FLORIDA PHYSICIAN

MAKING THE BEST DAYS OF OUR LIVES LAST LONGER
Dear Alumni and Friends,

My undergraduate college experience included the student theater program, with work as a stage manager and later show producer. While my career path was always headed toward medicine, important lessons were learned in the performing arts. Artistic expression can be an important part of the healing process, as demonstrated every day with our UF Health Arts in Medicine program. Theater also teaches us about teamwork, where individuals work together on and off stage with precise timing and well-rehearsed actions and words to create a successful performance.

As we transform the learning environment for our medical students and physician assistant students with a new educational curriculum that focuses on patient-centered small group learning, state-of-the-art patient simulation and interdisciplinary education, we were thrilled on Nov. 22 to finally break ground on the new George T. Harrell, MD, Medical Education Building, which will provide the facilities we need to fully implement the new curriculum.

And we used a bit of theater in the groundbreaking ceremony to demonstrate just how the new facility will support team-based and experiential learning. A group of our students, faculty and alumni sat center stage in a round venue and discussed contemporary topics in health care and medical education, demonstrating the approach that will take place in the two signature learning studio spaces located on the first floor of the new building. The setting and the performance provided a tangible impression of our new curriculum and building, and proved to be a meaningful and enjoyable way to celebrate this momentous day for the UF College of Medicine.

While the construction phase of this important project has just begun, it comes after more than two years of detailed planning by many people, beginning with the curriculum revision process led by Dr. Joseph Fantone, senior associate dean for educational affairs. The Harrell Building is being designed to support the new curriculum and to ensure our students are trained to practice safe, highest quality, effective and compassionate clinical care.

As the ground is cleared and the foundation poured for the new building, it is important to note that we could not have reached this point without the guidance and support of our alumni and friends. I have often said UF can have a very good medical school with the funds provided by the state of Florida. But to be a great medical school — to be a national powerhouse among the nation’s very best medical schools — this leap requires the private gifts of philanthropic donors who share our grand vision. We broke ground for the Harrell Medical Education Building with no funds from the state — but because of the tremendous generosity of some wonderful donors. Please visit HowWeLearn.med.ufl.edu to read more about these visionaries and their commitment to excellence in medical education and to learn how you can leave your mark on the new building.

As 2013 comes to a close, I wish each of you a very Happy New Year, and I hope you will continue to stay connected to the UF College of Medicine. We have charted our future, and with your continued support, that future is very bright.

Sincerely,

ML Good, MD
Michael L. Good, MD
Dean
On the cover:
The University of Florida Institute on Aging is home to faculty members from diverse disciplines who are dedicated to high-quality translational research to improve the health, independence and quality of life of older adults. The IOA recently moved to its new home in the $45-million, 120-square-foot UF Clinical and Translational Research Building, which opened this past spring and provides a hub for activity that will speed scientific discoveries to patients.

Florida Physician is produced by UF Health Communications for alumni, faculty and friends of the UF College of Medicine. Please send address changes and other correspondence to: Editor, Karen M. Dooley Florida Physician P.O. Box 100253 Gainesville, FL 32610-0253 352-273-5865 dooleyk@ufl.edu

Feature Stories:

Making the best days of our lives last longer Enhancing physical and cognitive abilities that decline with age

One Sleepless Night In Seattle
A serendipitous story of two surgeons who formed a lifelong friendship over their Gator ties

Blurred Lines
Interprofessional education encourages students to cross health profession boundaries for the sake of the patient

Crime Scene Investi-Gator
How a fascination with medicine led to a crime lab in South Florida

---

Dean
Michael L. Good, MD mgood@ufl.edu

Assistant Editor
Christine Velasquez

Associate Vice President for Development, UF Health Science Center; Vice President for Development, UF Health
Mary Ann Kiely 352-273-9622 / mkiely@ufl.edu

Editor
Karen M. Dooley 352-273-5865 / dooleyk@ufl.edu

Contributing Writers
Christine Boatwright
David Finnerty
Mary Goodwin
Mary Miller
Styliana Resvani
Nicole Zak
James Hellegaard

Contributing Editor
Melanie Fridl, MSJ, ELS

Senior Vice President and Chief Communications Officer, UF Health

Assistant Editor
Christine Velasquez

Contributing Writers
Christine Boatwright
David Finnerty
Mary Goodwin
Emily Miller
Styliana Resvani
Nicole Zak
James Hellegaard

Contributing Editor
Melanie Fridl, MSJ, ELS

Senior Vice President and Chief Communications Officer, UF Health

Photography
Maria Belen Farias
Jesse S. Jones
Djamel E. Ramoul
Matthew Ryan Williams
Sharon Kane Zohne

Art Direction
Mary Cecelia, Madelyn West
“The afternoon knows what the morning never suspected.”
— Robert Frost

MAKING THE BEST DAYS OF OUR LIVES

DR. MARCO PAHOR IS FIGHTING A WAR ON AGING. DON’T GET HIM WRONG, THOUGH. PAHOR, DIRECTOR OF THE UF INSTITUTE ON AGING, DOESN’T WANT TO KEEP US FROM AGING; HE JUST WANTS TO HELP US GROW OLD — NOT GRACEFULLY — BUT ACTIVELY.

LAST LONGER

BY JAMES HELLEGRAAFD
we want to prevent physical and cognitive decline and expand active life expectancy, “ Pahor said of the interdisciplinary team of scientists, clinicians and researchers at the institute dedicated to unlocking the secrets of aging. The Institute on Aging has plenty of weapons in its research and clinical arsenal to support the university’s plan to become a national leader in the understanding of the aging process and diseases and conditions associated with growing older. One of those weapons is its new home in the Clinical and Translational Research Building. The $45 million, 120,000-square-foot complex, which opened earlier this year, serves as a hub for activity that will speed scientific discoveries to patients by bringing together researchers from a range of disciplines. In addition to the Institute on Aging, the building houses the Clinical and Translational Science Institute and an array of other research departments and clinical programs, as well as state-of-the-art conference, training and reception areas. As of 40,000 square feet of the CTRB is dedicated to the Institute on Aging, which was funded under the American Recovery and Reinvestment Act of 2009 through a $15 million grant from the National Institutes of Health. Scientists and physicians with the Institute on Aging are dedicated to achieving a better understanding of the biological mechanisms of aging and how we can maintain or enhance our physical and cognitive abilities. Here is a sample of the projects that will lead to new discoveries: LIFE Study Statistics from the Centers for Disease Control and Prevention show that Americans are living longer, with life expectancy continuing to increase from 78.6 in 2009 to 78.7 in 2010. In fact, life expectancy rose in just one year — from 78.6 in 2009 to 78.7 in 2010. To provide the keys to ensuring the years we gain are high quality and fruitful, the National Institute on Aging is funding a nationwide study to see whether behavioral and lifestyle interventions can help older adults retain their independence. UF is the coordinating center for the Lifestyle Interventions and Independence for Elders (LIFE) Study and one of eight field sites. The phase 3 randomized control trial of 1,600 people ages 70 to 89 who are at risk of mobility disability is the largest study ever conducted on older adults comparing two lifestyle interventions — a physical activity program and a program of health education — to see which is more effective in maintaining mobility in older adults. Researchers are examining the effects of physical activity on a number of factors, including cognitive function, serious fall injuries, disability in basic activities of daily living, cardiovascular events and hospitalization and nursing home admission. They will also examine quality-of-life measures such as depression symptoms, sleep quality, stress and satisfaction with life. Researchers from the Institute on Aging utilize the Health Promotion Center’s 200-foot indoor walking track (opposite page) for the Lifestyle Interventions and Independence for Elders Study to examine the effects of physical activity as they relate to aging. The HPC also features ballet-style bars for balance exercises, resistance training equipment and classroom space for health education group meetings.
Almost 40,000 square feet of the CTRB is dedicated to the Institute on Aging.
The four-year study concluded in November, and the results will be presented next spring. So far, the news is encouraging. The LIFE-Pilot study has shown that older sedentary adults can engage in active physical activity and that there are long-term positive effects of physical activity interventions on major mobility disability.

