

UPSTATE MEDICAL Alumni JOURNAL

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FITNESS FOR ALL

NIENKE DOSA, MD '94,
UPSTATE'S FIRST
PROFESSOR OF
CHILD HEALTH
POLICY, IS A
CHAMPION
FOR INCLUSIVE
FITNESS





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ON THE COVER: Photo
of Nienke Dosa, MD '94,
Marley Aberdeen, and
occupational therapist Lisa
Neville by Susan Kahn

History-Making Election for Medical Student Sam Mackenzie, PhD '13

Upstate Medical University MD/PhD student Sam Mackenzie has been elected to the American Medical Association Board of Trustees, a first for Upstate in the 30 years students have held an AMA trustee seat.

With representatives from the nation's medical schools voting, Mackenzie outpolled two other students in the November 16, 2013, ballot for the only student section position on the 21-member AMA board. He will begin his one-year AMA term in June. The AMA trustees include physicians, one student representative, and one member of the public. Their mission is to guide the AMA in setting standards and policy for the medical profession.

Mackenzie is a third-year medical student from Groton, New York, who earned his PhD in neuroscience at Upstate last year. A focus of his campaign was ensuring the stability of funding for Graduate Medical Education. "Making sure there

are enough residency spots is an issue that's really taken off in the last seven years," he says. "I'd like to see the AMA develop model legislation that will provide smarter funding of residency positions."

Mackenzie also hopes to be active in the AMA's efforts to improve undergraduate medical education, physician satisfaction, and public health outcomes, and would like to increase physician membership in the AMA. As America's health-care system continues to evolve, Mackenzie says it's up to physicians and medical students to establish a comprehensive and cost-effective system of delivering care. "That's a tough task, but I think the AMA is in a good position to help make that goal a reality," he says.

As an AMA trustee, Mackenzie will attend meetings with legislative officials on health policy and medical education issues to share medical students' viewpoints and

concerns with lawmakers, and try to keep students engaged in issues affecting them now and in the future—including loan debt and GME funding. "Both are closely tied to ensuring that we have enough doctors 10, 20, 30 years down the road," he said. "It gets back to patient access."

Participation in policy discussions is nothing new to Mackenzie. He has been involved with the AMA and the Medical Society of the State of New York (MSSNY) since his first year at Upstate. Last year he served on the AMA's Council on Medical Service and authored an MSSNY resolution strengthening its position supporting a moratorium on high-volume hydrofracturing. "MSSNY has been incredibly supportive of me," he says. "I feel very fortunate to be able to say that I trained in New York State."



Third-year medical student Sam Mackenzie is a new student member of the AMA board of trustees.



Scholarship recipient Krista Tookhan '15 with Alvin Roberts, director of Multicultural Affairs, and Bruce Simmons, MD '79, president of the Upstate Medical Alumni Association

Sarah Loguen Fraser Day Celebrates the Power of Mentoring

UPSTATE MEDICAL STUDENT KRISTA TOOKHAN '15 was honored as the recipient of the Sarah Loguen Fraser Scholarship at Upstate's annual Sarah Loguen Fraser day, held February 26. Tookhan was selected for the scholarship based on her leadership skills and for exemplifying the ideals of Dr. Loguen Fraser. The scholarship, given by Upstate's College of Medicine Alumni Foundation, includes a monetary award and a certificate.

The theme of this year's program was "The Power of Mentoring," and featured a presentation by Gina L. Rivers, program director for Mercy Works Inc. Rivers offered personal insights into the importance of nurturing the next generation of health-care professionals who will likely serve an increasingly diverse community. Since 2008, Upstate has partnered with Mercy Works Inc. to offer leadership training internships to college students who live

in Syracuse. This outreach effort, led at Upstate by Maxine Thompson, assistant vice president for the Office of Diversity and Inclusion, is designed to inspire the workforce of tomorrow.

The lecture and scholarship are named for Sarah Loguen Fraser, MD, an alumna of Upstate's College of Medicine, who became the fourth African American woman doctor in America in 1876.



DAVID DUGGAN, MD '79, right, senior vice president and dean of the College of Medicine, speaks with students from Upstate Medical University's College of Medicine at the Eighth Annual Career Advisory Network Dinner. The event was presented by the College of Medicine Alumni Association on January 6 in Weiskotten Hall. A dinner was also held January 14 for medical students at the Binghamton campus. Both dinners enabled second- and third-year medical students to network informally with alumni, faculty, residents, and staff members representing various medical specialties.

Upstate Acquires New Technology to Fight Prostate Cancer

Upstate Medical University has a new weapon in the fight against prostate cancer; Upstate doctors are using a 3-tesla Magnetic Resonance Imaging (MRI) system and the new platform, UroNav, to fuse together different sources of information to create a comprehensive picture of the prostate in real time, thus creating a more specific target area for biopsy.

In October, Upstate acquired the Philips UroNav Fusion Biopsy System from Philips Healthcare, becoming the only provider in Central New York and one of a few sites in the country to offer this breakthrough technology.

"UroNav incorporates precise knowledge of the needle location within the prostate, and using a technology similar

to GPS navigation, it directs the biopsy needle to the heart of the suspicious lesion," says Gennady Bratslavsky, MD, professor and chair of Upstate Department of Urology.

"Compared with traditional biopsy technique that uses random prostate sampling, the new technology helps to avoid missing hard-to-find and often aggressive prostate cancer, and potentially helps give greater certainty as to the extent and aggressiveness of the disease, as well as allowing patients to avoid unnecessary repeat prostate biopsies," Dr. Bratslavsky says.

Bratslavsky and Srinivas Vourganti, an assistant professor of urology at Upstate and an urologic oncologist, are pioneers in the use of this technology as they par-

ticipated in its development and testing at the National Institutes of Health, working closely with the technology developer Invivo, a subsidiary of Phillips Healthcare. Both Bratslavsky and Vourganti have published on the topic of prostate cancer imaging and continue to collaborate closely with their NIH colleagues as they deliver this breakthrough technology to the region and beyond.

When UroNav became commercially available, Bratslavsky wanted to be certain patients throughout Central New York region were among the first to have access to this technology. "This technology is a major breakthrough in the fight against prostate cancer that is now a significant tool in Upstate's prostate cancer program for all men," he says.



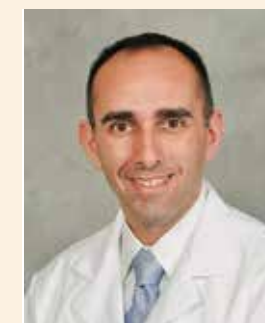
Gennady Bratslavsky, MD, chair of the Department of Urology, demonstrates the UroNav.

Neuropsychiatrist Named Chief Medical Officer

Anthony Weiss, MD, MBA, a physician-executive who has held leadership roles in the area of quality management, has been named chief medical officer of Upstate University Hospital. In this role, Dr. Weiss will oversee a number of key clinical initiatives at Upstate, including efforts to enhance patient experience and ensure quality of care. He will also serve as associate dean for clinical affairs at Upstate Medical University.

Weiss comes to Upstate from the Massachusetts General Hospital, where he has served in a variety of roles since 1997, most recently as director of quality management for the Department of Psychiatry. He led a number of initiatives to improve access and measure outcomes related to mental health care. He also helped develop innovative methods of physician performance assessment, using computer-based simulated interviews.

Weiss has been a member of Harvard Medical School faculty since 2000, most recently



Anthony Weiss, MD, MBA

as assistant professor. He has a wide-reaching research background, initially focused on the use of brain imaging to better understand the underlying changes associated with mental illness. Over the last six years, his work has shifted to health services research, including a large published study examining factors associated with emergency department length of stay for patients with psychiatric conditions.

Weiss is a board-certified psychiatrist, with a clinical focus in neuropsychiatry. He is an active member of the American Neuropsychiatric Association, the American College of Physician Executives and the Association of Professionals in Patient Safety.

Physician-Scientist named Top Expert

Michael Iannuzzi, MD, professor and chair of the Department of Medicine, has been named one of the world's top experts in the field of sarcoidosis research and treatment by Expertscape, an organization dedicated to helping consumers find health professionals with extensive expertise in their specific area of concern. Expertscape uses objective algorithms to identify the most knowledgeable and experienced physicians, clinicians, and researchers across more than 26,000 specific topics, stratified by geography. Expertscape



Michael Iannuzzi, MD

defines an expert as someone who has published peer-reviewed research in the science, therapies, and complications for a specific medical topic.



MEDICAL RESIDENTS TURNED OUT IN FORCE FOR DR. HOWARD WEINBERGER'S RETIREMENT RECEPTION FEBRUARY 4 AT UHCC.

Wishing Weinberger well are, from left, Bob Al Shareef, MD, Carla Overton, MD '11, Ben Prince, MD, Joshua McBride, MD, Brian Tran, MD, Howard Weinberger, MD '58, Jenica O'Malley, MD, Aamer Imdad, MD, Nellie Sadaghiani, MD, and Christopher Delaney, MD '13. Dr. Weinberger has a 60-year affiliation with Upstate, dating back to his acceptance into Upstate's College of Medicine in 1954. Weinberger has served in a variety of roles at Upstate, including chair of the Department of Pediatrics.



Upstate Medical University in December 1958, before the construction of University Hospital.

Upstate Hospitals Celebrate 50th Anniversaries

"REMEMBERING OUR HISTORY, Celebrating our Future" is the theme of a series of celebrations commemorating the 50th anniversaries of Community General and University Hospitals.

Even though Community's grand opening was in 1963, it wasn't until September 5, 1964 that it merged with Syracuse General Hospital to become Community General Hospital. And although University Hospital's grand opening was in 1965, the doors actually opened to patients in late summer 1964. The two hospitals merged in July 2011 when

Upstate acquired Community General Hospital.

"Beginning with our kick-off event, we are asking our Upstate family to share their memories of Upstate's two hospitals, from the time of construction to the present, and to suggest items to be included in our time capsule," says hospital administrator Joyce Mackessy. Special 50th Anniversary boxes are displayed at both hospitals where people can leave memories and suggestions. If you have a story to share, email: keeters@upstate.edu.

Alice Turek, MD '51, Leaves Major Gift to Scholarship Fund

THROUGH A PLANNED GIFT in her will, Alice Turek, MD '51, MPH, left a gift of \$205,000 to the Stanley D. Leslie, MD '51 Memorial Scholarship at Upstate Medical University.

"We are so grateful for Dr. Turek's generosity, which will benefit Upstate medical students in a meaningful way, now and into the future," says Lori Murphy, interim director of the Upstate Medical Alumni Foundation.

A pediatrician, Turek went on to earn a master's in public health from Yale University and then served in several public health capacities. Her last position was as director of health in Manchester, Connecticut, from 1973 to 1983, when she retired. She died in November 2013 at age 92.

Turek was one of five women in her Upstate medical school class; Dr. Leslie was a classmate, though they did not keep in touch after their medical school training. Leslie completed a residency in OB/GYN, and after the Korean War, returned to Syracuse to practice. Because of the opportunities Upstate afforded him, he was very loyal to the institution. After his death in 2009, Leslie's family created the Stanley D. Leslie, MD '51 Memorial Scholarship at Upstate to honor Leslie and continue his support of his alma mater.

