Support Our HOP Clinics

Help our students make a difference in underserved communities.

The Health Outreach Project clinics aim to prepare medical students to be excellent physicians while providing medical care to underserved populations in our communities. Through our clinics and pop-up community events, residents receive free, high-quality medical care and other services from first- and second-year medical students.

“My involvement with HOP helps me remember what my end goal is and allows me to see the impact I can have as a health care provider.” – Ryan Godinez

“Sometimes when you’re in the thick of med school and mired in books and school work, it is really hard to remember why you’re here. Being involved in HOP has helped remind me of my purpose here.” – Elizabeth Centurion

“That real-world experience was really impactful for me, because now when I’m taught ‘Here are the questions you should ask,’ I know there’s more to a patient interaction than just a script.” – Rohan Sehgal

“I love HOP. It’s what drew me to Drexel specifically. I’m really proud to be part of it.” – Sanjana Venkat

To give to the HOP clinics:
visit giving.drexel.edu/healthoutreachproject
or contact Kate McGovern, kbm56@drexel.edu.

A gift to the HOP clinics supports not only our medical students, but the communities they serve.
FEATURED

CARING TOGETHER
The founders of Caring Together, a program that supports women and children affected by substance use disorder. The program started at MCP in 1990.

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### Meet the Newest Future Members of the Alumni Association

#### MD Program
- **16,687 applicants**
- **303 enrolled**
- **20-36 age range**
- **24 average age**
- **25% are nontraditional students**
- **18% are first-generation college students**
- **70% of them hail from Pennsylvania, New Jersey, Maryland, New York, or California**
- One student each came from: Delaware, Kansas, Louisiana, Missouri, and Utah

#### Graduate School Programs
- **1,690 applicants**
- **341 enrolled**
- **21 are international students representing eight countries**
- **Master’s Students ........ 79%**
- **PhD Students ............. 12%**
- **Certificate Students ........ 9%**
- **75% of them hail from: Pennsylvania, New Jersey, Maryland, New York, California, Massachusetts**
- One student each came from: Alaska, Alabama, Arkansas, Colorado, Iowa, Kansas, Louisiana, Minnesota, Montana, Nebraska, Puerto Rico, Rhode Island, Washington, and Wisconsin
Greetings, fellow alumni!

When I became president of the Board of Directors of the Drexel University College of Medicine Alumni Association nearly two years ago, the death toll from COVID-19 in the U.S. was approaching 100,000 and we were beginning to gauge the enormity of the pandemic’s reach. Now, as the end of my term draws near, that number is nearly nine times higher. The persistence of the pandemic, presently in its third year, continues to impact and challenge us all in many ways. The Alumni Association has not only adapted, but thanks to the resolute commitment of the professional staff of the Office of Alumni Engagement and of our Board of Directors, we are thriving.

The board, which now numbers 26 directors from throughout the country, has met regularly despite the pandemic, as have the board’s four working committees: Awards, Cultivation & Engagement, Finance and Nominating. We continue to recognize and celebrate our alumni with awards, sponsor Drexel medical student projects and panels, and support students’ attendance at (still virtual) conferences. We have also introduced new initiatives. Thanks to the Alumni Association’s support, the Student Cupboard at Queen Lane, a student-run food pantry, has been up and running since the spring of 2021, serving the needs of students with food insecurity.

This winter, the board funded and launched the Alumni Association History Information Project, known more familiarly as AAHIP. The AAHIP, in partnership with Drexel’s Legacy Center Archives & Special Collections, seeks to explore and document the history and activities of the Alumni Associations of the College of Medicine’s predecessor schools. Preliminary archival research to date indicates that the alumni of those schools were strongly committed to their respective institutions and to their graduates. Two recently uncovered examples are most telling. It was the Alumni Association of Woman’s Medical College of Pennsylvania that organized and funded the Hospital and Dispensary of the Alumnae of Woman’s Medical College of Pennsylvania, which opened its doors in October of 1895. The dispensary delivered medical care to poor women and children while providing the College’s graduates medical positions and its students clinical educational opportunities. Forty-four years later, in 1939, the Hahnemann Alumni Association presented Hahnemann Medical College with new laboratories for the Department of Anatomy, with state-of-the-art equipment and the latest features! We are learning from AAHIP that the College’s Alumni Association of today, like the College itself, is heir to a long and committed legacy.

It has been a true honor and privilege to serve the Alumni Association as president of the Board of Directors. The directors are a wonderful and diverse group of physicians and scientists. They represent the best of our schools, and their steadfast dedication to the Alumni Association is manifest by their spirit of volunteerism, their work on the board and their generosity. I am particularly pleased and impressed that during each year of my term as president, 100% of the board participated in the College of Medicine’s Annual Fund! I am further delighted that Edward Siegel, MD ’12, MBA, who is currently chair of the board’s Finance Committee, will be installed as your next president at Alumni Weekend, taking place May 19-22, 2022. Mark your calendar!

All graduates of Hahnemann Medical College, Woman’s Medical College of Pennsylvania, Medical College of Pennsylvania, Hahnemann University, MCP Hahnemann University, and Drexel University College of Medicine are considered Alumni Association members. We welcome your involvement and we are always glad to hear from you. This issue of the Alumni Magazine has information on board service in the pages that follow. You can email medical.alumni@drexel.edu or call 215.895.ALUM (2586) to share updates, send us your questions and let us know what matters to you as an alum. You can check us out on the web at drexel.edu/medicine/alumni, on Facebook or on LinkedIn, and you can connect with alumni and students by signing up for Dragon Network at dragonnetwork.drexel.edu.

Claudia S. Pottel

Claudia S. Pottel, MD, MCP ’84
President, Alumni Association Board of Directors
There and Back Again

MARY SIMMONDS, MD, MCP ’75, of New Cumberland, Pennsylvania
When Mary Simmonds, MD, MCP '75, headed to Philadelphia to study medicine, her eye was on broader horizons. Looking back on a career in hematology and medical oncology that includes more than one historical moment, one could say it has been a story of boundaries explored. In a way, though, those roads have all brought her back to one community: her hometown. As Simmonds puts it, “It’s great how you can be in one place — in this case, in New Cumberland, Pennsylvania — and travel the world.”

Setting Out

Medicine runs generations back in the Simmonds family. Mary’s great-grandparents were pharmacists and founded the Simmonds Pharmacy in Shamokin, Pennsylvania, the same town where her grandfather would practice medicine as a general practitioner. Her father, Henry T. Simmonds Jr., was a radiologist; he and his wife, Harriet Lynn, who was a medical technologist, settled in the Harrisburg area.

Simmonds vividly recalls the precise moment when she knew she would go into medicine. When she was around the age of 12, a school assignment asked her to choose someone to interview about their job, and she chose her father. As she observed him that day, she came to admire his intricate knowledge of medicine. She was impressed that he had “the privilege of that information.”

By the time Simmonds went off to Smith College, from which she would graduate in 1971, she knew medicine was the path for her. “At that time, nationwide, the percentage of women in medical school was 10% — which I’ve often pointed out was better than 2%. I have personally known women physicians who are older than me and were one of very few women in their medical school class. I really take my hat off to those women. They started paving the way, and I suppose I have continued to pave the way.”

In the fall of 1971, Simmonds entered Medical College of Pennsylvania, which had the uncommon trait of being majority women, having just become coed and changed its name from Woman’s Medical College. “I was so excited!” Simmonds says. “That was the key to the rest of my life, to just have a place in medical school. I remember that I didn’t sleep a wink for three nights, just going over and over my notes.”

Following Footsteps and Paving the Way

After graduating from MCP in 1975, Simmonds did her residency in internal medicine at the Geisinger Medical Center in Danville, Pennsylvania. “It was not uncommon for me to be the only woman in the group on rounds,” she recalls.

In addition to the exposure to medicine through her parents, she had been introduced at a young age to Herbert S. Bowman, MD, who was raised in Harrisburg. After his training in hematology he had returned to the area and “was not only a clinician, but also a teacher, a clinical researcher and a wonderful role model,” according to Simmonds. Shadowing Bowman was part of what helped her discover that hematology might be the path for her. After completing her residency in 1978, she went back to Philadelphia for a two-year fellowship in hematology at Thomas Jefferson University, where Bowman had also trained.

Serving the Community

In 1980, Simmonds and her husband, attorney Richard Stewart, came back to central Pennsylvania and settled in her childhood home in New Cumberland. She completed a third year of fellowship in medical oncology at the Hershey Medical Center and then joined the faculty of Penn State College of Medicine.

The Pennsylvania division of the American Cancer Society (ACS) is across the street from the Hershey Medical Center. Simmonds recounts, “One day in 1981, one of my colleagues and I decided to go over there and find out more about the ACS. The next thing I knew, I was asked to be on a committee, and then I become chair of that committee. In 1988, I became the second woman president of the Pennsylvania division of the ACS.” Her leadership only grew from there. “Not too long after that I was asked to be on a national committee, and then to chair that committee. In 2003, I became the first woman president of the national American Cancer Society,” Simmonds says, noting that her time serving the ACS was “a privilege.”

When Simmonds finished her postgraduate training, oncology was just an emerging field. “The average person, even other doctors, thought, ‘How could you be an oncologist?’” Simmonds says. Earlier in the 20th century, she explains, “people didn’t even want to talk about the word ‘cancer.’ One of the reasons that there were few oncologists was that if anybody really sought out treatment, they went to the big city. There weren’t oncologists all around like there are today. It has been a privilege to live through all the progress that has been made in this field.”
Simmonds credits the American Cancer Society with helping to change that scene. As the Society developed, she says, it founded branches all over. “There was a presence in every community, every county, every state.” Higher cancer survival rates are one obvious outcome of this progress. In addition, the symptoms of cancer are being treated more effectively, particularly pain.

Early in her career, Simmonds says, pain as a symptom in cancer patients wasn’t being well addressed, partly due to “lack of knowledge on the part of physicians, and ideas in society that morphine was dangerous.” Simmonds had the opportunity to become involved in clinical research as she transitioned into practicing in the Harrisburg community. In 1990, she worked on clinical trials with transdermal fentanyl, which was later marketed as Duragesic. “It was gratifying to be able to teach other health care professionals how to use this medication effectively.”

“Home and All That Comes With It”
None of Simmonds’ firsts should be surprising given that she was also the first female physician in her hometown of New Cumberland. But in addition to breaking new ground in medicine, the years have presented Simmonds with plenty of opportunities to be involved in her hometown community, in church and local arts and theatre groups. “This is my community, the Harrisburg community,” Simmonds says.

“It’s been good to me, and giving back to it has been a good thing. My mother did volunteer work of her own, and she was a role model for me. My parents also modeled philanthropy.”

Her own philanthropy extends beyond her hometown. With Drexel, Simmonds established the Mary A. Simmonds Endowed Scholarship Fund for female medical students. “This scholarship is a wonderful opportunity to serve my alma mater, and I wish all alumni knew more about how to give back in this way. I think that Drexel has done a very good job in honoring the history and traditions of Woman’s Medical College, Medical College of Pennsylvania and Hahnemann University.”

