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ON THE COVER: Vincen Czerny (1842-1916,) a cancer specialist and professor of surgery from Heidelberg, performed a gastroenterostomy at the Cooper Medical College Lane Hospital, in San Francisco, on October 3, 1901. Levi Cooper Lane, MD (1828-1902), founder of the school, entered the operating room in street clothes to have his photo taken with the eminent visiting professor. © Stanley Burns, MD & The Burns Archive
It is indeed my pleasure to be addressing you for the first time as your new executive director of the Upstate Medical Alumni Association and Medical College Foundation. I have now been on the job for five months and am thoroughly enjoying my new role. I have been working closely with the Foundation Board of Directors and am impressed with the knowledge, commitment and passion they have for their medical college. I see my role with the Foundation Board to provide guidance and leadership in all areas of philanthropy and communications.

I am returning to Central New York from the State University of New York at Albany and bring with me more than 30 years experience of working in higher education philanthropy. Previously, I spent 11 years at Syracuse University, and prior to that, was in Western New York at St. Bonaventure University. New York State is in my blood, having been born and raised in Mooers, New York, north of Plattsburgh.

Already, I have realized that the greatest asset of the Upstate College of Medicine is you, our alumni. It is your participation in the life of your medical school that has helped to continue its success. Our alumni have established more than 80 endowed scholarships that award $350,000 each year to our medical students and the Career Advisory Network with more than 200 alumni that mentor our students. I see great potential for growth in these areas. There is certainly a much greater need for scholarships and mentors, and alumni participation will be an area that much of my time will be focused on.

In my short tenure, I have witnessed the intensity of our students as they prepare so hard to become doctors, the jubilation of Commencement, and the passion of our alumni working to ensure their medical school is forever the best. In the coming years, I truly look forward to working with the Foundation board and all of you, continuing the success and discovering new avenues to make Upstate College of Medicine an even greater institution.

Best regards,

Paul E. Norcross
Executive Director
Upstate Graduates 157 New Physicians

UPSTATE MEDICAL UNIVERSITY INTERIM

President Gregory L. Eastwood, MD, awarded 157 MD, 12 MPH (master of public health); and one Public Health Certificate to graduates of the university’s College of Medicine at a Commencement ceremony on Sunday, May 18.

Barbara Resnick, PhD, and John R. Seffrin, PhD, received honorary doctor of science degrees. Dr. Resnick is recognized for her innovative work in geriatrics, with special concentration on motivation related to functional activities, exercise behavior, testing outcomes of restorative care nursing programs, and other innovative long-term care projects. She is a professor in the Department of Organizational Systems and Adult Health at the University of Maryland School of Nursing; holds the Sonya Ziporkin Gershowitz Chair in Gerontology at the School of Nursing; and maintains a clinical/faculty position with clinical work at Roland Park Place, a Lifecare community.

Dr. Seffrin, who addressed the graduating class, has served as chief executive officer of the American Cancer Society since 1992. Under his leadership, he has transformed the world’s largest voluntary cancer-fighting group into one of the world’s most progressive public health organizations. He spearheaded the creation of the society’s nonprofit, nonpartisan advocacy affiliate, the American Cancer Society Cancer Action Network, of which he is also the chief executive officer.

In addition, graduating Upstate medical student Dan Harris, MD ’14, addressed classmates as the chosen student speaker for the Class of 2014. Dr. Harris thanked one and all, discussed love and joy, and quoted poet Ogden Nash on happiness. Then he broke out his trusty ukelele for a medical school adaptation of Don McLean’s “American Pie” that brought smiles and tears to the audience.

“It was a very happy day,” says David Duggan, MD ’79, dean of the College of Medicine. “I want to thank all faculty for their contributions to our students’ success. We have a lot to be proud of.”
Cleary Elected ACP Governor

LYNN M. CLEARY, MD, FACP, WAS ELECTED governor of the New York Upstate Chapter of the American College of Physicians (ACP), the national organization of internists. Her term began during the ACP’s annual scientific meeting, held April 10 to 12 in Orlando. Governors are elected by local ACP members and serve four-year terms. Working with a local council, they supervise ACP chapter activities, appoint members to local committees, and preside at regional meetings. They also represent members by serving on the ACP Board of Governors.

Dr. Cleary, who has been a fellow of ACP since 1998, is professor of medicine and vice president for academic affairs at Upstate. She is a Distinguished Teaching Professor of the State University of New York.

First-year Medical Students Win Top Writing Honors

Four first-year medical students at Upstate were honored at the 28th Bruce Dearing Writing Awards. The annual writing competition is sponsored by Upstate’s Center for Bioethics and Humanities, and the students’ work, along with winning submissions in the faculty/employee category, appear in the October issue of the literary and visual arts journal, The Healing Muse.

The top award for student poetry went to Makandiwana Shoniwa ’17 for “The Forging.”

The winner in the student category for prose was Kaitlin Kyi ’17 for her essay, “Roman Bridges.” Honorable mention went to Julienne Abad ’17 for “Valerie’s Secret.”

Upstate Interim President Gregory Eastwood, MD, cited the importance of the arts and humanities, which “give us great joy as we go about our daily lives.” Ideally, the arts are “a part of us, not just what we do in our spare time,” he said.

First-year medical students Kaitlin Kyi, Makandiwana Shoniwa, Julienne Abad and Brielle Stanton won top honors at the 28th Bruce Dearing Writing Awards, sponsored by the Center for Bioethics and Humanities.
Bradshaw Recognized for Excellence

Deborah Young Bradshaw, MD ’84, received the 2014 Program Director Recognition Award from the American Academy of Neurology, Consortium of Neurology Program Directors. This award, given annually to two neurology program directors in the United States, recognizes excellence in leadership, creativity and innovation. Dr. Bradshaw is associate professor of neurology and residency program director for the Department of Neurology.

Upstate Cancer Center Previews New Facility

THE UPSTATE CANCER CENTER came one step closer to opening with a ribbon-cutting ceremony and series of open houses in July for employees and the public to preview the new state-of-the-art facility. “One step inside this center and people will understand that a new era in cancer care has come to the region,” says Leslie Kohman, MD, medical director of the Upstate Cancer Center.

The $74–million complex encompasses 90,000 square feet on three stories and features 27 infusion chairs, four linear accelerator vaults for radiation therapy, a high-tech intraoperative suite, a four-season rooftop healing garden, meditation room, family resource center, multidisciplinary practice locations, private space for genetic, financial and nutrition counseling services, and a boutique for patient apparel and other personal products. The facility, anticipated to open to patients this fall, also includes two additional floors to accommodate future expansion.

Upstate provides treatment for all forms of cancer, including blood, bone, brain, breast, colon, endocrine, genitourinary, gynecologic, liver, bladder, pancreas, lung, chest, prostate, thyroid, and cancers and blood disorders associated mostly with children, including leukemia, brain and bone tumors and sickle cell anemia. The new cancer center houses all of Upstate’s outpatient cancer services in one location, including the Dr. William J. Waters Center for Children’s Cancer and Blood Disorders, which is currently located in Upstate University Hospital. The beautiful interior space will be supported by advanced cancer-fighting technology.

A highlight of this new technology is the Vero SBRT (Stereotactic Body Radiotherapy System) for advanced treatment of lung, liver and prostate cancer. Upstate is one of only three institutions in the United States to offer this unique combination of advanced treatment and imaging technologies. It facilitates the delivery of extremely high doses of radiation to complex tumors located in critical areas while protecting neighboring organs, improving both safety and accuracy. TrueBeam, an advanced radiotherapy option lessens treatment time, improving patient convenience.

Add these new technologies to Upstate’s existing arsenal of cancer-fighting technology—Tomotherapy, Calypso, Gamma Knife Perfexion and RapidArc—and the Cancer Center provides an unmatched breadth of radiotherapy options in the region.

In addition, aesthetic elements of the Upstate Cancer Center were selected to create an optimum healing environment for treating cancer, including artwork by local artists that hangs throughout the center, a four-season healing garden, and a therapeutic music program.
Upstate Leads in Enrolling New Yorkers

FOR THE SECOND YEAR IN A ROW, Upstate leads other state medical schools in enrolling a greater percentage of state residents. The College of Medicine’s incoming class for Fall 2013 had a higher percentage of New York residents than the other 12 allopathic medical schools in the state, according to data compiled by the Association of American Medical Colleges.

Upstate’s College of Medicine enrolled 165 students (77 women, 88 men); 149—or 90.9 percent—of the entering 2013 class were New York residents.

“These statistics bear out the important role Upstate plays in educating New York residents,” says David Duggan, MD ’79, senior vice president and dean of the College of Medicine. “We know that one of the most important reasons for young physicians choosing to practice in New York is having grown up here. More than 2,850 graduates of our College of Medicine live in New York. We are grateful for the ongoing support of medicine at Lincoln Medical and Mental Health Center in Bronx, New York.

For the last 10 years he has held the positions of assistant and clinical associate professor of emergency medicine at the Louisiana State University (LSU) Health Sciences Center in Shreveport. He previously served as assistant professor of emergency medicine at the Medical College of Wisconsin.

Swoboda is a member of the American Academy of Emergency Physicians, the American College of Emergency Physicians, the Society of Academic Emergency Medicine, the Council of Emergency Medicine Residency Directors, and the International Association of Medical Student Educators.
Upstate Receives National Trauma Care Verification

UPSTATE UNIVERSITY HOSPITAL AND UPSTATE Golisano Children’s Hospital are the first in the state to receive national verification as a Level 1 trauma center by the American College of Surgeons in recognition of the optimal trauma care the center provides patients.

Verification as Level 1 trauma centers for adults and children followed an intensive two-day onsite review, held in December, by medical experts in the field of trauma. They reviewed information related to patient outcomes, physician and nurse training and credentialing, facilities, trauma education and outreach, staffing and administrative functions.

“The work that goes on in our trauma center to save lives throughout Central and Upstate New York is a testament to those employees who enter our doors every day committed to providing the best care, even in some of the gravest of situations,” says Upstate University Hospital Chief Executive Officer John McCabe, MD ’79.

The state has previously designated trauma centers, but this action, known as verification, is the first national review of Upstate’s trauma services and the first to separately highlight the pediatric trauma service.

“We have been providing complex trauma care to children in the region for decades, and we have always believed that we did a good job of it,” says Thomas Welch, MD, medical director of Upstate Golisano Children’s Hospital. “What this development means is that a very rigorous external review of every component of our program, ranging from policies and personnel to outcomes, has provided an objective expert opinion confirming the high quality of our trauma care.”