Living with pain
For some, part of growing old is living with pain, and one area of research encompassed by CTsi is the newly formed Pain Research and Intervention Center of Excellence (PRISE). With strong support from the Institute on Aging and the UF Health Science Center, PRISE serves as the professional home for scientists, clinicians and trainees dedicated to improved understanding and treatment of pain. Under the direction of Roger Fillingim, PhD, a professor at the UF College of Dentistry, PRISE is focused on research to reduce pain-related suffering that affects about 100 million people in the U.S.

Healthy weight management
Dr. Stephen Anton, chief of clinical research in the department of aging and geriatric research at the College of Medicine, focuses his efforts on helping older overweight people increase and improve their mobility and eat a healthy diet. The obstacles are sometimes daunting. The participants in his study live in an environment that encourages the consumption of highly palatable foods that are high in fat and sugar and where they likely will not engage in physical activity throughout the day.

“As individuals engage in sedentary lifestyles and age, it becomes progressively more challenging to engage in a physical activity or an exercise regimen,” explained Anton, who leads the clinical research core for the Cognitive Aging and Memory Program as well as the Claude D. Pepper Older Americans Independence Center.

Someone who tries to go from being sedentary to becoming active often tends to overdo it. That can lead to injury or excessive soreness, quickly taking them from being highly motivated to very discouraged.

Still, there are many who recognize the stakes and meet the challenges. Through the results these people achieve, Anton and his fellow researchers have learned how great a difference these positive changes in lifestyle can make in people’s lives.

“We’ve seen when people engage in a progressive exercise program combined with a healthy diet they’re able to achieve many valuable changes in health-related quality of life,” Anton said. “Physically and cognitively they’re able to function at a high level. They feel better emotionally. Then those changes are reflected in the biology as well. So those are all encouraging changes. They see that when they do it, these types of outcomes are possible.”

Pepper Center
After its initial NIH grant in 2007 that established the Claude D. Pepper Older Americans Independence Center, the Institute on Aging was awarded in 2012 a multimillion-dollar, five-year grant that is expected to total $5.2 million in renewed support of the Pepper Center.

The Center focuses on understanding age related muscle loss from different perspectives, and the potential role of skeletal muscle as a key target for therapies to counteract age-related damage to the body. The center also aims to train the next generation of academic and research leaders in the field of aging.

UF is one of 15 institutions in the nation to receive the award, which is named for the late Claude D. Pepper, a U.S. senator-turned-representative from Florida. Pepper advocated for the rights of the elderly.

Expanding its reach
Late last year, UF officially opened a new research and education center in Orlando that includes a 4,200-square-foot unit that gives the Institute on Aging the ability to reach beyond Gainesville to recruit study participants. The UF Research and Academic Center at Lake Nona allows the Institute on Aging to involve larger numbers of people from a wider geographical radius, improving the quality of the resulting research data and the soundness of the study findings.

Still, there are many who recognize the stakes and meet the challenges. Through the results these people achieve, Anton and his fellow researchers have learned how great a difference these positive changes in lifestyle can make in people’s lives.

“We’ve seen when people engage in a progressive exercise program combined with a healthy diet they’re able to achieve many valuable changes in health-related quality of life,” Anton said. “Physically and cognitively they’re able to function at a high level. They feel better emotionally. Then those changes are reflected in the biology as well. So those are all encouraging changes. They see that when they do it, these types of outcomes are possible.”

Pepper Center
After its initial NIH grant in 2007 that established the Claude D. Pepper Older Americans Independence Center, the Institute on Aging was awarded in 2012 a multimillion-dollar, five-year grant that is expected to total $5.2 million in renewed support of the Pepper Center.

The Center focuses on understanding age related muscle loss from different perspectives, and the potential role of skeletal muscle as a key target for therapies to counteract age-related damage to the body. The center also aims to train the next generation of academic and research leaders in the field of aging.

UF is one of 15 institutions in the nation to receive the award, which is named for the late Claude D. Pepper, a U.S. senator-turned-representative from Florida. Pepper advocated for the rights of the elderly.

Expanding its reach
Late last year, UF officially opened a new research and education center in Orlando that includes a 4,200-square-foot unit that gives the Institute on Aging the ability to reach beyond Gainesville to recruit study participants. The UF Research and Academic Center at Lake Nona allows the Institute on Aging to involve larger numbers of people from a wider geographical radius, improving the quality of the resulting research data and the soundness of the study findings.

Five tips for doctors when caring for older patients

1. When caring for geriatric patients, remember they move much more slowly than young people, and mobility is important as they age.

2. It’s important to help them embrace having a caregiver — ideally someone who comes with them to their visits and oversees their care.

3. Encourage them to bring their medication everywhere they go.

4. Be sure to address cognitive impairments. As patients age, these impairments should be expected and addressed by both you and the patient.

5. Address end-of-life issues — make sure they express their wishes to the appropriate people. Examples of these issues are wills and life support.

Tips provided by Donnie Batte, MD ’79, a geriatric specialist in Baton Rouge, La.
WHO WILL CARE FOR THE AGING POPULATION?

The UF College of Medicine and UF Health are working hard to ensure the aging population is not ignored.

“As the Baby Boomer generation expands the geriatric population, we are looking for different approaches to help them achieve healthy aging and care for them with respect and dignity,” said Laurence M. Solberg, MD, who was recently appointed chief of the division of geriatric medicine at the college.

With added services such as a geriatric consult service and the new Institute on Aging facility, UF Health continues to improve the quality of care for older adults.

In fact, UF Health Shands Hospital, which ranks among the nation’s 50 top hospitals in adult medical specialties according to U.S. News & World Report, is pioneering a new model of geriatric care.

“We are leading the nation in our effort to develop the embedded geriatrician,” Solberg said. “We have initiated this new model in the surgical intensive care units where the geriatrician rounds with the ICU teams, manages the chronic and acute medical issues of adults over 65 and educates the surgical teams about delirium and potentially inappropriate medications in the elderly.”

There are plans to duplicate the success of the embedded geriatrician in the emergency department, which will allow geriatricians to assist in the immediate assessment of older adults and avoid hospitalization.

In 2010, there were 7.2 individuals of prime caregiving age — 45 to 64 years old — for every person age 80 or older.

