20 Years of Advancing a Healthier Wisconsin
LEADERSHIP MESSAGE

Improving Health Statewide

In 2023, the Medical College of Wisconsin (MCW) celebrated 130 years as a cornerstone institution in the region and the state. Throughout our storied history, we have commemorated many meaningful anniversaries that have underscored our successes in creating new knowledge that has changed lives. We have highlighted some of these observances in past issues of MCW Magazine, including 50 years of the Center for International Blood and Marrow Transplant Research (2022); 40 years of the Medical Scientist Training Program (2021); and 25 years of graduate school education (2020).

In 2024, we are pleased to recognize the establishment 20 years ago of the Advancing a Healthier Wisconsin (AHW) Endowment - which is the focus of this issue’s cover story. Created from a generous financial gift of more than $303 million from the conversion of Blue Cross & Blue Shield United of Wisconsin from a nonprofit insurance organization to a for-profit corporation, AHW provides funding and resources to researchers, organizations and communities to improve the health of the people of Wisconsin.

Since issuing its first funding awards in 2004, AHW has invested more than $338 million into more than 600 projects focused on community health improvement, biomedical research and health workforce education – bettering the lives of people throughout the state and fueling scientific discoveries that are enhancing the medical care of millions in Wisconsin and beyond. In addition to grant funding, AHW develops and delivers resources that add value to the partners it serves – building capacity within Wisconsin’s health ecosystem and extending the impact of its investments to maximize opportunities for people and communities throughout the state to thrive.

The cover story presents an overview of the AHW Endowment – from the seeds that were planted by the conversion to its position today as Wisconsin’s largest health improvement philanthropy (see pages 16-21).

We are deeply grateful to the many individuals from throughout Wisconsin whose vision, commitment and leadership over the past two decades have enabled AHW to help enhance and build a contemporary workforce for healthcare and public health in the state through partnerships, investments in new programs and catalyzing new ideas.

In this issue we also share two noteworthy transitions in MCW’s Office of Institutional Advancement (OIA). Jason Kraiss was named vice president and chief development officer effective February 1. Jason has been in leadership roles in the OIA since 2020 and has a strong track record of building productive relationships (see page 5). Also, we bid adieu to Angela K. Nelson, executive director of the MCW/Marquette Medical Alumni Association, who will retire in June after 17 years of valuable service in both donor and alumni relations. Angela has distinguished herself as a tireless advocate for alumni and has played an important role in reimagining programming and services for this critical stakeholder group (see pages 6–7).

As always, my thanks to our countless alumni for their ongoing commitment and dedication to protecting the health and safety of our patients, families, loved ones and communities.

John R. Raymond, Sr., MD,
President and CEO

“Since issuing its first funding awards in 2004, AHW has invested more than $338 million into more than 600 projects focused on community health improvement, biomedical research and health workforce education . . .”

John M. Grogan
Paul W. Griepentrog
Ted D. Kellner
Linda G. Gorens-Levey
Gina Bronner –
Dean, School of Graduate Studies
Chief Operating Officer
E xecutive Vice President for Finance and Administration; President and Chief Executive Officer
F ounding Dean, School of Pharmacy
P rovost and Executive Vice President; The Julia A. Uihlein, MA, Treasurer
I mmediate Past Chair
V ice Chair
President
V ice President and Chief Development Officer:
Senior Vice President for University Engagement and
ON THE COVER: More than 20 years ago, the Advancing a Healthier Wisconsin (AHW) Endowment was established by MCW to steward a generous financial gift of more than $303 million to provide funding and resources to researchers, organizations and communities to improve the health of the people of Wisconsin. Since issuing its first funding awards, AHW has invested more than $338 million into more than 600 projects focused on community health improvement, biomedical research and health workforce education. The cover story presents an overview of the AHW Endowment – from the seeds that were planted to its position today as Wisconsin’s largest health improvement philanthropy. (Cover design by Kristina Awadallah; photo credit: Getty Images)
MCW was recently honored with several awards in recognition of its exceptional work environment and its commitment to diversity and inclusion in the advancement of STEM.

Forbes has recognized MCW as a Best-In-State Employer for the third consecutive year, based on 2.1 million employer recommendations from employees working for US companies with at least 500 employees. Nationwide, MCW ranks in the top 3.1 percent of all US employers with 500 or more employees by making the Forbes 2023 Best-In-State Employers list.

Employees were asked via anonymous surveys to give their opinions on a series of statements surrounding work-related topics such as diversity, salary, potential for development, working conditions and company image of their current employer, which were conducted by Forbes and Statista Inc. between October 2022 and June 2023. The evaluation was made on a state-by-state basis within three criteria: in-state indirect recommendations, national in-industry indirect recommendations and direct recommendations.

“MCW is committed to building a workplace where everyone feels valued and supported, and I am honored that our institution has received this recognition by Forbes for the past three years,” says John R. Raymond, Sr., MD, president and CEO. “As we look to the future by investing in our people, programs, partnerships and communities, I am confident that living our core values of caring, collaboration, curiosity, inclusion, integrity and respect will lead to opportunities for our continued growth as one of Wisconsin’s top employers.”

MCW also was recognized by INSIGHT Into Diversity for its exceptional progress in inclusivity in higher education, as well as its pioneering promotion of STEM education, by receiving both the 2023 INSIGHT Into Diversity STEM Award and the 2023 Health Professions Higher Education Excellence in Diversity (HEED) Award.

Through the Student Enrichment Program for Underrepresented Professions (StEP-UP) programs, MCW prepares talented individuals from underrepresented backgrounds through STEM education.

StEP-UP is a dynamic multiyear program designed to engage middle school through college students, providing them with hands-on experiences in the medical field and offering an environment that nurtures their academic growth. The program also plays a pivotal role in guiding students through the complexities of the medical school application process.

The INSIGHT awards not only reflect MCW’s commitment to excellence but also highlight its pivotal role in shaping the future of healthcare and research.

By earning the HEED Award, MCW is demonstrating its determination to foster excellence by creating a more inclusive and equitable environment for all.
Wisconsin Institute of NeuroScience Officially Opens

The Wisconsin Institute of NeuroScience (WINS) has officially opened. With a bold vision to uniquely combine the strength and expertise of MCW, Children’s Wisconsin, Froedtert Health and the Clement J. Zablocki Veterans’ Administration Medical Center, WINS will deliver world-class clinical care, research and education that will make it a national and international destination for the neurosciences.

In January 2022, Shekar Kurpad, MD, PhD, the Sanford J. Larson Professor and chair of MCW’s department of neurosurgery, was recruited as the founding director of WINS – then known as the “Neuroscience Institute.” For almost two years, teams from each of WINS’ partner organizations, working with Dr. Kurpad’s office, developed a robust strategic plan that will drive WINS to national recognition.

Drawing on its plan to weave together the partners’ strengths, WINS is delivering “lifespan care” for all disorders of the brain and spine – and serves as a hub for continued innovation through integrated basic and clinical research; a freestanding Clinical Trials Office that will grow investigator-initiated and sponsored clinical trials; advanced neurological and neurosurgical clinical programs; and educational opportunities for graduate and medical students, residents, fellows and allied neuroscience professionals.

WINS already has begun to see success with the launch of its Building Resilience through Action in Veterans and First Responders (BRAVE) initiative, which addresses traumatic brain injuries in military veterans and first responders. BRAVE builds on the leading-edge research and treatment for neurotrauma already available through WINS’ partners.

Jason Kraiss Named Vice President and Chief Development Officer

Jason Kraiss was named vice president and chief development officer for MCW, effective February 1, 2024. Kraiss had served as MCW’s interim vice president of institutional advancement since March 2023.

Prior to his interim appointment, Kraiss was associate vice president of philanthropy for MCW and Froedtert Hospital – a position he had held since August 2020.

Kraiss is an accomplished professional with a strong track record of building productive relationships. In this new role, he will lead the philanthropy efforts for MCW and Froedtert Hospital, and will work in partnership with the Froedtert Hospital Foundation to inspire a culture of philanthropy across the organizations, lead a team that models high performance, partnership, collegiality and professionalism throughout the development organization, and work in partnership with faculty, staff and donors to achieve a transformational campaign.

Additionally, Kraiss will collaborate with the senior leadership teams of MCW, Froedtert Hospital and their respective boards to create a unified strategy for philanthropy.

In his interim role, Kraiss was responsible for leading all aspects of the new transformational, comprehensive campaign as well as a department of 41 full-time staff members.

Kraiss’s additional responsibilities have included all facets of philanthropy, campaign management, alumni relations, prospect research and management, finance, information services, gift processing, writing, creative services and stewardship.
Choosing a Course of Gratitude

Every day is a gift – and with 2024 being a leap year, each of us gets an extra day. With each new day, we have the power to choose a new course or direction. I would like to share with you why I have chosen a course of gratitude and encourage you to do the same.

The Medical College of Wisconsin remains the base upon which we have built our careers, and I am so grateful to be an alumni leader. The MCW/Marquette Medical Alumni Association works to ensure that MCW continues as a trusted collaborator, keeping more than 20,000 alumni connected to the institution, each other and the students who will follow as future physicians, scientists, pharmacists and healthcare providers. If you have not already, please join me on the MCW Alumni ENGAGE platform (mcwengage.com), our online community that provides opportunities to reconnect with old classmates, mentor MCW students and expand your professional network.

Medicine and research have been a focus of my life’s work, including mentoring and promoting diversity in health-related research. Throughout MCW’s history, the pioneering students, faculty, scientists and physicians at our health sciences university have spearheaded groundbreaking research and helped MCW grow into a major national research center. Many of our MCW alumni have gone on to do the same at other institutions. Every discovery translates into advances in academic medicine and patient care and helps improve the vitality of all our communities – and our future. As alumni, we have reason to be so proud.

Ultimately, alumni giving reflects the interests and insights that the donors bring to their philanthropy – be it establishing a personal legacy, creating sustainable financial access, developing professional opportunities or funding research and innovation. In 2017, I established the Betty S. Pace, MD Endowed Scholarship Fund to express my gratitude for the education I received and to help young people reach their full potential. Just this year I added MCW to my estate plan and set up a new Betty S. Pace Health Equity Scholarship. The underlying motivations of today’s alumni donors for giving back share a commonality: the bonds and appreciation created by their educational experience that last a lifetime.

When alumni come together to help others with their gifts – whether donating time, money, experience, skills or talent – we’re reminded of what it means to be human. And from there, communities grow stronger. I am so grateful for your partnership in the work we do.