Harry Dietz, MD ’84, Speaks at Student Research Day

Upstate Medical University spotlighted work of student researchers on April 2 at the annual Charles R. Ross Memorial Student Research Day. The event featured student presentations and a keynote address by Upstate alumnus Harry Dietz, MD ’84, of Johns Hopkins University School of Medicine, and a poster session featuring 100 students from all four Upstate colleges.

Dr. Dietz is the Victor A. McKusick Professor of Medicine and Genetics at Johns Hopkins University. He also holds appointments in pediatrics, medicine, and molecular biology and genetics at Johns Hopkins and has served as an investigator with the Howard Hughes Medical Institute and director of the William S. Smilow Center for Marfan Syndrome Research.

Dietz’s laboratory is interested in the development and homeostasis of the arterial wall. One goal is to understand genetic factors that predispose to aortic aneurysm, a condition accounting for nearly two percent of deaths in industrialized countries. The initial approach has been to study Marfan syndrome (MFS), a genetic disease that includes aortic aneurysm as part of the condition and that is caused by mutations in a single gene. It is anticipated that a comprehensive understanding of the cause, progression, and modulation of MFS will promote a greater understanding of vascular wall biology.

In addition, medical student Hans Salamanca ’16, was one of five students from across all colleges at the university to make a brief presentation on his work, presenting Inhibiting the Heat Shock Factor 1 with a Potent RNA Aptamer in Human Cancer Cells.
Daniella Palermo and Tiffany Telarico Caza Receive Chancellor’s Awards for Student Excellence

Upstate Medical University’s Daniella Palermo, MD ’14, and Tiffany Telarico Caza, MD/PhD ’14, are among 274 State University of New York students honored with the 2014 Chancellor’s Award for Student Excellence. Recent graduates, Drs. Palermo and Telarico Caza received their awards April 2 at the Empire State Plaza Convention Center in Albany from SUNY Chancellor Nancy L. Zimpher and Upstate Interim President Gregory L. Eastwood, MD. In June, Palermo began her medical residency in psychiatry at Brown University and Telarico Caza began her medical residency in pathology at Upstate.

Telecarico Caza said the MD/PhD program at Upstate has provided numerous opportunities to learn and grow as both a scientist and clinician. “I have been unbelievably supportive. I have had an incredibly positive experience here at Upstate and am excited to begin as a resident this summer.”

Palermo, who has served as president of the Latino Medical Student Association on campus, says it’s an honor to receive an award that recognizes students for their ability to successfully manage academic achievement, leadership and community outreach. “I am grateful for the continued support of countless individuals at SUNY Upstate, which allowed me to impact communities both within and outside the university,” she says. “As a Latina medical student, it has truly been an honor to create initiatives addressing cultural education and advocacy, all the while becoming my dream.”

Robert Corona, DO, HS ’87, MBA, to Lead Innovation Center, Upstate MIND

Robert Corona, DO, HS ’87, MBA, has been tapped to lead Upstate MIND (Medical Innovation and Novel Discovery), a focused innovation center intended to transform innovative ideas into useful, tangible ways to improve the human condition and the delivery of health care.

Dr. Corona holds the newly created position of vice president for Innovation and Business Development and will continue to serve as professor and chair of Upstate’s Pathology Department. In his new position, he will report to Rosemary Rochford, PhD, vice president for Research at Upstate.

Corona says that Upstate MIND is open to anyone who has a good idea and who is looking for collaboration with those who have complementary skill sets. “All ideas are on the table as long as they add value to the practice of medicine,” says Corona. “We are looking for new and creative ways to improve health care practices, whether it is through the discovery of new therapies, devices, or products; to make the patient experience more satisfying; or to improve patient access. If the idea is of value, we will support the innovator in every way possible to bring their idea to the bedside or to market.”

Upstate MIND will be housed at the Biotechnology Accelerator Center (BAC). “The BAC provides a stimulating environment where innovation is part of the culture,” says Corona. “At the BAC, our innovators will ‘collide and cloister’ with trailblazers in the fields of science, medicine, engineering, business, product development and licensing.

“The initial emphasis of Upstate MIND is to develop expertise in next-generation gene sequencing with the goal of collaborating with oncologists for personalized oncology treatments involving patients at our Upstate Cancer Center,” Corona said “and we hope to expand to other disease states.”

Corona wants Upstate MIND to pave the way to create what he calls lifelong fearless learners. “We can accomplish this by designing novel education pathways and models for teaching and training future physicians and scientists to become innovators and pioneers in the field of health care,” he says.
The annual Match Day festivities for Upstate College of Medicine students featured hugs, laughter, and lots of photo taking after the envelope opening that unveiled to fourth-year medical students where they would go next.

Fourth-year students packed the university’s ninth floor auditorium in Weiskotten Hall on March 21 to take part in the nation’s annual Match Day event, when graduating medical school students across the country find out simultaneously where they will perform their residencies.

“Today is among the most anticipated and important days in our medical students’ careers,” said Julie R. White, PhD, dean of Student Affairs at Upstate. “What an honor it is for those of us who are fortunate to work directly with these students to share in this special celebration. I am confident that these Upstate graduates will continue to make us very proud.”

A prelude to the reveal was a showing of the four-minute dance video “Get Happy Match Day,” featuring Upstate senior medical students doing their version of the Pharrell classic, which was produced, directed, and edited by Brian Hanrahan, MD ’14.

Then the envelopes, and within 20 seconds, the room was in uproar.

Upstate had a 98-percent match rate among the 156 medical students who participated in the match program. Some specifics:

- 44 percent of the students will enter the primary care specialties of internal medicine, pediatrics, family medicine and obstetrics and gynecology
- Two students matched in the Military Match
- 41 percent of the students will remain in New York State for their residencies
- 17 students will remain in Syracuse for their residencies: 12 at Upstate University Hospital and five at St. Joseph’s Hospital Health Center

In addition to matching its students to programs throughout the country, Upstate must also fill its own residency positions through the match. According to William Grant, EdD, associate dean of Graduate Medical Education, Upstate filled all 95 residency positions within its specialty and subspecialty programs through the match program this year.

“Upstate residency programs continue to attract an exceptional level of applicants and we are pleased that all of our residency positions are filled with outstanding individuals, including some of our own medical students,” says Grant.
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TALES FROM THE FRONT

Recent grads offer words of advice about the residency experience.

Starting from MS1, Upstate stresses making connections and really understanding the science of medicine. Residency is just another fun application. Hit the ground running. Make connections, review patients and your decisions in the evening to continually refine your diagnostic skills, and always revisit the basics. Truly understanding the pathophys makes it all easier and fun.

**Alan Viglione, MD ‘12**
*Internal Medicine, PGY-2*
*Kaiser Permanente San Francisco*

I love that my residency program teaches me to do full-spectrum family medicine. My experience at Upstate, especially in Binghamton, helped me have one-on-one learning experiences with attending physicians, which is how my residency is. I have been surprised at how much I learn in residency from year to year. There is always more to learn, but Upstate prepares us very well.

**Daniel Sperry, MD ‘11**
*Family Medicine, PGY-3*
*McKay-Dee Hospital Ogden, Utah*

*RESIDENCY PREPARED ME FOR THE TRANSITION FROM SHADOWING TO BEING THE PATIENT’S PRIMARY CAREGIVER YOU EXPERIENCE IN RESIDENCY. WORK TO COMMUNICATE WELL WITHIN YOUR TEAM AND YOUR SUPPORT STAFF. ASK AND DON’T ASSUME.*

**Nathaniel Herr, MD ‘12**
*Pediatrics, PGY-2, University of Minnesota*

*RESIDENCY FROM DAY ONE WILL DEFINE HOW YOU WILL PRACTICE—STRAIGHT TO THE STANDARD OF THOSE YOU ADMIRE.*

**Ryan LaFollette, MD ‘12**
*Emergency Medicine Resident, PGY-2*
*University of Cincinnati*

Residency will be challenging but you will be amazed by the amount you will learn and grow. Take time to take care of yourself—don’t forget to exercise and sleep when you can!

**Jill Tirabassi, MD ‘12**
*Family Medicine, PGY-2, University of Colorado*

We are the second largest Med-Peds program in the country. What I love about my residency is the large amount of autonomy we are granted, ample opportunities to do procedures, and the variety of pathology we are exposed to. The training environment is similar to Upstate—attending physicians are approachable, but always challenge you to be ready for the next step.

**Meaghan Stumpf, MD ‘12**
*Med-Peds, PGY-2*
*University of Tennessee Health Science Center*
When I started residency I quickly learned that my medical school education put me ahead of the curve. I have received praise for my clinical knowledge, patient interactions and overall experiences. Be confident in your skills—Upstate gave you a great foundation to practice medicine.

Chas Hannum, MD ’13
Pediatrics Resident, PGY-1
Floating Hospital for Children, Tufts Medical Center
Boston

I was surprised how hard residency is, both emotionally and physically, but realize that the more hours I work and the more experience I get, the better doctor I become.

Marisa Mendel, MD ’11
Psychiatry Resident, PGY-3,
Harvard Longwood
Boston

Yale EM is an awesome program with great volume, great faculty and training. Upstate’s superb Emergency Medicine department prepared me well and Dr. Johnson was a great mentor.

Frank A. Moore, MBA, MD ’13
Emergency Medicine Resident, PGY-1
Yale New-Haven Hospital
New Haven, CT

Upstate taught me to always look at the patient in front of me and find out what brought them in, because the story is always deeper than just the chief complaint. The Bronx patient always has something brewing in the background.

Jenny Johnson, MD ’13
Neurology, PGY-1
Einstein/Montefiore Medical Center
New York

Yale EM is an awesome program with great volume, great faculty and training. Upstate’s superb Emergency Medicine department prepared me well and Dr. Johnson was a great mentor.

Frank A. Moore, MBA, MD ’13
Emergency Medicine Resident, PGY-1
Yale New-Haven Hospital
New Haven, CT

Having hands-on experiences during my MS3 and MS4 years at Upstate made my intern year much easier, but as an intern, it’s easy to slip into “work-mode” and focus on paperwork and scut work. Embrace every day as a day to learn. Ask questions. Go to procedures. Go to lectures or conferences and participate. This is your time to get fully absorbed in learning.