According to Turek's attorney, she read about the scholarship fund in the *Alumni Journal* and decided then and there to leave the bulk of her estate to Upstate through the Leslie Memorial Scholarship. "Her donation is a testament to both her fealty and modesty," says Leslie's son, Bruce Leslie, MD '78. "She could have made the donation in her own name. Instead she gave the money to a fund named after a classmate who devoted a fair amount of time to developing the Upstate Medical Alumni Association. Her donation to help Upstate students fund their education demonstrates that she was a woman of loyalty and character. I wish I'd met her and am sure she will be missed by those who knew her."



THANKS TO THE GENEROSITY OF OUR ALUMNI, the Upstate Medical Alumni Foundation was able to provide each of our MSII students with a copy of the *First Aid for the USMLE Step 1* book in January.



UPSTATE COLLEGE OF MEDICINE STUDENTS Dan Finin '15 and Evan Kastner '15 volunteered to make calls to alumni during the annual College of Medicine Alumni Phonathon, held in February. Phonathon proceeds benefit the College of Medicine's student scholarships and other programs.



The toddlers have been set free. Faster and faster they go, zooming around the Institute for Human Performance atrium, chasing each other, chasing big kids in power wheel chairs, thrilled by the novelty of being able to control their own mobility.

These joyful toddlers are “driving” motorized toy cars that have been adapted to operate via a big red “easy” button rather than mechanical pedals, accommodating the physical limitations imposed by their cerebral palsy or spina bifida. They’re all patients of Upstate developmental pediatrician Nienke Dosa, MD ’94, MPH, participating in a workshop at the first annual Fit-In Conference.

The theme of the conference is “New Paradigms for Assistive Technology and Inclusive Fitness.” Dr. Dosa has brought in a team from the University of Delaware who pioneered the adaptation of these toy vehicles. They’ve spent the day working with technology students from Nottingham and Fayetteville-Manlius high schools, adapting four toy cars into power mobility devices for her patients, who clearly couldn’t be happier with the finished products.

“This is part of a movement to make mobility equipment much less expensive than what’s available and get around the insurance roadblock that many of these families face,” says Dosa. “It is very hard to get a wheel chair for a toddler and it’s almost impossible to get a power chair. What this group from Delaware has done is a paradigm shift—‘lets not worry about insurance, lets just get these kids moving and with their

peers.’ All you have to do is look at these children’s faces to see it’s a good thing.”

The October conference was sponsored by the Fitness Inclusion Network, a collaborative effort between Upstate Medical University’s Golisano Children’s Hospital, Syracuse University’s Burton Blatt Institute, and the SUNY Cortland Department of Physical Education. But the driving force is Dosa, who in the past decade has become a national leader in promoting inclusive fitness through community efforts, bringing recognition to Upstate in the process.

Dosa’s medical practice focuses on children with cerebral palsy and spina bifida—patients whose disabilities are largely physical rather than intellectual.

But treating their medical needs is only one aspect of her work. “Developmental pediatrics is working with families; it’s working with others in the community together to help those families,” she says.

For Dosa that might be talking with a school nurse about a catheterization program for a child with spina bifida, meeting with a parent who wants to start a camp for children who use assisted communication, or helping a family put the appropriate supports in place as a child transitions to adulthood. “The clinical encounter itself is just the tip of the iceberg,” she says.

In September, Dosa was named Upstate’s first professor of child health policy and concurrently appointed a senior

IT TAKES A VILLAGE

Upstate’s first Professor of Child Health Policy takes a community approach to caring for young patients with developmental disabilities.

BY RENÉE GEARHART LEVY



Toddler patients of Dr. Dosa got the opportunity to experience independent mobility at the first annual Fit-In Conference.

fellow at the Burton Blatt Institute, which leads advocacy for the civic, economic, and social participation of people with disabilities. Her new position is intended to further Dosa's research in the organization of health care services to children and young adults with developmental disabilities and in the development of inclusive fitness programs.

The creation of the Fitness Inclusion Network and this inaugural conference is a first step, featuring national experts working in various aspects of power mobility and an exhibition from the CNY United Power Soccer Team, which won the 2012 national power soccer championship.

It's an exhilarating day full of possibility, enjoyed by an interdisciplinary group of educators, health care providers, physical and occupational therapists, parents, and leaders in the field of disability policy. Those familiar with Dosa expected no less.

"Whether she's working with one child or a group of 15, her passion is unparalleled," says Timothy Davis, PhD, associate professor of physical education at SUNY Cortland and a member of the Fitness Inclusion Network. "She focuses on the child—not just the diagnosis—and gets to know the context of the family to seek out the best services to help that family around the needs of the child. That's a model that we wish was the norm in the medical world but isn't always out there."

A PATIENT ADVOCATE

Jason Benetti will never forget his first encounter with Dr. Dosa. The sports announcer—who works for ESPN and the Syracuse Chiefs—was invited to emcee the final banquet of CHAT Camp, a unique five-day experience for Syracuse-area children who use assistive/augmentative communication (AAC) devices to communicate, held in August at



SUNY Cortland physical education professor Timothy Davis and Peyton Sefick, Fit-In Project coordinator

the Burton Blatt Institute. Benetti showed up early to watch and pick up as much as he could to help him meaningfully convey to the families attending what their kids had done that week. "As I'm watching the kids get to know each other, I see this woman in the corner of the room getting choked up," he recalls.

Assuming she was a volunteer he hadn't yet met, Benetti sidled up to her and asked how she was associated. "I'm most of these kids' doctor," answered Dosa.

"It was clearly just a magical moment for her because she sees all these kids individually. And most of these kids never really have an opportunity to get to know other people like them. So it was this overwhelming waterfall of emotion to see them interacting," he says. "I was really touched by how much she cared for these kids. I'm sure it was really great for the parents, but I think it might have been even better for her."

Benetti is a fellow of the Burton Blatt Institute, and like some of the CHAT campers, he has cerebral palsy.

"With kids who have things that they don't do as well as others—but could be taught to do well based on technology or cognitive ability—it sometimes simply takes human power to get those things done. She is that human power," he says of Dosa.

"I would work on anything with her, anytime, anywhere."

Given the accolades she inspires, it's somewhat ironic that Dosa is almost an accidental pediatrician. Growing up in Syracuse, her family lived two doors down from Herbert Schneiderman, MD, HS '62, a pediatrician who started Upstate's Spina Bifida Clinic in the 1970s and ran it for many years. As teenagers, Dosa and her sisters babysat for Dr. Schneiderman's son, David, who has a developmental disability. Despite that early exposure, her interest in the field developed much later.

After graduating from Nottingham High School, Dosa went to Yale University, where she majored in religious studies and had a work-study job as a scientific illustrator for archaeologists and paleontologists at the university. "I came back to Syracuse with an education that I didn't quite know what to do with," she recalls. Dosa began studying photomicrography and electron microscopy, which led to a job in Upstate's Pathology Department, ultimately sparking an interest in science and medicine. Over the next several years, she took the necessary science classes at area colleges and applied to Upstate.

Dosa was drawn to pediatrics and Dr. Schneiderman became an early mentor. But it wasn't until she began working in the Pediatric Intensive Care Unit as a resident that her interest in developmental pediatrics was piqued. "Many of the kids in the PICU are children with developmental disabilities or medically fragile children," she says. One night, she was sitting with a mom whose child had had a really rocky course, when the woman confided that she wished the intensivists could see her son when he gets on the school bus. "That stuck with me," says Dosa. "There's another side to these kids that you don't see in the hospital, the simple joys of daily life with their families and friends."

After completing her pediatric residency, Dosa was granted a National Research Service Award to do research in general pediatrics at the University of Rochester. She began working with Gregory Liptak, MD, MPH, who ran the spina bifida clinic there and would become another important mentor (he joined her on the Upstate faculty in 2006 but passed away in 2012). "Pretty quickly I realized that patient care resonated more for me than doing dataset research. He was the consummate physician-scholar, and his professionalism inspires me still," says Dosa, who was able to simultaneously complete her research fellowship, a neurodevelopmental disabilities clinical fellowship, and earn a master's degree in public health (informed by her research on intensive-care admissions of children with chronic conditions and disabilities).

By this point, Schneiderman was waiting for Dosa to come back to Syracuse so he could retire. When she finished at Rochester, she joined the Upstate faculty, becoming director of the regional Spina Bifida Clinic in 2002.

The bulk of her work is not what most people would think. "Certainly these kids, especially in their first year of life when they are in ICUs—can be very sick. But most do not have progressive illnesses," explains Dosa. "Once they stabilize they're basically healthy. My role is to help them to learn how to live with disability, to normalize it. People some-

"People sometimes ask if it's sad, what I do, but I actually think it's just the opposite. These are amazing children and wonderful families that I have the privilege of working with."

—NIENKE DOSA, MD '94, MPH



Dosa enlists high school students as "change agents" in various projects. Here high school students adapt a toy car into a power mobility device.

times ask if it's sad, what I do, but I actually think it's just the opposite. These are amazing children and wonderful families that I have the privilege of working with."

Many of the medical recommendations developmental pediatricians make are operationalized in other systems of care—county health departments, school districts and the Office for the People with Developmental Disabilities, so Dosa says her public health training is invaluable. "You have to have a public health orientation or at least understand how to work with systems of care to do this work," she says.

"Developmental pediatricians that are highly effective are those who connect with the community and find ways of organizing community resources to help their patients," adds Thomas Welch, chair of the Upstate Department of Pediatrics. "That's been Dr. Dosa's unique contribution for us, in particular the way she's been able to connect with other educational institutions in the area to set up unique partnerships and community-based programs that are really outside what you would typically define as medicine. She is a player on the national stage in this area and is highly sought after as a speaker and consultant."

In 2006, Dosa obtained funding to form the New York State Institute for Health Transition Training at Upstate (www.healthytransition-sny.org), which she also directs. The institute helps patients with developmental disabilities plan for the transition to adulthood. "Young



"The teenage dance assistants are really enjoying their time with students at Jowonio," says Alissa DeBie, a physical education teacher at Nottingham High School of her students. "Seeing the physical and social gains that the young dancers make brings them joy."

adulthood is a vulnerable time for my patients," she says. "Often parents have been the keepers of their health information. There may be an element of learned helplessness. Our institute helps these young adults—and their physicians—develop the tools for this transition and deal with issues such as guardianship and health insurance."

Many of these are policy issues that are being studied from a legal perspective at the Burton Blatt Institute. Guardianship is a particularly timely issue. In August, Burton Blatt Chairman Peter Blanck, PhD, JD, served as an expert witness in the guardianship case of Jenny Hatch, a young woman with Down syndrome who contested being placed in a group home and won what is considered a landmark legal victory for many people living with disabilities.

"Dr. Dosa is crucial to helping BBI understand in practice the realities of young people in transition learning how to advocate for themselves and learning how to be engaged, active citizens," says Dr. Blanck of her appointment as senior fellow. "The partnership between Upstate and BBI is extremely timely

and productive given the contemporary importance of the healthcare debate and empowerment of individuals to choose how they live their lives and the types of health services they receive."

FITNESS INCLUSION

BBI's view of disability as a social construct is an important perspective. One of the challenges in taking care of patients with developmental disabilities is that society tends to see disability as a medical issue, but Dosa says it's actually much broader. "You're going to do a much better job taking care of these patients if you do it within a social context as well," she says.

An area she's become passionate about is physical activity and health promotion. Obesity is an entirely preventable secondary complication of spina bifida. While there are many contributing factors, a big one is difficulty accessing high-quality adaptive physical education and activity. "There's no question that physical fitness leads to better overall health, but there are fewer opportunities for

my patients to be physically active than the general population. Insurance won't pay for a sports chair so someone can play wheelchair basketball, but 20 years down the road, when they have an adult patient who is overweight because they've been inactive, that's also going to bring cost," she says.