Angela K. Nelson, Executive Director of the MCW/Marquette Medical Alumni Association, to Retire

Angela K. Nelson, executive director of the MCW/Marquette Medical Alumni Association, will retire on June 5, 2024, after 17 years of valuable service to the Medical College of Wisconsin.

Nelson joined MCW in 2007 as director of annual and special giving and was promoted to senior director of development and alumni relations in 2014. She has served in her current role since March 2020. Nelson has distinguished herself as a tireless advocate for alumni across the entire institution – physicians
Alumni Mug Snack Packs

The Mug Snack Packs have been a big hit with our students. The MCW/Marquette Medical Alumni Association has distributed mugs to more than 1,200 students on all three campuses. The campfire-style mugs include healthy snacks for study sessions. More distributions are planned for all schools and campuses.

OPERATION: Education

Operation: Education, co-sponsored by the Alumni Association and the Wisconsin Medical Society Foundation, was held at MCW-Milwaukee on January 18, 2024.

At the event, 21 physicians and physician-scientists hosted tables and discussed careers in 16 specialties with MCW students.

and residents, scientists, pharmacists, regional campuses in Green Bay and Central Wisconsin, and graduates from MCW’s varied and growing programs. Working closely with alumni leaders, Nelson has played an important role in reimagining programming and services for alumni and ensuring that MCW is partnering in furthering their priorities.

She has thoughtfully developed lasting relationships with alumni from MCW’s predecessor institution, the Marquette University School of Medicine. During her career at MCW, Nelson has worked alongside leadership and faculty to ensure that alumni are included as key stakeholders as the strategic objectives of the institution are developed and achieved.

Prior to joining MCW, Nelson served as a fundraising manager for Children’s Hospital and Health System Foundation and was the first executive director of the Wisconsin Chapter of the Lupus Foundation of America, the state’s only nonprofit organization dedicated 100 percent to providing support to individuals and families living with lupus.
Daisy Sahoo, PhD, vice chair of research in the MCW department of medicine, was named dean of the Medical College of Wisconsin School of Graduate Studies (the first woman dean of an MCW school) and the inaugural holder of the Women in Science Endowed Professorship, effective February 1, 2024.

Dr. Sahoo joined the MCW faculty in 2007 as assistant professor of medicine, earning promotions to associate professor in 2013 and professor with tenure in 2018. Upon becoming dean of the School of Graduate Studies, Dr. Sahoo stepped down from her role as vice chair for research.

The Women in Science Endowed Professorship has its roots in MCW’s Women in Science Lecture Series. Launched in May of 2007 as a forum for scientific presentations to the community, the lecture series provided financial awards to support research grants and elevated the role of women working in medical discovery at MCW.

The endowed fund supporting the series was converted to a professorship in 2022 following feedback from donors and faculty and is awarded to a woman researcher and leader at MCW. Dr. Sahoo received the Women in Science Pioneer Research Award in 2021.

Dr. Sahoo has held several leadership positions at MCW, including serving as president of the Faculty Council, and has been significantly involved in graduate and medical education.

Dr. Sahoo received her undergraduate degree from the University of Ottawa (Ontario) in 1995 and her PhD from the University of Alberta in Edmonton in 2000.

She served postdoctoral fellowships in cell biology and pediatrics at the University of Alberta (2000–2002) and in pharmacology at Stony Brook University in New York (2002–2005).

David A. Margolis, MD, GME ’92, FEL ’95, was named chair of the department of pediatrics at MCW and pediatrician-in-chief at Children’s Wisconsin (Children’s), effective February 1, 2024. He also will hold the Barri L. and David J. Drury Chair in Pediatrics and currently holds the David A. Margolis Chair in Pediatric Bone Marrow Transplant Research at Children’s.

Dr. Margolis has demonstrated exemplary leadership in the roles of interim chair of pediatrics and interim pediatrician-in-chief since 2020. During his interim tenure, Dr. Margolis provided critical insight and direction as MCW and Children’s carried out the work of their affiliation agreements – further strengthening the Children’s Specialty Group practice.

Dr. Margolis continues to serve as professor of pediatrics (hematology/oncology/bone marrow transplant) and program director, MCW BMT and Cellular Therapy Program. Prior to beginning his interim role, Dr. Margolis served as associate chair of pediatrics; program director for Children’s BMT and Cellular Therapy Program at the MACC Fund Center for Cancer and Blood Disorders; and associate program director, Pediatric Residency Program.

Dr. Margolis received his bachelor’s degree from Indiana University in 1985 and his medical degree from the University of Wisconsin School of Medicine and Public Health in 1989. He served a residency in pediatrics at Children’s from 1989–1992, a fellowship in pediatrics (hematology/oncology) at MCW from 1992–1995, and, from 1993–1999, was a postdoctoral trainee in the Molecular Genetics Laboratory.

Rare Pharmacogenomics Testing Opportunity for Pharmacy Students

When a medication isn’t working for a patient, pharmacists and physicians can adjust the dosage or find alternatives – yet this takes time, additional office visits and wasted medications. Pharmacogenomics testing, however, allows prescribing decisions to be made preemptively instead of relying on trial and error.

“When a medication is prescribed to a patient, the expectation is that it will work for every patient – but not every patient responds to the same dose and the same medication,” explains Ulrich Broeckel, MD, MCW professor of pediatrics and pharmacy, and also the founder and CEO of RPRD Diagnostics. “There are factors affecting drug response that we might normally think of, such as body weight or liver and kidney function, but there are also very distinct genetic factors playing a role.”

Some medications must be metabolized to an active form in the body to work, and some patients are genetically predisposed to either metabolize too quickly or not at all.

Since its founding in 2017, the MCW School of Pharmacy has embraced the field of pharmacogenomics. To that end, first-year MCW pharmacy students have the rare opportunity to engage in personalized pharmacogenomics testing by having their own DNA tested. In the first week of their Principles of Drug Action and Pharmacogenomics course, students complete a buccal sample by swabbing the insides of their cheeks. Weeks later, after learning the foundational concepts required to interpret their results, students then explore how their genes may affect their respective responses to certain medications.

Thanks to a partnership with RPRD Diagnostics (located close to the MCW–Milwaukee campus), pharmacy students opting to participate in the personalized testing can discover potential issues they may have with metabolizing certain medications. They also are invited to visit the RPRD Diagnostics laboratory to understand the expertise and infrastructure required to analyze each saliva sample and the process required to generate an actionable pharmacogenomic test result. Several students have returned in their third (and final) year of the MCW PharmD program for six-week rotations under the tutelage of Dr. Broeckel, who has a co-appointment as a faculty member in the MCW School of Pharmacy.

The School of Pharmacy conducts attitudinal surveys of the students before and after the testing process. “In 2021, we published a study in which we found that engaging students in testing their own DNA improved their knowledge, interest and confidence in pharmacogenomics and its incorporation in their future pharmacy practices,” says George E. MacKinnon, III, PhD, MS, RPh, founding dean of the MCW School of Pharmacy. “Having a discipline that is ready to assist in this area is critical in healthcare,” he adds.

As outlined in guidelines by the Clinical Pharmacogenetics Implementation Consortium (CPIC) – an entity in which Dr. Broeckel has been involved for the past decade – a physician may recommend a pharmacogenomic test for patients taking medications with known pharmacogenetic associations. A recent publication from the MCW School of Pharmacy demonstrated the magnitude of patients that may benefit from pharmacogenomics testing. Reviewing 845,518 electronic medical records, the study found more than half of patients (56.9 percent) had medication that was CPIC-actionable. This work helped to lay the foundation for the pharmacogenomic testing processes, physician support strategies and pharmacist workflows to optimize outcomes in this arena. As it is a growing and informative field, pharmacogenomics testing may be offered soon at pharmacies nationwide. ■

– MELISSA BEHLING
MCW Alumna Left a Legacy of Persistence, Achievement and Devotion to Family

Ask the Family of Katherine M. Dillig, MD ’84, What They Remember of Her, and the Answers Come in a Flurry.

“Katie was always in a hurry.”

“An indomitable spirit.” “Very smart.”

“Committed to her family.”

“Perseverance.”

“Katie was always in a hurry,” remembers a sister, Bridget Brennan, who attended law school at the University of Wisconsin–Madison during the time Dr. Dillig was a medical student at MCW. “She wasn’t going to lollygag around and take time to smell the roses. She had stuff to do.”

That approach to life was understandable. The oldest of 12 children with three children of her own – including an infant – by the time she enrolled at MCW, Dr. Dillig possessed a capacity to manage sprawling responsibilities with a confident demeanor.

Another sister, Sheila Conroy, recollects a time from Dr. Dillig’s medical school days when their large and growing families with children of all ages would get together in their mother’s kitchen in vibrant, joyful and noisy multigenerational gatherings.

“We’d usually be playing some game like Trivial Pursuit,” Conroy says, “and as we played, Katie would have the baby in a bouncy seat next to her, bouncing the baby with one hand and highlighting a medical school textbook with the other hand.”

Dr. Dillig passed away unexpectedly in 2010, leaving behind a family that by then had grown to seven children – with the addition of a child adopted from Korea and three more adopted from the side of the family of her first husband, Thomas Dillig.

The extended family has longstanding roots in the Milwaukee community – and to MCW. Dr. Dillig’s grandmother, Bessie Casey, served for decades as the registrar for the Marquette University School of Medicine (MCW’s predecessor institution). Yet another sister, Dr. Maura Brennan, is a 1992 medical school graduate of MCW, and a niece is expected to graduate with the MCW School of Medicine Class of 2024 in May.

When Dr. Dillig decided she wanted to go to medical school, her natural tenacity drove her success. Shortly after graduating from high school with top honors, she married her high school sweetheart, Tom Dillig, who was in the Air Force. She took college classes on military bases when she was able to but didn’t finish college. So, when they returned to Milwaukee, she earned her degree and completed the prerequisites for becoming a student of medicine by attending the University of Wisconsin–Milwaukee, often traveling by bus to her classes before returning home to study into the evening after getting the children into bed.

This was during a time when there were not only very few women attending medical school, but even fewer raising a family at the same time. However, Dr. Dillig managed to achieve her goal of obtaining a medical degree while still managing to be present for her family.

“I remember a lot of late nights and early mornings,” her oldest son, Matthew Dillig, says. “You know, she was either working or she was with her family.”
“I think she was raised that way,” Matthew Dillig continues. “People like her parents and Bessie Casey showed her that you can do anything you want. She was very intelligent, too, and I think the difficulty of practicing medicine appealed to her . . . like, I can accomplish this, and I’m smart enough to do this.”

After graduation from medical school, Dr. Dillig went on to specialize in emergency medicine and often pulled the night shift, which, Matthew Dillig recalls, was among the sacrifices she was willing to make for her family.