Kristan Alfonso, MD ’13
Otolaryngology, PGY-2,
University of Kentucky

NEW YORK

Albany Medical Center
Ilja Aleksic
Surgery-Preliminary
Urology

Andrew Bachman
Emergency Medicine

Robert Freeman
Family Medicine

Jacqueline Gallup
Pediatrics-Primary

Fareed Haddad
Anesthesiology

Einstein/Beth Israel Medical Center

Justin Tsai
Emergency Medicine

Einstein/Montefiore Medical Center
Jeremy Ganeles
Radiology – Diagnostic

Einstein/Montefiore New Rochelle
Christine Yang
Medicine-Preliminary

Icahn SOM at Mount Sinai
Andrea Luncheon-Hillman
Anesthesiology

Icahn SOM-Queens Hospital
Spencer Langevin
Medicine-Preliminary

Nassau University Medical College
Spencer Langevin
Ophthalmology

New York Medical College
Cristina Fox
Urology

North Shore-LIJ Health System
Chetna Bakshi
General Surgery

Nontawan Benja-Athsirikul
Obstetrics/Gynecology

Neal Cohen
Emergency Medicine

Lauren Jarchin
Pediatrics

Stacey Lin
Medicine-Preliminary

Grace Luk
Pediatrics

Julia S. Morrison
Psychiatry

Haider Ali Nazeer
Internal Medicine

Maxine Owusu
Emergency Medicine

Anjali Patel
Obstetrics/Gynecology

Matthew Wasser
Psychiatry

NYMC-Metropolitan Hospital Center

Cristina Fox
Surgery-Preliminary

NYMC-Westchester Medical Center
Maya Silbert
Pediatrics

NYP Hosp-Columbia Univ Medical Center

Christine Yang
Dermatology

NYP Hosp-Weill Cornell Medical Center
Andrew Fisher
Anesthesiology
NYU School of Medicine
Megan Hirshberg
Anesthesiology
Jason Ziplow
Pediatrics
St Josephs-Syracuse
Laura E. Andrews
Transitional
Daniel J. Bryan
Transitional
Rocco Cambareri
Family Medicine
Anthony Chiaramonti
Transitional
Daniel P. Harris
Family Medicine
Stony Brook Teaching Hospitals
Kiley Bax
Pediatrics
Andrew Handel
Pediatrics
Christopher Polito
Emergency Medicine
Kelly Tisovic
Med-Prelim/Neurology Neurology
Paul Wackerow
Emergency Medicine
SUNY HSC Brooklyn
Sarrina Shraga
General Surgery
SUNY Upstate Medical University
Kailyn Brand
General Surgery
Vincent Calleo
Emergency Medicine
Tiffany Caza
Pathology
Christina Fiorenza
Med-Prelim/PM&R Phys Medicine & Rehab
Matthew Gnirke
Medicine-Preliminary
Khalia Grant
Pediatrics
Holden Heitner
Orthopaedic Surgery
Stacy Hennick
Obstetrics/Gynecology
Sean Marx
Orthopaedic Surgery
Tonia Tiewul
Surgery-Preliminary

Scott Ulberg
Psychiatry
Daniel Zaccarini
Pathology
University of Rochester/Strong Memorial
Danso Ako-Adjei
Dermatology
Daniel J. Bryan
Dermatology
John Choi
Internal Medicine
Victoria DiMarco
Emergency Medicine
Jessica Ee
Psychiatry
Gregory Mak
Medicine-Pediatrics
Natalia Miles
Psychiatry
Marlon Mitchell
Family Medicine/Urban
Nadia J. Orosz
Internal Medicine
Carolyn Stwertka
Pediatrics
Colin Wright
Internal Medicine

Wilson Memorial Regional/UHS
Danso Ako-Adjei
Transitional
Winthrop-University Hospital
Jeremy Ganeles
Medicine-Preliminary
Kathleen Leger
Internal Medicine
Chinonye Nnaji
Internal Medicine
Zinal Patel
Internal Medicine
Tharani Rajeswaran
Internal Medicine

NORTH CAROLINA
Case Western/Univ Hosps Case Med Ctr
Christopher Caiola
Emergency Medicine
Chang H. Kim
Internal Medicine
Christine LaGrotta
Psychiatry
Childrens Hospital-NEOMED
Melissa I. Kaye
Pediatrics

OHIO
Cincinnati Childrens Hospital Medical College
Joseph McDonald
Pediatrics
Cleveland Clinic Foundation
Yaqi Hu
Anesthesiology
Ohio State University Medical Center
Kristen Landry
Internal Medicine
Arindam Singha
Internal Medicine

SUNY Upstate Medical University
Carolinas Medical Center
Elias A. Awad
Emergency Medicine
Moses H Cone Memorial Hospital
Andrew Wight
Family Medicine
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This August marks a milestone: 50 years since University Hospital opened its doors and began treating patients. During its five decades, the hospital has become a community institution, caring for patients from Pennsylvania to Canada while training hundreds of physicians in the process.

Fifty years ago in September, across town, the new Community Hospital also opened its doors. The two hospitals became one in 2011, when Upstate acquired Community General.

To commemorate this anniversary year, Susan Keeter has interviewed numerous alumni, hospital administrators, and staff about significant moments in hospital history. We share some of those here.
A Vision for Better Community Healthcare

The well-worn adage—Never doubt that a small group of thoughtful, committed citizens can change the world—held true in 1958, when a group of community-minded Syracusans came together with the idea of building a new hospital to serve the neighborhoods on the west side of Syracuse. This small group may not have “changed the world,” but they certainly changed the face of healthcare in our region when they envisioned a community hospital where most saw only overgrown fields.

By the time the hospital, then known as Community-General Hospital, opened several years later, this “small group” had grown to include more than 48,000 individuals, foundations, and corporations, who donated a total of $7.2 million to build the hospital, which is located at 4900 Broad Road on Onondaga Hill.

Almost a decade earlier, Carlyle “Jake” Jacobsen, PhD, began planting seeds for the creation of Upstate University Hospital in downtown Syracuse. In 1950, Dr. Jacobsen was executive dean for medical education at SUNY Upstate when he met with then-Governor Thomas E. Dewey to discuss the development of SUNY, in particular the development of its medical centers. In 1955, Jacobsen was a guest at the governor’s mansion, then occupied by Averell Harriman, at which time the important decision was made to proceed with construction of the medical center at Syracuse. By 1961, Nelson Rockefeller was in the governor’s office, and Jacobsen, now president of Upstate, invited him to travel to Syracuse to inspect the site for the new state university hospital.

In addition to his ability to work effectively with three New York State governors, “Jake” had impressive credentials for the formidable task. In a 1964 interview at Columbia University, the seasoned college administrator, brain researcher, and professor of medical psychology credited his Minnesota childhood for giving him the real tools he needed. Here’s what Jake said made him an adept hospital-builder:
1) Delivering newspapers.
As a boy, Jake had a paper route that included hospitals and delivering newspapers directly to patients. This early, close contact with the sick and injured gave Jake a deep appreciation for healthcare, and his ability to navigate hospital hallways prepared him to finesse the design of Upstate hospital’s physical plant.

2) Drawing maps.
In middle school, Jake created maps for his school district and remembers drawing the intricate streets and road patterns on drafting paper. Jake credits his art classes and map drawing for giving him the ability to “fight with the architects about what was wrong with what they were doing.”

3) Watching wheat.
Jake’s uncles were North Dakota farmers. He saw that no matter how hard they worked, outside forces (mother nature, chiefly) left them with a sickly wheat crop three seasons out of four. Those were lean years for his uncles, and that was before the Great Depression. According to Jake, observing their hardships helped mold his social philosophy—useful for a guy who’d someday lead a public hospital.

4) Running trains.
Jake was only seven when he told his Dad, “I want to make an invention.” Together they created a belt-driven, 6-volt generator that powered Jake’s toy train set. Later, as a college kid who’d run out of money, Jake worked for the railroad. His boss saw he had a knack for the business, and encouraged Jake to make the railroad his career. (Jake chose to finish his education instead.) Jake’s boyhood desire to create something new and his young man’s ability to understand a complex business prepared him well for his job at Upstate.

5) Learning Latin and selling trees.
During high school, Jake studied Latin, oratory and debate. After school, he worked at a dry goods store with a nursery. Days feeding his intellect and evenings shoveling dirt gave Jake, as he described it, the “diffuse interests” that made him good at his job as a hospital builder and university president.

6) Pulling taffy.
Jake’s summer job after high school was making taffy. It was hot and involved lots of precise steps—boiling sugar, kneading, twisting, cutting—and he did it all under the scrutiny of impatient customers. It was an early experience in navigating public perception.

7) Studying in public schools.
While Jake was on the faculty of several prestigious private universities—Yale, Harvard, Cornell—prior to joining Upstate, he attended public schools throughout his childhood and earned his bachelor’s and doctoral degrees at a state school: the University of Minnesota. “I have a strong feeling for public education, whether it is grade school, or on through a PhD,” he said in the 1964 interview. Those strong feelings, and his own experiences as a public school kid, made Jake an ideal leader for the newly created State University of New York.

Carlyle “Jake” Jacobsen, PhD, laying the cornerstone for Upstate’s University Hospital in 1963

Howard Weinberger, MD ’58, in Upstate’s Roosevelt Room
**Honoring Elizabeth Blackwell**

This year not only marks the 50th anniversary of Upstate’s downtown and community campus hospitals—it is also the 50th anniversary of the first time in memory that Upstate Medical University honored its most famous graduate: Elizabeth Blackwell MD, class of 1849.

Blackwell (1821-1910) was the first woman to earn a medical degree in the United States, valedictorian at our medical school, and founder of the New York Infirmary for Women and Children.

Patricia Numann, MD ’65, was a medical student at Upstate in 1964, and among those who led the effort to honor Blackwell with a portrait and lecture series. “We raised $500 for Joe Kozlowski to paint her portrait, which was more than a semester’s tuition in those days,” remembers Dr. Numann.

A small but generous group of women alumni, faculty members, and students conceived of the Blackwell recognition and donated the money to make it possible. Numann explains the modest numbers: “When I was a student, there were fewer than 15 women students in the entire medical school. And I was the only female surgical resident.”

The 1964 effort to recognize Blackwell may have been led by women, but Numann fondly remembers one man who was a great supporter: Upstate president Carlyle Jacobsen, PhD, who surprised attendees at the portrait unveiling with the announcement of a new street to be named for Elizabeth Blackwell.

Blackwell continues to be honored each February with a lecture organized by Upstate medical students. This year’s speaker was Yvonne Maddox, PhD, deputy director of the Eunice Kennedy Shriver National Institute of Child and Human Development at the National Institutes of Health.

Elizabeth Blackwell’s papers are housed at Upstate’s Health Sciences Library. In 1974, she was honored with a U.S. postage stamp, and is a frequent subject of articles and books.

**A Tradition of Providing Care**

In the days before Medicare and Medicaid, sick and injured Syracusans who had no money for doctors’ bills could be seen at the Syracuse Free Dispensary, located at 610 East Fayette Street in Syracuse.