By 2030 there will be 4.1 individuals of prime caregiving age for every person age 80 or older.

Potential caregivers will be in much shorter supply starting in 2026 when the first boomers begin to turn 80.

68% of Americans age 40 and older are counting on their families to supply long-term care when and if it’s needed, according to a survey by Associated Press-NORC Center for Public Affairs Research published this year.

The number of ‘frail older people,’ age 65 and over with any disability, is projected to increase from 11 million in 2010 to 18 million in 2030.
People spend a lifetime building memories only to slowly watch them fade away with age. It has become an accepted part of growing old. But does it really have to be?

Dr. Ronald Cohen doesn’t think so. As director of the UF Cognitive Aging and Memory Clinical Translational Research Program, Cohen has focused his research for many years on brain-related effects of diseases and conditions such as cardiovascular disease, HIV, hepatitis C and obesity.

When Cohen began looking at vascular dementia, which is caused by problems in the supply of blood to the brain, it quickly became clear to him that researchers needed to look back in time to earlier stages before people were no longer functionally independent. Cohen received grant money from the National Institutes of Health to look at vascular disease and other risk factors as well.

As people age they often experience various comorbid conditions like heart disease that can set the stage for changes in the brain. As Cohen notes, not everyone who develops brain changes with aging has Alzheimer’s disease. There are other reasons why these changes can occur.

“Increasingly what became very clear was the process of aging, and things that go along with aging are really multi-dimensional,” said Cohen, who came to UF in July 2012 from Brown University. “There are a lot of different comorbidities and factors. So the broader phenomena of what is healthy and non-healthy brain aging became sort of a central theme in a lot of my research.”

While almost everyone experiences comorbid conditions such as blood pressure or vascular disease or diabetes, Cohen explained, there are many people who are quite healthy throughout their lives. Researchers are trying to answer many questions about what happens to the aging brain when these conditions exist or do not exist.

“What is normal aging? These are the kind of questions that we’re trying to sort out,” Cohen said. “We’re trying to understand the bases for age-related brain changes and age-related cognitive change.”

Cohen’s program is supported by the McKnight Brain Research Foundation and complements the ongoing basic science, clinical and translational research at the UF Institute on Aging and the McKnight Brain Institute of UF.

“Age-related decline in cognitive function — including changes in attention, memory, learning, executive function and language — is real and varies widely from one individual to the next, substantially influencing the quality of life, the character of personal relationships and the capacity for making informed decisions,” said J. Lee Dockery, MD, a trustee of the McKnight Brain Foundation and former interim dean and executive associate dean of the College of Medicine. “For these reasons, age-related cognitive decline demands our attention and a continued, concerted research effort.”

Ronald Cohen, PhD, is the director of the UF Cognitive Aging and Memory Clinical Translational Research Program and a professor of aging and geriatric research within the UF College of Medicine. His research interests include clinical and experimental neuropsychology, cognitive and clinical neuroscience and neuropsychology of attention.

Research shows that utilizing mental exercises can improve thinking and increase memory. Simple games can help boost cognitive function through daily practice.
A serendipitous story of two surgeons who met early one morning in an operating room and formed a lifelong friendship over their Gator ties.

As the doctors diligently work to repair the infected hip of a premature, 2-pound infant, they reminisce and laugh about medical school. It’s 2 in the morning, and as the rest of Seattle sleeps, Dr. John Hendrickson and Dr. Fred Huang have discovered a connection that will bond them forever — they are both University of Florida College of Medicine graduates.

Their revelation came to light when Hendrickson, who had never before met Huang, entered the operating room at Seattle Children’s Hospital to offer his assistance and commented on the heat lamp that was keeping the infant warm — warm enough to remind him of Gainesville.

That chance meeting in the operating room in 2001 led the two orthopaedic surgeons to form a partnership and friendship that has lasted 12 years.
Hendrickson, a 1975 graduate of the College of Medicine, worked in private practice at Valley Orthopedic Associates and volunteered half a day each week at Seattle Children’s Hospital, where he was running a pediatric trauma clinic with residents. “Pediatric trauma was his way to experience something different in his work, other than private practice,” said Huang, who received his medical degree in 1996. “Similar to how I came out to Washington for residency to see something new and increase my exposure to the world.”

Because they share a love for the Gators, the two doctors identified with one another. “Aside from cheering for the same football team every fall, I was struck by how genuinely enthusiastic he was about everything. You could tell him apart from the other residents,” Hendrickson said. “From there, we developed a relationship watching Gator football games together and joining the Seattle Gator Club.”

When one takes on a challenging case, the other jumps in to help operate. “Most people in a practice don’t have that kind of relationship. Doctors don’t always help other doctors,” Hendrickson said. “Fred and I have a smooth flow in surgery; it’s almost like a dance. He knows exactly what I need, and I know exactly what he needs.”

They both admit that they learn from one another. “I think the thing that’s made this unique from Day 1 is that he asks my opinion about things, despite his seniority,” Huang said. “He wants to learn from people and be progressive, and I think some doctors get to a point where they don’t care to learn more; they just want to do things their way. It’s a quality I hope I can carry on and one of the greatest things he’s taught me—to never stop learning.”

In Hendrickson, Huang has found a close friend and mentor he is able to work with every day. He said he will miss that terribly when Hendrickson retires at the end of the year, but he does look forward to working with the resident they have recently recruited from the University of Washington — who coincidentally is married to a Gator alumna.
When UF College of Medicine graduates John Hendrickson, MD ’75, and Fred Huang, MD ’96, met in the operating room 12 years ago in Seattle, the two surgeons formed a unique relationship that would bond them as business partners and close friends.

"Now it’s like a new role for me — to be the mentor and friend Dr. Hendrickson was to me," Huang said. "Jokingly told him in his interview that if he’d gone to UF, he wouldn’t have really even had to interview.

Outside of work, the two doctors enjoy spending time together — whether it’s to go out for dinner or watch a game together. "We are just very similar," Hendrickson said. "We both believe in balance. He’s not a workaholic; he honors his friends and family but still has an incredible work ethic. I think we both have that in common."

Even though Hendrickson’s children are now adults (John, 30 and Casey, 28) and Huang’s children are much younger (Kaylee, 7; Scott, 5; and Leena, 3), their wives get along great. Huang’s wife, Loan Bui, is also a Gator graduate and Hendrickson’s wife, Melissa, has “just as much Gator fever.”

"Even though we’re 4,000 miles away from Gainesville, it’s fun to be somewhere in the country with other people who have Gator spirit," Hendrickson said. "It’s so delightful to see someone here wearing Gator gear."

Timeline of a friendship

1948 Hendrickson is born in Madison, Wis.

1950 Huang is born in Man, W.Va., and his family moves to Plant City, Fla., which he calls home.

1975 Hendrickson completes medical school at UF.

1976 Huang completes medical school at UF.

1980 Hendrickson completes his fellowship training in sports medicine in Aspen, Colo., and completes his residency at the University of Washington in Seattle.

1981 Huang completes his residency at the University of Washington.

1999 Hendrickson and Huang meet in an operating room at Seattle Children’s Hospital while operating on the infected hip of a 2-pound, premature infant.