While the medical field tends to attract individuals who are smart and high-performers, Dr. Dillig’s family sees the connection between her strong desire to care for her family and others as one motivation to go to medical school.

Dr. Dillig’s sister, Bridget Brennan, notes that family was always her first priority.

“You could call her with anything anytime and it was never too much,” Brennan says. “You were never interrupting her. She was absolutely dedicated to caring for all of us, and certainly when she became a doctor.”

In memory of her mother’s many contributions to her family, Matthew Dillig established the Katherine M. Dillig, MD, Endowed Scholarship Fund. And other family members are making their own contributions to the fund. Recipients of the fund are drawn from women attending the MCW School of Medicine who also are raising families.

Matthew Dillig hopes the fund will inspire other women like his mother and make their own journeys through medical school a little easier.

“Even with everything she went through, at the end of the day, she accomplished what she wanted to accomplish,” Matthew Dillig says. “She had her family. She got through medical school. She practiced the medicine that she really wanted to practice and, you know, it took a lot of hard work.”

“And what we want to do with the fund is to make it just a touch easier for other women attending medical school with families to realize their dreams, too. I think my mom would approve and be proud of what we’re doing to remember all that she did for all of us,” he adds. —MICHAEL J. MATHIAS
Katherine (Kathy) Hudson believes in the rule of three:
“If there’s one woman in the room, she is invisible among the men. If there are two women, it’s a conspiracy and the women cannot sit together. It takes three women for them to be seen and heard.”

Hudson is no stranger to being the first woman in the room. During her 24-year career at the Eastman Kodak Company, she was the first woman to be promoted to a corporate officer position, and later became the corporate vice president and general manager of its professional, printing and publishing imaging division.

Hudson transformed the company’s culture by raising corporate awareness about issues of diversity, women and work-family balance. Upon joining Milwaukee–based Brady Corporation in 1994, she became the first woman president and chief executive officer of a major public company in Wisconsin.

While at Brady, Hudson was recruited in 1995 to join MCW’s board of trustees, and in 2004 became the first woman to chair that entity. Hudson shares that her greatest contributions were her leadership of the on-time and on-budget construction of MCW’s new Health Research Building and her invaluable insights that led to the reaccreditation of the graduate school.

In 2022, Hudson received an honorary doctor of humanities degree from MCW in recognition of her outstanding commitment to excellence in corporate and nonprofit leadership, expansive global management expertise and her invaluable 13 years of service on MCW’s board of trustees during a period of rapid growth.

While her resume is full of impressive accomplishments – including tenure on the board of Apple Computer Corporation – Hudson has countless stories of being excluded from corporate retreats, country club luncheons and employee golf outings because of her gender.

“The biggest barriers for women in leadership are men who are only comfortable being with other men,” she says. “We must promote more inclusive environments while also giving women opportunities to connect with and learn from each other.”

Since joining the MCW board of trustees nearly 30 years ago, Hudson has witnessed firsthand the obstacles women can experience in academic medicine – ranging from biases in peer-reviewed publications and grants to role overload and caregiving responsibilities that can limit their career trajectories. “We need to rethink our policies and job qualifications to be better aligned with predictors of success, rather than the status-quo,” she shares.

While women currently outnumber men in medical and graduate school enrollment, they remain underrepresented in academic rank and leadership roles. As of December 2023, 29 percent of full professors at academic medical centers across the country are women (compared to 33 percent at MCW) and 24 percent of chairs are women (compared to fewer than 17 percent at MCW).

“As a woman, you’re expected to be extraordinary, but to pretend that you’re not,” Hudson says, referencing her favorite monologue from the movie Barbie. “When women are not considered for leadership roles, you are underutilizing the talents
of half of the population. You are compromising your return on investment.”

With her passion for women’s leadership, Hudson recently made a significant gift to MCW’s Center for the Advancement of Women and Science in Medicine (AWSM). Launched in October 2018, the vision of AWSM is that MCW will be a destination for women leaders – cultivating an inclusive and vibrant culture that supports all genders to grow and thrive in the health sciences.

“AWSM is designed to bring women together across MCW’s three campuses, remove barriers to women’s success, increase visibility and promote a positive work environment in which women are respected and valued,” shares Hudson.

Hudson is especially enthusiastic about the work of AWSM’s Women’s Leadership Learning Collaborative (WLLC) – a unique cohort that prepares women for leadership roles through individual growth, peer mentoring and application of skills. “The WLLC provides exceptional networking support for women to move into and feel comfortable in these elevated positions,” notes Hudson.

More than 60 women have participated in the WLLC to date (currently in its third cohort). Amy Farkas, MD, MS, MCW associate professor of medicine and the inaugural faculty director of the WLLC, shares, “I am incredibly grateful to Kathy Hudson and to AWSM for the opportunity to develop the WLLC from a pilot to a fully realized program. As someone who has both personally benefited from the women who came before me, and who hopes to foster the next generation of women leaders at MCW and within academic medicine, this gift is critical to my own leadership journey.”

Paired with her philanthropic investments, Hudson continues to share her wisdom with women in the WLLC and across MCW, including Elizabeth Ellinas, MD, FEL ’00, MS, MCW professor of anesthesiology, associate dean for women’s leadership and founding director of AWSM.

“Kathy brings a wealth of experience from her time in industry and has been invaluable in shaping programming, providing perspectives on gender equity in business and amplifying the success of women at MCW,” shares Dr. Ellinas. “We could not do this work without her.”

Among her many achievements, Hudson is most proud of the six people who worked for her who became CEOs – two of whom are women. “Women can do leadership work, and you aren’t compromising results in healthcare by having a woman leader,” she remarks.

Looking to the near future, Hudson is eager to see more women in leadership positions at MCW. Regarding any skeptics, she confidently states, “Listen to the women. You’re going to learn something.”

AWSM’s Mission
The mission of MCW’s Center for the Advancement of Women in Science and Medicine (AWSM) is to strengthen the culture for women at MCW through data-informed strategic projects that enhance opportunity and improve workplace climate. AWSM’s vision is that MCW will be a destination for women, cultivating an inclusive and vibrant culture that supports all genders to grow and thrive in the health sciences.
While you may not be able to squeeze blood from a stone, the French doctor and chemist François Poulletier de la Salle successfully isolated cholesterol for the first time from a gallstone in 1769, when his peers believed blood contained only a single protein and no fat. Scientists worked busily to define its molecular formula and shape, and to better understand its connection to the accumulation of plaque in blood vessels and the development of heart disease.

The first statin was approved by the US Food and Drug Administration (FDA) in 1987 to treat patients with high cholesterol and to reduce their risk of suffering heart attacks and strokes. More recently, in 2015, the FDA approved a new type of drug, known as proprotein convertase subtilisin–kexin type 9 inhibitors, to give cardiologists another tool for patients whose cholesterol levels are still too high after treatment with statins alone.

Unfortunately, even with these advances, heart disease is still the leading cause of death in the US, according to the Centers for Disease Control and Prevention. Stroke continues to be a major issue and ranks as the fifth leading cause of death in the country. One clinical trial following patients taking proprotein convertase subtilisin–kexin type 9 inhibitors demonstrated a benefit while also revealing an opportunity for improvement, as the absolute risk reduction was considered modest at 1.5 percent.

“It is clear that there is more going on than just what statins and these newer inhibitor drugs can control,” says Ze Zheng, MBBS, PhD, MCW assistant professor of medicine (endocrinology and molecular medicine), co–leader of the MCW Cardiovascular Center’s Atherosclerosis, Thrombosis and Vascular Biology Program, and associate investigator at the Versiti Blood Research Institute (Versiti). “More therapies are needed, and to get them, we need to know more about other sources of risk for heart disease – especially heart attacks and strokes.”

There are several forms of cholesterol circulating in our bloodstream. The type commonly referred to as “bad cholesterol” is carried by a protein called apolipoprotein B (apoB), which forms well–structured particles with lipids and proteins. These particles serve as stable vehicles for transporting lipids such as cholesterol in the bloodstream. These lipid–rich particles mostly include very–low–density lipoprotein (VLDL) and low–density lipoprotein (LDL). The current drugs for lowering cholesterol reduce LDL levels. While substantial evidence shows that LDL is important to control, it is not the only risk factor for heart disease. In fact, the other lipoproteins in the same group as LDL are not reduced by much with available treatments. Dr. Zheng and team are investigating how to reduce levels of other members of this family of lipoproteins, especially VLDL.

“With my background in lipid metabolism, I found myself consistently checking lipid levels even during studies regarding blood clot lysis and how an impairment in the body’s ability to remove blood clots affects the risk of blood vessel blockages,” Dr. Zheng adds. “I was just naturally curious about it, and I noticed that a protein I was studying may have an effect on the amount of circulating cholesterol.”

In prior research, Dr. Zheng has helped define a new cellular source of this protein – tissue–type plasminogen activator (tPA) – and its role in breaking down blood clots and preventing blood vessel blockages. To understand its potential influence on cholesterol levels, her team used a gene–editing technique to stop liver cells from producing tPA in mice prone to blood vessel plaque formation. The scientists found that the mice developed increased lipoprotein–cholesterol in this experiment, and then validated the findings in follow–up studies using human liver cells and a type of rat liver cell known to produce VLDL in a way similar to human liver cells.

With these and other experimental results published in Science in September 2023, Dr. Zheng and her team have demonstrated that liver tPA influences blood cholesterol levels while underscoring a
meaningful connection among the liver, heart and blood vessels.

“After defining this new role for tPA, we turned our attention to the question of how it changes blood cholesterol levels,” notes Wen Dai, MD, research scientist at Versiti.

The liver contributes to the majority of the “bad” apoB–lipoproteins by making VLDL. The team focused on whether and how tPA impacts the process of VLDL assembly in the liver. Microsomal triglyceride transfer protein (MTP) is required for the assembly of VLDL due to its role carrying lipids to the apoB. The scientists determined that tPA binds with the apoB protein in the same place as MTP. The more tPA is present, the fewer opportunities MTP has to connect with apoB and catalyze the creation of new VLDL. If MTP is the quarterback trying to pass a cholesterol football to an open apoB receiver, then tPA is the cornerback breaking up the play.

“Based on our prior research, we knew it also was critical to look at tPA’s primary inhibitor,” Dr. Zheng says.

Plasminogen activator inhibitor–1 (PAI–1) is known to block the activity of tPA. Scientists also have found a correlation between PAI–1 levels in blood and the development of disease due to plaque formation and blockages in blood vessels. The team found that higher levels of PAI–1 reduced the ability of tPA to bind with apoB proteins, rendering tPA less effective at competing with MTP to prevent VLDL production.