Howard Weinberger, MD ’58, was a medical student and resident at Upstate from 1954 to 1961, and remembers working at the free dispensary.

“Patients were lined up in the hallway, waiting to be seen. Medical students would sit between them, asking one after another about their medical issues,” he explained. “There was no privacy, no confidentiality. It was like something out of Dickens.”

Then came 1964 and the building of Upstate University Hospital. Dr. Weinberger had just returned to Upstate—this time as a faculty member in pediatrics. The dispensary had moved to the newly built hospital.

“It was like heaven,” recalls Weinberger, describing the outpatient clinic at the new hospital. “There were private rooms with doors. All the latest equipment was here.”

In honor of the 1964 transfer—and transformation—of the outpatient clinic, prominent local artist Dorothy Riester created a bronze plaque for the hospital, which hangs to this day in the lobby.

The building that once housed the dispensary has had a transformation as well. For many years, it was home to Syracuse University’s University College and, for a few years, a charter school. In August 2011, the McMahon/Ryan Child Advocacy Center moved into the former dispensary building, housing law enforcement, child protective, mental health specialists, and the doctors and nurses of Upstate’s Child Abuse Referral and Evaluation Program.
From Co-workers to Couple

The hospital’s 50th anniversary—and this cold, snowy winter—inspired Paul Berman, MD ’63, to share his strongest memory of the newly built Upstate University Hospital: The night the lights went out and he met his future wife, Yvonne Axtell.

At 5:16 p.m. on Tuesday, November 9, 1965, the power went out at Upstate University Hospital, and across 8,000 square miles of the northeastern United States and Ontario, Canada. It lasted for 13 hours and affected 30–million people, including the patients and staff at Upstate.

At the moment the lights went out, Dr. Berman—a second-year medical resident—was observing a gall bladder surgery in the operating room and Yvonne—a senior nursing student—was handing out dinner trays on the sixth floor of the new hospital at 750 East Adams Street in Syracuse.

Once the lead surgeon realized the sudden pitch-black in the OR was no prank, Berman was sent in search of light. He ran around the darkened hospital and finally found a source—a single lantern on the sixth floor medical unit. Berman grabbed the lantern to take it back to the operating room, but was stopped by Yvonne, who was in charge of the medical unit that night, for the first time in her career.

Yvonne had patients to take care of and no intention of giving up her only light. But Berman implored, “We’re in the middle of surgery!”

He won the debate and the lantern was used to finish the gallbladder surgery. Yvonne laughingly admits, “I forgave Paul, eventually.”

Fortunately, the windows in the hospital rooms were large, the moon was full, and the sky was clear, so Yvonne used moonlight to help see her patients that night.

Gary Kittell, assistant vice president for Upstate’s physical plant services, remembers the 1965 black out and welcomes the technological advances that make such an event less likely now. “Today, New York State’s electrical grid is better automated. Hospital generators come on automatically and support patient-care equipment, the fire alarms, ventilation, and so on. There was a similar regional outage in 2004 and, because our grid is highly automated, Syracuse didn’t lose power.”

Did Paul admire Yvonne for her work ethic and grace under pressure? Did Yvonne admire Paul for his resourcefulness and pluck? It certainly seems so, since the two married just seven months after they met during the November blackout and wrestled over the lantern.

After marriage, the Bermans moved to Missouri, then Utah, eventually settling in Massachusetts in 1969. They’ve raised two children, and celebrated their 48th wedding anniversary in June.

Berman retired from his primary care practice in 2007, but continues to volunteer as a physician at the “Survivor Center,” a clinic that provides health care free of charge to those in need, especially immigrants and the homeless. His advice for today’s medical students: “Go into primary care, please,” he says. “It doesn’t pay as much as some specialties, but we’re needed, and the work is very rewarding.”

To read more hospital memories, visit http://whatsupatupstate.wordpress.com/?s=50th-anniversary
If you have memories or artifacts related to the construction of Upstate’s downtown and community campus hospitals, please contact Susan Keeter at keeters@upstate.edu or 315-464-4834
Medical advancement at the turn of the century was more profound than at any time in history. Stanley B. Burns, MD ’64, has the photographic evidence to prove it.
It wasn’t right. Stanley B. Burns, MD ’64, FACS knew it the moment the doctors sat down. Although the surgical amphitheater was a perfect re-creation of one from an early 1900s photograph, the subjects were clearly in the wrong places.

“If you were invited to an event, would they put you in the back row?” he asked director Steven Soderbergh. “You’ve got all the good-looking young doctors down front, and all the old doctors up in the fifth and sixth rows.”

In 1900, Dr. Burns explains, it was common for surgeons to operate before an audience of fellow physicians, teaching what they were doing as they went. “That was the nature of medicine,” he says. “The experienced surgeons needed to see the new developments first and the interns and medical students would be in the back.”

How does he know? He has the photos to prove it.

Burns, a New York City ophthalmologist, is also a medical historian. His Burns Archive is home to a collection of more than one million vintage photographs and over 70,000 early medical photographs, spanning from roughly 1839 (the birth of photography) to 1945. The collection is generally recognized as the most comprehensive private collection of its kind. Burns has published more than 40 books related to his collection and curated dozens of museum exhibits. But for six months last year, he and his photographs served a different purpose: inspiring story lines and ensuring accuracy on an HBO/Cinemax-produced television series about medicine at the turn of the century.

“The Knick,” which debuted August 8 on Cinemax, is a 10-part miniseries set at New York City’s Knickerbocker Hospital in 1900, focusing on surgeons, nurses and staff working to push the boundaries of medicine in an era of high mortality, no antibiotics, and burgeoning social reforms. The show stars Clive Owen in the lead role and is directed by the Oscar-winning Soderbergh.
The show depicts a time period of incredible medical advancement and the establishment of new technologies and therapies that we now mostly consider outmoded and unnecessary,” says Burns. “These doctors were just as smart and inventive as we are today, they simply labored under inferior technology and knowledge.”

Burns served as medical, historical, and technical advisor, providing interesting cases, reviewing scripts for medical accuracy, and advising on set during filming last fall. (And yes, the director did rearrange the doctors in the audience of the surgical amphitheater.)

“There are countless doctors who could advise us on how a medical procedure is done but very few who could tell us how it was done in 1900,” says Jack Amiel, co-creator, co-writer, and co-executive producer of “The Knick.” “We tried to remain as true to the history of medicine and the time frame as humanly possible.”

To hear Burns tell it, you couldn’t pick a better time period to dramatize medicine. He refers to the turn of the century as the Golden Age of medicine, with revolutionary discoveries occurring almost daily between 1880 and 1920. “With the development of aseptic surgery in the mid 1880s, followed by the germ theories of disease and principles of bacteriology, everything changed rapidly,” he says. “Once you had aseptic surgery and you knew about diseases, you could operate successfully. For the first time in the history of the world, the internal body cavities became the playground of the surgeon, who could now safely operate on the brain, the chest, and the abdomen.”

In the 1890s, medical schools began to organize curriculum with scientific and laboratory training for students in the first two years and rigorous clinical training on rounds thereafter. The Syracuse University College of Medicine (Upstate’s predecessor) was among the first to follow this so-called...
“German model,” along with Johns Hopkins, Harvard, Penn, and a few others. The surgical subspecialties were developed and the residency period created. And according to Burns, more diseases were discovered and named than in any other period in history.

At the same time, the advanced use of photography for medical education was established, using 3D stereo cameras to take close-up photos of surgical cases. Burns’ collection encompasses the entire range of medicine from that era, photos of procedures and of doctors at work. “This was a time when new procedures and techniques were developing rapidly and the photographs were a way for physicians and surgeons to record what they were doing and share it with others,” says Burns. “The photographs are irrefutable evidence of the way things really were. Written histories do not describe the kind of shoes a surgeon is wearing or what his shirt looks like.”

Burns, who was the photographer for the Upstate College of Medicine yearbook, bought his first medical photograph in 1975, a daguerreotype taken in 1847 of a South American Indian with a tumor of the jaw, taken by an ophthalmologist. When he looked up the case in medical books, he was surprised to find it written up erroneously as a carotid tumor instead of a parotid tumor. “All the descriptions written about it were incorrect,” recalls Burns. “I realized that a collector with the photographic evidence could correct history.”

A history buff, Burns began collecting early medical photographs and comparing them against their appropriate written histories. “I realized all the discoveries I made by checking the photographs were a major contribution. I could see things that other people couldn’t in the imagery and put them into context,” says Burns, who claims unusual talent for visual perception. “I can look at a room and tell you how many square feet of boxes it would take to pack it,” he says.

Burns wrote his first journal article in 1977 and before long began writing monthly articles for a variety of medical publications including, MD
Magazine, Medical Heritage, Neurology Reviews, Neuropsychiatric Reviews, Clinicians Reviews, and the Jewish Medical Journal. By the mid-1980s, he was producing a bi-monthly journal for Bristol Laboratories that combined interesting historical medical photographs with articles about them, and was receiving educational grants from pharmaceutical companies to publish books related to his collection, such as the four-volume Respiratory Disease: 1845-1945, funded by GlaxoSmithKline, and Nephrology: A Photographic History 1840-1950 for Roche Pharmaceuticals.

During nearly 40 years writing articles for physicians, Burns learned that what usually grabbed their attention was an unusual case, an unusual surgery, an outmoded therapy, or an erroneous idea. He liked telling those stories and people liked reading them, as well as looking at the often-unbelievable photos that accompanied them.

As a young child, Jack Amiel remembers seeing some of those photos—such as the man with the giant goiter—and worrying, “Will I get that?”

The nephew of Burns’ ex-wife, Amiel lost touch with Burns after their divorce, but remained close to Burns’ daughter, Liz, his cousin, who helps run the archive. Now a successful Hollywood writer and producer, Amiel and his partner had written a pilot for a medical series set in a hospital in 1900. They needed someone to fact check it and Amiel turned to Liz for a referral. She told him her dad was the guy.

Burns’ photographs have been used as resource material for many films, most notably Jacob’s Ladder (1990), Looking for Richard (1996), The Others (2001), and Gangs of New York (2002). But “The Knick” brought Burns to an entirely new level of involvement.

“I collect stories and have a photographic memory for much of this material,” says Burns, who holds appointments as clinical professor of medicine, clinical professor of psychiatry, and lecturer in dermatology at New York University’s Langone Medical Center. “I have a broad-based esoteric knowledge about how medicine was practiced in terms of therapies and procedures, and perhaps most importantly, what didn’t work.”