Simmonds has now lived in the same house since she was 7. In the corner sits her grandfather’s desk, and medical memorabilia from previous generations of medical professionals are sprinkled around the residence. Her grandfather’s old doctor bag made a trip out of the house once more to join Simmonds on stage for her keynote speech at the 2012 Drexel University College of Medicine Scholarship Celebration at Queen Lane. In 2020, Simmonds was named a Distinguished Physician by the Society of Diplomates of Harrisburg. The plaque says, “Thank you for your commitment, dedication and service to our community.” She accepted it with her grandfather’s doctor bag in tow again. “I have had a great career in medicine. It was rich with sharing patients’ challenges with serious illness, teaching others to be more knowledgeable and effective, and advancing the field through clinical research. As I look back now, there’s nothing else I would have wanted to do.”

GET INVOLVED AND GIVE BACK

The Alumni Association encourages alums to volunteer their time and share their wisdom with the next generation of graduates. Here are some ways you can help – often from the comfort of your own home, office or lab.

Speak to Student Specialty Interest Groups
MD students want to hear from people working in the fields they are considering specializing in. You can meet with specialty interest groups over Zoom to share your experience and answer students’ questions.

Be a Discovery Day Judge
Volunteer to serve as a judge for Discovery Day, the College’s annual day of research. You can provide valuable feedback to our trainees about their work and see the kind of research happening at the College of Medicine. This year’s event will take place at the Pennsylvania Convention Center on October 27.

Volunteer at HOP Clinics
Physician mentors are always needed to work alongside students at our Health Outreach Project (HOP) clinics, which support underserved populations in Philadelphia while allowing students to gain valuable clinical skills.

Serve on a Career Exploration Panel
Many alumni have had career journeys that took them to unexpected places or they have chosen out-of-the-box roles from the start. Sharing your experience with students will help broaden their ideas about what is possible after graduation.

Join the Alumni Association Board
The call for nominations for the Alumni Association Board of Directors is ongoing. The board accepts nominations on a rolling basis, so you can nominate yourself or a fellow alum at any time, and your nomination will be voted on at the next meeting. The board meets quarterly, and terms last three years.

If you are interested in any of these opportunities, please contact Nikki Bromberg at mb67@drexel.edu.
MATCHES MADE IN MEDICAL SCHOOL

IN HONOR OF VALENTINE’S DAY, MEET THREE COUPLES WHOSE BONDS WERE FORGED OR STRENGTHENED THROUGH THEIR SHARED EXPERIENCE OF ATTENDING THEIR ALMA MATER.

ASIF ILYAS, MD, MCPPH’01
ERUM ILYAS (KHAN), MD, MCPPH’01

We met during medical school orientation on the Queen Lane Campus. Our last names were close alphabetically, so we were in the same orientation groups. Then we were also on neighboring teams in the gross anatomy lab. It was both enjoyable and helpful to go through medical school together. It was a challenging but fun time and going through medical school together only enhanced our experience, and also improved our performance having each other to support and encourage one another.

Going through medical school and residency together, and now being in practice with a family together, has helped us build a strong foundation of love, support and appreciation for each other’s career and professional responsibilities. Moreover, meeting in medical school and getting married right before graduation has placed Drexel Med in an even more special place in our hearts and minds. We remain loyal and proud alumni of Drexel Med.

RAM A. PATHAK, MD ’12
SWETHA N. PATHAK, MD ’13

We matriculated at Drexel University College of Arts and Sciences in 2005 as part of the BS/MD program, a seven-year combined undergraduate and medical school experience. The curriculum was rigorous at times given the traditional four-year undergraduate time condensed into three years. We feel blessed to have found the support of not only each other, but also a strong and deep community of friends who have become like family over the years. As we transitioned from undergraduate to medical school, we found that though the rigor or our studies intensified, we relied on each other that much more — to study, to de-stress, and to persevere.

We are so thankful for Drexel University and the College of Medicine because without the teachers, professors and clinical advisors we would not have been able to match in our dream specialties of urology and dermatology. I currently serve as an assistant professor at the Mayo Clinic in Jacksonville, Florida, and Swetha is in private practice. We have been blessed with three beautiful children, Aria (age 6), Asha (age 4) and Ava (age 2) and the never-ending love and support of our parents and extended family.

BARBARA SCHINDLER, MD, WMC ’70
ALAN M. SCHINDLER, MD, MCP ’77, PHD

We met on my 19th birthday — Alan was a senior at MIT and I was a premed freshman at Boston University when we began dating. Alan graduated from MIT and went on to Yale, where he got his master’s in physics, returning to Boston and Brandeis University to get his PhD in astrophysics while I completed undergrad. We got married two weeks before I matriculated at Woman’s Medical College. We had our first child, Rebecca, at the end of my third year of medical school. Alan soon decided I was having too much fun in medical school, and he wanted to apply. He took his MCATs the day I went into labor with our second child, Joshua.

Since we did medical school sequentially, I think Alan had the advantage of living through med school with me. I had his support, as well as that of fabulous classmates, going through med school, especially on the days when I came home threatening to quit. His response was “Schindlers don’t quit.” We got to spend hospital time together because I was on site most days and lived only three blocks from the hospital/med school. We had our third child, Benjamin, when I was a junior faculty member and he was a pediatric resident at MCP/St. Christopher’s Hospital for Children.

I think the incredible, supportive relationships we formed at WMC/MCP made it possible to achieve all we have as a family and as physicians. Our daughter Rebecca declared once at the dinner table that she was fed up with all the doctor talk and that she would never marry someone in her own field. She is an archeologist married to another archeologist working in the same academic department and doing their field work together. I guess we were okay role models.

We are interested in meeting more alumni couples! If you’d like to share your story, please contact Adrienne Hovey at akh33@drexel.edu.
The mural wall highlighting Drexel’s rich history, with materials from the Legacy Center Archives and Special Collections.
Drexel University College of Medicine welcomed its inaugural class of 40 first-year medical students to the new College of Medicine at Tower Health Campus in August. The campus, located less than one mile and within walking distance to Reading Hospital, had its grand opening the month prior, with attendees from Drexel, Tower Health and the local Reading community.

A VISION REALIZED
Charles B. Cairns, MD, the Walter H. and Leonore Annenberg Dean and senior vice president of medical affairs, expressed enthusiasm about the impact of the campus on its community and on medical education. “The opening of this campus is so gratifying and solidifies our college’s vision for a truly community-integrated medical college that spans urban, suburban and rural populations,” Cairns said at the grand opening. “This campus will serve as the intersecting point of our high-quality medical education, patient care, research and service missions.”

The building includes state-of-the-art medical education technology, including a Simulation Laboratory and a robust standardized patient program that allows students to practice medical interviewing, physical exams and patient counseling. John Repasch, director of standardized patient (SP), clinical skills and simulation, noted, “SPs can help train students on physical exam maneuvers and provide them with real-time guidance and feedback on their techniques. Thus, students can get hands-on experience with real people in a lower-stakes environment, since none of the SPs are actually sick.” He added that the Simulation Laboratory utilizes a SimMan 3G Plus, which offers heightened realism in scenarios that would be unsafe or impossible for a standardized patient, such as a live birth.

A BUILDING THAT BUILDS CONNECTION
The facility also has a fitness center, library, lounges, game room and café space to enhance student wellness. On the building’s upper floors, large windows and an outdoor seating area offer forest and mountain views. A mural, created by the Legacy Center with materials from its archives and special collections, features images from the College’s legacy institutions, Woman’s Medical College, Medical College of Pennsylvania and Hahnemann University.

“This building and its layout will help the campus to develop community and also encourage our students to make strong connections to faculty, staff and professionals,” said Orcel Kounga, director of admissions and student affairs. Kounga was one of the first administrators hired for the new campus, highlighting the importance of recruiting an inaugural class that would blossom in this environment. “My goal for the West Reading Campus was to recruit a diverse class that will help create a unique identity at the new location,” he said, adding, “I will be working with the team at West Reading to maximize the success of these students in becoming health professionals.”

Davin Evanson, a member of the class of 2025, noted he looks forward to collaborating with his classmates to sharpen various skills they will use as physicians. “One of my goals during my time in medical school is to practice working effectively as part of a medical team,” he said. “Collaborating with my classmates to analyze cases and make diagnosis and treatment decisions will teach me the communication skills and emotional intelligence I’ll need as I work with colleagues, as well as patients and their loved ones.”
OUTSTANDING EDUCATIONAL OPPORTUNITIES

The class of 2025 will study the same curriculum as their peers at Philadelphia’s Queen Lane Campus; Reading Hospital is one of many sites where all Drexel medical students have the opportunity to complete clinical rotations in their last two years of medical school. The hospital, which was recently named one of U.S. News & World Report’s top 10 hospitals in Pennsylvania, is Tower Health’s flagship location and the largest hospital between Philadelphia and Pittsburgh. It has been a key site of clinical education for College of Medicine students for more than 20 years.

Many alumni laud their time at Reading Hospital as among their most valuable educational experiences. Temi Daramola, MD ’21, said, “A friend of mine had done summer research there, and she raved about how amazing the teaching environment is. Once I got to Reading Hospital it affirmed what she said. Not only is this facility amazing, but teaching was just ingrained in the culture.” Nolan Feola, MD ’21, agreed, noting, “My clinical experience at Reading, I can’t brag about it enough, to be honest. I think one of the best decisions I ever made during my four years of medical school was to come to Reading Hospital for a whole year. This is a place where I never felt afraid to ask questions, a place where I never felt afraid to contribute, a place where I felt like my voice was heard in a lot of the different rotations I went through. I think what a lot of people seek out in medical school is a feeling like they’re in a home away from home, and I felt that while I was there.”

Josette Graves, a member of the class of 2025, said she looks forward to learning how to better serve patients from providers at the hospital. “I hope to learn how to effectively bridge gaps in the system as a medical provider,” she said. “I want to be able to advocate for patients with chronic pain and provide resources so they don’t have to struggle finding specialized health care close to home.”

COMMUNITY ENGAGEMENT

Students are not just learning to provide quality health care during their time in medical school. They are also connecting with the surrounding community. During orientation week, the inaugural class took part in a mural painting activity to get to know their community. Students painted a portion of a mural sponsored by the Berks County Suicide Prevention Task Force, ruOK Berks? The 45-foot-tall mural’s theme is “HOPE.” West Reading and the greater Reading area are home to many murals, and local art teacher Michael Miller showed the public art and downtown West Reading to students, who took a walking tour prior to breaking out their paintbrushes.

West Reading is home to a diverse and underserved community, allowing students to engage with patients with varied backgrounds and life experiences. Throughout their time in school, all Drexel medical students participate in community engagement, lectures and reflective discussions. This work prepares them to address social determinants of health, health disparities and trauma-responsive care and to become community-responsive physicians.

After deferring medical school for two years to take on a long-term service project, David Talarico, from the MD program class of 2025, is glad that community engagement will be a major part of his medical education. “I know that I will learn a lot in laboratories and am excited to be back in the classroom again, but I also can’t wait to practice patient interaction through community engagement experiences,” he said. “I’m excited to meet and serve people from different backgrounds.”