Returning to the biological gridiron, PAI–1 might be a decoy receiver that distracts tPA until MTP connects with apoB for a big gain. The team studied this interaction in human subjects with a naturally occurring mutation in the gene carrying the code for PAI–1. The researchers found that these individuals, as predicted, had higher tPA levels and lower LDL and VLDL levels than individuals from the same community who did not have the same mutation.

“We are investigating therapeutic strategies based on these findings regarding tPA, MTP and PAI–1,” Dr. Zheng notes. “I think we may be able to reduce the residual cardiovascular risk that has persisted even as treatment has advanced.”

— GREG CALHOUN
20 Years of Advancing a Healthier Wisconsin

Leveraging the Combined Power of Philanthropy and Academic Medicine, AHW Provides Funding and Resources to Researchers, Organizations and Communities to Improve the Health of the People of Wisconsin.

By Richard N. Katschke, Kelly Lietz and Sara L. Wilkins

More than 20 years ago, the Advancing a Healthier Wisconsin (AHW) Endowment was established by the Medical College of Wisconsin (MCW) to steward a generous financial gift of more than $303 million from the conversion of Blue Cross & Blue Shield United of Wisconsin from a nonprofit insurance organization to a for-profit corporation. The proceeds of the conversion were divided between Wisconsin’s two medical schools – MCW and the University of Wisconsin School of Medicine (now the UW School of Medicine and Public Health) – and a permanent endowment was created at each institution.

Since issuing its first funding awards in 2004, AHW has invested more than $338 million into more than 600 projects focused on community health improvement, research and health workforce education – bettering the lives of people throughout the state and fueling scientific discoveries that are enhancing the medical care of millions in Wisconsin and beyond. AHW investments have reached all corners of Wisconsin, with direct funding provided to organizations in 66 of Wisconsin’s 72 counties. From urban centers to rural and agricultural communities and self-governed tribal nations, AHW is committed to maximizing the health of all Wisconsinites.

In addition to grant funding, AHW develops and delivers resources that add value to the partners it serves, building capacity within Wisconsin’s health ecosystem and extending the impact of its investments to maximize opportunities for people and communities throughout the state to thrive.

What follows is an overview of the Advancing a Healthier Wisconsin Endowment – from the seeds that were planted by the Blue Cross & Blue Shield United of Wisconsin conversion to AHW’s position today as Wisconsin’s largest health improvement philanthropy and the only health philanthropy in the nation stewarding public funds from within a private medical school.

Public Stewardship of AHW

The oversight of AHW is carried out by two major governance committees: the MCW Consortium on Public and Community Health (the Consortium) and the Research and Education Advisory Committee (REAC).

The Consortium is a nine-member body that provides oversight for AHW’s investments and support of community and public health partnerships and projects, and serves in an advisory capacity for investments in research and education. As directed by the Wisconsin Insurance Commissioner, the Consortium comprises four members representing statewide and community healthcare advocacy organizations, four members representing MCW and a member appointed by the insurance commissioner.

The REAC is a nine-member entity comprising MCW faculty and executive leaders. The REAC provides oversight for AHW’s investments and support of MCW’s biomedical and population health research, as well as programs to enhance education opportunities for the health workforce.

AHW currently administers two key programs:

• **Healthier Wisconsin Partnership Program (HWPP)**
  With input and direction from the Consortium, AHW directs 35 percent of its investments toward public health improvement initiatives conducted through community-academic partnerships.

• **Research and Education Program (REP)**
  AHW works with the REAC to direct 65 percent of its investments toward advancing discoveries in biomedical research, health provider education and workforce development initiatives.
The Blue Cross & Blue Shield United of Wisconsin Conversion

In late May 1999, then MCW president and CEO T. Michael Bolger, JD, received a call from Thomas Hefty, president and CEO of Blue Cross & Blue Shield United of Wisconsin (BC/BS), regarding the non-profit insurance company’s plans to convert to a stock-owned company. Hefty informed Bolger that BC/BS intended to donate the assets of the company to Wisconsin’s two medical schools. The estimated donation to MCW and the University of Wisconsin School of Medicine would be $125 million to each institution.

At a news conference held at MCW on June 3, 1999, announcing the BC/BS conversion and the stewardship of the company’s assets by the two medical schools, Bolger said, “This magnificent gift couldn’t come at a better time, on the eve of a new millennium. We are excited about what this offer means to advancing the cause of public health in Wisconsin. We are facing major new challenges in public healthcare at a time when medical science is advancing rapidly and producing new breakthroughs in battling illness. We accept the challenge to make the health of our Wisconsin people the best in the nation.”

Recently, Hefty recalled that “the [Blue Cross & Blue Shield] board looked at alternatives. They looked at doing a United Way-type gift and creating a new organization to distribute money. But the board felt that building that structure would entail significant administrative cost and probably never would have the medical expertise that already existed in the two medical schools. And so using the medical schools to make those decisions was both economical . . . and scientifically more appropriate.”

BC/BS asked the two medical schools to jointly develop plans about how they would use the company’s assets to improve the health of Wisconsin’s citizens – although the funds could not be used for patient care programs or for the construction of new facilities. Bolger named Cheryl Maurana, PhD, then director of MCW’s Center for Healthy Communities in the department of family and community medicine (and currently MCW Eminent Scholar, senior vice president for strategic academic partnerships, professor of population health and founding director, Kern National Network for Flourishing in Medicine), to lead and craft MCW’s plan for the conversion funds.

On September 29, 1999, MCW and the UW School of Medicine submitted their joint plan for use of the conversion funds. The plan was accepted by the BC/BS board of directors. The next step was approval by the Wisconsin Commissioner of Insurance, who called for public hearings to obtain citizen input about the conversion plans submitted by the two medical schools.

The conversion process continued for five years as various organizations mounted legal challenges to the gift – leading all the way to the Wisconsin Supreme Court. It wasn’t until March 2004 that the two medical schools received funding from the conversion. By then, the value of the company’s assets had grown, and each medical school received more than $303 million.

Recalls Dr. Maurana, “In 2001, I became senior associate dean for public and community health. And Dr. Michael Dunn, who was dean of the MCW School of Medicine at the time, invited me to work on this new initiative. We weren’t really sure what it would be, but it seemed like a wonderful opportunity to advance our relationship with the community
and to improve health in a number of different ways. Of the more than 300 or so conversions to endowments that occurred in that period of time, ours was the only one that went to the two medical schools. That was very unique – and it really was transformative for these two institutions."

(Extensive details on the five-year process from the announcement of the gift to the creation of AHW can be found in Richard Katschke’s Knowledge Changing Life: A History of the Medical College of Wisconsin, 1893-2019, available at mcw.edu/historybook.)

The First Five-Year Plan (2003-2008)
AHW produces its first Five-Year Plan outlining the proposed use of available funding for community-based health improvement initiatives, health workforce education and medical research.

The Second Five-Year Plan (2009-2014)
MCW’s board of trustees approves AHW’s second Five-Year Plan, which includes initiatives aimed at violence prevention; a commitment to develop a community-friendly institutional review process; a greater emphasis on training faculty about community engagement and incentivizing their participation; and allowing flexibility to award funds in larger amounts for longer periods of time. Other enhancements include expanded Principles of Stewardship to reflect building academic and community strengths and new knowledge.

Notably, in July 2012, AHW awards MCW a $4.3 million grant to engage in a “thoughtful, deliberate three-year curriculum development process” to create regional medical school campuses in Green Bay and Central Wisconsin (the campuses opened in July 2015 and July 2016, respectively).

The Third Five-Year Plan (2014-2018)
Moving from Grantmaker to Changemaker
MCW’s board of trustees approves AHW’s third Five-Year Plan titled Moving from Grantmaker to Changemaker. This innovative focus leverages resources to build capacity, innovate and catalyze change for health improvement across Wisconsin. Changemaker roles include that of high-impact investor, learner, convener and influencer.

In June 2015, AHW invests $3.0 million to help establish the MCW School of Pharmacy to address a growing shortage of pharmacists in Wisconsin and to reshape pharmacist training in the state to meet emerging and future patient needs.

Support for Degree Programs
AHW has advanced the state’s health workforce through foundational investments in MCW’s regional campuses and in 20+ MCW schools and degree programs.

(Number of programs noted in parentheses.)

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Jesse M. Ehrenfeld, MD, MPH
Jesse M. Ehrenfeld, MD, MPH, has served as director of the Advancing a Healthier Wisconsin Endowment, senior associate dean, and tenured professor of anesthesiology at the MCW School of Medicine since September 2019. He divides his time among clinical practice, research and directing the strategic and operational advancement of AHW.

Under Dr. Ehrenfeld’s leadership, AHW has awarded $82.5 million in grants into community and research initiatives aimed at improving health and advancing health equity in Wisconsin. Dr. Ehrenfeld currently serves as president of the American Medical Association and is a fellow of the American Society of Anesthesiologists and the American Medical Informatics Association.
The Fourth Five-Year Plan (2019-2023)  
Changemaking for a Healthier Wisconsin

MCW’s board of trustees approves AHW’s fourth Five-Year Plan titled Changemaking for a Healthier Wisconsin, with an emphasis on catalytic philanthropy.

The plan notes AHW’s intention to more purposefully move the needle on Wisconsin’s health through its investments and changemaking roles while looking to strengthen AHW’s commitment to address the determinants of health that lead to poor health outcomes and unacceptable health disparities. It also describes how AHW would build on the efforts and experiences of the past to achieve greater results for the future – serving as a strategic roadmap for improving health for everyone in every corner of Wisconsin.

The Fifth Five-Year Plan (2024-2028)

Upon the fulfillment of the overarching aims of AHW’s fifth Five-Year Plan, and following the implementation of important and effective adaptation to fight COVID-19’s immediate and long-term effects on the health and well-being of the people of Wisconsin, the 2024–2028 Plan states that AHW would turn its attention to new and persistent health challenges that prevent people, populations and communities throughout the state from achieving their full potential.

To inform the development of the 2024–2028 Five-Year Plan, AHW undertook a multipronged effort to gather input and feedback on its vision and role in advancing health statewide. The stakeholder feedback process created space and opportunity for AHW to listen to, collaborate with and inform its stakeholders.

AHW’s continuous and meaningful engagement with those whose missions complement AHW’s helps foster the connections, trust and confidence in key initiatives that require both collective resolve and collaborative action.