Amiel brought director Steven Soderbergh and the show’s co-creator, Michael Begler, to meet Burns and see The Burns Archive for themselves. It was clear from the start that Burns was not the average medical historian.

It was his stories. “Stanley would casually tell anecdotes in passing and for us it was like—BOOM—light bulbs going off. We knew we had to incorporate the material into the series,” says Amiel, of “wonderful twists and surprises” imbedded within the 10 episodes. “It’s always great when you can point to the truth and say that, astonishingly, these things really happened.”

Burns was hired on as medical, technical, and historical advisor. Liz became the photographic consultant, supplying images for the production, which were essential in creating the set: a hospital, complete with 30-bed ward, constructed in three warehouses in Greenpoint, Brooklyn.
Among Burns’ first assignments was providing “medical training” to the actors portraying medical professionals. “We had held the Knickerbocker Hospital and Medical School here in my office and did a few more classes on set,” jokes Burns, who taught the actors how to suture, throw ties and hold instruments the way it was done in 1900, practicing on realistic latex arms created by the special effects department.

Burns says the actors took the training very seriously. “They all got so good at it,” he says. Another tip they liked was how to hold a hemostat on one finger and keep it tucked, so that when they were operating with the scalpel, they could cut a blood vessel and swing that hemostat into action in a fraction of a second. “Not only does it look good on camera but it really made the actors feel like they knew what they were doing,” he says.

Burns read every script for medical accuracy, offering suggestions about unusual conditions common at the time that might make the narrative more dramatic. “These are the extremes of disease,” he says, giving opisthotonos as an example, an extreme condition of tetany in neurological disease that causes an individual’s head, neck and spinal column to enter into a bridging or arching position.

Burns also worked with the special effects team, ensuring that the latex prosthetic parts used for surgical scenes had accurate interiors and were positionally correct, and that any visual blood flow accurately matched the patient’s condition. “If they talked about a patient’s pulse being high and the patient was bleeding, you’d want the blood to be spurting at the rate of that heart beat,” he explains. “As the heart beat lessened, the blood would then spurt at that lessened rate. That was all done automatically with machines at the set. You could have blood spurt at 60 times a minute, 90 times a minute, 30 times a minute.”

Burns says the historic accuracy of the production was amazing with no detail too small. “They bought one original Lister atomizer—a very complicated, expensive machine—and then built six others to match,” he says. “As we filmed around the city, dump trucks of dirt came and covered the pavement with dirt and then removed it at the end of the day.”

In order to fully appreciate medicine in 1900, it helps to understand the context of the time. Due to the massive immigrant migration from Europe, American cities exploded in size during the 19th century. With hundreds of thousands of people living in crowded, unsanitary conditions, public health became an issue. Flu and pneumonia were the leading cause of death in 1900, followed by tuberculosis.

Cities undertook sewer projects to provide clean water and remove waste and began sanitation crews to remove trash and animal carcasses that littered streets. New medical advances and a greater understanding of the importance of cleanliness to health spurred the building of modern hospitals to care for the sick.

The real Knickerbocker Hospital, located on Convent Avenue at 131st Street in New York City, began in 1862 as the Manhattan Dispensary, a temporary Civil War tent facility for returning Union Army invalids. In 1885, the New York Times praised its rebirth as the fully equipped Manhattan Hospital, “the only general hospital north of Ninety-ninth Street.” It became the Knickerbocker Hospital in 1913, assuming the city’s largest ambulance district for many decades and a forerunner in treatments for polio, gynecology, and alcoholism.

“The Knick” embraces the challenges of the time. Head surgeon John Thackeray, portrayed by Owen, is a visionary trying to drag an antiquated and newly integrated institution into the 20th century by initiating radical new procedures that will ultimately change lives. He’s also hiding a secret cocaine habit. When he is forced to hire an African-American as his new assistant chief of surgery, a new set of challenges arise from patients who would rather die than accept treatment from a man of color.

Burns calls the finished product “spectacularly good,” not just entertaining but a realistic depiction of doctors and their profession. “We tried to show surgical advances of the time,” he says. “While we may look at some of the practices from 100 years ago as primitive, 100 years from now they’ll be looking at us the same way.” In a rare move, Cinemax signed on for a second season of the series before it even premiered.

Of course, Burns hasn’t had time yet to watch the entire series. Concurrent with filming “The Knick,” he was curating part of the “Photography and the Civil War” Exhibit, which ran at the Metropolitan Museum of Art from April to September 2013, then traveled to The Gibbes Museum of Art in

Stanley B. Burns, MD ’64, in his archive

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Charleston, and on to the New Orleans Museum of Art, where it closed May 4. The Burns Archive had its own room, displaying photographs from the Reed B. Bontecou, MD, collection.

Dr. Bontecou was a New York surgeon from Troy who used photography to document Civil War battlefield casualties as a means to verify the severity of their injuries and help determine the degree and amount of the post-war pension payments. “These photos were originally all in government hands. Then in 1915, 50 years after the Civil War was over, Bontecou’s son asked for his father’s photographs back. They sent them to him, and I ended up buying them from his daughter—the photographer’s granddaughter—at an estate auction in Upstate New York,” says Burns.


He also prepared the inaugural exhibit for the new Morbid Anatomy Museum in Brooklyn. “The Art of Mourning,” which examines how the photography of memorialization changed during the turn of the century, opened with the museum on June 27 and will run through the end of the year.

In collecting, Burns says, there are windows of opportunity. “They open quickly and they close quickly,” he explains. “The Nazi soldiers are dying and their grandchildren don’t want any of this material. I know what I’m looking at, whereas a lot of other people don’t. I understand the context and history.”

If your head is spinning trying to keep all this straight, don’t be alarmed. Since residency days, Burns sleeps no more than four hours a night, which he says gives him more time than most people to juggle a multitude of projects at once.

Although he no longer performs surgery, he still sees glaucoma and cataract patients one or two days a week. But the majority of his time is spent on projects related to his collection, such as books, exhibits, or consulting on “The Knick.”

Burns says the take-away message from the production is that doctors at the turn of the century were just as eager to advance medicine as we are today. “When you study history, you realize we’re all trying to do the best we can with what we have,” he says. “It should make us think a little bit more about what we’re doing in our offices and wonder what we’re doing that’s going to be proven erroneous in 50 years or less.”

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Caring Connections

THROUGH THE PEDS PALS PROGRAM, UPSTATE MEDICAL STUDENTS SERVE AS TUTORS AND MENTORS TO LONG-TERM PATIENTS AT GOLISANO CHILDREN’S HOSPITAL.

It was literally a dream come true. Hours earlier, the young girl had been at the Ronald McDonald House, where she and her family stay when she’s in town for her medical treatment. And now, here she was backstage at the Carrier Dome, meeting Macklemore and Ryan Lewis.

The young girl is a patient at Upstate’s Golisano Children’s Hospital. She was enjoying a special evening out with her Upstate Peds Pals, Sarah Kline ’16 and Susie Agudelo-Uribe ’16, both Upstate medical students.

Peds Pals is a program that started last fall to match long-term patients at Golisano receiving treatment for cancer and blood disorders with pairs of Upstate medical students, who provide tutoring and mentoring.

“Spending time with our Peds Pal has been very rewarding, both emotionally and professionally,” says Kline, who helped her pal with homework, took her to Marshall Street for cookies, and helped her shop for clothes when she found out she was well enough to go back to school part time.

During one of their visits, her pal was listening to Macklemore on her CD player. Kline knew he had an upcoming concert at the Carrier Dome and contacted the artist’s management staff. “We managed to get complimentary tickets to take she and her brother to the show, and fortunately, her white blood cell count was high enough to allow us to proceed with plans. At the very end, she was escorted backstage. I feel so grateful to have spent that evening with them and none of it would have been possible without Peds Pals.”

Peds Pals was the brainchild of classmate Michael Enechukwu ’17, a former high school science teacher who was interested in establishing a tutoring program for school-aged patients. He approached Susan Stearns, PhD, assistant dean of the College of Medicine, at the beginning of the year, and she connected him to Kristi Griffin, the education specialist at Golisano.

Griffin already had a tutoring program in place using retired area teachers and SU undergrads. But because the tutors were not “employed” by Upstate, the relationship was limited to tutoring on-site at the hospital. This new collaboration with the medical school allows interactions to take place off-site as well—at the patients’ parents’ discretion—allowing for equally important mentoring relationships to develop.

“I had a list of children that were struggling in school and needed good role models,” says Griffin, many of them children with sickle cell disease. “They just really needed someone to care about them in addition to their own family, and sometimes they didn’t have that family support either. Through Peds Pals, they have somebody that is genuinely interested in them, listens to them, and cares enough about them to spend their own time with them.”

In the program’s first year, 28 first- and second-year medical students were paired with 14 patients, ranging in age from three to 16. Enechukwu teamed with Richard Hempel ’16 to mentor a teenage boy with sickle cell disease.

“He was having trouble in school, including behavioral issues that stemmed from anger about his illness,” says Enechukwu. “One of the issues was his attendance record. Once we got involved with him, his
attendance, grades, and behavior improved.”

When the young man was hospitalized again for several weeks, the pair worked with him there to stay current with his schoolwork.

Hempel says it was an eye-opening experience. “I knew going in that the pal would have physical limitations because of his illness, but figuring out practically how those limitations applied turned out to be a difficult task,” he says. “This is a teenager who wants to be very active but the disease can flare up if we do too much. It was a useful experience for both of us because I could explain to him what was happening physiologically based on how he was feeling, and if I didn’t know why something was happening, we would research it and try to figure out what could be done to improve his well-being.”

Hempel had been planning to volunteer with Big Brothers when he heard about the Peds Pals program, which he thought would be a similar experience with a medical component. “The experience has changed how I interact with patients,” he says. “I take my time more now and try not to rush them to get all the data the way I used to at the beginning of medical school.”

Kethia Eliezer ’17 was attracted to the program because of her interest in pediatrics. “I also have a hemoglobinopathy that is clinically insignificant. Although I do not have symptoms, I thought perhaps I could relate to children who are chronically sick on a different level,” she says.

The experience has given her real insight into the insecurities and mental state of children who are dealing with chronic illness and has been increasingly rewarding as the relationship with her mentee grows. “She’s opening up more and more to me and my partner and becoming more comfortable and confident with us. As role models, we’ve made clear that the educational part of our relationship is first and foremost, but when she does well in school, then we can do fun age-appropriate things like shop for a new lip gloss or stuff animals at the local Build-A-Bear.”