2000 Huang, then a chief resident, and Hendrickson arrive at the Seattle Gator Club to watch the Gators together.

2001 Huang completes his residency at the University of Washington.

2001 Hendrickson and Huang go into private practice together at Proliance Orthopedic Associates.

PHOTO BY MATTHEW WILLIAMS
Blurred Lines

Interprofessional education encourages students to cross over health profession boundaries for the sake of the patient

BY CHRISTINE BOATWRIGHT
Seven hundred students wearing everything from dental scrubs to white medical coats sat in groups of seven at round tables in Reitz Union ballrooms. Learners from the different health professions, whether nursing, medicine, dentistry, pharmacy or public health and health professions, fidgeted with papers and waited for the exercise to begin.

In one of the ballrooms, facilitator Erik Black, PhD, assistant professor of pediatrics, stood in front of the sea of students and asked them to read a case, based on the negative experience of an actual patient.

After giving the groups time to review the case, Black asked the students to prioritize the issues that affected the outcome, from lack of patient education to poor transition of care to lack of provider responsibility.

Next, the volume in the room sharply rose as students began debating the issues they deemed the highest priority. To complete the exercise, however, each group had to come to a unified conclusion. Group members held up the letter corresponding to their team’s consensus, and students were asked to defend their choices — for the reward of peanut M&Ms and a broader understanding of their counterparts in the other health professions.

Therein, the Interprofessional Learning in Health Care exercise began the next phase of UF’s second-year medical students’ journey in interprofessional education, which, ideally, will lead to improved safety and care for their future patients.

“Interprofessional education is clearly a push now within all of health professions education. However, interprofessional education is not simply teamwork skills. It’s also that knowledge, awareness and understanding of what other professions bring to the table when caring for their patients,” said Amy Blue, PhD. Blue recently was appointed associate vice president for interprofessional education at UF Health, taking over for Richard Davidson, MD, MPH, one of the founders of UF’s interdisciplinary program, who retired in November.

White national trends show a concentrated focus on interprofessional education, derived mostly from a history of breakdowns in communication among health care providers leading to medical errors, the College of Medicine has incorporated interdisciplinary teamwork into its curriculum for years.

However, a revived emphasis began when tragedy occurred because the team broke down. “People recognize that interprofessional collaboration should improve patient care. And studies are beginning to show that it does,” she added.

After spending a half-day debating her point of view, PHHP student Katelyn Turner realized her perspective sometimes conflicts with her peers’.

“The view I have of a health perspective isn’t always the best view or the right view, even though sometimes I think that it is because that’s the field I’m interested in,” Turner said. “Other providers have very important input in patient care, and our goal, all together, is the wellness of the patient. We really have to work together in that.”

According to Blue, the College of Medicine had one of the first interprofessional education programs in the country. In addition, Black said the college has “broken every mold” in pursuing a higher standard of collaborative education.

The earlier students from different professions work together, the sooner they realize their “not helpful stereotypes” are due to differences in medical interests, which can lead to communication breakdowns, Blue said.

“Having a generation of students know what other health practitioners do, know how to communicate with each other and know how to work together, is going to be essential,” said Venita Sposetti, DMD, an associate professor and the associate dean for education at the UF College of Dentistry.

Last year, Sposetti and her colleagues developed a collaborative microbiology event that included first-year medical and dentistry students applying fluoride varnishes and performing intraoral exams on each other to better understand early childhood caries, or cavities.

“The traditional lines in professions and between professions of ‘who does what’ and what’s the role are blurring,” she said. “They’re probably not going to crystallize more; they’re going to get blurrier.”

“We want graduates to be able to function in a collaborative manner with other health care professionals as members of an interdisciplinary team providing care.”

- Joseph Fantone, MD, senior associate dean for education affairs
Interprofessional Education: working together for effective collaboration and improved health outcomes

Erik Black, PhD

Amy Blue, PhD

Physician Luther St. James

Future physician Luther St. James prescribes physical therapy for Wanda to help prevent a heart attack and stroke, and physical therapist student Phillip Dicenso is now an integral part of the team.

Nurse Chelsea Emmett

As St. James prescribes medications for Wanda, pharmacist-in-training Carrie Hoffman provides expertise in medication management, making sure to consult with Wanda’s physician and nurse.

Pharmacist Carrie Hoffman

Physical Therapist Phillip Dicenso

Dicenso brings in (occupational therapist student) Molly McLaren to help counsel Wanda and encourage a heart-healthy lifestyle. They both provide the others on Wanda’s team with valuable insight into not just her physical abilities, but her emotional and mental health.

Chelsea Emmett, a nursing student who will provide direct, hands-on care to Wanda, works with medical student St. James to develop a plan for her care.

Wanda, a patient recently diagnosed with heart disease.

Amy Blue, PhD, associate vice president for interprofessional education at UF Health, oversees a curriculum that equips future health care professionals with skills in teamwork and communications that leads to effective collaboration and improved health outcomes for patients like Wanda.

Erik Black, PhD, assistant professor of pediatrics and instructional design specialist in the Office of Interprofessional Education, creates a scenario and facilitates students’ learning.

As St. James prescribes medications for Wanda, pharmacist-in-training Carrie Hoffman provides expertise in medication management, making sure to consult with Wanda’s physician and nurse.

Future physician Luther St. James prescribes physical therapy for Wanda to help prevent a heart attack and stroke, and physical therapist student Phillip Dicenso is now an integral part of the team.

Amy Blue, PhD, associate vice president for interprofessional education at UF Health, oversees a curriculum that equips future health care professionals with skills in teamwork and communications that leads to effective collaboration and improved health outcomes for patients like Wanda.

Erik Black, PhD, assistant professor of pediatrics and instructional design specialist in the Office of Interprofessional Education, creates a scenario and facilitates students’ learning.

Amy Blue, PhD, associate vice president for interprofessional education at UF Health, oversees a curriculum that equips future health care professionals with skills in teamwork and communications that leads to effective collaboration and improved health outcomes for patients like Wanda.

Erik Black, PhD, assistant professor of pediatrics and instructional design specialist in the Office of Interprofessional Education, creates a scenario and facilitates students’ learning.

Amy Blue, PhD, associate vice president for interprofessional education at UF Health, oversees a curriculum that equips future health care professionals with skills in teamwork and communications that leads to effective collaboration and improved health outcomes for patients like Wanda.
CRIME SCENE

Investigator

BY CHRISTINE BOWTOWRIGHT

JAMES “JIM” ONGLEY, MD '77, MAY RUN A CRIME LAB, BUT DON’T THINK FOR A MOMENT THAT HIS WORK MIRRORS THAT OF HOLLYWOOD’S “CSI: CRIME SCENE INVESTIGATION” OR “NCIS.”
do not drive a hummer,” Ongley said with a laugh. “We cannot put a piece of blood into a machine and an overhead projection reveals a satellite image of where the person is. It’s precise, rigorous and verified work.”

Ongley, the director of the Broward County Sheriff’s Office crime lab in Ft. Lauderdale, first discovered his aptitude for law and medicine during a fellowship with the medical examiner’s office, but his career path began with a move to sunny Florida.