The plan notes: “From urban centers to rural and agricultural communities and self-governed tribal nations, we are committed to maximizing the health of ALL Wisconsinites and developing programs, partnerships and knowledge-sharing opportunities aimed at achieving health equity. . . We recognize and strive to overcome disparate societal and environmental factors affecting the health and well-being of people, communities and populations throughout Wisconsin. Correcting the structural inequities that disproportionately affect the health of underserved and under-represented populations is a primary focus of AHW’s work.”

The plan’s “Framework for Success” is built on three critical drivers toward impact: public and community health improvement; health workforce education and development; and health-focused research.

“For the next five years, AHW’s strategic plan is pretty simple,” shares Jesse M. Ehrenfeld, MD, MPH, director of AHW. “Making sure that we invest our dollars where they are going to have the most impact and where they are needed the most. We will continue to make major investments in education and workforce, major investments in biomedical research, and major investments in public and community health.”
Significant Projects and Initiatives

National Fellowship to Advance Health Policy
AHW currently funds a two-year National Academy of Medicine Fellowship to Advance Health Policy. This program provides talented, early-career health science scholars from Wisconsin the opportunity to participate in evidence-based healthcare or public health studies that improve access and quality to patient care. It focuses on patients in domestic and global health care systems – bringing national best practices to Wisconsin while also sharing Wisconsin’s experience nationally.

National Advisory Committee
AHW formed a National Advisory Committee in 2023 to tap the perspectives and expertise of the nation’s top thought leaders on community and public health, and to provide both formal and informal counsel on its strategic goals and major activities. It drew enthusiastic responses from 16 eminent scholars, organizational leaders and public health practitioners from across the US.

Building Cancer Research Capacity
Leveraging the expertise of Ugwuji Maduekwe, MD, MMSc, MPH, a nationally recognized surgical oncologist and health disparities researcher hired in 2021 who currently serves as AHW deputy director and associate dean, the Endowment is funding a series of projects that will allow researchers at the MCW Cancer Center to more effectively develop treatments for cancer. These projects include The Origin and Function of Cancer–Associated Fibroblasts in Pancreatic Cancer; Integrated Program in Immuno–Oncology; Leveraging a New Translational Metabolomics Resource to Identify Cancer Pathways and Signatures; and Solving Protein Structures to Uncover Molecular Mechanisms of Cancer.
AHW also is funding the Community and Cancer Science Network – a broad collaborative committed to reducing breast and lung cancer disparities in Wisconsin through engaging a network of community and academic partners through a process to transform partnerships.

COVID-19 Response
When COVID–19 hit Wisconsin in 2020, AHW stepped forward to deliver support to active grantees while also rapidly developing and releasing a statewide funding opportunity that ultimately enabled partners across public and community health, healthcare and biomedical and population health to respond collaboratively.
In April 2020, AHW announced the award of $4.8 million to 17 projects that aimed to take immediate actions to protect health and support the response to COVID–19 in Wisconsin over the earliest and most difficult days of the pandemic response.
One year later, AHW announced an additional award to support a coalition working to increase vaccination rates in Milwaukee County, focusing on highly impacted and high-risk ZIP codes. Currently, AHW’s work has pivoted from a rapid response toward sustained support and recovery. It continues to connect across the state to identify where critical needs remain and where its work can best address the root causes of inequities that COVID–19 so clearly highlighted.

The Advancing Behavioral Health Initiative
Fueled by the power of communities to build the networks, systems and structures best suited to address residents’ health challenges, the Advancing Behavioral Health Initiative set a new standard for large-scale mental and behavioral health improvement. This strategic, coalition–centered approach combined significant funding with the resources, time and support communities needed to develop and implement customized action plans and to evaluate the impact and sustainability of their programs.
From reducing the number of youth experiencing depression to creating individualized de–escalation plans for emergency responders to use in a mental health crisis, community partners worked together to develop best practice models that can be replicated elsewhere in Wisconsin. The initiative provided 10 community partners across Wisconsin with eight years and $20 million in total to form coalitions, identify priorities, build sustainable programs and measure their effectiveness.

Investments in Wisconsin’s Native American Communities
Five projects focused on enhancing the health of Wisconsin’s Native American communities are: 1) building a community–driven process to implement smoke–free policies in tribal housing and to support tribal communities to end the acceptability of commercial tobacco use while respecting the tradition of ceremonial tobacco use; 2) preventing the spread of COVID–19 in tribal communities by working collaboratively to focus on disease prevention efforts; 3) empowering participating clinics to
enforce the quality of life for Native American cancer patients/families and to develop culturally appropriate cancer programs and services; 4) strengthening and restoring protective factors and decreasing excessive drinking among Native American adults by 10 percent; and 5) utilizing the Tribal Elder Food Box program to demonstrate the feasibility of an intertribal agriculture and food cooperative and to increase access to healthy, indigenous and traditional foods in Wisconsin tribal communities.

**Pediatric Readiness Program for Community Emergency Departments**

AHW supports children’s health equity in Wisconsin through health research funding for projects that improve children’s health and the availability of children’s health resources. A 2021 AHW grant was awarded to an innovative partnership between the Children’s Health Alliance of Wisconsin and Lorin Browne, DO, an MCW professor with a wealth of knowledge about issues faced by children and parents in emergencies. These partners aim to develop, test and refine a Pediatric Readiness Implementation Guide to support community emergency departments in providing quality, evidence-based pediatric emergency care.

**Increasing Health Literacy**

Three projects focused on increasing health literacy are: 1) designing a patient-centered prescription label using easily understandable language; 2) adopting easier-to-read labels, taking user-friendly prescription labels statewide and expanding use to areas with greatest needs; and 3) working with Wisconsin health systems to adopt changes in the electronic health record software that will make the use of evidence-based prescription labels and directions for use the default choice for prescribers.

**Increasing Cardiac Arrest Survival in Milwaukee County**

Two projects focused on increasing cardiac arrest survival in Milwaukee County are: 1) increasing bystander CPR rates by establishing a system that assures quality CPR instructions are provided to 911 callers; and 2) expanding efforts to change the infrastructure of all 911 call centers in Wisconsin to provide every 911 caller the opportunity to increase cardiac arrest survival through dispatcher-provided just-in-time CPR instructions.

**Changing the Culture of Risky Drinking Behavior**

Two projects focused on changing the culture of risky drinking behavior are: 1) building upon a previous funding award that developed a community-driven strategic plan to reduce the culture of risky drinking in La Crosse, Wis., project partners are aiming to translate evidence-based strategies into action in order to reduce underage access and use of alcohol in La Crosse County; and 2) expanding partnerships with tavern owners and local festival organizers, policymakers and others to create policy and system changes that will result in a safe environment for alcohol consumption through changes in local alcohol licensing policies; practices on college campuses, in taverns and at festivals; and by educating current and future leaders in community collaboration.

**Looking Back – and Moving Forward**

“The gift of the Blue Cross & Blue Shield Endowment to MCW has been absolutely transformative. It’s catalyzed so many innovations at MCW and has allowed us to invest in partnerships throughout the state that we otherwise would not have been able to accomplish,” says John R. Raymond, Sr., MD, president and chief executive officer of MCW.

Dr. Raymond continues, “MCW has used AHW to help to enhance and build a contemporary workforce for healthcare and public health in Wisconsin through partnerships, investment in new programs and catalyzing new ideas. For example, AHW provided startup funds for our two regional campuses, which at the time was incredibly innovative for a medical school, especially a private one to do. It also allowed us to begin an innovative three-year pharmacy school.”

Joseph E. Kerschner, MD ’90, FEL ’98, executive vice president, provost and the Julia A. Uihlein, MA, Dean of the MCW School of Medicine, is proud of the contributions of the AHW Endowment and grateful for the vision of providing the conversion funds to Wisconsin’s two medical schools.

“I think the medical schools have been good stewards of those funds. We’ve worked with communities and partners to create systems that give back and really catalyze the ways in which we can have a healthier Wisconsin.”

Reflecting on AHW’s two successful decades, Dr. Ehrenfeld remarks, “Our ability to garner trust is a cornerstone of who we are as an organization, which starts with the foundational oversight that we have from our public and community health partners. It starts with building trust through our relationships with community partners in every corner and county of the state. And it starts with our faculty and community partners being such incredible stewards of these dollars to execute the mission of the Endowment.”

Looking to the future, Dr. Ehrenfeld adds, “AHW is making sure that we can adapt to new health challenges by constantly surveying the landscape, understanding the drivers and the determinants of health of our communities, and then aligning our resources and our requests for applications with those health needs. We’ve given out more than the value of the original gift and we have more than the value of the original gift in reserves. That’s important because this fund will always be there to elevate the health of our communities, support the expanding health workforce and invest in public and community health.”
This is a story about the desire to give back. And falling in love with medicine. And a heart condition that was the impetus behind it all.

Jackson Radandt was born in spring 2001, and less than a week later, his parents learned his heart was compromised. Medical College of Wisconsin faculty at the Herma Heart Institute at what was then the Children’s Hospital of Wisconsin diagnosed him with hypoplastic left heart syndrome (HLHS), a condition that left Jackson with an underdeveloped left ventricle incapable of properly pumping blood to the rest of his body.

Before he was 2½ years old, Jackson had three surgeries to rework his circulatory system.

When he was 11, despite showing no outward signs, his doctors told the family that Jackson was in end-stage heart failure. His condition deteriorated rapidly, and he was admitted to Children’s Cardiac Intensive Care Unit. Jackson needed a heart transplant, and on October 23, 2012, he was placed on the transplant list.

“In a very short period of time, I went from being able to play with kids at recess to being bedridden and not able to walk across the room,” Radandt recalls.

His condition continued to worsen, and two months later, an experimental device called a Heartwave Ventricular Assistant Device (HVAD) was surgically placed in Jackson’s chest to help stabilize him until a new heart was available. The HVAD is a mechanical pump that helps with blood flow, and Jackson was the youngest person in the US with a Fontan circuit (which had been created as part of the initial three surgeries to address his HLHS) to receive the device.

Jackson improved significantly and was allowed to return home with the HVAD device – which was a first in the world. Then, on May 20, 2013, a perfect heart match became available.

Within three hours, Jackson was getting prepped for surgery. He was discharged 11 days later with a new heart, and says it was the healthiest he had ever felt. Because Jackson was the first patient to undergo several of these procedures and surgeries, people were eager to hear about his experience. He met with other children with the same condition (and their parents) and spoke at national medical conferences and events – including an American College of Cardiology conference in 2015 when he was 14. In 2018, Jackson wrote an editorial in the journal Pediatric Cardiology about his experiences. Throughout this time, he began to form career interests and a mission for his life that would grow during the upcoming years.

