human health. He had no intention of ever practicing medicine, he said, but as he progressed through medical school, he found clinical practice more rewarding than he thought.

Years later, he's still doing both and embraces the challenge. He jokes about the conundrum of getting dressed in the morning. "If I wear nice clothes to the lab, I invariably spill bleach on myself or end up crawling around on the floor to troubleshoot malfunctioning equipment. And if I wear my favorite fleece and T-shirt, I find myself in a clinician meeting conspicuously underdressed. It's a metaphor for the challenge of bridging two different cultures and ways of thinking."

Nurturing future physician-scientists

What is Mollie Marr's ideal job? The M.D./Ph.D. student doesn't hesitate: a faculty position as an emergency medicine physician-neuroscientist who studies psychological stress and trauma to inform acute care.

While her M.D. classmates get ready for residency this summer, this future physician-scientist is halfway through her training, and she wouldn't have it any other way.

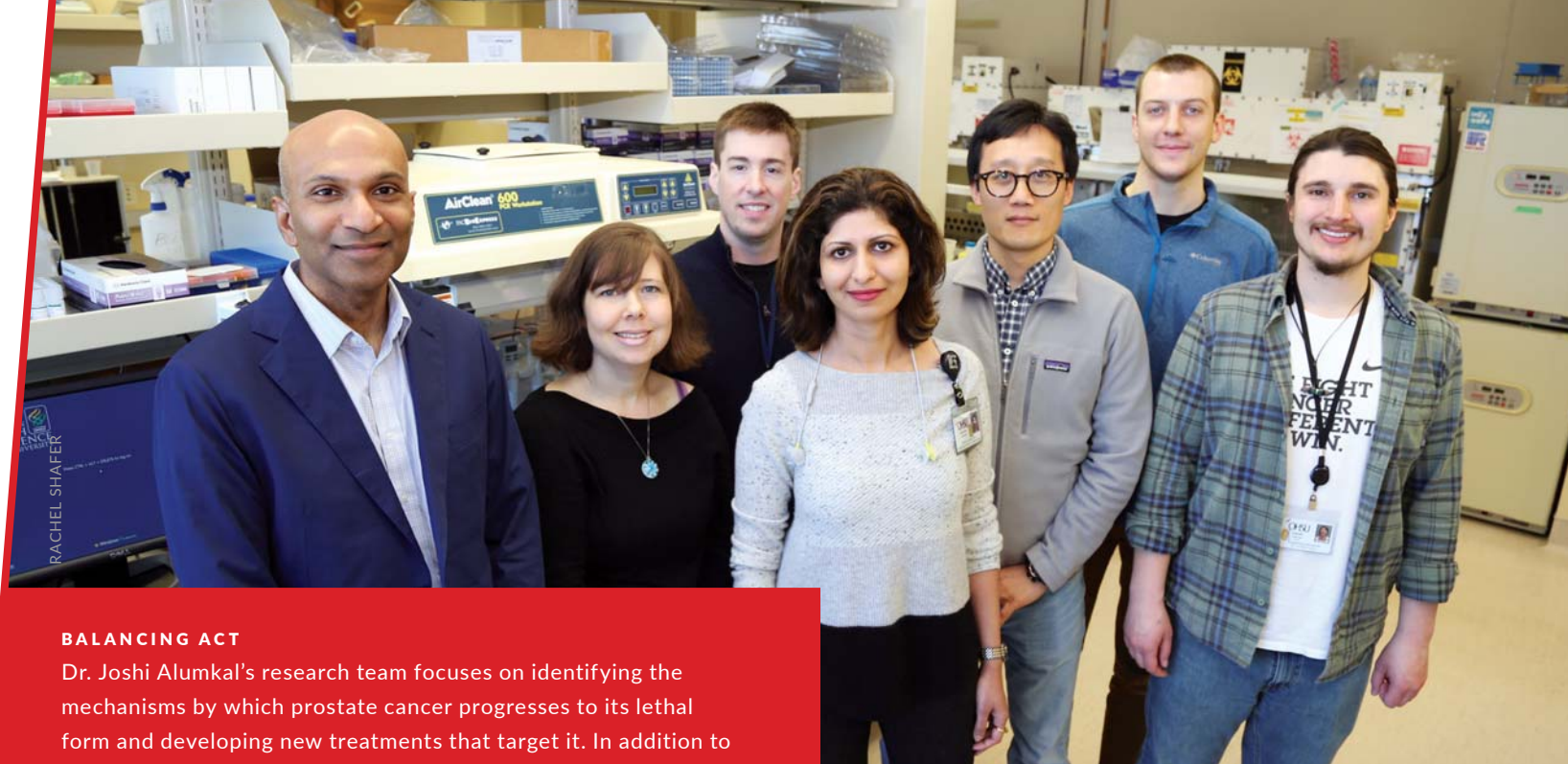
"For me as a medical student, training in research is so important because it's the way we iterate change in medicine," she said. "Clinical experiences need to inform biomedical research so we have the knowledge to push policy and make our systems of care better."