Eugene York, MD, serves as course director for the Health Advocacy Practicum (HAP) for the Reading Campus. He is one of the founders of the Street Medicine Program at Reading Hospital, which provides primary and urgent care to people experiencing homelessness in the community. He emphasized the importance of community engagement through HAP early in a medical student’s training. “There is a saying that goes, ‘You cannot teach empathy, but you can learn it.’ Whether it is at the rescue mission, the soup kitchen, the mobile eye clinic, pulmonary testing, the telehealth kiosk or the tent site, students will see the value in caring for individuals in need, an important part of their medical education.”

First-year MD student Alexis Price-Moyer grew up in West Reading and is excited to return as a medical student. She believes studying medicine in the area will provide her with opportunities to work with patients from varied backgrounds, and to learn how their life experiences affect their approach to health care. “Having a medical college here will absolutely change the lives of those that may not be as fortunate to see a physician due to cost, and it gives the younger population a clear view that they have the option to pursue a career in medicine,” she said. “It touches my heart that I will be able to give back to a community that I love and have a deep connection to.”

Regional Vice Dean Karen Restifo, MD, JD, said the community has welcomed its newest members with open arms. During MD program student orientation week, students took a walking tour of West Reading in their white coats and were stopped by local business owners and other residents who wanted to wish the future physicians well. “It’s daunting to start medical school, and for the students to have been embraced by the community this way is a fantastic help,” Restifo said.

A student at orientation receives a T-shirt indicating which Learning Society she belongs to. Learning Societies help new students connect in a smaller group environment.

The incoming students are welcomed by Drexel and Tower Health leaders.

Students working on the ruOK Berks? mural project.
Preceptors: Shaping the Next Generation of Health Care Professionals

Physicians understand the important role clinical experience plays in teaching the joys, realities and challenges of health care in the real world. MD alumni can volunteer to serve as preceptors for graduate nursing students at Drexel. In this role, they will provide direct instruction and supervision to these students during their clinical rotations.

Preceptors are key players in supporting the training of a new generation of nursing professionals. By becoming a clinical preceptor for graduate nursing students, Drexel alumni can help elevate students' knowledge from theoretical learning to lived experience. Beyond an individual student's experience, interdisciplinary mentorship is a key part of the development of high-functioning interprofessional health care teams, which are critical to the delivery of outstanding patient care.

Who Should Volunteer?
Preceptors can be physicians, nurse practitioners or certified nurse midwives in an approved specialty. They must meet the licensure and certification requirements of the state in which they practice and have at least one year of practice experience. In addition, the preceptor must have current board certification.

The ideal candidate is someone who not only meets those criteria, but who enjoys sharing insights with students, who is committed to and knowledgeable about their clinical site and who understands the immense value of health care mentorship.

How to Get Involved
In the coming weeks, graduate nursing students will begin their search for clinical preceptors. This role provides direct instruction and supervision for students during their clinical rotation, and helps to shape their future in health care.

If you are interested in becoming a clinical preceptor, there are two ways to get involved:
- Connect with a student directly on Dragon Network, the University's virtual professional development community. Students will send you a message to find an opportunity that matches their area of interest. Visit dragonnetwork.drexel.edu to get started.
  - Note: During the sign-up process, select “Serving as a clinical preceptor/ making connections to potential preceptors” under the “Topics of Interest” step. If you are already a member of Dragon Network, you can update this section of your profile.
- Contact Amy Maniero, clinical placement manager, at aem367@drexel.edu or call 267.359.5589. All interested alumni are also encouraged sign up for Dragon Network to make a one-to-one connection with a student.

Testimonials
A current nursing student shared, “Walking into my fall clinical rotation, I was extremely nervous and lacking confidence in my skill set and knowledge. Not only were my preceptors kind and compassionate, but their willingness to teach and desire to see me succeed made all the difference. I left that clinical experience with more confidence in my abilities and excited for my future career, and I owe it all to them. Preceptors have the power to make or break a student’s experience and I was truly blessed to find the best.”

A physician alumna who served as a preceptor said, “Having a nurse practitioner student has enhanced the quality of our program in many ways. Students are compassionate and caring, quickly become a part of our multidisciplinary team and provide much-needed help in our care of patients. It is a pleasure to see the growth in their clinical skills and to follow their careers when they graduate.”

For More Information If you have questions about becoming a preceptor, please contact Amy Maniero, clinical placement manager, at aem367@drexel.edu or 267.359.5589. More information is available at drexel.edu/clinical-preceptor.
Healing Through Connections: The Latest in Spinal Cord Injury Research

It’s been more than a quarter-century since a small group of faculty members at the Medical College of Pennsylvania — now Drexel University College of Medicine — built the first institution in the mid-Atlantic dedicated to spinal cord injury research. “[The founders] created a culture of excitement and drive to find new discoveries and celebrate the work that everybody was doing,” says Michele Basso, PhD. “I still try to think that way.”

Today, hundreds of College of Medicine graduates who studied at the Marion Murray Spinal Cord Research Center (co-founder Murray’s name was added to the center’s title after her 2018 passing) have fanned out around the globe. “In a small subfield of neuroscience, [the center] has a lot of important impact,” says Nicholas Au Yong, MD, PhD neuroscience ’11. “It was a special place to grow up.”

These innovators have charted their own paths in the field of spinal cord injury research and treatment, but each has taken a piece of the center along with them. Here are four of their stories, and a look at what’s new in this important field.

By Christina Hernandez Sherwood

The Double Threat

Nicholas Au Yong, a neurosurgeon who specializes in the restoration of function after spinal cord injury, splits his time between bench and bedside. It’s not always an easy balance. “There are economic pressures to be a full-time neurosurgeon,” says Au Yong, who has practiced at Emory Healthcare in Atlanta since 2018. “You need a lot of support and investment to allow you to not have a full-time clinical practice.”

Growing up in a small town in the Poconos as the son of restaurant owners, Au Yong knew he wanted to be a physician-scientist. To that end, he completed Drexel’s MD/PhD program, exploring how spinal cord neurons work together to generate walking behavior with his mentor Michel Lemay, PhD, who is now a professor and interim chair of bioengineering at Temple University College of Engineering and an adjunct professor of neurobiology and anatomy at Drexel. Today Au Yong relishes the chance to bring his perspective as a clinician to the lab while also speaking the same language as his fellow researchers. Au Yong chose to specialize in the neurophysiology of the spinal cord because, he says, despite its huge implications on quality of life, the spinal cord is often overlooked in neuroscience in favor of the brain.

“It’s a combination of the unknown, or the great extent that we still have to learn about spinal cord biology,” Au Yong says, “and the importance and relevance in clinical medicine, that attracts me to spinal cord injury.”

In his lab, Au Yong explores the sympathetic nervous system, and how it affects the neuromuscular junction after spinal cord injury. Specifically, his focus is the new technique of sympathetic innervation of the diaphragm in high cervical tetraplegia patients. His aim? Restore enough function to eventually get these patients, whose injuries high in the spinal cord render them paralyzed from the neck down, off ventilators.

An injured nerve takes a long time to grow — it can only manage about a millimeter a day. But if the muscle the nerve is trying to reach atrophies before the nerve regrows, there is no hope for the patient to recover this lost connection. So, Au Yong’s lab is trying to keep this muscle-nerve interface intact by stimulating the muscle. This will prevent the muscle from atrophying while it waits for the nerve to regrow, thereby expanding the therapeutic window and giving more time for clinical interventions. It allows for options that were previously disregarded because of the narrow time window.

At the same time, Au Yong’s lab is working to amplify the weakened motor signal between the muscle and the nerve. This could give a patient enough force to get off a respirator or have a better cough reflex, or even protect the airway from infection, he says.

The work hasn’t reached the clinic yet, but Au Yong is optimistic. “The hope is that we can, if it works, try something like that in the future,” he says.
The Questioner

Angelo Lepore, who earned his PhD in neuroscience at Drexel in 2006, approaches spinal cord injury treatment by beginning at, well, the beginning. “If we understand what is causing the damage to the nervous system on a very detailed biological level, then we can try to intervene by specifically targeting those things,” says Lepore, director of the Neuroscience graduate program and professor of neuroscience at the Sidney Kimmel Medical College at Thomas Jefferson University. “Each therapy would potentially be directed against a very specific gene or protein.”

Lepore’s lab is among those that have made major progress in understanding the pathogenesis of spinal cord injury by studying animal models. Now, the team is poised to take the next step: using cell transplantation therapy to target spinal cord injury–induced respiratory dysfunction, says Lepore, who completed his PhD research in the lab of Itzhak Fischer, PhD, professor and chair of neurobiology and anatomy at Drexel.

While most spinal cord injury researchers study the use of cell transplantation to replace neurons, Lepore’s lab instead focuses on replacing astrocytes. Astrocytes, among the principal cells of the nervous system, often die or become significantly compromised when the spinal cord is injured. Lepore and his team found that targeting astrocytes alone for cell transplantation can have a significant impact on an animal’s ability to breathe after a spinal cord injury. If that finding can eventually translate into a therapy that helps wean a patient off a ventilator, Lepore says, “that’s huge.”

Lepore’s lab is also considering the best cells to use in this transplantation method. His focus is induced pluripotent stem cells, which have the same near-unlimited proliferation properties of embryonic stem cells, but are less controversial because they can be derived directly from the patient. These cells are taken from the patient’s skin, then manipulated in the lab to become the biological equivalent of embryonic stem cells. Since these cells are autologous — obtained from the same person who is receiving them — there’s no possibility of an immune mismatch.

“With [any] therapy, it’s a combination of the biology,” Lepore says, “and also dealing with the practicalities.”

Axons, the wire-like connections between neurons that help control movement, are another focus of Lepore’s work. Spinal cord injuries are devastating because they cut axons, severing the connection between neurons and preventing certain movement. And when axons in the central nervous system are severed, they don’t regenerate.

Following his own model of starting first with the questions of basic science, Lepore and his team have been working to understand why axons don’t regenerate. It turns out there are proteins in neurons that inhibit axons from regrowing. So, the team moved on to the next question: How do we inhibit the inhibitors?

Using therapies targeting the cellular mechanisms responsible for limiting axon regeneration, Lepore’s work in animal models has shown that respiratory axons can regrow, and even reconnect to their original neuron targets. “These animals [don’t] have complete restoration of their respiratory function,” he says, “but very, very significant restoration of their ability to breathe.”

More animal testing is needed before the therapies potentially move forward into human trials, Lepore says. “Many of these therapies are poised to take the next step. But it takes a long time. It involves lots of people. Clinical trials take years. So I think things will start paying off, but it’s going to be carrying over into the next decade or so.”
In the world of spinal cord injury and recovery, Michele Basso is perhaps best known for her role in creating the Basso, Beattie, Bresnahan (BBB) Locomotor Rating Scale in the mid-1990s. The semi-quantitative, subjective scale operationalized the way scientists measured locomotion — and is still considered the gold standard today.