In her role as the education specialist for the Golisano Children’s Hospital, Griffin advocates for educational services for children seen in the clinic and ensures they have the appropriate accommodations in school. One unexpected benefit of the Peds Pals program is the assistance her medical students have provided that process. “Often, a school will require there be interventions before they offer accommodations or assistance,” she explains. “Some of our Peds Pals regularly go to their pal’s school and meet with teachers. I’ve had the Peds Pal go with me to a school meeting to talk about their involvement, and if we have documented dates and times and specific strategies used, that can sometimes be used as the intervention.”

Griffin says she’s been “unbelievably impressed by the caliber of humanity and emotional commitment” made by the medical students involved. “These aren’t people with a lot of spare time yet they give so much time and energy,” she says.

Clearly, the students find their participation worthwhile. For Sarah Kline, the program has meant far more than providing her pal with an unforgettable evening, great as that was. “One of the beautiful things about Peds Pals is we get to witness the medical experience from the patient’s point of view,” she says. “During appointments, we get to observe effective communication styles between medical staff and the patients. Outside the hospital, we learn about what day-to-day life is actually like for the patient. This experience has taught me how important it is to get to know my patient, and not just her disease and treatment course.”
Marvin A. Leder ’57, of New York, NY, was honored in July 2013 by the New York Hospital Queens Medical Staff Society of Flushing, New York, with a scholarship in his name in recognition of his longstanding dedication to education and helping those who are deserving of support.

1949

Stuart K. Cohan, of Houston, TX, writes, “there are so few of us left.” He has fully retired, first from practice and after 11 years from teaching. He has a granddaughter at Baylor Medical School, expecting to take over her mother’s practice in a few years.

1953

David D. Golub, of Baltimore, MD, has retired from hospital and private practice.

James B. Hanshaw, of Boylston, MA, retired at age 81 in 2010. He and Chris look forward to their 60th wedding anniversary this year. They have five children and three grandchildren. “We feel very fortunate to be able to enjoy our family,” he writes. “Art is still my big thing.”

1959

Andrew C. Sabey, of Coronado, CA, is unable to attend reunion due to illness. “Best Wishes,” he writes.

1964

A. Albert Tripodi, of Longboat Key, FL, is looking forward to his 50th reunion. He is enjoying the beach, sunshine, cycling, and tennis and is the medical director at the Friendship Centers in Sarasota as well as serving on the Board of Governors. He also enjoys teaching preventive medicine and the history of medicine at the Lifelong Learning Academy affiliated with the University of South Florida. He recently traveled to watch his grandson play lacrosse for West Genesee High School, his granddaughter play for Cornell, and grandson Dylan’s graduation from Union College in June. He is presently living on Longboat Key with his fiancée Fran Harris.

1956

Ira H. Scheinerman, of Melville, NY, enjoys travel, photography, skiing, biking, and his first great grandchild. Travel included Bhutan, Laos, and a cruise to Easter Island and Bora Bora. He has gotten into photography and is a member of a local camera club. Most recently, he skied with a son in Lake Louise. “It’s been a busy year,” he writes, calling his retirement occupation “full-time hedonism.”

1960

Julian Max Aroesty, of Lexington, MA, has a son who was married in August. He has four children; one attorney, one with an MBA, one engineer, one businessman; four grandchildren; and zero MDs (so far).

1957

Richard R. Dole writes that he is “alive and well at age 82, and living in Fairfield, Maine.”

1961

Barton Pakull, of Arlington, VA, has arranged for a conservation easement on his country land in the Shenandoah Valley so there will be no development in that scenic area.

1962

Michael F. Cahn and his wife, Hilda, remain well, and moved from Port Ludlow, WA, to Redmond, WA, north of Seattle, on June 30.

1951

Edward Dunn, of Exeter, NH, moved to a continuing care retirement community in Exeter two years ago from his first retirement locale in Stowe, VT. His skiing days are over, but golf and travel are still major interests.

1965

Richard N. Snyder, of Los Angeles, CA, retired as a pathologist from Southern California Kaiser Permanente, after 37 years in 2007. He is still working part-time/per diem as a surgical pathologist and lab director for four area clinics and is planning to attend reunion in 2015. His granddaughter will matriculate to SCRIPPS/Claremont, CA, as pre-med in August. He writes, “joyous news, that I remain on the warm side of the grass.”
A Better Diagnosis

Throughout his 45 years of medical practice, New York City radiologist Robert L. Bard, MD ’68, has worked to find better ways to detect cancer. Today, that means using 3D ultrasound and MRI as a means to detect prostate, breast, thyroid, and skin cancer.

“Using ultrasound and MRI—with no x-ray or radiation—we can see the tumor, we can see if it’s spread, see how aggressive it is, and often avoid biopsies and sometimes surgery,” says Dr. Bard, who operates the Bard Cancer Center and is a consultant to Mt. Sinai Medical Center. “When all we had was x-ray, you couldn’t really see very much and missed almost all the cancers except lung cancer. Ultrasound, CT scans, and MRI changed radiology completely and the new 3D ultrasound and new MRI technologies have completely replaced CT scanning.”

Although used throughout Europe, this state-of-the-art technology is not yet the standard of care in the United States. “You can get a good standard ultrasound machine for $40,000. My machine costs $400,000. They don’t do the same thing,” Bard says.

Using Doppler technology, Bard is able to assess blood flow and abnormal tumor vessels to determine whether a tumor is likely to metastasize or not. “Only three percent of prostate cancers kill. The blood flow technology that we have with ultrasound by itself tells patients if they’ll be in the 3 percent or they’ll be in the 97th percent that can be watched,” he says. “Often times we can avoid the biopsy. We can tell people, yes, you have a prostate cancer, but it is so low-grade it’ll kill you in 30 years.”

The technology is also particularly effective with melanoma. “Fifty percent of melanoma does not metastasize, but if it has a depth of penetration below the skin greater than one millimeter, it can be aggressive,” Bard explains.

“The sonogram can see that in seconds, in addition to blood flow. If melanoma is filled with abnormal tumor vessels it will metastasize. If it isn’t, it is unlikely to metastasize. If you can tell someone that the melanoma on his or her nose is not invasive, maybe it can be removed with a two millimeter margin instead of a centimeter margin.”

After earning his medical degree from Upstate and his intern year, Bard began his medical practice in the U.S. Air Force as a chief radiologist, attaining the rank of major. He performed radiology services at the Air Force Hospital in Udorn, Thailand, and acted as consulting radiologist at the U.S. Embassy in Laos. After completing his service and his radiology training, he held radiology appointments at several prominent New York Hospitals before opening his private practice in 1972. He also spent 10 years as clinical associate professor of radiology at New York Medical College.

Today, patients worldwide seek out Bard’s advanced imaging techniques for diagnoses, for laser treatments he has developed to treat prostate and other cancers, and for follow-up and prevention.

Three years ago, he began treating patients with prostate cancer with an image-guided laser treatment developed by a colleague in the Netherlands. “We only treat the focal area that needs to be treated and leave the rest of the prostate,” says Bard, who is a frequent speaker at medical meetings worldwide. “The treatment is done in an hour and the patient goes home, compared with a week in the hospital for conventional treatment.”

While some University hospitals have done a handful of cases, Bard has conducted 200 procedures over the last three years and is co-author of Image Guided Prostate Treatments (Springer, 2013), one of 10 textbooks he has written or edited. Image Guided Dermatologic Treatments will be released by Springer in 2016.

Bard believes 3D ultrasound has applications in other areas, including endometrial cancer, adenomas of the parathyroid gland, sports injuries, and arthritis. “Very few people in the country use it for this, but the technology works,” he says. “Radiologists like MRIs; they like to look at pictures on a screen and don’t want to get their hands dirty. Ultrasound gets messy but it’s a better technology.”

—Renée Gearhart Levy
Martin S. Goldstein ’66, of Boca Raton, FL, retired from clinical practice in New York City in October 2013 and pursues interests in history, photography, golf and woodworking. He was honored with the Mt. Sinai Hospital Jacobi Medallion in March 2014.

1967
Leslie M. Burger, of Vancouver, WA, has been serving on the Washington State Medical Board for the past eight years. In April, he received the Federation of State Medical Boards (FSMB) John H. Clark, MD, Leadership Award for 2014, for his role in spearheading a major transformation of the board during his tenure. He served as chair of the board from 2009-2011. He currently serves the medical regulatory community through his participation with the Federation of State Medical Boards Foundation, of which he is vice president.

Bruce L. McClennan, moved to Chicago, IL, in May to be with his children and grandchildren. He continues part-time work at Yale.

Robert J. Wald, together with his wife, Amy, and assorted dogs and cats, is retired and living in Chimney Rock, NC. After residency in psychiatry at the University of Rochester he served two years in the Navy. His duty as the only psychiatrist at the Key West Naval Hospital was both gratifying and entertaining. Thereafter, he opened an adult inpatient and outpatient practice in Naples, FL, where they remained for 30 years. After retiring in 2001, they built a log home on a mountainside in a dense forest, which they continue to call home. His main activities now include being an active firefighter, land trust work and other activities devoted to land protection, and acting as vice mayor of his small town. He is blessed with three wonderful children and an artistic wife who hand-crafts Adirondack-style furniture. He acts as her assistant with the non-artistic side of the business, such as walking the forest collecting wood and driving a truck to art shows.

1969
Donald H. Jackson, of Topeka, KS, is retired from private practice in cardiology. He recently lectured on “Photo safaris in East Africa” at the annual N-4-C photography conference in Iowa, and planned to return to Tanzania this summer.

Jeffrey G. Kaplan, of Highland Mills, NY, segued to full-time practice in pediatrics 12 years ago, after more than three decades in administrative medicine, working in an ultraorthodox community health center in the Hudson Valley, where the median family size is 10. He recently retired but was asked to work a few days per month, which he is happy to do. He also continues to advocate for rational medicine and incentive alignment (www.ManagingManagedCare.com). On a lighter note, he just picked up his sixth cedar-strip kayak construction kit; he plays four musical instruments; and most important of all, he enjoys being with his three kids in three states, along with six grand-kids, and his wife he married in year two at Upstate, 48 years ago.

Jane L. Falkenstein and John T. McCarthy, of Troy, NY, are happily and productively retired since 2011. They write, “we’ve managed to survive the winter of 2013-2014 in Upstate NY, where we qualified for the senior Olympics snow shoveling and snow blowing team.” However, they are saddened by the loss of their ninth grandchild, Anna Mae, at four days of age, on May 26, 2014.

1971
Richard M. Stratton, of Gilbert, AZ, is “retired and enjoying time with my wife and grandchildren.”

1974
Robert A. Edelman, of Mill Neck, NY, is proud of his wife, Ellen, who is a gallery lecturer at the Guggenheim Museum, and his daughters: Stephanie, who is a vice president with Ross Stores, and Erica, who is an architect with Platt, Byard, Duvell and White.