Marr is one of 34 students in OHSU's M.D./Ph.D. program, a nationally recognized program devoted to training outstanding physician-scientists with the breadth and depth of knowledge to become leaders in medicine and transdisciplinary biomedical research.

Under the leadership of David Jacoby, M.D., interim chair and professor of medicine, OHSU School of Medicine, interest in the program has grown, along with its size. Seven years ago, the program received 120 applicants; this year, 195 applied.

The program is also working to expand the diversity of its students. In April, OHSU brought University of Maryland, Baltimore County, President Freeman Hrabowski to campus to deliver its Hatfield Lecture. UMBC graduates more African-American students who go on to earn M.D./Ph.D.'s than any other college in the country, and OHSU hopes to attract more underrepresented minorities to its programs.

For those M.D. students who want to try research but can't commit to the eight years required to earn an M.D./Ph.D., *YOUR M.D.* offers the Physician-Scientist Experience, which provides dedicated time for introductory research in partnership with the Oregon Clinical and Translational Research Institute. By offering pathways and exposure to research, the school is working to bolster the physician-scientist workforce. —RS



BALANCING ACT

Dr. Joshi Alumkal's research team focuses on identifying the mechanisms by which prostate cancer progresses to its lethal form and developing new treatments that target it. In addition to overseeing his research program, mentoring students and residents and performing other academic responsibilities, Dr. Alumkal is an oncologist who treats cancer patients in the Knight Cancer Institute.

He elaborated. "Despite what people think, clinicians and scientists often don't speak the same language or even share the same priorities. Physician-scientists bridge those gaps."

Bringing disparate experts together is key to answering today's complex scientific questions, and it's an area where physician-scientists excel, including neonatologist and pulmonary scientist Cindy McEvoy, M.D., M.C.R. '08.*

Dr. McEvoy finds an infant's transition from life in the uterus to the outside world fascinating. Her bedside observations led her to initiate studies focused on maximizing lung growth as early as possible in order to set term and preterm babies on a positive trajectory. Collaborating with basic scientists from the Oregon National Primate Research Center, she and her team designed a clinical trial that revealed that giving supplemental vitamin C to pregnant smokers improved lung function in their infants and decreased wheezing through 12 months of age.

"We're optimistic this may be an inexpensive and simple approach with continued smoking cessation counseling to decrease some of the effects of smoking in pregnancy on

*Particulars

Faculty hold titles in the school, V.A. Portland Health Care System and elsewhere. Specific titles are listed in the online article at www.ohsu.edu/somnews.

childhood respiratory health," she said. Her results could have a large public health impact.

Dual-identity challenges

The argument for physician-scientists is convincing on paper, but the day-to-day reality is complicated. There's the challenge of balancing it all, said neurologist and neuroscientist Rebecca Spain, M.D., M.S.P.H.*, who investigates new treatments for progressive multiple sclerosis.

There are fewer jobs, added cardiologist and structural biologist Steven Mansoor, M.D. '09 R '17, Ph.D. '09*, who studies the structure of receptors and ion channels. "Financial pressures make it difficult for departments to hire physician-scientists because clinicians generate more revenue," he explained.