“The attendees at these conferences were world-class doctors who know everything possible about the genetics of hypoplastic left heart syndrome or performing surgery, but they didn’t know what it was like to have suffered from it,” Radandt remarks. “That’s the part I could share.”

He also is interested now in sharing thoughts on a patient’s quality of life, specifically as it applies to long-term care patients.

“Being in a healthcare facility for long periods of time, and not knowing when
you might leave, can really take a toll on the patient and their family,” he says, noting the frustration of being sick, the loss of freedom while in the hospital and the ongoing monitoring and testing as some of the things that caused him angst.

He also wanted to share information about his genes, so he and his family enrolled in a congenital heart disease genetic study at Children’s.

“We wanted to find out why congenital heart disease occurs around our family and also help clinicians have a better understanding of congenital heart defects,” Radandt says. As part of the study, Aoy Tomita-Mitchell, PhD, MCW professor of surgery (pediatric cardiothoracic surgery) and scientist at the Children’s Research Institute, and her team visited Jackson on the day of his high school graduation party to take samples from every family member present.

“It was interesting to get a behind-the-scenes look at the research and see the work that goes into studying diseases. I can now see healthcare from both sides,” says Radandt. “Between this and my personal healthcare journey, I have learned how incredible medicine is, and I’ve fallen in love with it.”

After college graduation in 2023, Jackson took a job in the Washington, DC, office of US Senator Ron Johnson. Jackson shares that he wants to go back to school at some point and had felt that his life was geared toward cardiology.

But while at Marquette, he gained an interest in diseases of the brain and can see working toward a PhD in cognitive behavioral sciences. Whatever Jackson ends up doing, however, he will never forget his journey or the many people who have helped him get through it.

“I want to give back to the community that saved my life,” Radandt remarks, sharing that this could be in the form of more talks, more published works or further education. “So many people go through what I had and end up with physical limitations or mental health issues, but I have been fortunate enough to be able to share this story with the world, and I plan to continue to do that.”

— ANTHONY BRAZA

Jackson Radandt met many MCW researchers and providers during his 22 years of care at Children’s Wisconsin, and remains close to some of them, including:

Michelle Ann Frommelt, MD, adjunct professor of pediatrics (cardiology) – has seen Radandt through the heart care he has received since his initial diagnosis.

Nancy Ghanayem, MD, GME ’96 – served as head of the Children’s Cardiac Intensive Care Unit (CICU) before and after Radandt’s heart transplant.

Steven Kindel, MD, associate professor of pediatrics (cardiology) – served as Radandt’s primary doctor post-transplant.

Aoy Tomita-Mitchell, PhD, professor of surgery (congenital heart surgery) and biomedical engineering – conducted the genetic study in which Radandt and his family participated. Radandt worked in her lab as part of the SPUR program.

Michael Mitchell, MD, professor of surgery and chief of congenital heart surgery, medical director of cardiothoracic surgery at Children’s Wisconsin and surgical director of the Herma Heart Institute.

Ronald Woods, MD, professor of surgery (congenital heart surgery) – placed the HVAD in Radandt and monitored his progress.

Steven Zangwill, MD – provided post-transplant care before leaving MCW.
Reducing Sudden Deaths in Epilepsy

Sudden Unexpected Death in Epilepsy (SUDEP) is a risk of vital importance to those living with epilepsy, particularly those with drug-resistant epilepsy – something almost one-third of epilepsy patients experience. In fact, studies have shown that a little over one case of SUDEP occurs per every 1,000 people with epilepsy. Some researchers also think that Sudden Unexpected Death in Infants (SUDI) may be a form of SUDEP, so overall numbers may be underreported.

Some unique research under the direction of Matthew Hodges, PhD ’04, MCW professor of physiology and a member of MCW’s Neuroscience Research Center, may help to shed a light on how SUDEP can be better predicted and thus reduced.

“Seizures seem to ‘lock up’ the neural network in the part of the brainstem required for breathing, causing it to stop – which reduces oxygen levels in the brain even after breathing restarts,” says Dr. Hodges. “This increases the risk of death, but the deaths themselves seem to occur randomly – so they’re still hard to predict.”

Dr. Hodges and his team were studying rats with a genetic mutation to test the effects on breathing when they found that these rats experienced generalized tonic-clonic seizures when exposed to a certain wavelength of sound. As the rats experienced more seizures, their breathing post-seizure worsened, and they experienced increased likelihood of SUDEP-like events.

What the research team found was that this particular gene (KCNJ16), which hadn’t been associated with epilepsy in humans, was responsible for the sound-induced seizures. Subsequent research, however, has shown that some humans do in fact possess genetic mutations in the same gene with similar features as the mutant rat model.

These experiments led Dr. Hodges’s team to shift the focus of their research to better understanding human epilepsy, using rat models with sound-induced seizures to establish the genetic mutation as an “epilepsy gene” and potential indicator of increased risk of SUDEP.

“Our research already has shown that a selective serotonin uptake inhibitor can prevent breathing issues post-seizure from worsening as a model rat experiences more seizures; however, seizure-related deaths still occur,” Dr. Hodges shares. “We suspect this is because recurring seizures may affect multiple vital mechanisms.”

Using their model rats, Dr. Hodges and his team are able to study the physiological consequences of this gene mutation, determine its effect on neurological function and whether it potentially contributes to the creation of epilepsy, and ultimately identify and evaluate novel therapeutic targets for treating epilepsy.

The team’s research is extremely rare; until now, little to no studies have been done to determine how mutations in KCNJ16 could contribute to seizures or other neurological issues – much less using rat models. In fact, the team’s investigation may not have happened at all if not for a serendipitous gift into the MCW Office of Institutional Advancement directed towards SUDEP research.

“A donation came through to support SUDEP research just as we began our new focus,” notes Dr. Hodges. “Fortunately, that donor continued to fund us and gave us the ability to form a strong NIH proposal, which resulted in an R01 grant – something that might never have happened if not for that support.”

That R01 grant now supports the team’s current research into mechanistic causes of SUDEP, particularly in the area of cardiorespiratory dysfunction.

“If we can better understand at the cellular level how seizures lead to respiratory failure, we might be able to recognize where and why deaths occur and reduce risk,” adds Dr. Hodges.

— CHRIS COMBS
MCW Student Earns Prestigious AHA Early Career Investigator Award

Gopika SenthilKumar, a Medical College of Wisconsin MD/PhD student in her fifth year of training, has been recognized as the winner of the Elaine W. Raines Early Career Investigator Award by the American Heart Association’s (AHA) Council on Arteriosclerosis, Thrombosis and Vascular Biology. SenthilKumar received the award at the organization’s 2023 Scientific Sessions following the presentation of her proposal, “The Beneficial Effects Of Ceramide On Human Microvascular Endothelial Function Is Dependent On S1P/S1PR1 Signaling Axis.”

This prestigious award recognizes early career investigators who are performing high-quality research in the fields of arteriosclerosis, thrombosis and vascular biology. It is named for Elaine W. Raines, who, along with Russell Ross, PhD, revolutionized the understanding of the cellular mechanisms of atherosclerosis. Dr. Raines’s career path was considered “non–traditional” because she had not officially obtained a PhD when she made her landmark discovery.

SenthilKumar – like Dr. Raines – was the only competitor in the 2023 competition who did not hold a doctoral degree yet.

“I am humbled to receive this honor, which commemorates a leader and role model such as Dr. Raines,” says SenthilKumar. “Receiving this award, especially at this point in my career, is a dream come true.”

SenthilKumar is earning both her MD and PhD through the Medical Scientist Training Program (MSTP) at MCW. Students in the MSTP complete the first two years of medical school, then turn their attention to research by earning a PhD and, finally, complete clinical rotations to earn an MD.

SenthilKumar’s research was conducted as a trainee in the laboratory of Julie Freed, MD ’11, GME ’16, FEL ’17, PhD ’08, executive vice chair, director of clinical research and associate professor in the department of anesthesiology and the Cardiovascular Center at MCW. Dr. Freed’s research focuses on finding ways to protect blood vessels and prevent heart disease.

SenthilKumar’s project challenges the current understanding of ceramides (waxy lipid molecules) and their role in promoting microvascular dysfunction leading to cardiovascular disease. Currently, drug companies are creating therapeutics to inhibit the ceramide pathway to prevent cardiovascular disease. SenthilKumar’s research, however, found that completely inhibiting this pathway also can cause damage to the blood vessels. Her results indicate that ceramide lipids have some beneficial effects that were not previously understood.

“The results from the study have the potential to change our clinical approach towards promoting healthy blood vessels,” shares SenthilKumar.

Dr. Freed’s philosophy on research as a physician–scientist herself, SenthilKumar says, has influenced her own approach that will continue after graduating from MCW.

“Dr. Freed constantly thinks about how we can translate our research work to clinical trials and ultimately to the care of our future patients. As someone also training to be a physician and a researcher, this aspect of translational research really resonates with me,” says SenthilKumar.

“I am truly grateful to have this experience learning from someone who models a successful physician–scientist career. Dr. Freed has sponsored me for every opportunity and award, and I hope I can pay this forward to my future trainees,” adds SenthilKumar.

Dr. Freed is proud of SenthilKumar’s accomplishment and believes her skillset will have much to offer the medical profession as she continues her career. “Working with Gopika has been a privilege. Her ability to take on challenges, problem solve and clearly communicate the impact of her work makes me so proud,” shares Dr. Freed. “Gopika is a special talent and a special individual, and I look forward to following her career over the coming years.”

– ALEX KROUSE
In November 2023, the Wisconsin Association of Free & Charitable Clinics (WAFCC) awarded the MCW-affiliated Saturday Clinic for the Uninsured (SCU) the Gold Seal of Excellence. The determination is made based on achievement of the WAFCC Standards of Excellence, which are measurable guidelines that aid clinics in providing quality care and optimizing accessibility.

MCW’s medical and pharmacy students run the clinic under faculty supervision, utilizing an interprofessional model of care delivery that strives to understand, serve and promote the health and wellness needs of uninsured patients in Milwaukee while simultaneously educating future healthcare professionals.

In addition to MCW’s students and faculty, an intertwining network of partnerships make the SCU possible: donors provide funding; volunteer physicians and pharmacists give their time and expertise; organizations such as the Milwaukee Free and Community Clinic Collaborative increase medication access; the Milwaukee Health Department supplies vaccines; and Ascension Columbia St. Mary’s provides laboratory services and the clinic space at its Family Health Center.