Ongley moved from his hometown of Rochester, Minn., where his father was a physician at the Mayo Clinic, to Gainesville to attend college. After earning his bachelor’s degree in zoology, he knew he was headed to medical school.

“It wasn’t an expectation, but I never really thought about anything else,” he said.

After graduating from the UF College of Medicine, Ongley was unsure about his future.

“I went to medical school and was exposed to all sorts of different ideas,” Ongley said. “When everybody starts off, they want to be a doctor because they want to save everybody. You don’t know until you’re in school and see what really excites you and doesn’t excite you.”

Ongley soon discovered it was pathology — specifically pathophysiology — that excited him. His interest led to a residency at Jackson Memorial Hospital, where he took a turn into neuropathology.

“I became very fascinated with how people died,” Ongley said, noting his interest guided him to a fellowship with a medical examiner.

“It was such a bizarre world that I’d never been exposed to and never imagined, especially growing up in Minnesota where there was no crime,” he said. “It was fascinating.”
Ongley worked as an assistant medical examiner for Broward and Dade Counties, as well as the University of Miami School of Medicine. During that time, the legal system caught Ongley's attention, and he attended Nova Southeastern University College of Law from 1986 to 1989. Ongley began to teach as an adjunct professor at Nova in 1992, and continues today. “I was very interested in the system and how the process works,” he said. “I went to law school, not with the intention of ever practicing law, but to learn how we fit into the system.”

In 1990, he was offered a position as an assistant public defender in Broward County. Over time, Ongley progressed in his legal career to take on death penalty cases. Even though he doesn’t pride himself on his public speaking abilities, Ongley immediately found his niche as a trial attorney. “I figured, ‘I can do three years and see if I like it, of course I can always go back,’” he said. “I got in the courtroom, and I just loved being in the courtroom.”

Then, in 2004, he heard news that changed his career path, yet again. The Broward County Sheriff’s Office crime lab chief was retiring, and Ongley decided to apply for the job. Ten years later, Ongley oversees 44 lab workers and maintains the crime lab’s standards of accreditation. “I started working at the crime lab, which put all of my different skills together,” he said. The father of three and grandfather of four plans to retire to the Orlando area with his wife, Bettie “Linda” Ongley, DMD ’76, who was the first woman to graduate from UF’s College of Dentistry. With a self-professed “type-A” personality, however, Ongley does not believe he truly will retire. “Life’s too short to do something you don’t enjoy. You need to start enjoying life now. Do something that interests you,” he said. “Every job I’ve had, I’ve been very lucky that the excitement outweighs the boredom.”
New position at UF Health to focus on research, education

Thomas A. Pearson, MD, MPH, PhD, was recently named executive vice president for research and education for UF Health. The newly created position will serve as a catalyst for optimizing approaches to research and education across the colleges, institutes and research centers of the UF Health Science Center, as well as a spark for new ideas.

“Dr. Pearson’s broad experience as a researcher, professor and administrative leader makes him uniquely qualified to inspire and lead advances in both the classroom and the laboratory,” said UF President Bernie Machen. “I’m confident his efforts will contribute greatly to furthering our efforts toward preeminence among public research universities.”

Pearson, who was appointed in June, came to UF from the University of Rochester School of Medicine and Dentistry, where he was senior associate dean for clinical research and director of the Rochester Clinical and Translational Science Institute.

“The University of Florida Health Science Center, with six colleges in different health sciences, and two highly rated UF Health systems, is an extraordinary environment poised to seize the opportunities of truly multidisciplinary, collaborative faculty, staff, and students,” Pearson said. “I certainly considered it too great an opportunity to pass up.”

Pearson received his doctor of medicine, master in public health and doctor of philosophy in cardiovascular epidemiology, from The Johns Hopkins University, where he also completed residencies in preventive medicine and internal medicine and a fellowship in cardiology.

The U.S. Department of Defense has awarded $1.2 million to the UF College of Medicine for skin regeneration research that may benefit injured troops and civilians. Adam Katz, MD, an associate professor in the department of surgery, will lead the research. He has worked for the Armed Forces Institute of Regenerative Medicine since 2008 investigating possible techniques to help wounds heal and to improve the appearance of existing scars by using patients’ own excess fat tissue and the stem cells it holds.

The groundbreaking for the George T. Harrell, MD, Medical Education Building took place on Nov. 22, and one day later Randolph B. Mahoney, PA, announced a donation of $500,000 to help fund the building’s administrative offices of the UF School of Physician Assistant Studies.

The area will be named after the foundation of which Mahoney is president and chairman, The Hall-Halliburton Foundation Suite.

“The Harrell Medical Education Building is a cornerstone of the College of Medicine,” Mahoney said. “We are excited to help with this project, which will advance medical education here at UF.”

The Hall-Halliburton Foundation was founded by Mahoney’s family many years ago, and it funds programs and projects in various medical and social areas, primarily in Florida.

“We support endeavors that can make a difference, whatever the field,” Mahoney said. “We like to see the needle move with our funding. This is why we primarily focus on a few larger gifts, rather than many smaller ones.”

The new medical education building will serve as a national model, providing a dynamic environment for training UF medical and PA students to practice safe, effective and compassionate clinical care. The Hall-Halliburton Foundation Suite will house the PA administrative offices, including offices for the director, faculty and staff.

Mahoney is an assistant professor and serves as the clinical director for the UF College of Medicine School of PA Studies. He received his master’s degree from the school in 2001.

PA Corner | Family’s foundation names PA studies suite in new Harrell Building

Randolph B. Mahoney, MPAS, PA-C

The Hall-Halliburton Foundation Suite
Just more than a year after a $10 million gift from the Lillian S. Wells Foundation to the department of neurosurgery, the international search for a leader and a team focused on brain tumor research came to an end this summer. Duane Mitchell, MD, PhD, and his team of five researchers joined the Preston A. Wells Jr. Center for Brain Tumor Therapy at UF.

“Duane Mitchell brings world-class expertise in the use of immunotherapy to treat malignant brain tumors. He is the principal investigator on seven first-in-human protocols,” said William Friedman, MD, chair of the department of neurosurgery and the center’s co-director. Mitchell and his team, who arrived July 1, round out the comprehensive neurosurgery and the center’s co-director. Mitchell, who was associate director of Duke University’s brain tumor immunotherapy program, is an associate professor in the department of neurosurgery, director of the UF Brain Tumor Immunotherapy Program and co-director of the Preston A. Wells Jr. Center for Brain Tumor Therapy at UF. This addition to the brain tumor program at UF was made possible by the Wells Foundation gift, combined with matching funds from other university sources, totaling $20 million dedicated to brain tumor treatment and research.

Mitchell, who arrived July 1, round out the comprehensive neurosurgery and the center’s co-director. Mitchell, who was associate director of Duke University’s brain tumor immunotherapy program, is an associate professor in the department of neurosurgery, director of the UF Brain Tumor Immunotherapy Program and co-director of the Preston A. Wells Jr. Center for Brain Tumor Therapy at UF. This addition to the brain tumor program at UF was made possible by the Wells Foundation gift, combined with matching funds from other university sources, totaling $20 million dedicated to brain tumor treatment and research.