In addition to earning more, clinicians don't face pressure to publish or obtain grant funding. There is instant gratification when patient health improves; scientists can spend months without a positive result.

"But to me, research is worth it because I'm driven by that positive result," said Dr. Mansoor. "There's no greater high than getting an exciting result late at night in the lab when no one else in the world knows what I know at that moment. It's thrilling. And it constantly motivates me."

One of the biggest challenges physician-scientists face is a gap in research funding. In fact, studies suggest that they are most vulnerable early in their careers as they try to transition to independent funding such as an NIH R01 grant.

Worried by these obstacles and shrinking numbers, leaders in the school are working to right the ship. They recruited

If you look at institutions doing transformational work, they are heavily populated by physician-scientists.

— Dr. Joshi Alumkal

notable physician-scientists Joan Teno, M.D.*, and Susan Gurley, M.D., Ph.D.*, earlier this year. And the school launched a major strategic program to further expand the ranks of physician-scientists and provide better support.

"Some of the most interesting science happens when clinical questions drive mechanistic experiments," said Mary Heinricher, Ph.D., associate dean for basic research. "This comes naturally to physician-scientists, and we want to ensure they have the support they need to make the transformational discoveries we know are possible."

The new program, led by Jeanne-Marie Guise, M.D., M.P.H.*, will help in a number of areas, including career development and protected time policies. And it will provide substantial financial support to gird retention and recruitment efforts.

The program augments existing researcher support services provided by the Oregon Clinical and Translational Research Institute (OCTRI), directed by David Ellison, M.D. One of OCTRI's most popular programs is the well-regarded Human Investigations Program and its master's in clinical research, led by Cynthia Morris, Ph.D., M.P.H.

That's all good news for people like Dr. Susan Rowell who, to make it as a surgeon, scientist and mom, learned to delegate where possible, write grants at four in the morning and fit research around her busy clinical and family schedule.

The results of her team's traumatic brain injury clinical trial – soon to be published – are the culmination of more than seven years of hard work. She's hopeful the findings will improve outcomes for brain-injured patients and potentially change the standard for care for the management of traumatic brain injury.

"That," she said, "is the ultimate reason to do research." ▮



STORIES OF THE
ALUMNI
AWARD
WINNERS
2018

by Todd Murphy

Call him Joe

JOE ROBERTSON, M.D. R '82, M.B.A.

CHARLES PREUSS DISTINGUISHED ALUMNUS AWARD

Editor's note: OHSU President Joe Robertson retired last October after almost 40 years of service, following a diagnosis of multiple sclerosis. He continues to serve as president, without salary, through July. The OHSU Board of Directors selected Danny Jacobs, M.D., M.P.H., F.A.C.S., to succeed Dr. Robertson following a national search. Dr. Jacobs is currently the executive vice president, provost and dean of the School of Medicine at the University of Texas Medical Branch. Look for a more detailed introduction to Dr. Jacobs in the next issue.

There's plenty Dr. Joe Robertson could boast about – if he were the sort of man who boasted – as he looks back on his remarkable OHSU rise, from ophthalmology resident to the highest level of leadership at Oregon's academic health center. The 12 years of his presidency have been particularly eventful.

There's the transformation of Portland's South Waterfront – with hundreds of millions of dollars in new and under-construction buildings for students, researchers and patients.

There's the successful realization of the Knight Cancer Challenge, which resulted in \$1.2 billion raised for research that may someday change how the world understands and treats cancer.

And there's the myriad other ways OHSU has grown, including adding 1,000 faculty members and \$100 million more in annual research awards since Dr. Robertson became president.

But ask him about the victories of the past dozen years, and he's as likely to talk about clinical and educational partnerships in Klamath Falls and Coos Bay. Or how medical residents do rotations in more than two dozen rural communities throughout Oregon. Or OHSU's collaboration with Columbia Memorial Hospital in Astoria that's helped to bring more than 15 new doctors to the North Coast city.