A decade ago, Dosa joined forces with faculty members in adaptive physical education at SUNY Cortland who were putting together a week-long sports camp for children with disabilities. "She supplied many of her patients as campers," recalls Tim Davis.

Both Davis and Dosa quickly realized that a one-week program was insufficient to meet the needs of the Central New York community. "Our discussion quickly moved to how we could go from a one-time summer camp to provide greater continuity for children," recalls Davis. With funding secured by Dosa and the assistance of Dr. Liptak, they created what is called Fit Families Group Visits, a monthly program at Upstate where kids and their families receive brief individual medical visits that are combined with adaptive sports activities in groups of 10-15, led by graduate students in adaptive physical education and physical therapy. "It's a way of integrating medical care with access to expertise, community resources, and informal networking for families," says Dosa.

Sometimes families invite a child's school physical education teacher to join them. "A teacher may only have one child with spina bifida in his or her 20 year career, so this is an efficient way to learn what they need to know," says Dosa.

Without a doubt, the program has connected families, children, and teachers with beneficial long-term outcomes through physical activity, says Davis, who chairs an effort to create national standards for teaching adaptive physical education. "You can see the potential in those young people to do greater things. It's part

of Nienke's vision to give kids with disabilities the opportunity to excel just like any other child."

The program is intended to be a model that can be replicated anywhere. Dosa and her staff have also created manuals and educational DVDs to develop programs for children who are blind and for children who have cerebral palsy. "I'm interested in thinking at the community level how you can promote physical activity for people with developmental disabilities across the age span," she says.

Parent Barbara Tresness says it was Dosa who allowed she and her husband to see that her youngest son, who has cerebral palsy and uses a wheel chair, was as competitive and athletic as his older brothers, standout high school soccer players. Dosa recommended robotics therapy for Graham, which is essentially an iron man suit that allows him to stand and walk, exercising unused muscles in the process. "This was life changing for Graham," says Tresness. "He

broke personal records for distance and speed. Watching his determination and his pride in achievement is a gift she gave us."

Two years ago, Dosa and her friend, Lisa Neville, an occupational therapist, engaged a group of high school dancers to create an adaptive ballet program for children with cerebral palsy at the Jowonio School, a Syracuse pre-school catering to children with a wide range of abilities. Not only was the program therapeutic for the young children, but it taught important lessons to the teenage assistants as well.

"It's like framing disability in the positive," says Dosa. "It's beautiful for the child, the family, and the high school students. It's community building. Medicine is only a small portion of it."

Dosa, Neville, and others involved in the project created a guidebook that could be used by other young dancers who'd like to start a similar program. That's a recurring theme. With financial support that came with her

new position, Dosa plans to tap into students at the high school level and get them involved as change agents in her inclusive fitness initiatives. A second guidebook was recently completed based on the Fit-In conference workshop that can be used by high school technology programs that want to learn how to adapt toy cars into adapted power mobility devices for disabled children.

Dosa and her interdisciplinary team at the Fitness Inclusion Network are knee-deep planning the next conference, which will take place October 10. The theme will be elite sports and how elite athletes (Olympians and Paralympians) can support the inclusive fitness movement. "We will be bringing in Paralympians and Olympians to talk about 'the road to the Olympics' and how their communities supported them to get to where they are," says Dosa, reeling off a list of names of Olympians and Paralympians with local ties as well as local school-aged athletes with disabilities whose athletic abilities she plans to recognize.

Her timing for shining a light on adaptive sports is impeccable. In January 2013, the U.S. Education Department's Office of Civil Rights sent school districts throughout the country a 13-page guidance document that spelled out the rights of students with disabilities to participate in school athletics. The Obama administration made it clear that school districts need to comply or risk losing funding. "It's almost like Title IX for children with disabilities," says Dosa. "We're going to be in a new era of opportunity for kids with disabilities." ■



In March, the Fitness Inclusion Network received a three-year \$150,000 grant that Dosa hopes will help launch a wheelchair basketball team in the Syracuse School district and possibly other regional unified sports teams for high school students. For more information, visit www.bbi.syr.edu/projects/Fit-In

Is There An App For That? [probably.]

Medical apps are transforming the efficiency and accuracy of medical practice. These Upstate-educated physicians are contributing to the information flow.

BY RENÉE GEARHART LEVY

It's no understatement that information technology is revolutionizing the practice of medicine, from the ability to consult with patients remotely via telemedicine to the convenience of being able to access a patient's medical record from home when you are on call.

But one of the biggest impacts may be the availability of huge amounts of information at your fingertips through the proliferation of medical applications (more commonly known as apps) for smartphones and tablets. While the number of medical and health apps in use is constantly in flux, there are an estimated 97,000 mobile health apps currently available for download. Apple's App Store features an entire collection dedicated to "apps for healthcare professionals."

This explosion of apps has given clinicians a wide array of new tools to diagnose symptoms, treat patients, and to obtain and share information, replacing the laminated drug cards, obstetric wheels, and other quick reference guides that once stuffed a doctor's lab coat pockets.

Despite a reputation for resisting change, physicians are fully embracing this form

of information technology. A recent survey found that nearly 75 percent of doctors make use of a smartphone in their day-to-day practice, and 95 percent of those use medical apps. The reason is simple: it helps treat patients better. "There is a lot of medical literature showing that doctors can't know everything they need to know," says Joshua Steinberg, MD '95, a family medicine physician in Binghamton and the author of 13 medical apps. "Questions come up all the time and only a small percentage of the time do we look up the answer. Some times that's okay but other times it really isn't."

The most popular app? Probably Epocrates, which topped the list in a 2012 survey conducted by the University of Pennsylvania's Perelman School of Medicine and the very first app cited by virtually all the physicians interviewed for this article. Instead of searching through an unwieldy drug directory, Epocrates brings accurate dosage information, adverse reactions, drug interactions, and other clinical information to the smartphone.

In addition to commonly used medical reference apps, a new wave of medical device apps can turn a smartphone or tablet into a medical device, such as an electrocardiogram

machine, pulse oximeter, or ultrasound. Since September 2013, FDA guidelines require apps that diagnose or treat conditions meet the same quality standards as heart stents, ultrasound machines, and other medical devices that can pose a risk to patients if they don't work properly.

One thing is clear. The app market is growing before it is slowing. research2guidance, market research specialists in the app market, forecast the medical app market to reach \$26 billion globally by 2017. And according to healthcare futurist Joe Flower, we're almost at the "tipping point," where the use of apps in the medical context has become so commonplace that it's difficult remembering how one practiced without them.

It should come as no surprise that many apps have been developed by physicians themselves in an attempt to solve a problem or answer questions encountered in their own daily practice. Here are a few Upstate physicians who have done just that.



Joshua Steinberg, MD '95

THE DOCTOR:
JOSHUA STEINBERG, MD '95

Family Medicine physician, Binghamton, NY

THE APPS: PreopEval, Pneumonia Guide, Warfarin Guide, ABG Acid-Base eval, Lead Screen Guide, GBS Guide, Pap Guide, EFM Guide, PFT eval, PE & DVT dx tool, Eating Disorders, and Rabies Guide

WHERE DO THE IDEAS COME FROM? Questions that repeatedly arose in his own practice. "Initially, I looked for good resources out there, and when I couldn't find one, wondered if I could make it myself." Steinberg created his first apps back in 2008 for the Palm Pilot. With the advent of the iPhone, he sought assistance from some computer scientists at SUNY Binghamton, developing his first batch of iPhone apps in 2010. Since then, he's used that programming as a template, adding new content to create new apps.

"In our practice, every single resident or attending can field a phone call from the lab about a patient whose Coumadin test result is off, make the dosage adjustment in the same way, and reliably recheck the level a few days later to make sure we got the adjustment right."

His criteria for developing an app—"It has to be something that comes up frequently. It has to be something that's difficult to memorize. The stakes need to be fairly high if you get it wrong. And there isn't a good resource already out there."

WHAT DO THEY DO? Steinberg says all of his apps are intended to improve medical care by providing easy access to information that health care professionals might not otherwise look up. "A lot of these I wrote because they were weak

points for me," Steinberg says. "They came up frequently, the stakes were high, I didn't have the information memorized and I didn't like it."

HOW DO THEY CHANGE THE PRACTICE OF MEDICINE?

Quality improvement, for one. Take Steinberg's Warfarin Guide. Before the app, clinicians either had the information memorized or they "winged it," he says. "For the first 10 years of my career I was winging it and I knew I was winging it but I didn't know how to do better." In an attempt to provide a systematic way of handling patients on this potentially dangerous blood thinner, Steinberg developed a dosage guide from the medical literature, first printing it on paper, then for Palm Pilots, and finally developed an iPhone app. "In our practice, every single resident or attending can field a phone call from the lab about a patient whose Coumadin test result is off, make the dosage adjustment in the same way, and reliably recheck the level a few days later to make sure we got the adjustment right." The app has become standard protocol for United Health Services of Binghamton. "The entire region is using this app so that we all handle Coumadin in a reliable, evidence-based fashion," he says.

BENEFITS: "Having incredible amounts of medical knowledge at my fingertips allows me to be a little bit smarter doctor, make better decisions, and give a little bit better care, one patient at a time," he says.

OTHER FAVORITE APPS: Steinberg is a big fan of technology and uses many apps in his daily practice. He's compiled a list that he recommends to clinicians. You can find it at www.fmdrl.org/index.cfm?event=c.beginBrowseD&clearSelections=1&criteria=steinberg#2423.



THE DOCTOR:
DAVID ADAMKIN, MD '74

Professor of Pediatrics and Director of Neonatal Medicine at the University of Louisville

THE APP: The Sugar Wheel

WHERE THE IDEA CAME FROM: Adamkin was lead author on an Academy of Pediatrics Committee on the Newborn and Fetus statement on post-natal glucose homeostasis and the management of neonatal hypoglycemia in 2010. He was approached about developing an app based on those guidelines.

INTENDED USERS: Neonatologists, pediatricians and nurses use it in the first 24 hours after birth

WHAT IT DOES: Used in conjunction with a bedside testing glucometer, the Sugar Wheel measures the blood sugar level in babies at risk of developing a low blood sugar and provides guidance based on the hour of life and the baby's diagnosis. "For instance, if the screening test is low, the app

directs you as to whether the baby needs another feeding immediately, or intravenous fluids," says Adamkin.

BENEFITS: It's a quick information guide for clinicians that provides simple instructions on who needs to be screened and what do with the results.

OTHER FAVORITE APPS: Adamkin uses smartphone apps for drugs, for drugs in human milk, bilirubin, jaundice, and strep prevention. "I find them quite useful," he says. "I like algorithms." His book, *Nutritional Strategies for the Very Low Birth-weight Baby* (Cambridge Press), is a book of algorithms in nutrition that was developed into an app by the same software developer as the Sugar Wheel.