Mark D. Simms, of Glendale, WI, says this July marked his 20th anniversary as chief of child development at the Medical College of Wisconsin. His son was married in the spring and his daughter is applying for a master’s degree program in speech-language pathology. Simms has been actively involved in training pediatricians in China in the newly recognized subspecialty of developmental and behavioral pediatrics.
1975

Robert M. Goldberg remains in full-time solo practice of medical oncology/hematology in Somers Point, NJ, (milepost 30 on the Garden State Parkway). “Looking forward to my 2015 (40th) reunion, and cordially invite any classmates in the area to contact me, particularly in the summer, when the kayaks and jet skis are in off my back deck!”

1976

Harriett L. Burris, of Alexandria Bay, NY, is retired as of April Fool’s day, just eight years after returning home to Alexandria Bay and River Hospital (formerly EJ Noble Hospital). While there, she served as ED medical director, hospital medical director, and SNF medical director. Her first daughter, Liz, married Won Heo in September 2013, and moved to Seoul, South Korea, in April 2014 after working for 10 years in Japan. Her second daughter, Kate, is the finance director for the northeast region for ARAMARK Healthcare, based in Philadelphia. Harriett and John are happy living quietly in the frozen north.

1978

Mark Davis, of Abingdon, MD, has written a book, Obama Care: Dead on Arrival, A Prescription for Disaster.

1979

Linda M. Rice, of Rochester, NY, has joined the Rochester General Health System, working as part of Northridge Medical Group, after 30 years in private practice. She is adjusting well to the EMR, though says “it’s a challenge to pick and choose what goes in there from my stacks of paper records, as all ‘seasoned’ practitioners well know! Doing well though, happy with the choice, and hoping this move will eventually allow more time with my four grandchildren, two in Buffalo, and two in Baltimore.”

1982

David M. Novick, of Andover, MA, is still in private practice in the Merrimack Valley focused on neuro, MSK, and women’s imaging. His older son, Karl, is a lieutenant in the Marine Corps, based at Camp Pendleton and is engaged to his college sweetheart with a wedding this summer. His youngest, Max, is heading off to University of Virginia this fall to study classics and biology (medicine?). A new puppy is expected this summer to fill the empty nest.

Nicholas G. Tullo, of Towaco, NJ, currently practices cardiac electrophysiology at St. Barnabas Medical Center in Livingston, NJ. He is assistant clinical professor of medicine at the Rutgers University School of Medicine and Dentistry of New Jersey, and was just awarded the Harvey Nussbaum Golden Apple Award for his years of dedication, scholarship, and commitment to educating the medical residents at St. Barnabas. He spoke as a faculty member at the annual scientific sessions of the Heart Rhythm

Joby Swerdlow ’79, of Manlius, NY, and her elder daughter, Amber Sommer, returned to her first remembered home in Rangoon, Burma (Yangon, Myanmar), in January 2014. To read Amber’s blog interviewing Joby every day, go to CuminandCamels.com. “Read, in order, About Me; Burma; and then go to February, and find Day 1. Go in order from Days 1 through 18,” she writes.
Society in May 2014, and also presented an original research abstract at that same meeting. He was the first in New Jersey to implant a new miniaturized insertable cardiac monitor on February 24, 2014, and serves as medical advisor to the Dysautonomia Information Network (DINET.ORG) and STARS-US.ORG, an advocacy group for patients who suffer from syncope. But he most enjoys spending time with his wife, Lucy, and their three wonderful children.

1983

Scott A. Ross, of Bonita Springs, FL, is still practicing dermatology and Mohs surgery in Naples, FL, though now spending some time in pre-production of his medical fiction novel, Wrinkle, which has been taken under the wings of American Films. All his kids are finishing or starting more years of college: Danny in medical school in Tampa, Jessica graduating with her MBA and looking for a job in New York City, and Michael finishing up at Florida State. “Say hi if you’re in Florida and use your sunscreen!”

1985

Gerard A. Compito, of Skillman, NJ, writes that after four years as vice-president and president of the medical staff at Princeton HealthCare System, he moved over to the hospital foundation as chair of its board of directors. He remains on the System Board of Trustees and recently moved into a brand new hospital in 2012 while he was medical staff president. His work with the System’s board has been productive, thanks to a cooperative effort between medical staff leadership and administration. “It’s good to be part of that link,” he writes. “I’m still practicing full-time radiology, so it’s busy and, thankfully, rewarding.”

1984

Anthony Hartmann and Lynn Sutley-Hartmann, of Hillsborough, NJ, share that their oldest daughter, Katie, recently married her medical school classmate, Jim Harrison. They graduated from Uniformed Services University of Health Sciences and are now Navy lieutenants stationed at Portsmouth Naval Center. Katie will start a pediatric internship while Jim does orthopedics. Younger daughter Tory also got married this summer to Blake Bishop. Blake will be teaching at the Uncommon School while Tory starts classes at Harvard Law School. Anthony and Lynn are still busy working in central New Jersey with any spare time spent at their house in Naples, FL, or visiting the kids. “We’d love to visit with any classmates who are visiting those areas — looking forward to the 30th reunion!” they write.

1986

Marc Z. Simmons and Michele Berger Simmons, are still living in Westfield, NJ. Marc is a radiologist at Memorial Sloan Kettering and Michele has been enjoying her non-clinical career for the past few years as a physician advisor, learning more about the ever-changing complexities of health care compliance. Their daughter, Amanda, graduated from Wesleyan University and is enjoying life and her first job in New York City. Their son, Josh, is a junior at Georgetown.

Pamela and Kevin Stuart, of San Martin, CA, write that Kevin is a gastroenterologist and Pam is the medical director of a CEP-America Emergency Department. They have been living and practicing in California since 1991. Their older son, Benjamin, started medical school at Hofstra School of Medicine in fall 2013, and their younger son, Daniel, is a junior at University of San Diego.

1987

Howard L. Offenberg, of Ormond Beach, FL, announces his newest additions, identical twins, on top of six prior kids.

Gordon M. Ortiz ’89, of Saratoga Springs, NY, is looking forward to seeing everyone at the 25th Reunion.

Drew Malloy, is living the dream in Santa Cruz, CA, with his wife, Linda; daughter, Maggie and St. Bernard, Lu Lu.
1989

Bruce Eisendorf, of Soquel, CA, is a family physician and champion for shared medical appointments at Palo Alto Medical Foundation in Santa Cruz. He runs one or two group visits per week, with 10 to 20 patients per visit, and oversees the implementation of others. He focuses on holistic health and managing chronic pain and is interested in hearing what others are doing with group visits. “E-mail me at eisendb@painf.org.”

Gregory Fiasconaro, III, of Cheshire, CT, can’t make the 25th reunion but wishes everyone well. He has changed jobs since the 20th reunion. “New group, new partnership,” he writes. “It was scary to change but has worked out well.” All is well with his wife, Tracey, and children, Peter and Olivia, both students at Fordham University. He’s a junior; she is a freshman.

J. Marc Pipas, of Lebanon, NH, is professor of medicine at Dartmouth Medical School, director of GI oncology at The Norris Cotton Cancer Center, and director of the Hematology/Oncology Fellowship Program. He and his wife, Catherine, have two daughters, Victoria and Stephanie, and the world’s greatest yellow labrador retriever, Purdey.

1990

John D. Bisognano, of Pittsford, NY, has been elected president of the American Society of Hypertension (ASH) from 2016-2018 and will serve as president-elect from 2014-2016. He is professor of medicine in the Cardiology Division at the University of Rochester Medical Center and heads the ASH Comprehensive Hypertension Center of Excellence at the University of Rochester. He runs an NIH funded study in behavioral aspects of mild hypertension and also is involved in development of implantable device therapy for severe and refractory hypertension. He is also involved in a Monroe County collaborative of local businesses that has resulted in much improved blood pressure control in the region.

1991

Molly A. Brewer, of Farmington, CT, was named chair of obstetrics and gynecology at University of Connecticut Health Center.

1993

Annemarie Etienne Hester, of Ormond Beach, FL, is practicing ophthalmology at Florida Health Care in Daytona Beach. She specializes in glaucoma.

1997

Alison L. Mitzner, of New York, NY, and her husband, welcomed a son, Penn Rafael, on January 2, 2014. He joins sister, Serina Isabelle, who is two-and-a-half years old. Alison is a senior director, medical oversight lead, at Pfizer, Inc.

2001

Katherine M. Walker Foster, of Kannapolis, NC, was married on August 24, 2013, to Robert Foster and they are expecting their first child this fall.

2003

Andrew S. Bagg, of Orlando, FL, has published chapter 33 in the fifth edition of Allergens and Allergen Immunotherapy Subcutaneous, Sublingual and Oral.
Dave C. Prakash, of Barksdale AFB, LA, was selected in 2013 as a U.S. Air Force pilot physician. He serves as both bomber pilot and flight surgeon, trained in aerospace medicine.

Matthew C. Miller, of Rochester, NY, was named associate medical director of Perioperative Services for Strong Memorial Hospital. He is a head and neck oncologic and microvascular reconstructive surgeon at the University of Rochester Medical Center.

2006

Anne Marie Tremaine and Glenn E. Groat, of Costa Mesa, CA, were married in Southern California in November. Anne Marie is finishing a laser and cosmetic dermatology fellowship at Massachusetts General Hospital. She is excited to move back to California in July to begin working in a private practice and rejoin Glenn, who has been practicing radiology in Orange County.

Joanne Kacperski, and husband, Jeff Damadeo, of Loveland, OH, share the birth of their son, Christian Vedder Damadeo, on October 1, 2013. He joins proud big brother, Preston.

2007

Sarah Finocchiaro, of Fulton, NY, and husband John McGraw had their first baby, daughter Lena Grace, on August 20, 2013.

2008

Michael and Marissa Mincolla, of North Syracuse, NY, share that Marissa completed her residency in diagnostic radiology in June 2013 at Upstate Medical University and has joined University Radiology Associates in Syracuse, practicing as a general diagnostic radiologist.

2010

Beverly A. Schaefer, of Cincinnati, OH, is doing a fellowship in pediatric hematology and oncology at Cincinnati Children’s Hospital.

2014

Trevor J. Laborda, of Pflugerville, TX, and his wife, Abbey, announce the birth of their daughter, Jovie Ana, on April 9, who joins big brother Cadel.