His presidency is first and foremost about collaboration, Dr. Robertson said. Sometimes that means partnerships with Intel or advanced microscope maker FEI or Nike founder Phil Knight. But it also means less publicized partnerships across Oregon to remind small towns and rural Oregonians that

‘

One of the great benefits of being surrounded by aspiring, bright students is that it's a great antidote for cynicism. You become excited about the future and know we will be in great hands.

– Dr. Joe Robertson

OHSU belongs to them, too.

That's important to Dr. Robertson, who grew up in the rolling hills of rural southern Indiana. “I wanted OHSU to be as relevant in Burns, Jordan Valley or Enterprise as it is in Portland. And I want those citizens to feel that it's their OHSU. And that OHSU is actively working to make their lives better.”

The collaborations and work throughout Oregon became part of what Dr. Robertson calls the “96,000-square-mile campus.” Those collaborations also fit with Dr. Robertson's larger vision and the vision of the OHSU strategic plan adopted the year after he became president in 2006. That plan envisioned OHSU growing and succeeding by working with a range of partners – communities, non-profits, private companies and others.

And there was no better salesman for those ideas, or for OHSU as a whole, than Joe Robertson, said Keith Thomson,

the former Intel executive who chaired the OHSU Board of Directors when Dr. Robertson became president.

“He would talk with legislative leaders and medical people, find out what their needs were,” Thomson said, remarking on Dr. Robertson’s trips throughout Oregon. “He has a natural feel for how to deal with major donors, like Phil Knight, and with the power brokers in Salem. He’s just a very competent, caring individual who meshed well with people.”

At OHSU, Dr. Robertson has been meshing with people for a long time. After completing his residency in 1982, he joined the ophthalmology faculty after a brief stint in private practice, becoming chair of ophthalmology and director of the Casey Eye Institute in 1997, then dean of the School of Medicine in 2003.

He said he often misses his time as a faculty member and chair when he worked with young medical residents and fellows.

“One of the great benefits of being surrounded by aspiring, bright students is that it’s a great antidote for cynicism,” Dr. Robertson said. “I’ve especially noticed this as I’ve gotten older. In any career, there’s a tendency for cynicism to creep into your thought processes, but seeing the talent, commitment and enthusiasm of these students is a great antidote for that. You become excited about the future and know we will be in great hands.”

As president, Dr. Robertson waded into the complexity of reforming the nation’s health care system. OHSU adopted

eight essential principles for health care reform in 2008.

Dr. Robertson also served on the Oregon Health Policy board, the policy-making and oversight body for the Oregon Health Authority and for Oregon’s health care reforms, from the board’s creation in 2009 until last year. He was also a founding member of the board for Health Share of Oregon, the Portland metro area’s largest coordinated care organization.

Whatever his focus, Dr. Robertson remained his passionate but affable self, say those who know him. When describing surprises about the job, for example, Dr. Robertson said he was struck by how much talking he had to do as university president. “Just a lot of talking and talking,” he said, laughing. “I’m a retina surgeon, and I’m an introvert. But as I did it more, I became more comfortable with it.”

He was also surprised by how formally people treated him. “This is Oregon, and we’re an egalitarian, ‘jeans and khakis’ kind of culture, and you’re being addressed as ‘president,’” he said. “I was surprised by how easy it is to lose your approachability.”

He tried to combat that, in part, by encouraging people to address him by his first name. “I get called Joe by a lot of people walking down the hall, and I love that,” he said.

He’s still blown away by those people walking down OHSU hallways. “I was talking to a faculty member this morning, and as I was talking to them, I was in awe of everything they had accomplished. And that’s just one of literally thousands.”

That’s where he finds the most pride at the end of his tenure. Not in buildings and numbers, but in the people who work at OHSU, and how they work together. “I’m most proud of the culture,” he said. “I really am. This is a place where people do value each other and where they will collaborate and share their ideas. At the end of the day, that’s what I’m most proud of.” **B**

OVER THE YEARS

From left, Dr. Robertson as a young faculty member, celebrating Casey Eye’s tenth anniversary and meeting leaders during a visit to Myanmar.



I’ve seen many, many diseases that were untreatable when I started. And we now have a therapy for them.