David Adamkin, MD '74



THE DOCTORS:

BRIAN HANRAHAN '14, AWSS ZIDAN, MD, HS '16, ILYA BRAGIN, MD, HS '14

THE APP: An electronic headache diary, currently in development

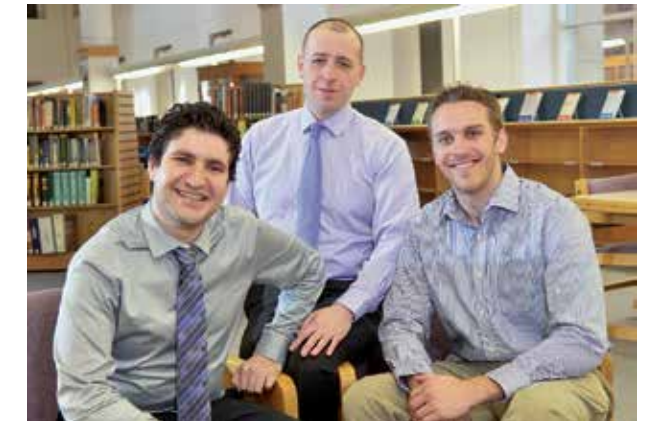
WHERE THE IDEA CAME FROM: This team of Upstate neurology residents and a medical student want to see if they can improve upon a standard paper headache diary and existing headache apps.

WHAT IT DOES: While a headache journal is traditionally used to track possible triggers and medication effectiveness, patients sometimes have a hard time keeping track of how many headaches they have in a week or month and how long they last.

The app provides daily reminders for users to log headaches. If a user logs a headache currently underway, he or she will be notified after a period of time to indicate whether the headache has changed in character, location, or severity.

Hanrahan, Zidan, and Bragin will be tracking users headache logs to create a headache database. "We will collect data regarding duration, severity, triggers and other criteria, and with this information, we will hopefully be able to track trends within our patient population," says Hanrahan.

HOW IT COULD CHANGE THE PRACTICE OF MEDICINE: A primary goal of this app is to see whether patients will be able to better log their headaches in comparison to standard paper forms. "We will test two randomly assigned patient populations (electronic diary vs. paper diary) to see which is better to assess the severity and frequency of their headaches," says Hanrahan. "There are a lot of possible triggers for a migraine-like event—food, poor sleep, stress, weather. The headache applications out



Awss Zidan, MD, HS '16, Ilya Bragin, MD, HS '14, and Brian Hanrahan '14

there now are really patient based. Many of them provide PDF files that you can print out and bring to your doctor. We're trying to streamline it so that every time the patient enters information it comes to us so that we can analyze it. Our long-term goal is to come to some large-scale conclusions based on the variables we look at."



THE DOCTOR:

MICHAEL PRIVITERA, MD '80

Professor of Neurology and Director of the Epilepsy Center at the University of Cincinnati

THE APP: An electronic diary that measures stress and mood variables several times daily, used in a controlled trial for stress reduction in epilepsy



Michael Privitera, MD '80

“That’s really the goal—to come up with interventions that can help people recognize the relationship between stress and seizures and do something about it.”

WHERE DID THE IDEA COME FROM?

A wealthy patient who felt a strong connection between stress and his own seizures created a foundation to study the relationship. As the principal investigator, Privitera quickly realized that stress was an important seizure trigger that was both poorly understood and poorly investigated. Working with colleagues at Albert Einstein and Penn State, he designed a study that employs a smartphone app as an electronic diary that records mood variables and seizures.

INTENDED USERS: Patients and neurologists. Right now, it’s only used in his study but if the diaries show useful in predicting seizures, Privitera would release it for general use for people with epilepsy. “That’s really the goal—to come up with interventions that can help people recognize the relationship between stress and seizures and do something about it,” he says.

WHAT IT DOES: Hopefully, help prevent seizures, or at least give patients a heads up that they’re at risk. “It’s complicated to predict seizures,” Privitera says. “A patient might have one seizure a month, then go two months with no seizures, and then have three in one month. If this app could help us determine what a particular person’s triggers are, we might be able to develop an algorithm that might alert them—not that they are necessarily going to have a seizure tomorrow—but that the following factors are in line and tomorrow might be a high-risk day. Then they might be able to avoid doing certain things or situations that they know are triggers.”

HOW DOES IT CHANGE MEDICAL PRACTICE? “It provides interesting data that you can analyze and act on in a much different way than what we’ve been doing for the last decade,” he says. For now, the app condenses twice-daily mood and stress variables into a graphic form; in the future he’d like to develop patient-specific algorithms for seizure prediction. “I’ll know a lot more in a year, but what I can say so far is that patients think keeping track of mood and stress variables and seizure frequency is very helpful in seeing the connection between them.”



THE DOCTORS:

CHERYL KERR, MD '72

Pediatrician and Telemedicine Coordinator in Binghamton, NY

LAWRENCE KERR, MD '72

Plastic and reconstructive surgeon in Binghamton, NY

THE APP: iClickCare is a HIPAA-secure solution for collaborating with other health care professionals via the iPhone or iPad. iClickCare® enables healthcare providers to “talk” with their colleagues using text, pictures, video, and PDF, and provides a secure archive of cases.

WHERE DID THE IDEA COME FROM?

Personal need. In the 1990s, while working as a pediatrician at United Health Services in Binghamton, Cheryl needed a means to advise and assist nurse practitioners in off-site school-based clinics. With email and the Internet gaining common use, she and Larry developed a computer system in 1995, ClickCare, which provided a telemedicine

link between the UHS pediatric office and the centers. They began offering ClickCare for commercial sale to other providers via clickcare.com beginning in 2006. In 2010, with the proliferation of the iPhone, the Kerr’s created iClickCare specifically for the iPhone and iPad.

INTENDED USERS: All health-care professionals involved in a patient’s care. “People who really understand the importance of coordinated care have been the first users,” says Cheryl.

WHAT IT DOES: iClickCare provides a means to collaborate with other providers off site while maintaining HIPAA confidentiality. For example, a teenage girl visited her doctor with problems walking—her right foot didn’t dorsi-flex in the gait sequence. The primary-care physician took a short video and simultaneously sent it to three colleagues via iClickCare—a neurologist, an orthopedist, and a neurosurgeon. The neurosurgeon operated on the patient the next day to remove a spinal



tumor. Or this case: a 70-year-old man came to a rural emergency room with a severe injury to his arm caused by his garage door spring. Fearing the need for amputation, clinicians sent photos of the injury to a larger hospital an hour away. The operating team there was able to prepare for the incoming surgery and the patient’s arm was saved. iClickCare archives all of a user’s cases, including photos and videos, so they can be easily referenced later.

HOW IT IMPROVES THE PRACTICE OF MEDICINE: It can lead to faster, more accurate diagnoses for the patient while providing greater physician satisfaction. “It allows clinicians to provide quality, coordinated care, the very principles we were taught at Upstate,” says Larry. “If you send a patient for a referral and you hear back what happened six weeks later, it’s hard to connect that back in a satisfying way,” adds Cheryl. “But if you get a conversation going with a referring provider within a day or so via iClickCare, it is much more satisfying and your patient feels much better served.” The app was cited by Steve Wozniak from the stage at the American Telemedicine Association meeting in 2012.

“If you send a patient for a referral and you hear back what happened six weeks later, it’s hard to connect that back in a satisfying way.”



Cheryl Kerr, MD '72, and Lawrence Kerr, MD '72

Not just for health care professionals:

THE DOCTOR:

**SAMI BÉG, MD '02,
MPA, MPH**

Medical Director,
LifeTime Fitness

THE APP: The Macaw mobile health and fitness app, which was named the winner in the Mobile Applications: Health, Wellness and Fitness category of CTIA's Emerging Technology Awards; winner of the 2012 Consumer Electronics Show Mobile App Showdown; and a finalist in the 2011 CTIA Hot for the Holidays.



Samí BéG, MD '02, MPA, MPH

mobile access point to the online product, as well as the latest in smartphone-based health tools. The goal was to employ the latest in mobile technology to drive engagement and help users on their journey to better health.

WHAT IT DOES: The app creates a "health hub" by connecting an individual's health apps and wireless devices for tracking weight, fitness, overall activity, and biometrics—including pedometers, glucose meters, activity armbands, scales, mobile weight loss apps and blood pressure cuffs—into a single app that helps users manage health risks and adopt healthy habits. Macaw features include GPS to track exercise, the ability to set goals and track weight and calories, reminders about recommended preventive screenings based on age and gender, and activity and knowledge cards that unlock chances for weekly prizes.

HOW IT'S DIFFERENT THAN OTHER HEALTH APPS?

Unlike other available health and fitness apps, Macaw was designed specifically to help users engage with the online product and their own health. The goal was to transform the smartphone into the ultimate personal health monitor, connecting an individual's health apps and wireless devices into a single app for complete tracking.

HOW DOES IT CHANGE MEDICAL PRACTICE?

"One of my favorite quotes is by Thomas Edison, who said, 'The doctor of the future will give no medicine, but will interest his patients in the care of the human frame, in diet, and in the cause and prevention of disease,'" says BéG. "Medical practice is changing before our eyes. No longer can doctors ignore the fact that many of the chronic diseases our patients face can be prevented and that in order to do that, we have to engage our patients to be active participants in their own health. While technology is not the solution by itself, it is a tool that health practitioners can use to help empower patients so they can transform their lives."

ALSO UNDER DEVELOPMENT:

BéG has since joined LifeTime Fitness, an industry leader in the health club and events arena, where he continues to develop state-of-the-art products and services that support lifestyle medicine. He is currently working with a team of developers to create a transformative online well-being product that will include various mobile applications.

THE DOCTOR:

**ANURAG SHRIVASTAVA,
MD '03**

Ophthalmologist and
glaucoma specialist
in New York City

THE APP: Peeriscope, a professional networking app that uses GPS and LinkedIn profiles to find professional peers and events near you in real time.

WHERE THE IDEA CAME FROM:

Long airport layovers. "The idea is that there are people out there with similar professional interests and backgrounds that you might be interested in meeting but don't know who or where they are," says Dr. Shrivastava.

WHAT IT DOES: Peeriscope, developed by Shrivastava and his brother, a web and mobile technology professional, has gone through several iterations. The newest version draws from events listed on meetup.com with the information on an individual's LinkedIn pro-



Anurag Shrivastava, MD '03

file to suggest events in the user's proximity that might be of interest, basically saving the user the effort of having to search the site themselves. "It can predict, based on your LinkedIn profile, what groups would be of interest and show you on a map where they are," says Shrivastava. "We're trying to hone our algorithm so that people are matching in several categories—career specialty, skills, alumni network, hobbies or personal interests."

THE BENEFITS:

In addition to saving time, "you can actually look and see who the attendees are, view their profiles, and decide whether you want to join those people at an event," says Shrivastava, who most recently used the app to search events for medical professionals in Manhattan who are entrepreneurs. "We're looking for venture capital for our new iteration and I was able to make some great connections," he says.

OTHER FAVORITE APPS:

Professionally, Eyehandbook, a reference guide for ophthalmology that includes eye charts, color vision testing, coding, and surgery videos. "It's really changed the way I practice," says Shrivastava. "It saves so much time explaining things because a picture is worth a thousand words. You can show a patient a video of cataract surgery, and in 15 seconds, they know exactly what you're going to do."

"We have to engage our patients to be active participants in their own health. While technology is not the solution by itself, it is a tool that health practitioners can use to help empower patients so they can transform their lives."

WHERE THE IDEA CAME FROM:

Dr. BéG has focused his career engaging programs, strategies, and tools in the health and wellness industry to help individuals live healthier lives. In 2007, he was recruited to develop and launch a new web-based prevention and wellness product for employers and individuals at U.S. Preventive Medicine, a start-up company that was considered one of the most innovative employer-based online wellness products at the time. BéG helped design the Macaw App to give individuals a

Support Student Learning at Upstate

Beginning in the 2014-15 academic year, the curriculum for first-year medical students will include a year-long anatomy course with a unique electronic learning component.