MCW Students Gain Valuable Experience at the SCU

Of Wisconsin’s 95 free and charitable clinics, the SCU is the eighth to achieve WAFCC’s Gold Seal of Excellence — and the only awardee that is student-run. Ingrid Anderson, an AmeriCorps VISTA member at the SCU since August 2022, estimates that more than 100 people have worked to help the clinic achieve the WAFCC standards since 2014, as a new group of 15 student-leaders serves on its board of directors each year.

Mutsa Chiromo and Alynah Adams, 2026 MD candidates at MCW-Milwaukee, had volunteered at free clinics during their undergraduate college years. They both agree that the opportunity to continue this type of work at the SCU was a deciding factor in applying to MCW, as their respective motivations to serve were as great as their desire to expand their medical skills.

Chiromo, who served as the SCU board chair in 2023, was born and raised in Zimbabwe. She says that her family’s abode there was akin to a hospital, since her relatives would receive care from her mother, who is a physician.

“We’d have people stay in our home for long periods of time, being treated for various medical conditions,” notes Chiromo. “I had the unique experience of being introduced to free healthcare in my home and faced the reality that many people couldn’t receive quality care or couldn’t afford it.”

Adams served as chair of the SCU dispensary committee and was a member of the anti-racism committee, which addresses health equity within the clinic and provides training to medical and pharmacy students. Adams and her classmate developed a workshop to bring attention to the mental health disparities that Black and Brown patients experience. She has personal ties to free clinics and recognizes the impact they had on her own family.

“The ability to lend my time and attention to the people who need it most is a privilege,” says Adams. “Our patients are resilient and inspiring; they have taught me the value of leaning on one’s community and the importance of working on a supportive, dedicated team toward a common goal.”

**SCU Achievements in 2023**

- 730 appointments to patients without insurance
- 18,267 total volunteer hours
- **MCW STUDENT VOLUNTEERS**
  - 15 members of the board of directors
  - 232 medical students
  - 30 pharmacy students
- **OTHER VOLUNTEERS**
  - 4 community volunteers
  - 32 primary care physicians
  - 30 pharmacists
  - 60 specialty care physicians
Soriene Ozcan, a 2025 MCW PharmD candidate, grew up in Turkey and started utilizing free clinics when she moved to the US at age 17. “Volunteering at the SCU was my way of giving back,” Ozcan shares, noting that she served on the SCU board as director of pharmacy students. “It’s a privilege to have healthcare like this, compared to where I came from, where you don’t have routine checkups. You just go to the hospital when something is seriously wrong with you.”

Brianna Albee, also a 2025 MCW PharmD candidate, served as patient prescription assistance director at the SCU. “It was really eye-opening to see just how expensive medications are,” she says. “I learned how prescription assistance programs work, how to utilize them to save the clinic money and assist the patient, which helped me during my hospital clinical rotations as well.”

The Evolution of the SCU

Denise Kohl, DO, MCW assistant professor of family medicine and community medicine and medical director of the SCU, says the range of resources offered at the clinic are unique. When she was in osteopathic school, the free clinic was located in a church basement and offered minimal preventative care.

Since its founding in 1991, the SCU has evolved from offering first-come, first-served walk-in appointments to becoming a primary medical home that provides continuity of care, preventive services, chronic condition management and social services.

Patients are screened for social determinants of health and connected to resources. The SCU offers in-house appointments for 16 different areas of specialized care, from cardiology to gynecology to psychiatry – which Dr. Kohl says is rare for a free clinic and wouldn’t be possible without physician and pharmacist volunteers.

“Our volunteers are passionate about providing care to this population and want to prevent people from falling through the cracks. They also really love to teach, and it makes for a joyous environment when you have that combination,” Dr. Kohl remarks.

The first cohort of pharmacy students began volunteering at the SCU shortly after the MCW School of Pharmacy opened in 2017. The students complete medication histories, provide medication counseling, fill medications and administer immunizations.

“Prior to the School of Pharmacy’s involvement, the SCU had a limited medication formulary to offer its patients,” says Rachele Harrison, PharmD, MCW assistant professor and the SCU’s pharmacy director. “The SCU has since established multiple pharmacy partners that allow for robust prescribing habits and now utilizes patient assistance programs to ensure every patient has access to the most appropriate medication regimen and highest quality of care.”

During the COVID-19 pandemic, the SCU established a telemedicine program that continues to address barriers of time and transportation. Students developed a prescription call-back program so that patients – particularly those managing chronic conditions – would receive refill reminders.

“The Gold Seal of Excellence reflects the work by many dedicated individuals who are motivated to provide high-quality inclusive care to members of under-resourced and marginalized groups,” says Rebecca Lundh, MD ’07, GME ’10, FEL ’15, MCW assistant professor of family and community medicine, who served from 2013-2023 as the SCU’s medical director. “This achievement is an impressive benchmark for the SCU, as it continues striving to meet the needs and goals of our patients, community and volunteers.”

– MELISSA BEHLING

If you would like to make a donation to the Saturday Clinic for the Uninsured, please contact Elsa Knysak, MCW director of annual giving, at eknysak@mcw.edu.
“How Could I Have Been So Lucky?”

For Thomas Krummel, MD ’77, These Words Reflect His View on an Esteemed Career as a Pioneering Pediatric Surgeon, Renowned Scientist, Trailblazing Innovator and Investor in Groundbreaking Technologies.

I grew up in Racine, Wisconsin, and had a classic small-town Midwestern upbringing,” Dr. Krummel shares. “I was sort of a science guy and majored in chemistry at the University of Wisconsin–Parkside. One day I stumbled into a meeting of a pre-med club – probably because pizza and beer were free – and was lucky enough to be mentored by an advisor whose guidance got six or seven of us into medical school that year.”

Dr. Krummel was accepted “early decision” at MCW and says he blossomed during his clinical years. “I had some unique opportunities that charted a career for me in surgery and were foundational for the things that followed,” he notes.

“Then, students played a major role in bedside care, and as a result, I had a phenomenal experience learning to be a real doctor. On my surgery rotation, I did a ‘selective’ in cardiac surgery and didn’t leave the hospital for two weeks. It was just galvanizing in terms of everything I learned. In fact, I lived in the hospital for the better part of two years after that,” he adds.

In his senior year, Dr. Krummel completed a rotation in pediatric surgery with Dr. Marvin Glicklich at Children’s Hospital, which planted the seed for his future interests. Dr. Krummel also credits MCW surgeons Dr. H. Myron Kauffman, Jr., and Dr. Larry Bonchek with stoking his passion for the field. In another stroke of luck, Dr. Kauffman – a graduate of the Medical College of Virginia (MCV) – personally recommended Dr. Krummel for a surgical residency there. “My clinical experiences at MCW were invaluable. As a surgery intern, I was better equipped than many of the junior residents because I had been allowed to grow in the supervised, but self-reliant environment at MCW,” Dr. Krummel notes.

Dr. Krummel’s career-long focus on innovation began at MCV, where as a second-year resident he formed the world’s second-ever program focused on extracorporeal membrane oxygenation (ECMO) – a then-novel form of advanced life support designed to keep blood moving through the body in newborns with life-threatening cardiac or respiratory conditions. The team’s research in infants helped establish ECMO as an effective intervention, and the approach has since saved the lives of hundreds of thousands of patients worldwide. His research and subsequent work has pioneered advances in surgical technology and our understanding of the biochemical and cellular mechanisms of scarring and tissue damage.

Following his residency and a surgical research fellowship at MCV, Dr. Krummel completed a residency in pediatric surgery at Children’s Hospital of Pittsburgh and a fellowship in fetal surgery at the University of California, San Francisco. He then spent more than two decades in Silicon Valley, including as chair of the department of surgery at Stanford University. In 2002, recognizing a need to bridge gaps among surgery, innovation and clinical adoption, Dr. Krummel founded the Stanford Surgical Innovation Program, which merged with the Stanford Byers Center for Bodesign. He then served as its co–director until 2021.

Dr. Krummel and his wife, Susie, have three daughters and six grandchildren. He currently divides his time between Austin, Texas, and California, where he continues to mentor young scientists and helps fund promising medical technologies.

“It has been a miracle and a privilege to take care of patients,” Dr. Krummel shares. “How could I have been so lucky?”

—SARA L. WILKINS
Alumna Remains Engaged at Age 99, Looks to Publish Memoir

Maria I. Barrows, MD ’49, has led a full life, and she has stories to share about every part of it.

Dr. Barrows, born Maria Weissenberg on April 8, 1925, in Vienna, Austria, shares that some of those stories involve her family and the circumstances of the time: Being sent to safety to the United States by ship at age 15 (sponsored by the Quakers) after Hitler invaded her homeland; or having the Von Trapps (of The Sound of Music fame) as family friends; or having a father and uncle in the medical and science fields who knew Albert Einstein.

Then, there were the instances that she could control.

Dr. Barrows chose to attend the Marquette University School of Medicine (MCW’s predecessor institution) because it offered an opportunity to graduate in three years’ time. Her class had 75 students, including seven women – two of whom were nuns.

“The other women graduates were such an inspiration to me,” says Dr. Barrows. “I used to travel with Sister Agnes Terese during vacations, sharing a sleeper train car between Milwaukee and Ossining, New York, when I would accompany her to the Maryknoll Motherhouse on the way to visiting my father in New York City.”

Dr. Barrows completed her pathology residency in San Diego and San Francisco, during which she married Frank Barrows and had two children. Her husband was an international educational advisor whose job with the United Nations required him to live and work overseas. Dr. Barrows joined him on these relocations to exotic places such as Malawi, Taiwan, Malaysia, Bangladesh and Indonesia.

Dr. Barrows says that the most rewarding stretch of her career was her first overseas job in Blantyre, Malawi. The country had just gained independence from the United Kingdom; as a result, many of the physicians had returned to England – so she was the only pathologist in Malawi, responsible for all post-mortem examinations, surgical tissue extractions and transfusion services.

Other rewarding overseas episodes included establishing an outpatient general practice clinic for local and international United Nations staff in Bangladesh – where she helped an abandoned neonatal infant survive and thrive. In Indonesia, she helped rehabilitate an American tourist who had fallen into a volcano in Northern Sumatra and who was eventually rescued after three days with a broken femur.

Each new location afforded Dr. Barrows a chance to provide care, teach and support missionary work. She is thankful for all of it.

“I was able to expand my knowledge by working with people who had rare and tropical disease,” she says. “I learned creative communication skills with patients who didn’t speak my language, and I got to help many people who otherwise would have gone without care.”