The idea of using the immune system to treat cancer dates back more than 100 years, but Mitchell and his team are encouraged by the promising results they have seen in their clinical trials and in the immunologic treatments of other cancers.

“For some cancers, such as advanced and metastatic melanoma, we are seeing for the first time significant and durable clinical responses in a large proportion of patients who have failed multiple other treatment regimens, through the effective generation of an immunologic attack against their own cancer cells,” Mitchell said.

And while the ultimate goal is for immunotherapy to be used in place of more toxic treatments such as radiation and chemotherapy, Mitchell says that in the near future he hopes to see improvements in patient outcomes by using it in combination with current standard treatments.

UF is the only place in the state that offers this treatment and conducts immunotherapy research, Friedman said.

Mitchell, who was associate director of Duke University’s brain tumor immunotherapy program, is an associate professor in the department of neurosurgery, director of the UF Brain Tumor Immunotherapy Program and co-director of the Preston A. Wells Jr. Center for Brain Tumor Therapy at UF. This addition to the brain tumor program at UF was made possible by the Wells Foundation gift, combined with matching funds from other university sources, totaling $20 million dedicated to brain tumor treatment and research.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“People are used to being evaluated on a one-to-five scale or a one-to-nine scale, and I think going with the milestones here, it’s not so much numerical grading,” she said. “The milestones have a lot of narrative description that describes each level, so it’s more of ‘Where do I fit in the description?’”

Mahla said the new system “is a good thing,” although it requires a lot more institutional resources and oversight than in the past.

“It provides more accountability for programs to make certain they are producing what society needs as far as health-care providers,” he said.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“The AGME is really shifted to looking at the quality of the physician we are producing and whether he or she can meet societal expectations of doctors in the 21st century,” Mitchell said.

Seven UF Health residency programs are currently under the new accreditation system, and by July 2014, all 65 UF programs accredited by the AGME will be added.

“It is a very big impact on pretty much all the areas of health-care here at the institution,” Mahla said. “If the programs are not accredited by the AGME, then the hospital is not eligible to receive government funds to support resident training in that area.”

Under the new accreditation system, the AGME will switch from periodic evaluations to more continual reviews, examining programs yearly based on whether residents and fellows meet outcomes-based milestones within six domains of clinical competence.

Medical educator Lynne Meyer, PhD, MPH, said the hardest part of the change will be the shift in mindset.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“It will be based less on whether or not you fill out the appropriate paperwork,” said Michael E. Mahla, MD, associate dean for graduate medical education at the UF College of Medicine. “The AGME has really shifted to looking at the quality of the physician we are producing and whether he or she can meet societal expectations of doctors in the 21st century.”

Seven UF Health residency programs are currently under the new accreditation system, and by July 2014, all 65 UF programs accredited by the AGME will be added.

“It has a very big impact on pretty much all the areas of health-care here at the institution,” Mahla said. “If the programs are not accredited by the AGME, then the hospital is not eligible to receive government funds to support resident training in that area.”

Under the new accreditation system, the AGME will switch from periodic evaluations to more continual reviews, examining programs yearly based on whether residents and fellows meet outcomes-based milestones within six domains of clinical competence.

Medical educator Lynne Meyer, PhD, MPH, said the hardest part of the change will be the shift in mindset.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“It will be based less on whether or not you fill out the appropriate paperwork,” said Michael E. Mahla, MD, associate dean for graduate medical education at the UF College of Medicine. “The AGME has really shifted to looking at the quality of the physician we are producing and whether he or she can meet societal expectations of doctors in the 21st century.”

Seven UF Health residency programs are currently under the new accreditation system, and by July 2014, all 65 UF programs accredited by the AGME will be added.

“It has a very big impact on pretty much all the areas of health-care here at the institution,” Mahla said. “If the programs are not accredited by the AGME, then the hospital is not eligible to receive government funds to support resident training in that area.”

Under the new accreditation system, the AGME will switch from periodic evaluations to more continual reviews, examining programs yearly based on whether residents and fellows meet outcomes-based milestones within six domains of clinical competence.

Medical educator Lynne Meyer, PhD, MPH, said the hardest part of the change will be the shift in mindset.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“It will be based less on whether or not you fill out the appropriate paperwork,” said Michael E. Mahla, MD, associate dean for graduate medical education at the UF College of Medicine. “The AGME has really shifted to looking at the quality of the physician we are producing and whether he or she can meet societal expectations of doctors in the 21st century.”

Seven UF Health residency programs are currently under the new accreditation system, and by July 2014, all 65 UF programs accredited by the AGME will be added.

“It has a very big impact on pretty much all the areas of health-care here at the institution,” Mahla said. “If the programs are not accredited by the AGME, then the hospital is not eligible to receive government funds to support resident training in that area.”

Under the new accreditation system, the AGME will switch from periodic evaluations to more continual reviews, examining programs yearly based on whether residents and fellows meet outcomes-based milestones within six domains of clinical competence.

Medical educator Lynne Meyer, PhD, MPH, said the hardest part of the change will be the shift in mindset.

The characteristics of an empathetic practitioner — humanism, compassion, integrity and respect for others — make up one milestone in the new accreditation system developed by the Accreditation Council for Graduate Medical Education.

The AGME is shifting the focus of accreditation for graduate medical programs from a process-based evaluation to one that is more outcome-based. Instead of focusing on a program’s ability to meet requirements set by the AGME, the new system looks at residents’ preparation in their chosen specialties.

“It will be based less on whether or not you fill out the appropriate paperwork,” said Michael E. Mahla, MD, associate dean for graduate medical education at the UF College of Medicine. “The AGME has really shifted to looking at the quality of the physician we are producing and whether he or she can meet societal expectations of doctors in the 21st century.”

Seven UF Health residency programs are currently under the new accreditation system, and by July 2014, all 65 UF programs accredited by the AGME will be added.

“It has a very big impact on pretty much all the areas of health-care here at the institution,” Mahla said. “If the programs are not accredited by the AGME, then the hospital is not eligible to receive government funds to support resident training in that area.”

Under the new accreditation system, the AGME will switch from periodic evaluations to more continual reviews, examining programs yearly based on whether residents and fellows meet outcomes-based milestones within six domains of clinical competence.

Medical educator Lynne Meyer, PhD, MPH, said the hardest part of the change will be the shift in mindset.
UF Health announces expansion plans

To accommodate anticipated growth in several areas, UF Health officials plan to build a new specialty tower that will house neuromedicine and cardiovascular hospitals. "The new specialty hospital tower will allow us to better address the needs of patients with cardiovascular and neurological issues, much like we are providing care to cancer patients with great success at the UF Health Shands Cancer Hospital," said Timothy M. Goldfarb, CEO of UF Health Shands. The new specialty tower will be located on UF Health's south campus and will likely feature about 240 beds. The neuromedicine and cardiovascular hospitals will provide state-of-the-art care to patients with neurologic, neurosurgical, heart or vascular conditions, and will include approximately 18 state-of-the-art operating rooms and intensive care units, along with complementary outpatient facilities.

UF Health also is committed to creating a children's hospital with all aspects of pediatric care together in one facility, and extensive renovations to the UF Health Shands Children's Hospital are underway to make that happen. When these renovations are complete, UF Health will have a world-class, 200-bed children's hospital.