Basso began her postdoctoral work on 3D kinematics of locomotion after spinal cord injury in the lab of Michael Goldberger, PhD, at MCP, and later shifted her attention to creating locomotor assessments that capture features in animals that are also relevant in human walking. “[Previously] you couldn’t compare your outcomes to anybody else’s,” she says. “There was a lot of drift, even within an individual lab, because what ‘some movement’ meant to one person was different to somebody else.”

The BBB scale, while still using measurements scientists can see with the naked eye, defines terms such as “slight movement” (less than half the range of motion) and “occasional” (happening less than half the time a patient walks). “It still gets done in four minutes,” Basso says. “But now there’s more precision than there ever was before, and we can compare from lab to lab.”

Today, Basso continues to use the BBB scale in her own work at the Ohio State University School of Health Rehabilitation Sciences, where she is director of research. Her labs focus on both the cellular and molecular mechanisms that promote — or stifle — recovery from spinal cord injury, and translational research around exercise and physical therapy.

Basso’s newest project, funded by the Department of Defense, will combine these interests within subacute spinal cord injury. Her lab will study patients’ cervical spinal fluid to determine when the spinal micro-environment is most conducive to physical therapy. In the study, one group of participants will immediately begin a treatment that combines treadmill training with functional electrical stimulation to excite targeted muscles. The other group will start later.

“We think if we can start as early as possible with combination interventions that induce neuroplasticity in the best cellular environment,” Basso says, “then we can get more recovery than we would at later times or with one therapy alone. We are trying to get more bang for our buck.”

The study will mark the first time spinal cord injury researchers use biomarkers to determine the timing of rehabilitation therapy, Basso says. “We don’t know if it’ll work out,” she says. “It’s definitely a high risk. But being the first one to do all these things means that whatever we find is going to be important. That’s the motto in our lab. Even if we’re not successful, it will set the stage for something.”

Basso also sees advocacy as part of her mission as a spinal cord injury researcher. In 2018, she co-authored a paper in the Archives of Physical Medicine and Rehabilitation on the economic impact of activity-based rehabilitation for people with spinal cord injury. At the time, most U.S. health insurers covered just 21 physical therapy sessions per patient annually, Basso says.

But, the study found, when spinal cord injury patients were offered more therapy sessions, they continued to make significant new gains, especially in areas of bowel and bladder function, even at 120 sessions. These functional gains can help protect people with spinal cord injuries from dangerous infections and other side effects.

“We need insurance companies to pay for more therapy sessions earlier after spinal cord injury because it’s cheaper in the long run by preventing repeated hospitalizations,” Basso says. “To change insurance companies’ perspectives, it’s really going to take showing how much money can be saved.”
Lana Zholudeva’s passion for the people of the spinal cord injury field — both her colleagues and the patients she strives to serve — started when she was working toward her PhD in the lab of Michael Lane, PhD, associate professor of neurobiology and anatomy at Drexel. “He not only interacts with people with spinal cord injury, but he introduces his students to them and to the big-name scientists,” says Zholudeva, who earned her PhD in neuroscience from Drexel in 2018. “You become part of the community from early on.”

Zholudeva’s PhD project focused on V2a interneurons, spinal cells that play an important role in motor control. “There were lots of ways we could take the project,” she says. “For me, it’s coming back to that clinical perspective and seeing how we can make this discovery part of a therapy. Can we make these cells in vitro? We hypothesize that putting [V2as] back into the injured spinal cord will further enhance recovery.” The results from Zholudeva’s project suggested this technique contributed to increased recovery of the respiratory circuit, meaning some of the animal subjects breathed better.

When it came time to find a postdoctoral position, Zholudeva looked for an institution that would help her translate her PhD findings into, eventually, a treatment for people. She notes that such a shift from bench to bedside — and perhaps back again — is par for the course in spinal cord injury work. “This trajectory is flexible,” she says. “Whatever part of the translational pathway interests you, you’ll have a home in this field.”

Zholudeva found her new home at the Gladstone Institutes in San Francisco, where she works in a lab that studies V2a interneurons derived from human stem cells. “Rather than just answering the biological questions,” she says, “it’s going to put me closer to that clinical thought process. What is it about human stem cells that we need to consider when we’re trying to make cellular therapeutics?”

Zholudeva also continues to interact with patients directly, speaking recently at a virtual symposium held by the advocacy group Unite 2 Fight Paralysis. “The perspective from someone who has an injury is incredibly important,” she says. “It truly gives you this inspiration when you’re at the bench and your experiment isn’t working.”

As difficult as it can be to have these conversations, Zholudeva says she appreciates hearing the lived experiences. “I do think about the injured person, the person having trouble breathing or who can’t walk or do the simple things we often take for granted,” she says. “Anyone can have a spinal cord injury at any time. It’s not a genetic predisposition. It’s not something you can take a pill for or prevent... I hope whatever discoveries I make or contribute to ultimately do help people.”
Thanks to a $2.6 million, five-year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA), the Caring Together program and its medical director, Barbara Schindler, MD, WMC ’70, will be better able to treat substance use disorders across the lifespan.

The grant will allow Caring Together to expand its network of peer support specialists and its community screening for substance use disorder, as well as continuing its decades-long work to help women and their children engage in and sustain their recovery.

Caring Together was founded in 1990 by Schindler and colleagues at the Medical College of Pennsylvania (MCP). SAMHSA grant funds helped launch the program, which has continued to benefit many times over the years from the organization’s support. The initial grant was made possible by Schindler’s receipt of the Mary DeWitt Petit Fellowship in 1987. The $10,000 award, originally established jointly by the Trust Fund of the Alumnae/i Association of WMC/MCP and the estate of Mary DeWitt Pettit, MD — a longtime chair of MCP’s Department of Obstetrics and Gynecology — supports the research of junior female faculty members. Schindler says that the data collected using those funds were the foundation of her first SAMHSA grant application.

An Urgent Need

The program, initially slated to last just three years, was first launched to address the epidemic of babies being born to women with substance use disorder. A 1989 study of Philadelphia hospitals noted that between 6 and 25 percent of their newborns were known to have been exposed to cocaine in utero, putting them at risk for premature birth, birth defects and sudden infant death syndrome, among other conditions.

In addition to Schindler, the program founders included longtime MCP faculty member Sonia Imaizumi, MD, Ann Honebrink, MD, MCP ’81, and May-Ange Ntoso, MD, who completed her obstetrics and gynecology residency at Hahnemann University Hospital. Trude Haecker, MD, MCP ’80, assisted by working in the pediatric clinic caring for the babies of the women in the program at the outset.

“We all agreed that something needed to be done,” says Schindler, who is also a professor of psychiatry and pediatrics at Drexel University College of Medicine. “So many babies were being born prematurely, and they were often in the NICU. Some moms came in with preeclampsia. Some were agitated and depressed because they were withdrawing from cocaine. There were some maternal deaths due to placental abruption. Everyone was concerned about where we were going to send these babies while waiting for their moms to take them home.”

After collecting preliminary data, Schindler and her colleagues developed the idea for a

Trude Haecker, MD, MCP ’80, (left) and nurse practitioner Martha Cockerill check on a baby in the Caring Together program. This photo appeared in the Fall 1990 MCP Alumnae/i Magazine.
A comprehensive program that would provide all-inclusive care for these moms and their babies. It would include pediatrics, obstetrics and gynecology, and primary care, as well as behavioral health, because there are often mental health issues related to substance abuse.

“Drs. Honebrink, Ntoso, Imaizumi and I sat around my kitchen table to put together a plan,” recalls Schindler. “We submitted it to the National Institutes of Drug Abuse three times before we were approved for funding. But this was at the height of the AIDS epidemic and we got a call from NIDA saying that they couldn’t fund us after all because all their money had been moved to AIDS research. They suggested that we go to SAMSHA instead. We had only 10 days to turn this proposal around. Because we had such a tight deadline, we couldn’t rely on the mail to get it there in time. So we personally drove it down to SAMSHA offices in Bethesda and put it in the drop box the day it was due.”

SAMSHA approved funding of $425,000 per year for three years. “It seemed like an enormous amount of money. Even though we had laid out very clearly what we were going to do with the money, it was still overwhelming,” relates Schindler.

Schindler and her colleagues met with Dr. Robert Kaye, MCP’s former chair of pediatrics, to discuss it. “He was a very wise and wonderful man,” says Schindler. “He said, ‘I just want you to sit down and catch your breath and think about this — if you keep two babies out of the NICU, you will have saved the health care system $425,000. Over three years, if you save six babies from a NICU admission, you will have saved the health care system all that money.’ That was a very powerful statement that helped us keep things in perspective.”

Schindler also recalls working with her co-founders to come up with a good name for the program. “I think we found the perfect name because Caring Together totally describes the culture of the program. Our staff is a team caring together for all the women in the program. But the women care for each other also. Those who are more established in the program take under their wings new women who are just joining.”

30 Years Later
Today, Caring Together utilizes a patient-centered, multidisciplinary approach, providing medication-assisted treatment, addiction counseling and trauma-informed care, and actively treating patients’ co-occurring psychiatric disorders.

Schindler says that grant support from organizations like SAMHSA helps the program to maintain services that are not covered by patients’ insurance. The new grant will help maintain and expand Caring Together’s roster of peer support specialists, whose own experience with substance use disorder and recovery guide program participants in their processes. To connect with more young people and their families, peer specialists will work in the waiting rooms and with the staff of St. Christopher’s Hospital for Children and at Drexel University’s student health facility, when COVID-19 protocols allow it.

Additionally, the SAMHSA grant will help Caring Together focus on family reunification in circumstances where a family has been separated due to a parent’s substance use disorder. Grant funds will support the program’s continued collaboration with students and faculty in the Drexel University College of Nursing and Health Professions to provide family therapy and work with Caring Together participants toward the goal of reunification.

Schindler and her colleagues still provide psychiatric care and medication-assisted treatment to many program graduates; Schindler says it has been powerful to maintain relationships with participants who graduated from Caring Together’s core program 10 or 15 years ago. “It’s very gratifying, because for some of our most successful participants, their connection to the program wasn’t easily developed — but they finally connected and were successful in their recovery.”

As part of the SAMHSA grants, Caring Together has played a significant role in educating current and future medical practitioners in the care of patients with substance use disorders. The grants have supported efforts to create novel open-access online educational programs to train practitioners in screening for substance use disorders, providing medication-assisted treatment and managing pain without opioids. Caring Together also offers onsite clinical training for first- and fourth-year medical students, psychiatric nurse practitioner students, psychiatric and family medicine residents, and master’s-level counseling and family therapy students. In addition, the program provides curricular content for second- and third-year medical students and CME lectures to practicing clinicians.

Sonia Imaizumi, MD, and addictions counselor Linda Ann Grier work with a child in Caring Together’s multipurpose room. This image appeared in MCP’s Internal Journal, February 1991.
WHEN THE DOCTOR BECOMES THE PATIENT

ENDURING PERSONAL MEDICAL CHALLENGES, THREE ALUMNI DEVELOP A NEW APPRECIATION FOR THEIR RESPECTIVE FIELDS

By Elisa Ludwig
SAVED BY INGENUITY

Three years ago, then-80-year-old Robert Ersek, MD, HU ’66, boarded a plane with his girlfriend, anticipating several days of vacation ahead. As they lugged their carry-ons up the aisle, Ersek suddenly collapsed.