— Dr. Markus Grompe

The man who created a mouse

MARKUS GROMPE, M.D. R ’87

**RICHARD T. JONES DISTINGUISHED ALUMNUS
SCIENTIST AWARD**

Alongside everything Dr. Markus Grompe has accomplished, there is this: He is the man who created a mouse.

Dr. Grompe is an international pioneer in stem cell and gene therapy research. He identified and cloned a key gene linked to the rare genetic disease Fanconi anemia. And he’s made, and continues to make, major discoveries in the treatment of liver disease. Recently, he and his team have begun focusing on using gene therapy one day to cure diabetes.

But it’s the genetically engineered mouse that he semi-accidentally created 25 years ago that he might be most known for.

He created the transgenic mouse to study a rare disease called tyrosinemia that can cause kidney and liver dysfunction. But the altered mouse ended up being much more valuable: it has a “humanized” liver, which has allowed scientists around the world to use it to study all sorts of metabolic functions,

including how drugs are metabolized by humans.

“This is literally what my career is built on – this knockout mouse,” Dr. Grompe said, proudly showing a photo of himself 24 years ago with one of the first mice.

Dr. Grompe became the first director of the Oregon Stem Cell Center at OHSU in 2004. In 2008, he became director of the Papé Family Pediatric Research Institute at OHSU Doernbecher Children’s Hospital. But he’s always been more than a researcher.

Because of his work, he’s an expert in a range of diseases called “inborn errors of metabolism” – which often come from a defect in a single gene. He uses that knowledge as a Doernbecher physician, helping patients and families who come from throughout Oregon and nearby states for his expertise.

“I would never give that up,” he said. “It’s really part of who I am – that direct interface with patients.”

It’s also exhilarating, he said, to sometimes tell patients that there’s now a treatment for a condition no one had been able to help them with. “I’ve seen many, many diseases that were untreatable when I started,” Dr. Grompe said. “And we now have a therapy for them. Being able to do that for a patient is really satisfying.” **B**

To be perfectly honest, I'm an adrenaline junkie.

– Dr. Terri Schmidt

Emergency responder

TERRI SCHMIDT, R.N., M.D. '85 R '88
ESTHER POHL LOVEJOY LEADERSHIP AWARD

Don't let the "fairy grandmother" glitter on Dr. Terri Schmidt's iPhone case fool you. Yes, fairy grandmother is an indispensable role for her these days – her four grandchildren live within walking distance of her Portland home.

But Dr. Schmidt's life has almost always been about rough-and-tumble action – along with the fairy glitter – as an emergency department nurse, then doctor and disaster medical worker. She's spent a career looking for chaos and working to fix it quickly.


"To be perfectly honest, I'm an adrenaline junkie," Dr. Schmidt said.