Each dissection group in the Anatomy Lab will have an iPad for use during lab periods that provides access to a photographic, step-by-step, interactive lab manual. This manual includes photo galleries with every step of the dissection instructions, quizzes, and short instructional video clips. A full glossary of terms within the lab manual automatically generates study flash cards when highlighted by students. Students can also export any notes they've taken, or email them to themselves.

iPads for use in the lab have been provided by IMT-Educational Communications. Additional resources are sought to provide library reserve iPads (that can be used inside the library, but cannot be removed from the library), as well as additional iPads in secured lock-cases, with attached cables, that will be available within the lab for after-hours review. You can help the Upstate Medical Alumni Foundation support this initiative with a tax-deductible gift made payable to Upstate Medical Alumni iPad program. Contributions may be sent to the Medical Alumni Foundation, Setnor Academic Building #1510, 750 E. Adams St., Syracuse, New York 13210-9976; or call 315-464-4361 for more information.

An Intervention in Her Future

FOURTH-YEAR MEDICAL STUDENT NIKKI ZIMMERMAN IS A LEADER IN PROMOTING HER INTENDED FIELD OF INTERVENTIONAL RADIOLOGY.

It's not every Upstate medical student who can say they've designed a medical school course for their peers, but first-year students can thank Nicole—Nikki—Zimmerman '14 for their Wednesday radiology course.

It's part of a long list of unique achievements the fourth-year student has racked up during her time at Upstate, including co-writing a textbook chapter, publishing peer-reviewed journal articles, presenting her research at national conferences, and writing a textbook for medical students.

While she hasn't even graduated from medical school yet, Zimmerman is well on her way to making a name for herself in the field of interventional radiology. A subspecialty of radiology, IR is a relatively new field that utilizes minimally invasive image-guided procedures to diagnose and treat diseases in nearly every organ system. It emerged as a specialty in the 1970s with the invention of angioplasty and the catheter-delivered stent to treat diseased arteries and has revolutionized treatment for many procedures that once required surgery.

"They're referred to as the cowboys of medicine," says Zimmerman of interventional radiologists. "There are so many new procedures coming out of IR that are treating patients better, that are more efficacious, with shorter recovery times and fewer complications. I love that when no one else knows what to do with a

patient, they're like, 'send them to IR, they'll figure it out.'"

Zimmerman's interest in the field was sparked early in her first year when she brought a CT scan to anatomy professor Barry Berg, PhD, with questions. He referred her to Reza Rajebi, MD, the co-chief radiology resident. "Reza spent a lot of time explaining things to me and his love for radiology was infectious," she recalls. Zimmerman began shadowing Dr. Rajebi, whose real interest was in IR. The two began collaborating on research, ultimately co-writing the book chapter "Imaging in Sarcoidosis," which appears in the *Sarcoidosis Diagnosis and Management* (InTech, 2011).

In the middle of her second year, Dr. Berg approached Zimmerman and Rajebi to ask if they'd be interested in helping create a radiology elective. He felt the four classes on radiology included in the gross anatomy course weren't enough. Assisting Rajebi and Upstate radiologist Hal Cohen, MD '84, Zimmerman helped design the course, present it to the curriculum committee for approval, and develop a lecture series together with online clinical case studies, assessments, and evaluations. She also researched and presented lectures in the specialty of interventional radiology. The course was offered during 2012-13 and attracted 43 students. In March, Zimmerman was first-author on a presentation about the course at the Society of Interventional Radiology meeting in San Diego.

From Upstate's perspective, the course was so successful it was moved from elective status and integrated into the first-year curriculum. "We used most of the material included in her elective in crafting a new longitudinal integrative radiology/anatomy course," says Susan Stearns, PhD, assistant dean of the College of Medicine.

And Zimmerman wasn't done. As a third-year student, she designed and taught four lecture/laboratory sessions devoted to reintroducing the first-year diagnostic radiology (DR) residents to the vascular system. "These were viewed by the faculty and attendings as an innovative and essential addition to Upstate's DR residency program," says Dr. Stearns.

Regardless of a student's intended field, Zimmerman views radiology as an important means for understanding organs, organ systems, and disease process. "Once you become a doctor, very few people see the inside of the human body. Unless you're a surgeon, you never see things the way you did in gross anatomy. The way you view everything is via radiology so it's important to have good radiology skills," she says.

Zimmerman formed an interventional radiology interest group at Upstate her first year and became an active student member of the Society of International Radiology. During second year she became a student council member of that organization and was elected student council chair for 2013, the highest



Nikki Zimmerman '14 threads a catheter through a needle in a mannequin's jugular vein at Upstate University Hospital.

position a medical student can hold. She's been asked to continue as resident chair for 2014. The group edits the IR page on Wikipedia, hosts medical student meetings at the Society of International Radiology International Conference, and works to build student interest in IR, among many other things. Zimmerman spearheaded a regional conference in interventional radiology held at Upstate in November 2013, which was attended by department chairs, faculty, attendings and students from a number of medical schools in the northeast.

She's also writing a textbook for medical students. "The books

that are out there are geared toward fellows or attendings; there's nothing accessible at a medical student level," she says.

Her answer to that is *Interventional Radiology 101: A Medical Student's Guide to IR*, another collaboration with Rajebi, now an IR fellow at Baptist Cardiac and Vascular Institute in Miami. "It goes through the history of IR and how it became the specialty it is today, explains the different imaging modalities, and through each different service line of IR," she explains. "So for arterial disease, for instance, when you think about a big aortic aneurysm, it explains

the pathophysiology of how that happens, then it goes through the indications for treatment, both the conventional treatment and also the endovascular/ interventional option for treatment. It does that for every single disease pathology IR treats." Zimmerman is doing the writing, which she hopes to have complete in the next year.

Amazingly, she's accomplished all of this while a student. And it wasn't until her fourth year that she got to experience an actual radiology rotation. "I was a little nervous to start it because I thought, 'What if I don't like it?' But I loved it and it turned out really well," she says. "I actually spent all of third year trying to find something I liked better but couldn't."

IR has been approved as a primary residency beginning in 2016, so Zimmerman applied to general radiology residencies, honing in on programs that offer a combined radiology/IR pathway.

Regardless of where she lands, she's anxious to get started. "I love that when you're in a procedure you have to think on your feet to come up with different ways to solve things," she says of her intended field. "It's so exciting because there is so much on the forefront. It really is the future of medicine."

CLASS NOTES

1945

Murray A. Grossman, of East Syracuse, NY, is “one of a handful of survivors of the Class of 1945.” He believes that his class is down to perhaps six people.

1949

Charles B. Marshall and Doris, of Martinsville, VA, who received Upstate’s first Humanitarian Award in 2009, hope to be able to attend reunion in September. “Doris’ locomotion has slowed and I am still swimming laps daily at age 86,” he writes.

1956

James P. Giangobbe, of Litchfield Park, AZ, writes, “Pat and I are doing fine. We have done much traveling (most recently to Tahiti, Italy, and Upstate



James Giangobbe '56, far left, and family

New York). I’ve had an active writing career for years (novels, children’s stories, articles, poetry and music) and have been published in *Sports Illustrated*, *Listen*, *Boy’s Quest*, *Positive Teens*, and *Private Practice*.”

1957

Marvin A. Leder, of New York, NY, was honored in July by the Medical

Staff Society of Flushing, New York, with the “Dr. Marvin Leder Medical Staff Society Scholarship Award,” in recognition of his longstanding dedication to education and helping those deserving of support.

David B. Levine, of New York, NY, retired in 1995 as chief of scoliosis at The Hospital for Special Surgery. In 2003 he was asked to take over a new position as director of alumni affairs and of the HSS Archives—positions he continues to occupy.

1958

Howard L. Weinberger, of Syracuse, NY, retired from his full-time academic faculty appointment at Upstate on January 31. “During my 50 years on faculty, I was fortunate to have had some wonderful mentors (including Julius B. Richmond, Harry Feldman, and many excellent colleagues at Upstate). My wife, Anita, retired 15 years

ago after a long career in childhood education. Our three children are married and have wonderful families: Dr. Susan Lehmann is an associate professor of geriatric psychiatry at Johns Hopkins in Baltimore; Debra Linden is a former software editor living in Westchester; and Marc Weinberger is an attorney in the U.S. Department of Homeland Security—Customs and Border Protection living in Silver Spring, MD. We have 10 grandchildren, two of whom are married and four who are in college. The youngest is going to be 12 this year. Our oldest granddaughter is expecting a baby, so we are looking forward to being great-grandparents later this spring. Syracuse is still a great place to visit—especially in the Fall—and we look forward to greeting our classmates at our 60th class reunion in 2018.”

1960

Julian M. Aroesty, of Lexington, MA, recently returned from a sailing cruise through Turkey and the Greek Islands. “My maternal grandfather is buried in Salonica, Greece,” he writes. “I met some distant Aroesty relatives there but unfortunately the grave has been desecrated by the Nazis and the records were destroyed. (My paternal grandfather is buried on the mount of olives in Jerusalem but I could not find his grave which was desecrated by the Jordanians who



Julian M. Aroesty '60 with Aristotle statue in Salonica

destroyed all the records as well). Salonica was wonderful. We were embraced by the Cyrus Vosniakou, who is Greek orthodox but whose mother was a (Jewish) Aroesty. For the first time in about 50 years, I had an opportunity to speak Ladino, the ancient Spanish Jewish dialect, with a docent at the synagogue in Rhodes. It was a memorable moment for both of us. We were almost the same age. He had tattoo numbers on his arm and I realized my own survival occurred because my grandfather emigrated to the United States in 1910. Both of us were close to tears when we parted, wishing each other peace and long life.”

Robert R. Sirotky, of Somerset, NJ, and wife Margo have moved into an over-55 community. “No more lawn work! We will be in Florida for February, and are going to Spain in May. We will be in Syracuse during September for Margo’s 55th reunion at Syracuse University,” he writes.

Frank J. Weinstock, of Boca Raton, FL, has written *I’ve Been Thinking*, available through Amazon.com. The first half of the book is intended to help consumers understand our health system and deal with it more efficiently, while the second half deals with the eyes, how they function, and their diseases. Weinstock spends most of his time with his wife in Boca, where he is still involved in ophthalmology teaching and writing for lay and professional publications.

1964

John P. Fitzgibbons, of Stamford, CT, has a part-time position as senior advisor in the Department of Medicine at the Stamford Hospital and is professor of clinical medicine at Columbia University’s College of Physician and Surgeons. He also serves as a teaching attending for internal medicine residents and medical students from Columbia University at a federally qualified community health center in Stamford. In April, he will receive The Dema C. Daley Founders Award at the meeting of the Alliance of Academic Internal Medicine in Nashville. The award is given to a “member of the internal medicine community recognized nationally as an educator, innovator and leader.” Fitzgibbons and his wife, Beverly, moved to Stamford five years ago because three of

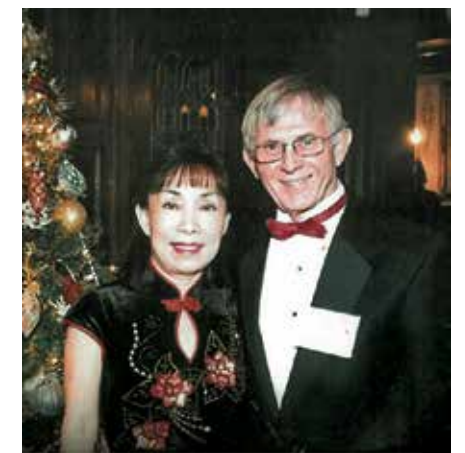
Paul E. Berman '63, of Amherst, MA, is retired and volunteers in a clinic at a local survival center. A medical historian, he presented a paper in England last year and had a paper accepted by the American Association for the History of Medicine for presentation this year.

their four children and 10 of their 14 grandchildren live within 25 miles. Their other son and his family live in Wisconsin where he is stationed in the military.