A woman who was a nurse emerged from the crowd and immediately started performing CPR on Ersek, who had turned blue. An aide arrived to administer a defibrillator. On the second zap, Ersek started to regain color.

An ambulance whisked him to a nearby hospital where he was admitted to the cardiac unit.

“They ran some blood tests and did a cardiac catheterization,” he says. “They saw that I had an 80 percent blockage of my anterior descendant cardiac artery.”

The doctor gave Ersek a stent. Had Ersek been conscious, he would have told the medical team that he himself had invented and patented the first intravascular stent during his residency at University of Minnesota in 1968.

But Ersek was not conscious — he was intubated and closely monitored for three days while his family discussed his uncertain outlook and their next steps. Years earlier, following the death of his wife, Ersek had amended his living will to include a DNR order.

“Back then, I said, ‘I’ve had a wonderful life with 52 years of marriage, six grandchildren and travel all over the world, as well as many wonderful successes. I don’t want to spend my last days hooked up to a bunch of machines. If I’m not going to get to 90 percent recovery, just let me go.’”

Luckily, a cardiac enzyme study came back showing no damage to the heart whatsoever. When Ersek regained consciousness, he was sent home. He completed a month of cardiac rehabilitation and was given a comatus mentis test to see if he had lost cognitive function during the incident.

“At giving me the third part of the test, the woman said, ‘You’re just fine, a highly functioning 80-year-old. So I have had a complete recovery. You could even say I saved my own life — 50 years earlier.’”

In total, Ersek accrued 34 patents over the course of his career. And though he initially planned to become a cardiac surgeon, he changed tracks after serving as an Air Force general surgeon at Dover Base, and went on to become a highly successful plastic surgeon who also founded nine companies. He continues to see patients today.

Months after his heart attack, Ersek got his vacation, a trip to the Austrian Alps where he donned his skis and went down one of the toughest slopes. He has since changed his DNR order.

HEALING THROUGH GRATITUDE

In November 2020, 53-year-old pulmonologist Sean Devine, MD, MCPPH ’98, contracted COVID-19. Just a few months later, the vaccine would be made available to health care workers, but with no antibody protection, Devine was vulnerable to the novel virus that had impacted so many of his patients. After four or five days of low-grade illness, he woke on the morning of November 13 short of breath and unable to think clearly.

“I noticed that my skin was somewhat blue and when I checked them, my oxygen saturation levels were in the 70s,” Devine says. “I called my wife, who had left for work, and said, ‘You need to take me to the hospital.’”

Devine understood the seriousness of his condition and made sure his affairs were in order when he left the house. He barely made it to the emergency room, where aides helped him into a bed.

Two days later, Devine was placed on a ventilator and subsequently treated with extracorporeal membrane oxygenation, but his condition didn’t improve. Unbeknownst to him at the time, his oldest daughter had also contracted COVID-19 and was hospitalized three floors below. She made a full recovery and was sent home, but Devine continued to decline. After three weeks in the hospital, Devine’s family was told that the staff would make comfort measures. Unwilling to accept this outcome, Devine’s wife frantically began making inquiries about lung transplants, a then-emerging treatment for COVID-related lung disease. In fact, until summer of 2020, double lung transplants were not an option for COVID-19 patients.

University of Florida was one of the few places in the country offering the experimental treatment, and specialists there agreed to see Devine.

“Two weeks before I got sick, I had said to my daughters that I wanted us to go to Florida during the winter for a week. Well, it wasn’t a week — it was six months, and I got a private plane, too. Of course, I don’t remember it!”

On December 14, Devine was flown to Gainesville. Paralyzed from deconditioning, he communicated through tongue movements, which demonstrated that he was neurologically intact — an important indication for the surgery. Ten days later, physical and occupational therapists started working with Devine to improve his ability to move. It was easy for him to comply with orders, but he says the most difficult part about being the patient was knowing what could go wrong, both during and in the weeks after surgery, and how critical it was to get the transplant as quickly as possible.

“After several weeks, I was able to get out of bed, with great assistance. But the transplant service would not list...
me for a transplant until I could demonstrate that I could walk a significant distance,” he says.

By January, Devine accomplished the task. After a few dry runs, a suitable set of lungs became available in early February. The 11-hour surgery went smoothly. More challenging, Devine says, was the rehab that followed, starting three days later. By the time he was taken off the ventilator and the tracheostomy was removed, he weighed 105 pounds, down from 145.

In April he was discharged, and he returned home to his wife and three high-school-aged daughters in Philadelphia in May. Devine continues to receive physical therapy for four hours a week. He went back to work full time in August.

“It has certainly affected my lifestyle, and I have had to alter my career to an extent. I still practice medicine but my days of doing procedures are over. I have to be careful about contracting any illness, so I mostly work via telemedicine. I went into this profession to help take care of people, and I’m not going to get out of it because of the risks now. I just need to take the proper precautions.”

Still, Devine remains remarkably optimistic, and his positive point of view has only been reinforced by all that he has endured. He feels more sympathy for his patients now, he says, and he has a deeper conviction about the need for patient advocacy.

“You really need someone there to make sure nothing falls through the cracks and to assimilate all the information.”

In the meantime, he has a renewed sense of purpose, in both his work life and his family life.

“Six hours after my transplant, my daughter was sending me messages that she needed help with a school project, which I was very happy to do.”

**A SELF-DIAGNOSIS AND CARE FROM HER OWN DEPARTMENT**

In 1977, medical oncologist Mary Raab, MD, WMC ’68, and her late husband, Spencer Raab, MD, were recruited to Greenville, North Carolina, to help launch oncology services at the new East Carolina University School of Medicine.

“The two of us worked very diligently to establish oncology in Greenville. At the time, people had to travel at least 50 to 100 miles to get radiation or chemotherapy, and many did not have the resources to do so,” she says.

“I was shocked at how many patients presented late in their illness. Then, because we saw how difficult it was for many patients to get here, we worked to expand outreach clinics around eastern North Carolina.”

Over the next four decades, Raab served as a full-time staff physician, teaching residents and medical students, and seeing patients in her own clinic. After Spencer’s death in 1993, she married radiologist William McConnell, MD. Together they continued to improve care for patients in North Carolina, establishing an American Cancer Society Hope Lodge in Greenville, providing lodging and support to patients and their caregivers.

Then in 2002, at age 60, she discovered a lump in her own breast.

“I am a strong advocate for the breast self-exam. I had a mammogram in October, which was totally normal, and I did yearly mammograms. It’s important to get those screenings done. But they were normal. In February, I was doing my self-exam when I noticed the lump.”

Raab had the mammogram redone and it still read as normal, but as a seasoned oncologist she was not content to accept the result.

“Now this was back before they did the new 3-D mammograms, and they didn’t do breast MRIs at that point. But they did do an ultrasound and they saw that it was suspicious.”

Raab visited a breast surgeon in her department, who conducted a biopsy. It was inconclusive, so she opted for a lumpectomy, which finally gave her a diagnosis: invasive lobular cancer. Because it was a small tumor, she was placed on hormonal therapy and underwent six weeks of radiation treatment, continuing to work every day, as she was lucky to tolerate both well.

That she even had the option of world-class treatment in her hometown was largely due to Raab’s own work with her husband, laying the foundation for the Leo Jenkins Cancer Center.

“The area continues to be pretty rural, but it has changed significantly over the years, and we now have a tremendous hospital and radiation therapy, all the things that we did not have back in the day: a full complement of specialists, an excellent oncology surgeon.”

While she did have some cumulative side effects that include osteoporosis worsened by the hormonal treatment and heart damage from the radiation, Raab has been cancer free for 20 years. Now retired, she says that the experience taught her to relate differently to her patients in the last years of her practice.

“I always tried to be empathetic as a physician, but being a patient yourself teaches you to approach your own patients with greater humanity,” Raab says. “Having had breast cancer and having to go through the scans and uncertainty gave me a greater awareness for the emotional journey. There’s a difference between care and caring, and I wanted my patients to know they were more than just a diagnosis.”
’70s

Barbara Schindler, MD, WMC ’70, received the 2021 Distinguished Service Award from the Liaison Committee on Medical Education. The award recognizes individuals “whose efforts make the LCME peer review process possible and who have had a direct impact on the excellence of medical education in the United States.”

Len Lichtenfeld, MD, HU ’71, former interim and deputy chief medical officer at the American Cancer Society, was a guest on MedPage Today’s podcast, “Anamnesis: Medical Storytellers,” on which he discussed his career working as a medical editor at the American Cancer Society, including rewriting the society’s guidelines after the Affordable Care Act was passed.

Marc Reynolds, MD, HU ’74, a family medicine specialist in Fallon, Nevada, was quoted in an Associated Press article, “Mobile Vaccination Units Hit Tiny U.S. Towns to Boost Immunity.” Reynolds has volunteered at a mobile clinic in Fallon, his hometown, and at the state prison in Lovelock, Nevada.

Marlene Wolf, MD, MCP ’77, wrote a book, Serenity View: Poems and Images from the Blue Ridge Mountains. The book is a combination poetry collection and travel guide. Wolf is a retired family physician and an adjunct assistant professor in precision nutrition at the Keiser University College of Chiropractic Medicine. She is also a freelance writer whose articles and poems appear monthly in several publications.

Stephen Klasko, MD, HU ’78, former president and CEO of Thomas Jefferson University Hospital, was quoted in a Philadelphia Business Journal article about Jefferson Health Sidney Kimmel Cancer Center’s launch of a mobile cancer screening program. He was also quoted in a Philadelphia Inquirer article about Jefferson’s partnership with Novartis Pharmaceuticals. They are planning on collaborating for a three-year, $3 million “Closing the Gap” program, an effort to improve cardiovascular health in poor neighborhoods in North and South Philadelphia. Klasko was also quoted in a Philadelphia Business Journal article on Einstein Healthcare Network’s merger with Jefferson Health, and he was featured in Philadelphia magazine’s list of “The 76 Most Influential People in Philadelphia: Power Shifts.”

’80s

Scott Kolander, MD, HU ’82; Internal Medicine Residency, HU ’85, was ranked first nationally in a patient satisfaction survey by MedStat, a medical technology firm that helps physician practices measure the patient experience. Kolander is board certified in geriatric medicine and internal medicine. He sees patients at Capital Health Primary Care — Mountain View in Ewing, New Jersey.

Richard Snyder, MD, MCP ’82, was included in the Philadelphia Business Journal’s Leaders in Health Care, which honors medical professionals from a range of sectors and medical facilities, including hospitals, pharmacies, health insurance providers and urgent care clinics. Snyder is chief medical officer at Independence Blue Cross.

Victor F. Tapson, MD, HU ’82, a pulmonologist, was appointed vice president of medical affairs at Inari Medical Inc., a medical device company focused on developing products to treat patients suffering from venous diseases. Tapson previously practiced at Cedars-Sinai Medical Center in Los Angeles, where he started the first Pulmonary Embolism Response Team (PERT) on the West Coast. He has been an officer and board member of the PERT Consortium, serving as its first elected president.