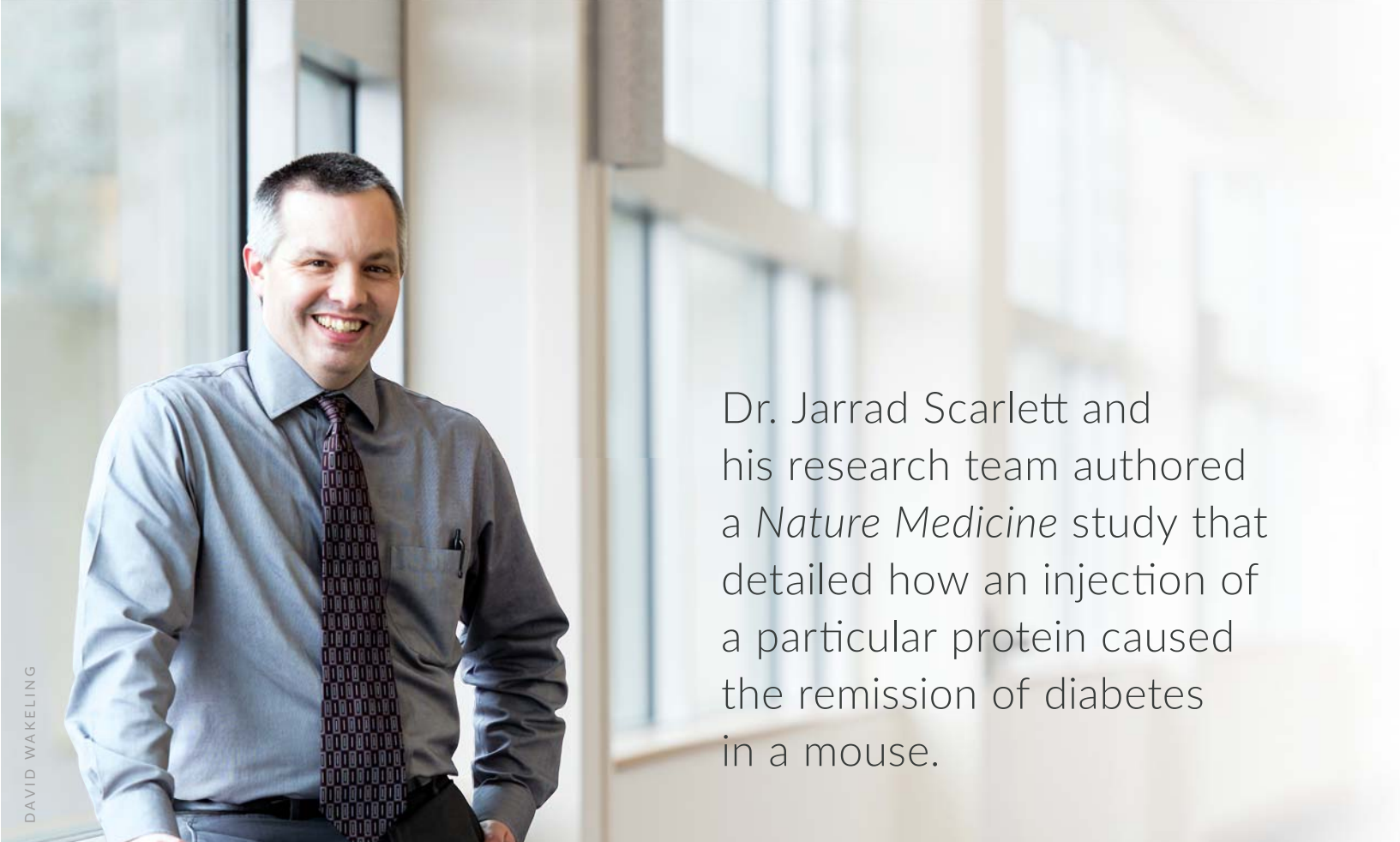
She's semi-retired now after working at OHSU for more than three decades, including as interim chair of the school's Department of Emergency Medicine. But she still responds to disasters as a chief medical officer of the U.S. Department of Health and Human Services' Incident Response Coordination Team.

In August, she deployed to Hurricane Harvey in Texas, followed by Hurricane Maria in Puerto Rico. She was part of the command team that rode out the latter in the hallway of a hotel and woke to a "pre-industrial world," she reported. "There was no power, no Internet, no cell phones. The roads were impassable; ports and the airport were closed."

But with her team, she figured out what they could do to start making things better. Just as she's done throughout her career.

It's not always been about chaos, of course. Drawn to patients approaching end of life, Dr. Schmidt early on became a leader at OHSU in the movement to ensure the health care industry listened to what patients with advanced and progressive illnesses wanted for end-of-life care. Oregon and OHSU's leadership on the issue led to the creation of Physician Orders for Life-Sustaining Treatment. Dr. Schmidt became the first director of the electronic POLST registry, allowing immediate access to patients' preferences.

For herself, Dr. Schmidt said she'd rather "go out with a bang than a whimper." But the purpose of POLST "is not to say this is the right answer, this is the wrong answer, but to honor whatever your preferences are." 



DAVID WAKELING

Dr. Jarrad Scarlett and his research team authored a *Nature Medicine* study that detailed how an injection of a particular protein caused the remission of diabetes in a mouse.