Kenar D. Jhaveri ’04, of Searingtown, NY, was awarded the 2013 Miriam Friedman Ben- David New Educator’s Award for his work in developing innovative teaching tools to enhance medical education. He is the first recipient from the United States to receive this award, which is given by the Association for Medical Education in Europe (AMEE).
MINDY HULL, MD ’03

Forensic Files

Blame Patricia Cornwell’s Kay Scarpetta. Or Dana Scully from “The X-Files.” Or “CSI.”

“There’s no shortage of female medical examiners represented in media,” says Mindy Hull, MD ’03, a forensic pathologist and medical examiner for the Commonwealth of Massachusetts, just one reason she thinks hers is a female dominated field.

Another? “We’re curious and we like a good story,” she says. “I think women are intuitive and ask a lot of the right questions. We’re good at it.”

Dr. Hull likes solving a good mystery. “The forensic side is captivating to a lot of people because it does read like a mystery novel. I get asked quite a bit if my job is like TV,” she says.

And while she enjoys the autopsy process and identifying the cause and manner of death, she says forensic mystery solving alone is not what keeps her in her field. “Human anatomy is beautiful. I feel incredibly privileged to see the body in the way that I do. It’s the anatomic part—the dissection—that keeps me in forensics.”

Dr. Hull joined the Office of the Chief Medical Examiner in Boston in 2007 as a Fellow in Forensic Pathology, and remained on as a staff medical examiner (serving both the Boston and Holyoke offices) and director of the Cardiac Pathology Service.

On average, she conducts three autopsies a day, plus additional external examinations. When police have questions about whether a death is a homicide or not, Hull can be called to the crime scene to consult. She also spends time in court testifying about her findings.

“It can be a pretty dramatic life, to be honest,” says Hull. “When I’m working I’m able to stay emotionally detached. When it does actually hit me is when I’m testifying and describing my findings to a jury and I see the work that I do in the eyes of other people. I’ve had juries cry or family members run out of the courtroom. That snaps me back to realize how horrific the things that I see are.”

But Hull believes hers is important work, providing healing and closure for families looking for answers about how their loved one died, and helping to bring justice to victims who died as the result of violence. “I am the voice of my patients, particularly in the courtroom,” she says.

Hull’s interest in pathology was sparked during a post-sophomore fellowship in pathology conducted after her second year of medical school, which was offered by Upstate to fill a shortage of pathology residents. Although she planned to eventually pursue surgery, Hull spent the year performing the same duties as a first-year pathology resident. She spent time at the Onondaga County Medical Examiners office and found a mentor in renowned occupational lung pathologist Jerrold Abraham, MD. “I started reading his deposition transcripts for fun and that really opened my eyes to the medical/legal aspects of pathology,” she recalls. Their work together culminated in her first (of over a dozen) peer-reviewed publications.

It wasn’t until she did her first surgery rotation in her third-year that Hull realized perhaps surgery wasn’t the right path. Although she thoroughly enjoyed the experience, it didn’t provide the full anatomical experience that pathology had. “Surgery requires such a small window because you have to maintain a sterile, bloodless field, where in an autopsy you get to see it all,” she says. “It was the contrast between those two that really solidified that it’s the incredible human anatomy you see in autopsy pathology that I loved.”

Hull did her residency in clinical and anatomic pathology at Massachusetts General Hospital, following up with her fellowship in forensic pathology. In addition to her work as a medical examiner, she started a private forensic consulting business in January, providing forensic pathology consultation and expert witness services to attorneys, families, and insurance companies. “Forensics doesn’t attract a lot of doctors so across the board there’s a bit of a shortage across the United States,” she says.

Hull considers the work a privilege. “My job makes me grateful for a lot of things, most importantly that I have a chance to live,” she says. “I don’t tend to sweat the small stuff.”

—Renée Gearhart Levy
March 1943

MORRIS E. FULLER, of Spokane, WA, died July 20, 2010.

1946

ANTHONY J. OROPALLO, of Barrington, NJ, died February 20. Dr. Oropallo graduated magna cum laude from Syracuse College of Medicine. He enjoyed a successful career as an ophthalmologist working in private practice, as well as at the Veterans Administration and the Pennsylvania Office of Vocational Rehabilitation, both in Philadelphia, where he retired at the age of 84. He was also on the staff of both Wills Eye and Methodist Hospitals in Philadelphia. He is survived by his wife, Sue; sons James and Richard; daughters Susan, Terry, and Janice; and several grandchildren, great grandchildren and other family members.

ALFRED M. STRUTHERS, of Nelson, NH, died March 26. Dr. Struthers served during World War II in the medical corps and the medical reserves. For 35 years, he had a private practice in Syracuse specializing in plastic and reconstructive surgery and hand surgery, retiring in 1988. He is survived by his sons, Alan, Mark, and Samuel; his daughters, Sally, Suzanne and Shari; and several other family members.

1952

LEONARD M. MARMOR, of Los Angeles, CA, died August 24, 2013.

CARL E. MARLOW, of Liverpool, NY, died on April 30. In 1942, he entered military service as a first aid man during World War II with the U.S. Army’s 36th Infantry Division in Europe. He was the recipient of two Purple Hearts, a Silver Star and Bronze Star. After graduation, he spent an additional year as a first lieutenant in the U.S. Army in Nuremberg, Germany. He was a staff member of the Cardiovascular Research Institute at the University of California, San Francisco. He pursued a career in teaching and research, was appointed full professor of physiology in 1970, and became well known for ground-breaking studies of pulmonary edema. He is survived by his wife, Eileen; his daughters, Dr. Katharine Collinge Staub Harrison, Carle, and Nancy; his sons, Norman Jr., and Peter; brother Frank J. Staub ’52; nine grandchildren; and several other family members.

1953

NORMAN C. STAUB, of San Rafael, CA, died March 18. Dr. Staub served in the medical corps of the U.S. Army in Nuremberg, Germany. He was a staff member of the Cardiovascular Research Institute at the University of California, San Francisco. He pursued a career in teaching and research, was appointed full professor of physiology in 1970, and became well known for ground-breaking studies of pulmonary edema. He is survived by his wife, Eileen; his daughters, Dr. Katharine Collinge Staub Harrison, Carle, and Nancy; his sons, Norman Jr., and Peter; brother Frank J. Staub ’52; nine grandchildren; and several other family members.

1955

DOUGLAS R. SHANKLIN, of Gainesville, FL, died on November 12, 2013. Dr. Shanklin was a faculty member at the University of Florida Medical School in pediatrics and pathology, where he received the “best teacher” award. He was a former member of the Alachua County Medical Society and the Florida Medical Society. He was also professor emeritus at University of Tennessee, a medical malpractice expert witness and forensic pathology consultant, and instrumental in overturning several death row convictions in Florida. He is survived by his wife, Virginia; his daughters, Elizabeth and Eleanor; his son John Carter; and three grandchildren.

1963

ARLEN K. SNYDER, of Canandaigua, NY, died April 14, 2013. He was survived by his wife, Deborah; children Nadine, Lori, Todd, Derek, Diana, Chad, Bobby Fuller, and Todd Fuller; grandchildren; and several other family members.

RONALD A. HOUSMAN, of Oak Beach, NY, died on June 3. Dr. Housman was a member of the medical staff of Good Samaritan Hospital Medical Center and Southside Hospital and also founded Long Island Neurology in Bay Shore, NY. He served as chief of the Division of Neurology at both hospitals until his retirement in 1998. He was a valued colleague, teacher, and friend throughout his tenure and in 2011 he was affirmed as a member of the Honorary/Emeritus Medical Staff of Good Samaritan Hospital Medical Center for his achievements and service to the community. He is survived by his wife, Wanda; son Marlon; daughter Lauren; stepsons Tony and Michael Sonsini; step-daughter Danielle Sonsini; several grandchildren; a great grandchild, and other family members. Friends and classmates may donate to Upstate Medical Alumni Foundation in his name.

1964

ALICE M. DEWEY, of Syracuse, NY, died March 22. She is survived by her brothers, William and Earl.

1977

RONALD A. GREENFIELD, of Edmond, OK, died December 1, 2013. Dr. Greenfield worked with the infectious disease section in the Department of Medicine at Oklahoma University Medical Center. His last position was as professor of medicine. He was passionate about his work with the AIDS community, including the Ryan White Foundation and Aids Care Fund. He is survived by his wife, Tawana; his son, David; his daughter, Precious; two grandchildren; and several other family members.

1997

CARIDAD ISAAC, of Larchmont, NY, died March 6. Dr. Isaac worked in the departments of Emergency Medicine and Pediatrics at New York Presbyterian Hospital, Weill Cornell Medical Center and provided compassionate and exceptional care to countless children in the Pediatric Emergency Service. She was a dedicated teacher and mentor to residents and medical students and a highly respected and loved colleague to physicians, nurses, and all who worked beside her. She is survived by her husband, William Boxer ’97; her daughter, Isabella; her son, Benjamin; and several other family members.

2003

ELENI (DOUFKEIAS) VAVAS, of Manhasset, NY, died on July 1. Dr. Vavas was accepted to Upstate through the early assurance program and after medical school completed her residency in internal medicine at New York Presbyterian Hospital-Cornell Medical Center. She served as chief fellow while completing her cardiology fellowship at New York University Medical Center, then went on to work as an assistant professor and director of echocardiography at North Shore University Hospital. Out of her life’s accomplishments, she was most proud of her role as a mother to her three-year-old son, Zachary. She is survived by her husband, John; son Zachary; her parents, Zachary and Voula; in laws, Daniel and Sue; and several other family members.
I believe that higher education should be accessible to anyone with the interest and ability to pursue it; but increasingly, even public schools are beyond the reach of many highly qualified young people. My own family was solidly “blue collar,” and for me, even at age 15, the affordability of college was at best uncertain. The support of my family, however, along with part-time work, student loans, and generous scholarship aid allowed me to begin my baccalaureate studies at Hobart College. When I lost my parents two years later, my dreams of medical school—along with much else—seemed to evaporate overnight. But thanks in large measure to financial assistance (including that provided by alumni), I successfully completed college, matriculated at Upstate, and received my MD in 1971. Throughout my treasured career in academic medicine and clinical practice, I have been mindful of the opportunities that my education provided—opportunities that would not have existed without the financial support made available to me by others. This debt of gratitude will be with me always.

David T. Lyon, MD ’71, MPH, FACP
Clinical Professor of Medicine
Drexel University College of Medicine

By endowing a scholarship through a planned gift in his will, David T. Lyon, MD ’71, will provide opportunities for future generations of physicians to receive a medical education.

For more information about how you can support the College of Medicine through a planned gift, please contact Paul Norcross at the Upstate Medical Alumni Foundation; 315-464-4361 or www.upstate.edu/medalumni/giving.
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