Loretta L. Christensen, MD, HU ’84, a general surgeon, was named the new chief medical officer of the Indian Health Service. In this capacity, Christensen, a member of the Navajo Nation, will lead experts on medical and public health topics, and she will be a guide for the IHS Office of the Director and staff on Native American and Alaska Native health care policies and issues. Christensen is board certified in general surgery and is a fellow of the American College of Surgeons.

Robert Frank, MD, HU ’85, was appointed chief medical officer of Pipeline Health System. Frank is a board-certified cardiothoracic surgeon.

Donald M. Yealy, MD, MCP ’85, chief medical officer at the University of Pittsburgh School of Medicine, was quoted in a Philadelphia Inquirer article about the Food and Drug Administration granting full approval for the COVID-19 vaccine made by Pfizer Inc. and BioNTech SE. Yealy was also quoted in a Philadelphia Inquirer article about how the majority of Pennsylvanians who contracted the coronavirus in 2021 were not vaccinated.

Joseph Hulihan Jr., MD, HU ’86; Neurology Residency, HU ’90, serves as chief medical officer at Marinus Pharmaceuticals, which recently filed a new drug application with the Food and Drug Administration seeking to market ganaxolone as a treatment for seizures associated with a rare type of epilepsy.

David Shulkin, MD, MCP ’86; HD ’19, was appointed chairman of the board of directors of MedMinder Systems Inc., a medication adherence and connected care solution for elderly and polypharmacy patients. Shulkin previously served as U.S. Secretary of Veterans Affairs and Undersecretary of Veterans Affairs for Health in the Trump and Obama administrations, respectively. Shulkin has been named one of the Top 100 Physician Leaders of Hospitals and Health Systems by Becker’s Hospital Review and one of the 50 Most Influential Physician Executives in the Country by Modern Healthcare and Modern Physician. Shulkin is a board member of the Deerfield Healthcare Technology Acquisitions Corp.

Sandra Stratford, MD, HU ’86, was a participant on the “Digital Health Adoption: Barriers and Regulatory Challenges” panel for the Digital Health Adoption Symposium hosted by Human Interface Technology Lab. Stratford is a corporate occupational health executive specializing in employee health and well-being. As the former chief medical officer and head of global health resources for the Raytheon Company, she led its health centers, health policy and compliance, crisis management and health risk communication, international case management, and business support.
Stephen A. Chidyllo, MD, HU ‘87, served as a volunteer physician vaccinator for the Jersey Shore University Medical Center during the height of the COVID-19 vaccine rollout. Chidyllo is the former chief of plastic surgery at Jersey Shore University Medical Center, Hackensack Meridian Health Network and a former associate clinical professor of surgery at Drexel University College of Medicine.

Patrick Hwu, MD, MCP ‘87, was selected to participate in the University of South Florida Presidential Search Committee to help identify candidates for the university’s next president. Hwu is a tumor immunologist and has been president and CEO of Moffitt Cancer Center since November 2020. He is also the president of the Society for Immunotherapy of Cancer and a scientific advisory board member at Immatics, a Germany-based cancer research center.

James D. Winkler, PhD pharmacology, MCP ‘87, was appointed chief scientific officer and chief development officer at OnKure Inc., a clinical-stage biopharmaceutical company pioneering a novel class-1 selective histone deacetylase inhibitor for the treatment of solid tumor cancers.

Christopher Olivia, MD, HU ‘88, CEO of Orthopedic Foundation/Rothman Institute, was quoted in a Philadelphia Business Journal article about Rothman’s new orthopedic walk-in clinic in Center City.

Miguel Regueiro, MD, HU ‘92, was named chair of Cleveland Clinic’s Digestive Disease & Surgery Institute (DDSI). Regueiro previously served as chair of the Department of Gastroenterology, Hepatology and Nutrition, and vice chair of DDSI. He is also the Pier C. and Renee A. Borra Family Endowed Chair and is a professor of medicine at Cleveland Clinic Lerner College of Medicine.

Susan Schneider, MD, MCP ‘92, was appointed chief medical officer at Applied Genetic Technologies Corporation in November 2021. Schneider has over 15 years of experience as an executive and medical professional at biotechnology companies with early- and late-stage ophthalmic development programs in multiple disease indications. From September 2020 to October 2021, she was senior vice president of clinical development, ophthalmology at Ji Xing Pharmaceuticals, a biotechnology company.

Maria Fasano, MD, HU ‘93, a pathologist, has been named medical director of laboratory services at Evangelical Community Hospital. She will also continue her role as an on-staff pathologist at the hospital.

Hugo Vargas, MD, HU ’91; MS applied human physiology, HU ’89, participated in a Key Opinion Leader webinar hosted by Sequana Medical. The topic was “The Impact of Liver Ascites on Patients and Healthcare Systems and the Potential of Alfapump Therapy in NASH-related Ascites.” Vargas is a consultant in the Division of Gastroenterology and Hepatology, Department of Medicine at the Mayo Clinic and the director of research at the Mayo Clinic School of Medicine-Arizona.

Kathleen C. Kobashi, MD, HU ’92, joined the Houston Methodist Hospital as the chair of the Department of Urology.

Maria Fasano, MD, HU ’93, a pathologist, has been named medical director of laboratory services at Evangelical Community Hospital. She will also continue her role as an on-staff pathologist at the hospital.

Keeping With Tradition

Michael Addonizio, MD, HU ’93 (third from left), Jack Lee, MD, HU ’93 [center], Elmer G. Pinzon, MD, HU ’94, MPH (third from right), and non-alumni friends kept alive their tradition of watching college football and reminisce about their time at Hahnemann University. This year they met in Lexington, Kentucky, for the University of Kentucky Wildcats versus Florida Gators football game on October 2, 2021. Even the Gators’ 13-20 loss to the Wildcats couldn’t dampen the group’s spirits.
Kathleen Russo, MD, MCP ‘94, chief medical officer of Carolina HealthSpan, acquired two North Carolina hormone practices in Charlotte and Huntersville. An integrative and regenerative medicine practitioner, Russo previously served as president of the medical staff at Novant Rowan Regional Medical Center and president of the Executive Committee. She has also served as a member of the board of directors of Novant Rowan Regional Medical Center.

George Tsai, MD, HU ’94, a surgeon at Bayfront Health Medical Group in Brooksville, Florida, was highlighted in a board of joint reconstruction and oncology and is on the editorial review board of The Journal of Arthroplasty, The Journal of Knee Surgery, and The Journal of Hip Surgery and Orthopedics. He is also chair of the board for Cold Plasma Medical Technologies and has been CEO of many start-up companies.

David Jacofsky, MD, MCP ’96, was featured in an article titled “5 Fast Facts About the CORE Institute’s CEO” in Becker’s Spine Review. Jacofsky is a recognized expert in complex adult joint reconstruction and oncology and is on the editorial review board of The Journal of Arthroplasty, The Journal of Knee Surgery, and The Journal of Hip Surgery and Orthopedics.

Kathleen R. Kozak, MD, MCP ’96, was a guest on Hawaii Public Radio’s “The Conversation” to answer caller questions on COVID-19. Kozak is an internist specializing in preventive health, travel medicine, women’s health and wellness at Straub Clinic and Hospital in Honolulu, Hawaii. She is also the host of the “The Body Show” on Hawaii Public Radio.

Michael Cackovic, MD, HU ’97, a maternal-fetal medicine specialist at Ohio State University’s Wexner Medical Center, was quoted in a Philadelphia Inquirer article about Texas’s new abortion law.

Maryann Lauletta, MD, HU ’98, was appointed chief medical officer at Dina, a care-at-home platform and network that supports the health care industry’s transition to virtual and in-home care. Lauletta will work out of the company’s Philadelphia hub. She most recently served as medical director for Inspira Health’s Medicare PACE/LIFE program, a full risk-bearing model providing all-inclusive care for the elderly, and as an Accountable Care Organization physician champion for the Inspira Network.

David Hartman, MD, MCPHU ’99, a plastic surgeon, joined the Haute Beauty Network representing the northeast Ohio market. He is a sole practitioner at Fine Arts Skin & Laser Facial Plastic Surgery in Dover, Ohio. Haute Beauty is a section of Haute Living magazine that covers the latest advancements in beauty and wellness. Hartman is board certified by both the American Board of Facial Plastic & Reconstructive Surgery and the American Board of Otolaryngology – Head & Neck Surgery. He is also a fellow of the American College of Surgeons.

Genevieve Minick, MD, MCPHU ’99, a primary care physician at Crozer Health, was quoted in a Philadelphia Inquirer article about her success in persuading about three-quarters of vaccine-reluctant patients she’s seen at her Drexel Hill office in recent weeks to get the COVID-19 vaccine.

Tiffany Sanders, MD, MCPHU ’99; Internal Medicine Residency, MCPHU, a board-certified geriatrician, joined RVNAhealth in Ridgefield, Connecticut, as hospice medical director.

David Damsker, MD, MCPHU ’00, medical director of the Bucks County Health Department, was quoted in a Philadelphia Inquirer article about COVID-19 vaccination rates in various counties in eastern Pennsylvania. He was also mentioned in a Philadelphia Inquirer article about plans for Bucks County schools to reopen during the pandemic.

Ryan K. Lee, MD, MCPHU ’00, MBA, was appointed chair of the Department of Radiology at Einstein Healthcare Network. Prior to this appointment, Lee served as vice chair of quality and safety, section chief of neuroradiology, and magnetic resonance imaging director for the Department of Radiology for Einstein Healthcare Network. He is an associate professor of radiology at the Sidney Kimmel College at Thomas Jefferson University.

Judette Louis, MD, MCPHU ’00, chair of the University of South Florida College of Medicine Department of Obstetrics and Gynecology, was quoted in a Seattle Times article about a rise in hospitalizations of pregnant people with COVID-19.

Eric Matkowski, VMD; MLAS ’00, joined the veterinary staff of Indy Veterinary Care at their Northern Liberties location in Philadelphia.

Tony Reed, MD, MCPHU ’00, chief medical officer at Temple University Health System, was quoted in a Philadelphia Inquirer article about a report on racial inclusivity in hospitals and the primary care system.

Bashir Zikria, MD, MCPHU ’00; MSc medical biochemistry, HU ’95, became chief of surgery at the health care company Aspetar, according to a LinkedIn update. Previously, Zikria was a team physician for the Baltimore Orioles.

John M. Davidyock, MD ’01, an internist, joined Winter Haven Hospital and Winter Haven Women’s Hospital as chief medical officer. Davidyock previously served as the associate chief medical officer for AdventHealth’s Central Florida Division in Orlando. He has been a senior fellow in hospital medicine since 2012.

Katie E. McPeak, MD ’01, medical director of health equity at Children’s Hospital of Philadelphia, was included in Philadelphia Business Journal’s 2021 Women of Distinction.