Samuel J. Mazza, of South Hadley, MA, retired from private practice in 2008 and is now employed by the Department of Veterans Affairs Medical Center in Leeds, Massachusetts, as their surgical consultant.

1965

Peter J. Adasek, of Colorado Springs, CO, bought a ‘new’ house in 2013, about 18 miles north of the city center. He and Sun Hui continue to enjoy dancing at the International Dance Club and at Broadmoor Waltz Club balls. “Being a docent for the Colorado Springs



Peter J. Adasek '65 and Sun Hui

Fine Art Center continues to be a joy!” he writes. “Still lecturing on child abuse; the latest was to cadets at the Air Force Academy.”

Bruce L. McClelland '67, of Branford, CT, is moving to Chicago in the spring, where all three children and three grandchildren live. He may maintain a part-time position at Yale School of Medicine in diagnostic radiology. Winter included a lot of skiing in Bend, Oregon, Sun Valley, and Meribel, France. "Senior ski lift passes are most welcome!"

1967

Roger A. Breslow, of New Hartford, NY, recently received the Scroll Award from the Oneida County Medical Society, presented to "individuals who have made a significant contribution to the advancement of scientific progress or humanitarian attainment." Breslow still enjoys contact with the varied refugee population and last fall made a field trip to Bosnia and Herzegovina to hone his language skills. "To think, in med school days I only knew Greek! I also received my second Paul Harris award from the Utica Rotary Club," he writes.

John R. Moore, of Remsen, NY, reports that none of his six children have MDs, but his two boys received their PhD's last year: Nicholas, in computer engineering from Northeastern University; and Alexander, in astrophysics, from the University of Rochester.

1968

Robert L. Bard, of New York, NY, edited a textbook in December, *Image Guided Prostate Cancer Treatments*. Bard also wrote chapters "Anatomy of the Face for Cosmetic Purposes" and "Concepts in Cosmetic Procedures" for the textbook, *Dermatologic Ultrasound with Clinical and Histologic Correlations*.

1969

Joann and Robert Dale, of Rochester, NY, managed three wonderful trips in 2013. "For you 'Downton Abbey' fans, our PBS station arranged a trip

to England that included Highclere Castle and other relevant sites. We next cruised the Dnieper from Kiev to the Black Sea. Our last was a cruise from Istanbul to Dubai and was filled with highlights like the Holy Land and trooping through Petra's vast canyon a la Indiana Jones," Joann writes. Bob is still actively practicing pulmonary medicine.

Aart Geurtsen, of Jamesville, NY, has joined Upstate as assistant professor for the Department of Internal Medicine and has been a hospitalist at the Community Campus since 2008. He is board certified in family practice and practiced in California before returning to the Syracuse area where he was in private practice until 2008.

1974

James H. Brodsky, of Potomac, MD, is planning to attend his 40th class reunion in September.



Jim Brodsky '74 shared this moment to remember: switching chairs with Dean Andreatta.

David E. Gorelick, of Solana Beach, CA, retired from cardiology and is a volunteer member on the Institutional Review Board.

Stephen P. Heyse, of Silver Spring, MD, retired for the second time in May from the National Institutes of Health, but not completely. "They keep pulling me back in, like the Godfather, part III," he says. Heyse continues to consult on a project to qualify an animal model of tularemia for drug and vaccine testing, but has much more time to spend with his six grandchildren at the beach house in Delaware Bay and the family cabin on Fox Lake in Sullivan County.

1975

Phillip C. Gioia, of Auburn, NY, is now board certified in clinical informatics.

1976

Richard M. Alexander, of Houston, TX, participated in a surgical medical mission to the Philippines in 2013.

James Cornell, of Orefield, PA, continues in group practice of gastroenterology, which recently added its 14th member, serving hospitals in Allentown and Bethlehem, Pennsylvania.

1980

Michael D. Privitera, of Cincinnati, OH, was appointed second vice president of the American Epilepsy Society at the 67th American Epilepsy Society's annual meeting and scientific conference in Washington, DC, on December 8, 2013.

Gerald B. Rakos, of Wilton, CT, remains chair of the Department of Pediatrics at Stamford Hospital and was recently elected to serve on the hospital's board of directors. "Looking forward to our 35th!" he writes.

Jean M. Weigert, of Simsbury, CT, was named president of the Radiological Society of Connecticut and director of breast imaging for the Hospital of Central Connecticut. Her daughter, Rachel Alper, gave birth to a beautiful boy, Aaron Reid Alper, on October 15, 2013.

1981

Sharon A. Brangman, of Syracuse, was selected by the Institute of Medicine (IOM) as one of seven experts to participate in three meetings on advanced dementia. IOM is convening these meetings for the U.S. Department of Health and Human Services and the Advisory Council on Alzheimer's Research, Care, and Services that was created by the National Alzheimer's Project Act (NAPA). Brangman is

professor of medicine, division chief of Geriatrics, division chief of University Geriatricians and division chief of Alzheimer's Disease Assistance Center at Upstate Medical University.

Elizabeth C. Henderson, of Smiths Station, AL, is working as a Department of the Army Civilian at Fort Benning, Georgia, as the Medical Evaluation Board Psychiatrist.

1982

Robert C. Cupelo, of Manlius, NY, is proud that his daughter, **Emily '13**, graduated from Upstate in May and was accepted to a radiation oncology residency in Syracuse.

John C. Morris, of Cincinnati, OH, is professor of medicine in the division of hematology-oncology at the University of Cincinnati, where he is co-director of the Comprehensive Lung Cancer Center and Experimental Therapeutics Program, and associate director for translational research of the UC Cancer Institute. He is currently engaged in teaching, laboratory and clinical research. His daughter, Caroline, graduated from West Virginia University with a BSN degree and is currently a critical care nurse at Virginia Hospital Center in Arlington, VA. Son Brian is a senior in the political science/international relations program at University of Cincinnati and is expecting to enter graduate school in the

fall. His wife, Laura, is the controller of documents for pension actuary in Maryland. They split their time between Cincinnati, OH, and Bethesda, MD.

1983

Eric L. Fremed, of Teaneck, NJ, celebrated his 29th wedding anniversary, with his wife, Nancy, a nurse practitioner. "We must have talked about medicine a lot at the dinner table, because most of our four children have pursued interests in healthcare," he writes. "Our oldest is a vascular surgery resident at Mt. Sinai in New York; our second is a third-year medical student at Albert Einstein in New York; and our third is studying speech therapy at Columbia. The youngest is a freshman at Columbia, but so far no interest in a medically related field. She'd rather try to save the planet. Regards to the class of 1983!"



Mark Berg '84, wife Debbie, and daughters Emily and Kristen

1984

Mark J. Berg, of Winchester, VA, was elected the delegate representing the 29th District of the Virginia House of Delegates this past November. He began his two-year term in January. "Come down to Richmond for a visit!"

Theodore M. Mazer '83, of Poway, CA, has been elected Speaker of the California Medical Association. He has been involved in political advocacy and legal advocacy for patient access to care, including involvement in a recent U.S. Supreme Court Case, and has appeared in national news, including the *New York Times*, *Los Angeles Times*, Fox News, and CNBC.

Gwen S. Korovin, of New York, NY, is editing the fourth edition of the textbook *Diagnosis and Treatment of Voice Disorders*, to be published by Plural Publishing.

1986

Stephen Delia, of Duxbury, MA, was honored with the "Best of South Shore" for cosmetic surgery this past fall.

1987

Cynthia B. Heller and **Steven Weinreb**, of Hartford, CT, are still living and practicing internal medicine in Hartford as part of the ever-growing Hartford Health Care system. "We bike, hike, and ski when we can. Our eldest is a first-year medical student at University of Connecticut and the younger two are in college."

1988

Rene Anderson-Cowell, of Portland, OR, is a practicing allergist/clinical immunologist. She is married and has two children—ages 16 and 13—a yellow lab, and two cats. She enjoys hiking the natural trails in the Pacific Northwest, along with writing and oil painting.

Teresa J. Karcnik-Mahoney, of Hurley, NY, continues to work at Crystal Run Health Care in Orange County, New York, as a diagnostic radiologist. She lives with her husband and younger daughter who is a junior in high school in Ulster County. Her older daughter is in her second year at SUNY New Paltz.

1989

Joseph Albano, of Salt Lake City, UT, is a team physician for the Major League Soccer team, Real Salt Lake, who won the Western Conference finals (and he got to hoist the cup!). "If you can't do, teach. If you can't play, you may as well be the team doc!" he writes.



Joseph Albano '89

SAJID A. KHAN, MD '03

From Bench to Bedside

The leading cause of death in patients with colon cancer is metastasis to the liver. While most patients undergo systematic chemotherapy to slow the progress of their disease, there is a small subset that undergo potentially curative liver resection. Unfortunately, 60 percent of those patients will have their cancer return.

Sajid A. Khan, MD '03, wants to lower that number. The Yale surgical oncologist is using molecular markers to identify patients for whom surgery will truly be curative.

"Currently, patients are selected for surgery using clinical characteristics, such as number and location of metastases. My research is looking at the molecular profile of tumors in patients with limited metastases to identify individuals with true, oligometastatic disease," explains Dr. Khan. He's attempting to identify microRNA profiles in patient tumors that correlate with favorable clinical outcomes, and hence better select which patients will benefit from metastatic liver resections.

"Technology is pretty advanced in molecular biology. My studies involve actually taking patient tumor tissue to see what their microRNA expression is," he says. "The goal is to be able to use this molecular data and incorporate it with clinical data to better select patients for curative surgical resection. This is true clinical translational research."

It's also a perfect marriage of Khan's interests, combining the inquiry of basic science, the hands-on adrenaline rush of surgery, and the humanity of patient care. As an undergraduate, Khan initially planned to pursue a PhD and become a scientist. Realizing he could help people through practical application of science, he pursued medical school instead. Interested in internal medicine, it wasn't until the middle of his third year—when he had his first surgical rotation—that his interests changed.

"I loved being in the operating room. It was a huge adrenaline rush. I also liked that you have quick results. You have a problem, you fix or remove it, and then you have an answer as to whether you solved the problem," he says.