Construction begins on UF Health Jacksonville North

Anthony A. Dunkaru, MD '77, passed away on March 30. He was a board-certified obstetrician and gynecologist for 32 years. He founded and was the CEO of Gynecare Associates. He is survived by his wife, Janette Garrett, and daughter, Shandrinke.

Nancy L. Roblin, MD '69, passed away on April 3. She practiced family medicine in Clearwater, Fla. She was predeceased by her husband, Miguel, and is survived by one son and one daughter.

Lawrence E. Broder, MD '69, passed away on April 2. He was a diplomat of the American Board of Internal Medicine and Medical Oncology in Florida, where he maintained a practice in Hinsdale and Palmetto Bay. He also was retired from the public health sector, where he served at the rank of commander. He is survived by his wife, Karen, and son, Seth.

Michael P. Villaroman, MD '99, passed away on April 14. He worked as an internist in Washington, D.C., following his career at the VA Medical Center in Virginia. He was the founder and creator of a car website dedicated to doctors who shared his passion for exotic cars. He is survived by his wife, Nola Villaroman, and his sisters, Mindi Villaroman and Angelita Villaroman.

Jerome L. Sullivan III, MD '78, passed away on May 5. He was known for first theorizing a link between heart disease and iron levels in the blood. He was a physician, scientist and professor, and was recognized around the world as the father of the "iron hypothesis," which states that people with elevated levels of iron in their blood face a greater risk of heart attacks. He is survived by his wife, Laura; three sons; and two daughters.

In Memoriam

Richard C. Christensen, MD, chief of the division of public psychiatry at UF's College of Medicine, has been named visiting professor for his dedication to benefiting the lives of those affected by mental illness.

Mayo Clinic Florida selected Christensen, who is also director of behavioral health at the Subachner Center, a large shelter and medical clinic for the homeless in Jacksonville, to receive the visiting professorship. Christensen will share his expertise on humanistic care in medicine and mental health issues among the homeless during a presentation and question-and-answer session with Mayo Clinic Florida physicians.

Christensen joined UF in 1990 as a resident in the department of psychiatry and became director of community psychiatry in 1994. In 2000, he moved to Jacksonville to continue the community psychiatry program and became director of Jacksonville's medical student clerkship.

Peter J. Carek, MD, was appointed chair of the department of community health and family medicine at the College of Medicine. Carek came to UF from the Medical University of South Carolina, where he earned a reputation as an exceptional educator and a national leader in family and sports medicine.

William W. Housewright, PhD received the Louis Leggett Award in June from the Foundation Fighting Blindness, a national nonprofit organization. The foundation's highest research honor recognizes individuals who have had a significant impact on retinal disease research throughout their careers.

Lawrence Lottenberg, MD, one of UF Health's longest-serving trauma surgeons, received the Raymond H. Alexander Award from the Florida chapter of the American College of Surgeons. Lottenberg is an associate professor of surgery and anesthesiology.

UF Health Jacksonville broke ground Aug. 14 on a major health care project that will bring the latest technology and services to northern Jacksonville and surrounding areas.

The UF Health Jacksonville North medical office complex will house multiple services and physicians. The estimated cost of the project is $60 million to $65 million.

"A major goal of UF Health is to provide convenient, timely health care in a manner that combines medical expertise with the highest levels of hospitality and service," said David S. Guzick, MD, PhD, UF senior vice president for health affairs and president of UF Health. "This new state-of-the-art facility, in which both UF faculty and community-based physicians will practice, will do just that."

The facility will include an emergency department, urgent care, imaging services, women's health services, operating room suites and interventional rooms. Construction is estimated to take 18 months, with an anticipated grand opening in early 2015.
A time to give back

BY CHRISTINE BRIGHTWRIGHT

Alan Porter’s life changed when Clyde Williams, MD, chair of the UF Department of Radiology in the late 1960s, told him he should go to medical school.

Porter, MD ’71, was planning to become a patent attorney after he worked on his master’s in radiation physics under Williams’ guidance, but the chair’s advice pointed him in a new direction. “I’m glad he pursued that with me,” Porter said. “Medical school was a tremendous experience at Florida. It was outstanding training, and it prepared you for going on in medicine.”

After medical school, Porter completed his residency training in radiation oncology at UF under the founding chair Rodney Million, MD. Porter then went on to open Porter Radiation Oncology in 1975, which was one of the first privately owned freestanding outpatient centers for radiation oncology in Florida. His practice has since grown to include locations in Sarasota, Venice, Englewood and Port Charlotte.

Two years ago, UF College of Medicine Dean Michael Good, MD, asked Porter to be a part of his leadership council. The council members quickly became aware of an urgent need to upgrade the college’s existing medical school facilities. “I know the medical school started in 1956, so it’s been in the same place for 57 years. It’s time to upgrade,” Porter said.

Porter’s wife, Claudia, RN ’75, who is a UF College of Nursing graduate, continually invests her time into the Sarasota community by supporting and mentoring young people considering medical careers. The couple recently broadened their scope of support and service to include the UF College of Medicine.

The Porters bestowed a $1 million gift to fund a portion of the new George T. Harrell, MD, Medical Education Building, which will be the future home for UF’s medical and physician assistant students. The gift specifically will fund the four-story-tall Dr. Alan and Claudia Porter Tower, which will include study spaces for individual students and small groups.

“I know that you receive a lot of your training in classrooms, but I think the most important place you learn is in the quiet times when you study,” Porter said. The college broke ground on the George T. Harrell, MD, Medical Education Building Nov. 22, and Porter said that since the building project will not receive funding from the state of Florida, he believes the college’s alumni will rise to the financial challenge. “This is the time to support this effort,” Porter said. “I know the alumni will support it now that it’s a reality — now that we’ve dug some dirt, so to speak.”

— ALAN PORTER, MD ’71

Honoring Smiley and Hazel

BY STILANA BRYANKO

For F. Lee Howington, MD ’63, coming to UF for medical school felt like surrounding himself with family. “Hazel Donegan was the mother and Hugh Hill was the father,” Howington said. “It was kind of a family affair, I guess — home away from home.”

Although it’s been 50 years since Howington and his classmates took their first steps as Gator doctors, they still remember the impression Hazel Donegan and Hugh M. “Smiley” Hill, MD, made.

The class of 1963 hopes to immortalize these two figures and give back to their alma mater through a gift of $150,000 to name the dean of student affairs suite in the new George T. Harrell, MD, Medical Education Building in their honor.

“That education that you get is what gives you the tools to be successful to not only earn a living but to pass that on to other people, so they can go out and do likewise. You have to just not talk about it but put your money where your mouth is,” said Nell Potter, MD ’63, who recalls Hill’s charming laugh and Donegan’s ability to remain helpful without patronizing.

Donegan worked at UF for 22 years — first as secretary to Hill and then as an administrative assistant in the college’s Office of Student Affairs — and often received gifts of appreciation from classes upon graduation, including a scholarship in her name. She oversaw everything from exams and internship matching to matters of the heart.

“If you had a problem, if your sweetheart left you and you were all upset, you went to Ms. Donegan,” Howington said.