Piecing together the diabetes puzzle

JARRAD SCARLETT, M.D. '09 R '12, PH.D. '09
EARLY CAREER ACHIEVEMENT AWARD

A recurring goal of 41-year-old physician-scientist Dr. Jarrad Scarlett – an extraordinary diabetes researcher at a still-young age – is working with a team to solve complicated puzzles that have significant impact on human health. His career, which includes time as a pediatric gastroenterologist, has also been about something that is both smaller and larger at the same time.


"Research projects don't send me emails at 11 o'clock at night asking for advice or invitations to graduation ceremonies," he said. "Sharing in the medical and personal successes – and failures – of my patients creates a type of bond that one can't find in any grant or manuscript."

"I truly value and cherish the connection that I get to have with patients and their parents – seeing the positive impact that I'm able to have in their lives, to help them grow to understand their disease and to be there step by step as they

grow ... it's a reward that can't fully be put into words."

Dr. Scarlett is currently an assistant professor and scientist at the University of Washington and a pediatric gastroenterologist at Seattle Children's Hospital. His research focuses on how the brain and gastrointestinal system interact to regulate glucose and energy homeostasis. In 2016, he and his research team authored a study published in *Nature Medicine* that detailed how an injection of a particular protein caused the remission of diabetes in a mouse. The research was a major advance in the quest to more effectively treat, or even cure, diabetes.

Mentor Dr. Robert Steiner, a noted neuroendocrinology researcher at UW, called Dr. Scarlett's latest research "arguably paradigm-shifting."

Being a top-flight medical researcher while also seeing patients is demanding, Dr. Scarlett said. Although officially his time is apportioned 75 percent to research and 25 percent to clinical care, he said, only half joking, it's more like 100 percent to research and 30 percent to clinical care. However, it's more than worth it. "I have a passion for both and find [both] to be rewarding," he said. 

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.

1970s

John Stoianoff, M.D. ’71, F.A.C.S., is now retired, but volunteers with the Physician Assistant Program at Pacific University in Forest Grove, Ore., and recently with the MS2 Transition to Clinical Experience Alumni Panel.

John Tongue, M.D. R ’74, will serve a one-year term as president of the OHSU School of Medicine Alumni Association, beginning July 1.

Admiral (Retired) Samuel Lin, M.D. ’75, Ph.D. ’73, has added an adjunct teaching position at Florida Atlantic University to his two existing adjunct appointments at the John A. Burns School of Medicine/Office of Public Health Studies, Honolulu, Hawaii, and at Seattle Pacific University, Seattle, Wash.

▼ **Harry Chen, M.D. ’79 R ’82 R ’83**, and Anne Lezak wrote from Uganda,



BUILDING COMMUNITY

Seven years ago, OHSU graduate students and postdocs founded Women in Science Portland to build a supportive network in the city. Today, the group has grown well beyond OHSU to include hundreds of STEM workers in the Portland area, welcoming anyone interested in the development of women in the sciences. Founding members and board members gathered in March for a photo. From left to right: Laura Stadum, J.D., Astrid Kurniawan, M.Sc., Allison Schaser, Ph.D., Ashley Fritz, Ph.D., Kateri Spinelli, Ph.D. ’12, Ruth Barrett, Ph.D., and Lillian Klug, Ph.D. ’18.

where they are spending a year as Peace Corps volunteers, “We are finding Uganda warm and welcoming, as well as surprising and challenging. We are keeping a blog <https://musingsfrommbarara.wordpress.com>.”

1980s

Karen Gunson, M.D. ’81 R ’85, wrote that she has retired as medical examiner for the State of Oregon, after 32 years of service. “It has been a great honor for me to be the chief medical examiner,” she said. “My career has been very exciting, interesting and rewarding. And, best of all, I feel I have given something back to this state, which has given so much to me.”

2000s

Norah Green Verbout, Ph.D. ’08, will serve as president-elect of the OHSU School of Medicine Alumni Association, beginning July 1.

2010s

► **Nicole Andeen, M.D. ’12**, and **Gabriel Andeen, M.D. ’12, M.P.H. ’12**, joined the faculty in the OHSU School of Medicine. Dr. Nicole Andeen is an

assistant professor of pathology and a renal and surgical pathologist. Dr. Gabriel Andeen is an assistant professor of family medicine.