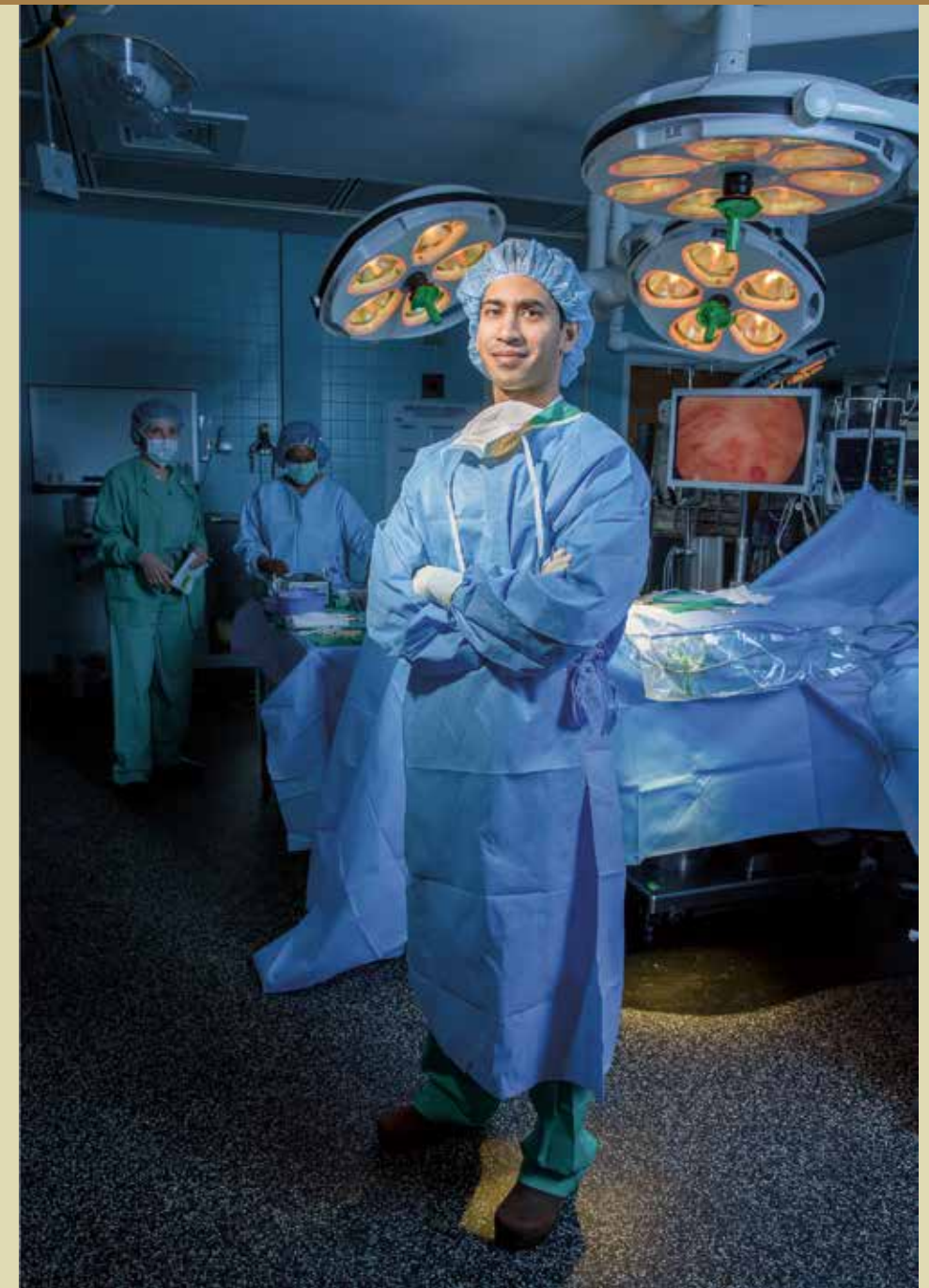
Khan began his surgical residency at Albert Einstein School of Medicine-Montefiore Medical Center, where his program director was a surgical oncologist. That, and his long-time interest in basic science and tumor biology, drew him to the specialty. "More than many other disciplines in surgery, surgical oncology is very academic and research focused, which had a huge appeal to me," says Khan. "You have to really understand the biology of the cancer in order to treat someone with cancer."

After his second year of residency, Khan was selected for a prestigious surgical oncology research fellowship at Memorial Sloan-Kettering, where he spent two years doing clinical translational research on colon cancer. With his interests more finely honed, he completed his surgical residency at Oregon Health and Science University, followed by a second surgical oncology fellowship at The University of Chicago.

He selected that program because it included 18 months of clinical training and 18 months of pure cancer research. It was there he was introduced to his current research in oligometastasis and he continues to collaborate with his mentors at University of Chicago and Sloan-Kettering.

Khan joined the Yale faculty as an assistant professor in August 2013. His clinical practice specializes in gastrointestinal oncology and removal of soft tissue tumors such as sarcomas and melanomas. He's the principal investigator at Yale for a new national chemoprevention trial for colon cancer. "I choose my research projects, both scientific and clinical, to complement my clinical practice," he says. "If I see patients in my office with these kinds of problems, it'll help me do a better job at focused research that asks the right questions. More importantly, hopefully I will have good, positive results from my research that I can apply to my patients and clinical practice. The ultimate goal is first-rate outcomes for my patients."

Aside from his work, Khan says his greatest passion is his family, and there's little doubt about what gets discussed at family gatherings. Khan's wife is a medical oncologist. His brother is an orthopedic oncologist at SUNY Stony



Sajid A. Khan, MD '03, is a surgical oncologist on faculty at Yale.

Brook. His sister-in-law is a nurse anesthetist. His mother is also a physician and dad is a professional engineer. "We like solving problems," he says.

While never pushed toward medicine, Khan says his parents stressed the importance of a strong education, a tireless work ethic, perseverance in achieving goals, and of being honest, sincere, and respectful to others, values he hopes to pass to his children.

He should probably add passion for what

you do to the list, as his is clearly evident. "I love being a surgeon but I also love understanding the biology behind the disease," says Khan. "That helps me treat patients better and allows me to do the research I do."

—Renée Gearhart Levy

1991

David W. Dexter, of Fairview, PA, is the lead singer in a local rock band called Malpractice, which is increasing in popularity and bookings. The band plays about once a month at local bars or charity events. "All of us in the band are healthcare-related and three are physicians," he says. "We are never too old to try something new!"



David W. Dexter '91 is lead singer in the band, Malpractice.

Jeffrey M. Riggio '97, of Wynnwood, PA, is the medical director of clinical informatics at Thomas Jefferson University Hospital. He recently received his board certification in clinical informatics, the first new medical specialty in nearly 20 years.

1998

Aviva D. Gorig, of New York, NY, completed a fellowship in consultation-liaison psychiatry, and has been working in community psychiatry in New York City. Her older daughter is a junior in high school and her younger daughter is in 5th grade.

1999

Mary E. Fowkes, of Katonah, NY, is director of neuropathology and the autopsy service at the Icahn School of Medicine at Mount Sinai in New York.

2001

Jamie D. Shutter, of St. Petersburg, FL, is now the laboratory director at the Women's Care Florida Laboratory in Tampa, Florida.

2005

Daniel R. Lefebvre and **Isabelle Zamfirescu**, of Westwood, MA, share that Dan was inducted into the American Society of Ophthalmic Plastic and Reconstructive Surgery (ASOPRS) last June in Newport, RI, a group of about 500 oculoplastic and orbital surgeons worldwide. He is currently on the full-time staff at the Massachusetts Eye and Ear Infirmary in Boston and is an instructor in ophthalmology at Harvard Medical School. He and Isabelle enjoy living outside of Boston with their four-year-old twin daughters, Brooke and Noelle.

2006

Lisa M. and **Daniel D. Hayes**, of New Hyde Park, NY, are happy to announce the birth of their son, Andrew Daniel. Andrew was also welcomed by his big sister, Allison, who is now four years old.

2007

Yvonne and **Madison '02 Cuffy**, of Cincinnati, OH, welcomed their second child on June 7, 2013.

Emily Lazzari Albert, of Fayetteville, NY, joined the Upstate Department of Medicine as assistant professor and as a hospitalist for Upstate University Hospital. Albert earned a master's in public health from Ohio State University in 2013.

2008

Sarah E. Matt, of Austin, TX, recently started a position in healthcare IT/bioinformatics and is now the physician director of clinical content for NextGen Healthcare's inpatient software division.

Robert Nastasi, of Fayetteville, NY, and Azam Wendy Nastasi announce the birth of their son, Ethan Robert Nastasi, born March 30, 2013.

ERICALYN KASDORF, MD '05

Making Miracles Happen



Ericalyn Kasdorf, MD '05

Ericalyn Kasdorf, MD '05, knows exactly when the spark occurred. She was a second-year Upstate medical student participating in an elective called The Miracle, which follows an expectant mother throughout the course of her pregnancy.

Paged to the delivery, Dr. Kasdorf remembers her excitement. "I had been following this woman's health for nine months and had developed a relationship with her," she recalls.

But something unexpected changed Kasdorf's focus. In an otherwise routine birth, the baby was born with meconium in the amniotic fluid. A NICU team was rushed in to suction the newborn below the vocal cords. "I was instantly drawn to the warmer and what they were doing," she says.

A decade later, Dr. Kasdorf is director of the Perinatal Center at the Komansky Center for Children's Health at New York-Presbyterian/Weill Cornell Medical Center in New York City and a specialist in neonatal medicine, caring for pre-term infants and babies born with congenital anomalies.

An important part of her work begins long before the delivery. "With sophisticated ultrasound and the wide array of genetic testing, there are fewer surprises in terms of congenital anomalies these days," says Kasdorf, who counsels families prenatally to prepare them for what lies ahead.

"Typically, we've determined through prenatal testing that there's a condition—maybe congenital heart disease or spina bifida—that will require the baby to be in the neonatal intensive care unit for an extended period of time," she says. The goal is to remove the mystery out of what may happen after the delivery.

"For a family that delivers at 24 weeks, their baby may be in the NICU for upward of four months or more," Kasdorf explains. "I want to give the parents an idea of some of the challenges we may face, the treatment options, what the NICU course may be like, what criteria need to be met before discharge. In the case of congenital anomalies, I'll introduce them to the surgeries that may be needed during that period. Often, I'll organize a multidisciplinary meeting with all the subspecialists that will be involved in their child's care to lay out what the care plan may look like."

Caring for a fragile infant takes a village, one aspect of Kasdorf's work that most appeals to her. "You're not working in isolation. There's a lot of collaboration— with

neonatal nurse practitioners, nutritionists, respiratory therapists, nurses, multiple subspecialists. Our goal is to provide high-quality multidisciplinary care to families that are facing a real challenge, and to try to make that experience as least stressful as possible," she says. "If we can make them see that we have a cohesive plan, that we'll work together as a team to provide the best outcome possible for their baby, we can make the process a little easier for them."

In addition to conducting prenatal counseling year round, Kasdorf divides her time between clinical service and research. While on service for one month at a time, she is responsible for infants hospitalized in the 50 bed NICU. "I'm conducting rounds on a daily basis, doing bedside teaching, and spending time with families updating them on how their infant is doing. Those months are particularly busy, with early mornings and late nights," she says. Kasdorf is also focused on clinical research, much of which studies the developing brain and developmental follow up. The NICU has a developmental clinic and Kasdorf spends one day a week there following patients until age six. "I really get to establish a long-standing relationship with the baby and the family," she says.

Part of the practice plan at New York-Presbyterian/Weill Cornell is to treat high-risk infants with a procedure called therapeutic hypothermia—head cooling—to reduce the extent of evolving brain injury. Using clinical data on her patient population, Kasdorf is studying developmental follow up, various treatments, and infant outcomes to determine best practices. "The goal is to counsel families better in the future as they find themselves in a similar position," she says.