Hill, associate dean for student and alumni affairs and an obstetrician/ gynecologist who worked at the college for 42 years, placed the ceremonial hood on every doctor graduate (with the exception of the first class in 1960) until his retirement in 2001. To date, the class of 1963 has raised more than $130,000 toward the Medical Education Building to support the college’s goal of remembering the past while laying the foundation for the future.
Alumni Challenge finishes strong
BY STYGMA RELYNX

It was five years ago when members of the UF Medical Alumni Board of Directors put forth a challenge to their fellow alumni to support the university’s plan to build a new medical education facility — and the Alumni Challenge was born.

“It’s crucial that we raise the seed money needed to get this important project off the ground,” said Jason Rosenberg, MD ’95, at the 2008 meeting. The goal was to enlist graduates to pledge at least $5,000 a year over five years for the new building fund.

“Our Alumni Challenge participants created the groundswell and gathered the energy — and critical funding — that kept this dream alive in the medical school through several generations of leadership cycles,” said Michael L. Good, dean of the College of Medicine, during the groundbreaking ceremony for the George T. Harrell, MD, Medical Education Building.

With 52 participants — including several alumni who supported the Challenge twice — and almost $1.2 million raised, the Alumni Challenge will come to a close Dec. 31. A final push to the Challenge began in September with the groundbreaking ceremony for the Harrell Medical Education Building and to learn how you can support the future of UF medical education by naming a special space in the new building, visit HowWeLearn.ufl.edu or email drgator@health.ufl.edu.

Clay Bayham, MD ’87, an orthopaedic spine surgeon at Palm Beach Orthopaedic Institute, Palm Beach, was named by Becker’s Spine Review as one of 90 Spinal Surgeon Device Inventors and Innovators to Know. Bayham is a founder and director of Atlas Spine, a company focused on developing products for the cervical and lumbar spine. Bayham has a professional interest in adult and pediatric spinal problems, and he serves as a consultant with the Palm Beach County Trauma District. He is trained in microsurgical and laser techniques and has served as a spinal consultant to Children’s Medical Services.

Brendan Prendergast, MD ’08, will work with Cynthia Bryant, MD, in the radiation oncology department at Space Coast Cancer Center. Prendergast completed his residency in radiation oncology at the University of Alabama at Birmingham in July 2013. Currently, Prendergast is a member of the Radiologic Society in North America, American Society of Therapeutic Radiation Oncology and the American College of Radiation Oncology, where he has been appointed to the resident committee through 2013.

CAREER MOVES

Recently, David Shadix, MD ’72, joined the Brigham Memorial Hospital medical team. Shadix, a pulmonologist, specializes in treating patients with respiratory diseases and disorders such as chronic obstructive pulmonary disorder, chronic bronchitis, asthma, emphysema, occupationally related breathing disorders and inflammatory lung disease, pulmonary fibrosis and sleep-related breathing disorders. In addition to his medical degree, Shadix earned his undergraduate degree in chemistry from UF.

Balgah Yehia, MD ’96, MPP, MSHP, recently received a 2013 Young Investigator Award for his work in the field of HIV health services and quality research. Yehia is an instructor at the department of medicine at the University of Pennsylvania and an investigator with the Philadelphia Veterans Affairs Center for Health Equity Research and Promotions. While attending the UF College of Medicine, Yehia was inducted into Alpha Omega Alpha, the national medical honor society and the Gold Humanism Honor Society.

DOCTOR OF THE YEAR

Alan Valadie, MD ’91, an orthopaedic surgeon who specializes in joint replacement surgery, was named “Doctor of the Year” by Blake Medical Center in Bradenton, Fla. The award recognizes a physician who performs exceptional patient care and is committed to serving the Bradenton community. Patients, hospital staff, physicians and community members nominate candidates for the award. Valadie joined the Blake Medical Center team in 1996.
Jaima Woodiwiss, MD '03, took time to share a favorite medical school memory during the Reunion Classes Celebration at the 2013 College of Medicine Alumni Weekend. That memory, however, was unexpected. “The best memories were study weekends,” she said. “So many good friendships were made that way.”

Woodiwiss, a family practitioner in Riverview, Fla., celebrated her 10-year class reunion by bringing her family to visit her alma mater, including her 4-year-old daughter who enjoyed seeing where her mom went to school, she said.

The weekend kicked off Sept. 19 with a dinner honoring members of the George Harrell Club at the Samuel P. Harn Museum of Art. Current medical school students joined the mix for Lunch & Learn on Friday, which afforded alumni the opportunity to informally share advice with a student panel about their lives after medical school, while students spoke of the current medical school environment. Lectures from notable alumnus, David Gross, MD '73, and UF professor of neurology and health psychology Kenneth Heilman, MD, followed.


Visit Facebook.com/ufdrgator for photos and stories from the weekend.
Alison Clarke DeSouza, MD ’79, of Parkland, is an obstetrician and gynecologist with a private practice in Coral Springs.

Steven Fagien, MD ’83, of Boca Raton, is an oculoplastic cosmetic surgeon who has written more than 300 articles and a textbook, “Putterman’s Cosmetic Oculoplastic Surgery.”

David A. Gross, MD ’73, of Boca Raton, addressed fellow Gator doctors at the Notable Alumnus Lecture during Alumni Weekend 2013. A psychiatrist and mass casualty expert, Gross discussed media coverage and its effect on how society and individuals deal with tragedies.

Mark Hauser, MD ’73, of Coral Gables, is vice president of medical affairs and chief medical officer at Baptist Hospital of Miami. He specializes in pulmonary medicine.

Stuart A. Kleit, MD ’61, of Wellington, is a retired internist who served as associate dean for clinical affairs at the Indiana University School of Medicine. He founded the school’s division of nephrology and worked as its chief for 22 years.

Mark Michels, MD ’85, of Palm Beach Gardens, is founder and managing partner of Retina Care Specialists, an ophthalmology practice with three locations in Florida. Michels serves on the UF medical alumni board.

J. Patrick O’Leary, MD ’67, of Miami, is executive associate dean for clinical affairs and associate vice president for medical affairs at the Florida International University Herbert Wertheim College of Medicine.

James Ongley, MD ’77, is director of the Broward County Sheriff’s Office crime lab, a former Broward County public defender and former associate medical examiner in Broward and Dade counties.

Eric J. Stelnicki, MD ’91, of Fort Lauderdale, is a pediatric plastic surgeon specializing in cleft and craniofacial reconstruction. An associate professor at Nova Southeastern University, his research focuses on the causes of clefts, improved treatments and how to minimize scarring.

Tim Williams, HS ’87, of Boynton Beach, is medical director of radiation oncology at the Eugene M. and Christine E. Lynn Cancer Institute at Boca Raton Regional Hospital.

Gator Clubs® in South Florida

**Palm Beach County Gator Club®**
1160 Nantucket Bay Court
Wellington

**Martin County Gator Club®**
P.O. Box 1074
Palm City

**Broward County Gator Club®**
P.O. Box 690468
Coral Springs

**Gator Club® of Miami**
12464 S.W. 127th Ave.
Miami

**Florida Keys Gator Club®**
P. O. Box 1233
Tavernier