Brandon Mikolich, MD ’02, and his father, J. Ronald Mikolich, MD, both cardiologists with Sharon Regional Medical Center, were profiled in a Sharon Harold article, “A Father-Son Relationship With Heart: Cardiologists Expanding Frontiers of Care at Sharon Regional.”

Jeffrey Nau, PhD; MS medical science ’02, the president and CEO of Oyster Point Pharma, was a featured guest on an episode of the Health Professional Radio podcast, in which he discussed OC-01, a nasal spray being developed to treat the signs and symptoms of dry eye disease. He was also
interviewed for NJBiz.com about a nasal spray the company has been developing, which studies suggest is effective in preventing COVID-19 infections.

William D. Surkis, MD '02, vice president for medical education at Main Line Health System, was quoted in a June 2021 Philadelphia Inquirer article about an upcoming heat wave that posed hazards to elderly people who live alone and people with serious medical issues.

Allison Keen, MD '03, a board-certified obstetrician/gynecologist and co-founder of Philadelphia Women’s Health & Wellness, was profiled in an article in the Chestnut Hill Local newspaper about her medical practice.

Mariam Mahmud, MD '04, was elected to the board of directors of the Central Bucks School District out of Region 5. Mahmud is completing a fellowship program at the Andrew Weil Center for Integrative Medicine and is a pediatrician who has worked in a primary care practice for more than a decade. She was quoted in a Philadelphia Inquirer article about the CDC recommendation that everyone wear masks in indoor public spaces again.

Michael Attilio, MD '05, was selected to serve as vice president for physician practices at Rome Health in Rome, New York. He provides primary care to patients at the Rome Health Delta Medical Center. Attilio is a board-certified family physician with more than 10 years of leadership experience.

Vishal M. Kothari, MD '05, was recognized by Continental Who’s Who as a Top Surgeon for his outstanding contributions to the fields of medicine and education and in acknowledgment of his professional excellence with Nebraska Medicine — Lauritzen Outpatient Center in Omaha, Nebraska. A board-certified general surgeon, Kothari sees patients within the Bariatrics Center at the Nebraska Medical Center and the Multispecialty Clinic at Village Pointe Health Center.

Yaser El-Gazzar, MD '06, has been named one of ThreeBestRated.com’s top orthopedic surgeons in Jersey City, New Jersey, for his excellence in patient care.

Michael Jablonski, PhD; PBC medical science ‘06; MS medical science ‘07, was a featured guest in a recent episode on the Health Professional Radio podcast. Jablonski, who is the vice president of medical affairs at Myriad Genetics, discussed the results of a new GeneSight Mental Health Monitor national poll conducted by Myriad. The poll found that 83% of those diagnosed with depression say that life would be easier if others could understand what they were going through.

Jamie McKenzie, MD '06, a medical oncologist specializing in the diagnosis and treatment of breast cancer, joined the medical team at Tampa General Hospital’s newly established TGH Cancer Institute.

Sandy Li, MD ‘07, a board-certified reproductive endocrinologist, has joined the fertility practice and telemedicine team at Boston IVF, becoming the only current Mandarin-speaking fertility specialist in Boston and throughout New England. Li joins Boston IVF from Shady Grove Fertility Center in Washington, D.C.

Cynelle Kunkle, MD ’08, medical director of female pelvic medicine at Crozer Health, was recognized as one of Main Line Today magazine’s 2021 Power Women of the Main Line and Western Suburbs.

Amy Jo Jenkins, MS clinical research organization and management ‘09, recently joined the Winthrop P. Rockefeller Cancer Institute’s new Office of Clinical Trials Administration and will lead early-phase clinical trials at the University of Arkansas for Medical Sciences (UAMS). Jenkins was previously chief of staff in the office of Chancellor Cam Patterson and CEO of UAMS Health. She is the immediate past president of the board of directors for the Society of Clinical Research Associates, having served as a board member since 2016.

Madhury (Didi) Ray, MD ’09, was included on the de Beaumont Foundation’s 40 Under 40 in Public Health list. Working at the intersection of medicine, data, health equity and public health as the director of data and analytics for childcare at the New York City Department of Health and Mental Hygiene, Ray has helped address the pronounced disparities in COVID-19 transmission, hospitalizations and mortality in neighborhoods where many communities of color reside.

Osama Abdul-Rahim, MD ’10, board certified in interventional diagnostic and medical radiology, joined the medical team at Precision Vascular at their McKinney, Sherman/ Denison and North Dallas locations. Prior to joining Precision Vascular, Abdul-Rahim spent five years at the University of South Alabama Health System as both an assistant professor and section chief of interventional radiology, where he was honored with an award for Best Radiology Teacher 2017-2018.

Rosemarie Arena, MD ’11; Drexel/Hahnemann Internal Medicine Residency ‘12; Drexel/Hahnemann Gastroenterology Fellowship, a gastroenterologist at Mountainside Medical Group in Montclair, New Jersey, was listed on Becker’s GI and Endoscopy’s list of “10 Gastroenterologists to Know.”

M. Shuja Shaﬁqat, MD ’11, and Andrea Porpiglia, MD; MS clinical research for health professionals ‘16, participated in a Facebook Live chat about breast cancer, hosted by 6abc on July 21, 2021. Shaﬁqat was an assistant professor for the Department of Surgical Oncology and Division of Plastic and Reconstructive Surgery, and program director of Microsurgery Fellowship at Fox Chase Cancer Center until December 2021. Porpiglia is an assistant professor in the Department of Surgical Oncology, Division of General Surgery at Fox Chase.

Puja Shah, MD ‘11, a double board-certified anesthesiologist and interventional pain management specialist, joined the Haute Beauty Network as a pain management expert representing the Orange County, California, market.

Nicolé Bacarella, MLAS ‘12, passed the board certification exam for the American College of Laboratory Animal Medicine.
Lauren Krueger, PBC veterinary medical science ’12, passed the board certification exam for the American College of Laboratory Animal Medicine.

Angela Kim, MD ’13, a pediatric emergency medicine attending physician at St. Christopher’s Hospital for Children, was quoted in a Philadelphia Inquirer article about how injuries from fireworks have hit a 20-year high during the pandemic.

Austin D. Williams, MD ’13, completed his general surgery residency at Lankenau Medical Center and a postdoctoral research fellowship at the University of Pennsylvania. In addition to multiple research publications, he is the first editor of a textbook for medical students, Surgery Morning Report: Beyond the Pearls. He is a fellow in breast surgical oncology at Memorial Sloan Kettering Cancer Center.

Gokul Swaminathan, PhD microbiology and immunology ’14, became director of vaccine innovation at Boehringer Ingelheim, a health care solutions development company for humans and animals. Previously, Swaminathan was a principal scientist of immunology/investigational biology at Merck Exploratory Science Center.

Suogene Lee, MD ’15, a cardiologist, joined the medical team at Sutter Medical Group and will serve patients at their Sacramento, Jackson and Elk Grove locations in California. She completed the J. Willis Hurst Internal Medicine Residency Program at Emory University School of Medicine and a clinical cardiology fellowship at Albert Einstein College of Medicine/Montefiore Medical Center.

Andrew Trontis, MD ’15, was recognized as a “Spine Surgeon Leader to Know” by Becker’s Spine Review. Trontis is a spine fellow at Cedars-Sinai Spine Center in Los Angeles. He is an active member of the North American Spine Society (NASS) as a reviewer for The Spine Journal and as a member of the society’s Member Feedback and Research Funding Committees. NASS’s primary publication, SpineLine, included him on its “20 Under 40” list for 2020. During his residency at MedStar Union Memorial Hospital in Baltimore, Trontis became the first resident board member of the Maryland Orthopaedic Association.

Brian White, MD ’15, a neuro-ophthalmologist, joined the medical team at Charlotte Eye Ear Nose & Throat Associates (CEENTA) in Charlotte, North Carolina. Prior to joining CEENTA, White provided instruction at UNC Greensboro and the Children’s Hospital of Philadelphia.

Andrew Holmes, PhD microbiology and immunology ’16, and College of Medicine colleagues presented “Altered Env Conformational Dynamics as a Mechanism of Resistance to Peptide-Triazole HIV-1 Inactivators” at AFFINITY 2021, the International Society of Molecular Recognition’s annual meeting, held June 22-24, 2021.

Andrea Porpiglia, MD; MS clinical research for health professionals ’16, see M. Shuja Shafqat, MD ’11.

Martin Gesheff, MS clinical research organization and management ’17, became executive director of research at the hospital and health care company LifeBridge Health, according to a LinkedIn update. Previously Gesheff was director of industry-sponsored research at LifeBridge.

Alex Hunt, MS interdisciplinary health science ’17, was profiled in an article in 34th Street Magazine. Hunt is a public health researcher turned community organizer who is running for Congress in Pennsylvania’s 3rd District.

Amber Theriault, MS cancer biology ’17, Baicheng Lin, MS molecular and cell biology and genetics ’18, Shivani Sheth, MS cancer biology ’20, and colleagues at the College of Medicine, the University of Pennsylvania and Columbia University published “FANCD2 Limits Acetaldehyde-Induced Genomic Instability During DNA Replication in Esophageal Keratinocytes” in Molecular Oncology on July 30, 2021.

Leann Walsh, MS molecular and cell biology and genetics ’17, and Selena Park, MD ’19, were among the authors of “Mechanisms of Ovarian Aging,” which was published in the May 1, 2021, issue of Reproduction.

Lindsay Festa, PhD pharmacology and physiology ’18, Emily Nickaloff-Bybel, PhD pharmacology and physiology ’21, and colleagues at the College of Medicine published a review article, “Co-receptor Signaling in the Pathogenesis of NeuroHIV” in the journal Retrovirology on August 24, 2021.

Baicheng Lin, MS molecular and cell biology and genetics ’18, see Amber Theriault, MS cancer biology ’17.

Ebony Gary, PhD microbiology and immunology ’19, and College of Medicine colleagues presented “Tracking SARS-CoV-2 Spike Domain Antibodies in Plasma of Convalescent COVID-19 Patients by SPR” at AFFINITY 2021, the International Society of Molecular Recognition’s annual meeting, held June 22-24, 2021. Gary is a postdoctoral fellow at the Wistar Institute.

Selena Park, MD ’19, see Leann Walsh, MS molecular and cell biology and genetics ’17.

Kristie Cox, PhD biochemistry of health and disease ’20, and colleagues at the College of Medicine, Fox Chase Chemical Diversity Center, Eli Lilly and Strella Biotechnology, published “Discovery of a First-in-Class Inhibitor of Sulfide: Quinone Oxidoreductase That Protects Against Adverse Cardiac Remodeling and Heart Failure” in Cardiovascular Research online June 16, 2021.

Alexandra Guffey, MS molecular and cell biology and genetics ’20, and a College of Medicine colleague published “Regulation of Resistance in Vancomycin-Resistant Enterococci: The VanRS Two-Component System” in the September 25, 2021, issue of Microorganisms.