When she first began her training—she completed both her pediatric residency and a fellowship in neonatology at New York-Presbyterian/Weill Cornell—she thought she'd be intimidated by the NICU and the fragility of the newborns. But she quickly learned just how resilient that patient population could be. "To see a baby who's been there for three or four months go home, that's such a reward," Kasdorf says. "And to see them running down the hall of our developmental clinic, kicking a soccer ball three years later, that's even better."

—Renée Gearhart Levy

2010

Michael G. Fitzgerald, of South Burlington, VT, was married to Nina E. Fedrizzi on October 5, 2013, at the Cathedral in downtown Syracuse.

Rajitha Devadoss Venkatesh, of Brookline, MA, matched to the pediatric gastroenterology fellowship at Massachusetts General Hospital starting in July 2014. She got married in 2013, and her husband is a current resident at Brigham and Women's Hospital and Massachusetts General Hospital. She completed her pediatrics residency at Yale-New Haven Hospital and is currently working at Boston Children's Hospital.

Jeff P. Ward, of University City, MO, and Stacey Leisenfelder Ward (who graduated with her PhD from Upstate in 2007) welcomed the birth of their son, Benjamin George, on November 16, 2013. Jeff is an oncology fellow at Washington University in St. Louis, MO.

2013

Emily Cupelo and **Michael R. Daugherty**, of Syracuse, NY, were married on October 19, 2013. Emily is currently doing her transitional year at St. Joseph's Hospital in Syracuse and will be a radiation oncology resident at Upstate; Michael is a urology resident at Upstate. Emily's father is **Robert "Bob" Cupelo '82**.



Michael Fitzgerald '10 and Nina Fedrizzi were married on October 5, 2013.



Emily Cupelo '13 and Michael Daugherty '13 were married on October 19, 2013.

1950

MARGERY W. SMITH, of New Berlin, NY, died on August 8, 2012. Dr. Smith moved to a dairy farm in western Albany county after residency, where she served the medical needs of her community while raising her family. She had a 50 year distinguished career and participated in numerous professional and community organizations, including serving as president of the New York State Academy of Family Physicians in 1984 and the American Medical Society of the County of Albany from 1980-1982. In 1979, she was a runner-up for Good Housekeeping Family Doctor of the year. She was survived by her sons, Charles and Franklyn; her daughters, Johanna and Elizabeth; and six grandchildren.

1951

ALICE J. TUREK, of Boca Raton, FL, died November 18, 2013.

1953

JOHN L. RURY, of Plattsburgh, NY, died on September 23, 2013. Dr. Rury served his country during World War II in the U.S. Army Infantry. He moved to Plattsburgh in the 1960's as an anesthesiologist at the Champlain Valley Hospital and Physicians Hospital, later CVPH Medical Center. Rury is survived by his wife, Doris; his daughters, Kim, Cynthia, Joyce, Suzan, Elizabeth, and Rebecca; sons, John III and Michael; and several other family members.

1954

SALVATORE J. DALBERTH, of Rochester, NY, died July 1, 2013. Dr. Dalberth served in the U.S. Army for two years in France. He was a Fellow of the American Academy of Pediatrics, past president of the Rochester Pediatrics Society, and practiced as a pediatrician in the Rochester area for 50 years. He is survived by his wife, Joan; his sons, Paul and Mark; his daughter, Elizabeth; grandchildren, and several other family members.

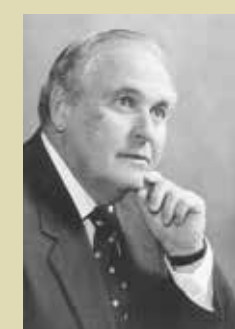
1955

DAVID D. O'BRIEN, of Lake Ridge, VA, died November 2, 2013. Dr. O'Brien was a major in the U.S. Air Force and served from 1957-1965. He was a longtime private practice physician in Oswego until his retirement last year. He served as the medical director at St. Luke Health Services for many years and was also a medical consultant to the nuclear industry in Oswego. He is survived by his wife, Joan Jackson; his daughters, Kathryn, Meghan, and Alice; his sons, David and Dr. Christopher O'Brien; stepdaughter Dr. Cynthia Chapman; stepson Tyler Chapman; and several other family members.

1956

ANTHONY T. SLIVINSKI, of Syracuse, NY, died January 6. Dr. Slivinski was a U.S. Army veteran of World War II. He practiced as a psychiatrist for more than 50 years in the Syracuse area. He is survived by his daughters, Mary, Anne, and Charlotte; his sons, Anthony, Gregory, and Robert; grandchildren, great-grandchildren and several other family members.

1957



ROBERT J. KAPLAN MD '57, of Smithtown, NY, died January 17. Dr. Kaplan was a U.S. Air Force veteran who served as captain. An obstetrician and gynecologist, he settled in Smithtown on Long Island, where he delivered thousands of babies during his 50 years of practice. Kaplan was a fellow in the American College of Surgeons and also specialized in infertility and cancer treatments. When not practicing medicine, he built

microwave ovens and radios and even a sports car from a kit. He earned his private pilots license in 1973. He is survived by his wife, Edith; and his daughters, Lisa, Debra, and Amy; and four grandchildren.

IN MEMORIAM

1958

BENJAMIN H. BUTTON, of Amsterdam, NY, died on January 21. An orthopedic surgeon, Dr. Button began his career in 1963, working at Amsterdam Memorial Hospital and St. Mary's Hospital. During his 27 years of practice, he was chief of staff at both hospitals, in addition to many other positions. He retired in 1990 and did volunteer medical missionary work with Samaritan's Purse for the next 15 years in many African countries and Afghanistan. Button is survived by his wife, Jane; sons Scott and Christopher; and several other family members.

1959

WALTER BAURLE, of Dryden, NY, died December 26, 2012. Dr. Baurle practiced medicine in Dryden with Dr. John Ferger for 30 years. He is survived by his wife, Marilyn; a son, two daughters, grandchildren, and great-grandchildren.

JAMES W. FITZGERALD, of San Rafael, CA, died December 24, 2013. Dr. Fitzgerald served in the U.S. Army from 1942 to 1945. He was a Catholic Mission Doctor, serving in the Lukechuki Indian Reservation in Arizona, in the African Nation of Malawi and in the Territory of Papua in New Guinea. He returned to private practice in the Los Angeles area, prior to returning to the Capital Region in 1986 to accept a position with the New York State Department of Health. He is survived by his children; daughters Mary and Patty; his son, James; and a grandson; and several other family members.

1961

MARVIN H. STEIN, of Irvine, CA, died August 12, 2013. Dr. Stein practiced medicine in Gardena from 1962-2001. He was a captain in the U.S. Army from 1966-68 and served in Vietnam. Stein is survived by his wife, Rosanne; sons Jeffrey and Richard; and several grandchildren.

1981

ELIOT J. LAZAR, of Irvington, NY, died January 30, 2014. Dr. Lazar was board certified in internal medicine, critical care medicine, cardiovascular medicine, and geriatric medicine. He began his career as associate director of medicine and co-director of the Intensive Care Unit at the Hospital of the Albert Einstein College of Medicine. In 1991, he was appointed as a consultant to the Commissioner at the Food and Drug Administration, focusing on policy matters pertaining to continuing medical education and adverse drug event reporting. He continued in this capacity through 1993, receiving the Commissioner's Special Citation for his work. Lazar then served as chairman of internal medicine and residency program director at The Brooklyn Hospital Center. In 2000, he joined the New York-Presbyterian Healthcare System as vice president of medical affairs, and in 2004 was appointed chief medical officer of the New York-Presbyterian Hospital/Healthcare System. His research included clinical trials in hypertension and coronary disease, and issues related to quality and patient safety. He was a fellow of the American College of Physicians, the American College of Cardiology, the American College of Chest Physicians, the New York Academy of Medicine, and the Royal Society of Medicine (UK). He is survived by his wife, Becky; his children; and several other family members.

Faculty

C. BARBER MUELLER, MD, of Hamilton, ON, died on February 13. Dr. Mueller was a decorated veteran of World War II serving in the South Pacific. He was in the first class of Markle Scholars, a Distinguished Fellow of the American College of Surgeons, and chairman of surgery at Upstate Medical University. Mueller is survived by his daughter, Ann; his sons, John, Richard, and William; seven grandchildren, and five great-grandchildren.

UPSTATE MEDICAL ALUMNI Reunion

SAVE THE DATE! SEPTEMBER 19 - 20, 2014

Reunion Weekend 2014 honors College of Medicine graduates from 1949, 1954, 1959, 1964, 1969, 1974, 1979, 1984, 1989, 1994, 1999, and 2004.



MARK YOUR CALENDAR NOW TO ATTEND YOUR MEDICAL class reunion and enjoy a weekend of social activities, educational lectures, tours, family events, and plenty of time to reminisce with old and new friends alike.

We're proud to announce Patrick Basile, MD '03, as the Weiskotten Lecturer. Dr. Basile is assistant chief of plastic surgery and director of microsurgery at Walter Reed National Military Medical Center and will speak about his experiences treating soldiers injured in the Iraq and Afghanistan wars, including his role in a rare bilateral arm transplant performed last year.

Other Reunion highlights include:

UPSTATE CANCER SYMPOSIUM

Occupational Related Cancers

MEDICAL ALUMNI WRITING SEMINAR

Workshop led by Dr. Deirdre Neilen from Upstate's Center for Bioethics and Humanities on how creative writing can deepen the connections that link physicians, patients, and caregivers, and provide them more control over suffering and illness.

REUNION AWARDS AND SCHOLARSHIP PRESENTATIONS

Presentation of the Distinguished Alumnus, Outstanding Young, and Humanitarian Awards, and the awarding of student scholarships funded by alumni support

TOURS: THE HEALTH SCIENCE LIBRARY

FEATURING HISTORICAL EXHIBITS, THE SETNOR ACADEMIC BUILDING'S CLINICAL SKILLS CENTER, AND ANATOMY LAB

Take a walk down memory lane and relive your medical school days! Visit library historical exhibits and take pride in new state-of-the-art facilities.

ALL CLASS DINNER PARTY

Enjoy great atmosphere, food and drink while reconnecting with old friends and making new Upstate connections.

DEAN'S BREAKFAST AND ANNUAL MEETING

Get an update on Upstate from Interim President Gregory L. Eastwood, MD, and College of Medicine Dean David B. Duggan, MD '79

LUNCHEON AT THE ROSAMOND

GIFFORD ZOO AT BURNET PARK

Enjoy a lovely luncheon with your classmates at the Rosamond Gifford Zoo, then stroll through the many new exhibits — penguins, elephants, grey wolves, snow leopard cubs, and Ophelia, the giant pacific octopus. Come rain or shine as there are plenty of indoor exhibits. Reminisce with favorite faculty members from the past and present as part of our Familiar Faces from Upstate. We will be recognizing our special guests around 1:30. Lunch will be served throughout the afternoon.

CLASS DINNERS

Classes of 1949, 1954, 1959, 1964, 1969, 1974, 1979, 1984, 1989, 1994, 1999 and 2004

Make hotel reservations today!

For a listing of area hotels, visit our Reunion web page at www.upstate.edu/medalumni/reunion and click on accommodations in the left margin.

Information: Call 315-464-4361

Email: murphyL@upstate.edu

Mail: Medical Alumni Office
Setnor Academic Building #1510
750 E. Adams St., Syracuse, NY 13210

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LOOKING BACK: Herman Gates Weiskotten, MD (Class of 1909), Syracuse health commissioner and dean of the Syracuse College of Medicine, speaks to children from the Onondaga Home for Orphans at a class picnic, June 23, 1926.