Richard Bruno, M.D. ’13, M.P.H., is a candidate for Maryland state delegate in District 41 (Northwest Baltimore).

Julia Frey, M.P.A.S. ’13, P.A.-C., is the recipient of the 2018 Karen Whitaker Knapp Service Award. The Knapp Award is presented annually in recognition of a physician assistant whose clinical career reflects a commitment to the rural and medically underserved communities of Oregon.

Josh Erde-Wollheim, M.B.A. ’17, was promoted to manager of network development at Providence St. Joseph Health.



In memoriam

Kenneth Burry, M.D. R ’74, of Beaverton, Ore., died Jan. 26, 2018, at age 75. Dr. Burry was a professor emeritus and former interim chair of obstetrics and gynecology, OHSU School of Medicine.

Michael Miller, M.D. ’60 R ’63, of Portland, Ore., died Feb. 12, 2018, at age 84. Dr. Miller was a professor emeritus of pediatrics, former professor of medicine in the Division of Infectious Diseases and former associate dean for student affairs, OHSU School of Medicine.

James “Jim” Morris, M.D., died Sept. 30, 2017, at age 95. Dr. Morris was a professor emeritus of medicine, OHSU School of Medicine, and section chief of pulmonary and critical care in the V.A. Portland Health Care System.

Richard Bylund, M.D. ’56, of Eugene, Ore., died Feb. 3, 2018, at age 91.

Robert Chiapuzio, M.D. ’56, of Tigard, Ore., died Feb. 17, 2018, at age 91.

Robert Crabill, M.D. ’48, of Tacoma, Wash., died March 4, 2018, at age 94.

Douglas Fisk, M.D. ’66 of Rochester, New York, died Nov. 19, 2017, at age 77.

Carol Grieser, B.S. ’62, of Seattle, Wash., died Dec. 11, 2017, at age 76.

John Guyer, M.D. ’48, of Duarte, Calif., died Dec. 31, 2017, at age 92.

Terry Hansen, M.D. R ’67, of Pocatello, Idaho, died Jan. 9, 2018, at age 82.

Jed Howard, M.D. R ’60, of Houston, Texas, died Nov. 27, 2017, at age 84.

Al Kuykendall, M.D. R ’66, of Boise, Idaho, died Jan. 1, 2018, at age 86.

Ivan Sandoz, M.D. R ’64, of Portland, Ore., died Dec. 7, 2017, at age 84.

Glen Shipley, M.D. ’59, of Beaverton, Ore., died Nov. 25, 2017, at age 83.

Allena Tegarden, B.S. ’93, of Portland, Ore., died Jan. 6, 2018, at age 65.

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

Calendar

Upcoming Events

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

OHSU Convocation and Hooding Ceremony

JUNE 3	1 p.m.	OREGON CONVENTION CENTER, PORTLAND, ORE.
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M.D. Class of 1968 50th Reunion

JUNE 22–24	PORTLAND, ORE.
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For more details about 2018 reunions, visit www.ohsu.edu/som/alumni.

White Coat Ceremony

AUG. 10	10 a.m.–noon	OREGON CONVENTION CENTER, PORTLAND, ORE.
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Continuing Professional Development

Ashland Endocrine Conference

AUG. 2–4	ASHLAND HILLS HOTEL & SUITES, ASHLAND, ORE.
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4th Annual Musculoskeletal Update for Primary Care

SEPT. 6–7	SALEM CONVENTION CENTER, SALEM, ORE.
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13th Annual Regional Hospital Medicine Conference

SEPT. 27–28	SENTINEL HOTEL, PORTLAND, ORE.
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Pacific NW Pediatric Symposium

OCT. 4–6	EMBASSY SUITES WASHINGTON SQUARE, TIGARD, ORE.
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19th Annual Oregon Geriatrics Society Conference

OCT. 5–7	SUNRIVER RESORT, SUNRIVER, ORE.
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42nd Annual Pacific Northwest Update in OB-GYN and Women’s Health

OCT. 18–19	SENTINEL HOTEL, PORTLAND, ORE.
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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 continuing professional development events, visit www.ohsu.edu/som/cme.



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