Lina Maciunas, PhD biochemistry ’20, was one of the authors of “Structures of Full-length VanR from Streptomyces coelicolor in Both the Inactive and Activated States,” which was published in the journal Acta Crystallographica on August 1, 2021.
Rebecca Moeller, MS cancer biology ‘20, and colleagues at the College of Medicine and Thomas Jefferson University authored “An Ex Vivo Brain Slice Model to Study and Target Breast Cancer Brain Metastatic Tumor Growth,” which was published in the Journal of Visualized Experiments in September 2021.

Hemalatha Muralidharan, PhD neuroscience ‘20, was one of the authors of “Mini-review: Microtubule Sliding in Neurons,” which appeared in the May 14, 2021, issue of Neuroscience Letters as part of a special issue on neuronal microtubules. Muralidharan is a postdoctoral research fellow at Regeneron.

Mitchell Nothem, PhD pharmacology and physiology ‘20, now a postdoctoral fellow at the College of Medicine, was selected to participate in a data blitz event organized by the International Association for the Study of Pain’s Special Interest Group on Neuropathic Pain. He presented “Primary Somatosensory and Anterior Cingulate Single-Unit Activity Is Increased After Peripheral Nerve Injury and Altered by Gabapentin” on October 4, 2021.

Shivani Sheth, MS cancer biology ‘20, see Amber Theriault, MS cancer biology ‘17.

Megan Meuser, PhD biochemistry ‘21, was an author of “A Useful Epitope Tag Derived From Maltose-Binding Protein,” along with colleagues at the College of Medicine and New England Biolabs. The paper appeared in Protein Science April 25, 2021.

Emily Nickoloff-Bybel, PhD pharmacology and physiology ‘21, see Lindsay Festa ‘18.

Ankita Patil, PhD neuroscience ‘21, was one of the authors of “Mini-review: Microtubule Sliding in Neurons,” which appeared in the May 14, 2021, issue of Neuroscience Letters as part of a special issue on neuronal microtubules. Patil and College of Medicine colleagues also published “A Cellular Approach to Understanding and Treating Gulf War Illness” in Cellular and Molecular Life Sciences online September 27, 2021.

Former Residents and Fellows
(alphabetical)

Imtiaz Alam, MD; Internal Medicine Residency, HU, was included on the “10 Gastroenterologists to Know” list by Becker’s Gastroenterology and Endoscopy. Alam is the medical director of HepCare Specialty Pharmacy and is also a clinical associate professor of medicine at Texas A&M University in College Station, Texas.

Frederick Buechel, MD; Orthopedic Surgery Residency, HU, was elected by Find Local Doctors as a 2021 Top Patient Rated New York Orthopedic Surgeon. Buechel specializes in partial and total robotic knee replacement. His practice, the Robotic Joint Center, treats many conditions, including early to advanced knee osteoarthritis, rheumatoid arthritis, osteonecrosis, meniscus injuries and cartilage injuries.

Sharon Carney, MD; Emergency Medicine Residency, HU ‘94, chief clinical officer at Trinity Health Mid-Atlantic, was quoted in a Philadelphia Business Journal article about how all employees of Trinity Health Mid-Atlantic are required to be vaccinated against COVID-19.

Michele Domenick, MD; Surgery Residency, MCPHU ‘02, joined the University of Maryland Shore Medical Group – Surgical Care practice, serving Kent and northern Queen Anne’s Counties in Maryland. Her prior experience includes serving as a general surgeon with Eden Hill Medical Center – Surgical Associates, the Delaware Surgery Center in Dover, Delaware, and the Comprehensive Breast Center in Rehoboth Beach, Delaware.

Vera Feuer, MD; Drexel/Hahnemann Psychiatry Residency, served as a panelist for a “Back to School in Good Health” online event on September 23, 2021, hosted by Northern Westchester Hospital’s Center for Healthy Living. Feuer is the associate vice president of school mental health at Northwell Health and director of pediatric emergency psychiatry and behavioral health urgent care at Cohen Children’s Medical Center, part of Northwell Health.

Marla J. Gold, MD; Internal Medicine Residency, MCP ‘86; Infectious Disease Fellowship, MCP ‘88, senior vice provost for community health and chief wellness officer at Drexel University, was quoted in a Philadelphia Inquirer article about how employees of higher education and health care systems will need to be vaccinated by mid-October. Gold was also quoted in a Philadelphia Inquirer article about how colleges are adapting to the new reality of COVID-19.

Thanuja Hamilton, MD; Drexel/Hahnemann Internal Medicine Residency ‘10; Drexel/Hahnemann Sleep Medicine Fellowship ‘12, joined the board of directors of Nightfood Holdings Inc. A double board-certified sleep specialist at Advocate Sleep Physicians of South Jersey, Hamilton serves as medical director of the sleep labs at Jefferson University Health Systems and Virtua Health. She also serves on the board of the New Jersey Sleep Society.

Jose Menoyo, MD; Internal Medicine Residency, HU ‘95; Nephrology Fellowship, HU ‘97, joined Shield Therapeutics PLC as vice president and chief medical officer. Prior to joining Shield, Menoyo served as head of U.S. medical affairs at Alexion Pharmaceuticals Inc., acquired by AstraZeneca in July 2021. In this role, Menoyo led the Medical Affairs and Health Outcomes and Research Teams.

Kusum Punjabi, MD; Drexel/Hahnemann Emergency Medicine Residency ‘08, was elected chair of the Board of Trustees of the American Association of Physicians of Indian Origin (AAPI) during the 39th Convention and Scientific Assembly of the AAPI. Punjabi’s election was covered by the News India Times, where she noted that she is the youngest person, and the first who attended medical school in the U.S., to hold this position in AAPI’s 40-year history. For the past 12 years she has been working as an emergency physician at Rutgers Robert Wood Johnson University Hospital in New Jersey, serving the local community and teaching at the medical school as an assistant professor of emergency medicine.
Altha Stewart, MD; Psychiatry Residency, HU ’82, received the 2021 University of Tennessee President’s Award in the Connect category. Stewart is the senior associate dean for community health engagement, associate professor of psychiatry, the director of the UTHSC Center for Health in Justice Involved Youth in the UT College of Medicine, and past president of the American Psychiatric Association (APA). She also received the Solomon Carter Fuller Award from the APA in March 2021.

Loice Swisher, MD; Emergency Medicine Residency, MCP ’92, co-founded National Physician Suicide Awareness Day, which marked its fourth anniversary on September 17, 2021. A clinical professor in the Department of Emergency Medicine at Drexel University College of Medicine, Swisher is a member of the Council of Residency Directors in Emergency Medicine, which established a grassroots movement to raise awareness around physician suicide in emergency medicine and has pushed for National Physician Suicide Awareness Day to be recognized annually.

Student Loan Updates

The Office of Financial Planning has created a website to share updates about student loans, including the provisions of the CARES Act, loan servicer changes and the Public Service Loan Forgiveness Program. Visit bit.ly/ducomfinance to view the page.

All alumni can contact Michael Clancy, MBA, CFP, director of financial planning, for one-on-one counseling and financial planning assistance. He can be reached at 215.991.8595 or mrc324@drexel.edu.
HOW DOES MEDICAL EDUCATION work when a medical school doesn’t own a hospital or health system?
Drexel has always operated with a distributive model of clinical education. This means that, rather than owning a hospital or health system, we have established longstanding affiliations with many very strong clinical partners that play a key role in educating our students. Currently, we have affiliate sites in Pennsylvania, New Jersey, Maryland and California. They provide us with a large faculty base and give students the chance to explore many different opportunities in medicine. Our students spend their third and fourth year at these affiliate sites, where they have the ability to do clinical rotations in urban, rural and suburban settings.

HOW MANY AFFILIATES DOES the College of Medicine currently have?
We have six regional medical campuses that have the capacity to provide clinical education for our students for their entire third and fourth years. We also have 12 academic clinical campuses that offer some of the required rotations. In addition, we have 18 independent family medicine practices that serve as campuses for family medicine rotations only.

HOW DOES AN INSTITUTION become an affiliate?
We put a great deal of effort into establishing partnerships with each institution as an affiliate, and our goal is to make sure that it will provide an optimal learning environment for our students. When we look at potential clinical affiliates, we want to be certain that there is a stable infrastructure for student education, the physicians want to be physician-educators, and they have an interest in being part of a college of medicine and working with students. We have a lot of discussion before a hospital or system becomes an affiliate to determine that they have enough patient volume to support medical education programs and the resources that our students need while on rotations. We want to ensure the relationship is a great fit for our students.

Hospital systems or institutions also reach out to us. A community hospital may be interested in adding academics to their institution, or a hospital that already educates medical students from other institutions may want to expand. We also regularly touch base with our academic clinical campuses to assess their interest in expanding their rotation offerings to include additional disciplines for our students.

WHAT ARE THE BENEFITS to students with this type of model?
The distributive model enhances clinical education by giving students many more opportunities to explore career possibilities with different health systems, patient populations and communities, as well as learning ways that medicine is practiced differently in different arenas. This helps them learn what disciplines and practice settings they have an affinity for when it comes to their residency selection or where they intend to practice medicine as their career.

When students experience different health care environments and learn how to work within those environments, it enhances their adaptability and flexibility in pursuing their medical career. If they’re doing rotations at different sites, they’re learning different electronic health records, different processes used for procedures and different management styles for patient care.

Learning adaptability and flexibility really helps to prepare them for success in their residencies. These skills are much easier to acquire when students do their rotations at different clinical sites rather than all in one place. The majority of our students recognize this benefit and many choose to rotate across our affiliates.

We get a lot of positive feedback from our students. Even students who thought they wanted to do a whole year at one affiliate site are often pleasantly surprised at how much they have enjoyed rotating at different sites and how much they learned.

Interview by Nancy West
ALUMNI WEEKEND 2022
MAY 19-22
Save the date and spread the word!
Online registration opens in March.

ALUMNI WEEKEND IS BACK – LIVE AND IN PERSON!

We welcome alumni from the College of Medicine, Woman’s Medical College, Hahnemann, Medical College of Pennsylvania and MCP Hahnemann University to this year’s celebration from May 19 to 22. Here’s just a sneak peek of what to expect this year!

- Catch up with classmates at the College of Medicine All Alumni Reception with cocktails, hors d’oeuvres and music.

- Brand new this year is the Drexel Makers Market Festival, an open-air market featuring Drexel makers, artists and entrepreneurs, with food trucks, live music and more!

- Enjoy breakfast and an immersive guided experience at the Barnes Foundation, one of the world’s greatest collections of impressionist, post-impressionist and modern art.

- We’re taking over Drexel Park for Drexel After Dark, overlooking the Philly skyline. Party the night away with live music, food and dancing!

- Golden Dragons from the Classes of 1970, 1971 and 1972 are invited to lunch and a tour of the College of Medicine Archives with Charles B. Cairns, MD, Walter H. and Leonore Annenberg Dean and senior vice president of medical affairs. Later that day enjoy a reception and private, class-specific reunion dinners.

drexel.edu/alumni/weekend
DUCOM Classical

April 23

Spring Recital

DUCOM Classical recently marked 10 years of making music together. Their Spring Recital will be held on April 23 from 7–8 p.m. at the Philadelphia Ethical Society.

Visit drexel.edu/medicine/alumni/events for tickets.