Dr. Barrows worked from the time of her graduation in 1949 until her retirement in 2002. Although she doesn’t consider herself a trailblazer, Dr. Barrows enjoyed helping patients get better – and she continues to encourage others to pursue careers in medicine to experience that same joy. This approach is working, as she has brought numerous people into the healthcare fold, including members of her own family. Two of her grandchildren, both physicians, are recipients of prestigious national fellowships – one at the National Institutes of Health’s National Cancer Institute and one at the Los Alamos National Laboratory. A meaningful legacy with roots at MCW! Dr. Barrows currently is finishing a memoir on her life and work at home and abroad.

– ANTHONY BRAZA

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**Janice Werbinski, MD ’75**, is a clinical associate professor emerita in the department of obstetrics and gynecology at Western Michigan University Homer Stryker MD School of Medicine in Kalamazoo, Mich. She practiced women’s health and gynecology for 34 years in Kalamazoo before retiring from clinical practice in 2014 and was the founding president of the American College of Women’s Health Physicians.

**Robert A. Cohen, MD ’77**, has been appointed to the clinical advisory board of Prytime Medical Devices, Inc., which specializes in the design, development and commercialization of minimally invasive solutions for hemorrhage control. An obstetrician/gynecologist, Dr. Cohen is the medical director of the placenta accreta program at Medical City Dallas (Tex.).

**Kevin Garvin, MD ’82**, is president-elect of the American Board of Orthopaedic Surgery. He is the L. Thomas Hood, MD, Professor of Orthopedic Surgery and Rehabilitation and chair of the department of orthopaedic surgery and rehabilitation at the University of Nebraska Medical Center.

**Steven Weinshel, MD ’83, JD, GME ’89**, is a criminal prosecutor and an assistant state’s attorney for the 12th Judicial Circuit in Sarasota, Fla. He also teaches first-year students at Lake Erie College of Medicine School of Dental Medicine in Bradenton, Fla.

**Gregory P. Olsen, MD ’84**, has two careers: one as a physician and another as a licensed fisherman. He is an emergency medicine physician in Santa Barbara, Calif. Since 2007, he also has operated a commercial lobster business.

**Iftiker Ahmad, MD, GME ’85**, a gastroenterologist, has joined Sparrow Medical Group and sees patients at Sparrow Carson Hospital and Sparrow Ionia Hospital (both in Michigan).

**Thomas Grist, MD ’85**, has stepped down as the John H. Juhl Professor and chair of the department of radiology at the University of Wisconsin School of Medicine and Public Health after 18 years of leadership. He continues as a professor of radiology and recently received BioForward Wisconsin’s Hector F. DeLuca Scientific Achievement Award. Dr. Grist has written three books, 15 book chapters and more than 150 peer-reviewed publications.

**Anthony Melillo, MD ’86**, is the founder of Bay Oaks Orthopaedics and Sports Medicine in Houston, Tex.

**Lynn D’Andrea*, MD ’87, GME ’90**, professor and chief of pediatric pulmonary and sleep medicine at MCW, is featured in the Netflix documentary *Big Vape: The Rise and Fall of Juul*. She shares the Children’s Wisconsin experience of caring for adolescents who would eventually be diagnosed with EVALI, a vaping-related lung injury.


**Geraldine McCarthy, MD, FEL ’91**, is a consultant rheumatologist at the Mater Misericordiae University Hospital in Dublin, Ireland, and professor of medicine at University College Dublin. She was president of the Irish Society for Rheumatology from 2019–2023, and has won many awards, including the Royal College of Physicians of Ireland Institute of Medicine’s Bryan Alton Medal.

**Cynthia Rubert, MD ’91, GME ’96**, an orthopedic surgeon, has joined Aspirus Keweenaw (Wis.) Hospital and Clinics.

**Ayse Atasoylu, MD ’92**, is an internal medicine specialist at Eastern Mediterranean University on the island of Cyprus.

**US Rep. Larry Bucshon, MD, GME ’93, FEL ’95**, has announced that he will retire from Congress this year after serving as a congressman for portions of western and southern Indiana since 2010.

**Divyakant B. Gandhi, MBBS, FEL ’93**, is a cardiothoracic surgeon with the Greater McLaren Lansing (Mich.) Cardiothoracic and Vascular Surgeons and the Center for Cardiovascular and Thoracic Surgery.

**Captain J. Russell Linderman, PhD, PDF ’99 (postdoctoral fellow)**, is the deputy director of the Consortium of Health and Military Performance, a designated United States Department of Defense Center of Excellence. While at MCW, he studied brain tumor angiogenesis, growth factor control of blood vessel development and vasoactive hormone receptor localization in the microvasculature.
2000s

Frederic Butler, MD, MPH '00, returned to his hometown of Brawley, Calif., to serve as an occupational medicine specialist with Innercare.

Peter Weir, MD '00, MPH, has been named chief population health officer at University of Utah Health. His work in population health has included leading a team tasked with improving access to medical care for refugee populations in Salt Lake City and developing an employer-based clinic that focused on improving the health and reducing overall costs of its 6,500 members.

Ellen Hayes, MD, GME '01, a fertility specialist who is board-certified in both reproductive endocrinology and obstetrics and gynecology, leads the Kindbody fertility and in vitro fertilization clinic in downtown Milwaukee.

Mark Lodes*, MD '97, GME '01, was recently named a “Notable Health Care Leader” by Milwaukee BizTimes. Dr. Lodes is chief medical officer for population health and medical education for the Froedtert & the Medical College of Wisconsin health network, where he has led the implementation of a health equity strategy that has driven transformational efforts in the communities it serves.

Kawzar Talaat, MD, GME '01, is associate professor of international health at both the Johns Hopkins University School of Medicine and the Johns Hopkins University School of Public Health in Baltimore (Md.). Her research focuses on international health and parasitology, with an emphasis on vaccines, avian influenza and pandemic influenza.

2010s

Timothy N. Botler, MD '13, is a hospitalist at Maine Medical Center in Portland

Deseray Aguirre, DO, GME '23, has been appointed to the Southern Illinois University Center for Family Medicine in Quincy, Ill. She is board-certified in both family medicine and osteopathic manipulation treatment.

Madeline Oestreich, MD '20, GME '23, has joined the Aspirus Medford (Wis.) Clinic as a family medicine physician.

2020s

Daniel Sjoquist, MD '17, is an orthopedic surgeon specializing in hip and knee replacement surgery with Bellin Health Sports Medicine and Orthopedics with clinics in Escanaba and Iron Mountain, Mich., and Marinette, Oconto and De Pere, Wis.

Umber Ahmad, DO, FEL '18, has joined Mercyhealth Hospital in Crystal Lake, Ill., as a rheumatologist. She sees patients at Mercyhealth clinics in Crystal Lake and Woodstock, Ill.

Ciani Ellison, MD '18, GME '23, is assistant professor of radiation oncology at the University of Arkansas College of Medicine. Dr. Ellison, one of only two pediatric radiation oncologists in Arkansas, specializes in the treatment of pediatric cancers at the Radiation Oncology Center at the Arkansas for Medical Sciences Winthrop P. Rockefeller Cancer Institute.

Peter O’Day, MD '18, is a pediatric hospitalist with Columbus Regional Health in southeastern Indiana.

*MCW faculty member
IN MEMORIAM

1950s

William G. Longe, MD ’51, died at home in Muskego, Wis., on December 12, 2023, at the age of 98. Dr. Longe was one of the founders of West Allis (Wis.) Memorial Hospital, where he served as medical staff president and then 23 years on the hospital’s board of trustees. Following his retirement from private practice, he worked as the corporate medical director for the A.O. Smith Corporation.

James F. Berg, MD ’57, of Mineral Wells, Tex., died on November 16, 2023, at the age of 90. He was a general surgeon practicing at St. Francis Hospital, St. Luke’s Hospital and Milwaukee Hospital (all in Milwaukee) and at West Allis (Wis.) Hospital.

Roger L. Hepperla, MD ’57, died on October 30, 2023, at the age of 91. He was an anesthesiologist caring for patients for more than 40 years at University of Wisconsin Hospital in Madison, Columbia Hospital and St. Joseph Hospital in Milwaukee and West Allis (Wis.) Hospital.

Robert Werra, MD ’57, of Ukiah, Calif., died on June 2, 2023, at the age of 93. He was a family medicine physician for more than 50 years in Ukiah, where he established the first home health agency and first hospice in Mendocino County. He was honored as California Family Physician of the Year in 2005.

Thomas J. Flatley, MD ’59, GME ’60, ’61, died on January 18, 2024, at the age of 90. He was an orthopedic surgeon with Ascension Medical Group Wisconsin in Greenfield, Wis.

1960s

John Raymond Rogers, MD ’60, of Fairfax Station, Va., was reported to have died in November 2023 at the age of 88. For 20 years he served as an aerospace physician and psychiatrist with the US Air Force. While stationed at Andrews Air Force Base in Virginia, he served as an advisor to the Surgeon General of the Joint Chiefs of Staff. He retired from the Air Force in 1980 after receiving several medals and reaching the rank of colonel. As a psychiatrist, Dr. Rogers worked at the Northern Virginia Mental Health Institute and saw patients in private practice.

Michael Guy O’Mara, MD, GME ’68, ’72, of Brookfield, Wis., died on December 19, 2023, at the age of 82. An internal medicine specialist, he was in private practice in Oconomowoc, Wis., for many years before joining ProHealth Care, where he cared for patients at Oconomowoc Memorial Hospital and Waukesha (Wis.) Memorial Hospital.

1970s

Arthur West Kaemmer, MD ’70, of St. Paul, Minn., died on January 31, 2024, at the age of 80. A detailed tribute to Dr. Kaemmer will be published in the Summer 2024 issue of MCW Magazine.

Carl Poley, MD ’71, GME ’74, died on December 7, 2023, at the age of 78. Dr. Poley was an obstetrician/gynecologist in Green Bay, Wis., where he served on the medical staffs of St. Vincent’s, St. Mary’s and Bellin Hospitals. He also served as president of Beaumont Clinic (now Prevea) and participated in several medical missionary trips through the Christian Medical Society.

1980s

Joseph R. Wilczynski, MD, GME ’71, died in Racine, Wis., on September 24, 2023, at the age of 87. He served the Racine community as an obstetrician/gynecologist for 44 years and delivered more than 10,000 babies.

Marshall Dale Morgan, MD, GME ’74, died on November 27, 2023, at the age of 73. As a radiologist at Highland Hospital in Oakland, Calif., he conducted pioneering work in ultrasound scanning. He served on the hospital’s staff for 34 years and was chief of mammography. After retiring from Highland Hospital in 2008, Dr. Morgan joined the Veterans Administration Hospitals in Oakland and Martinez (Calif.), where he served from 2009–2023.

Richard Ralph Schmidt, PhD ’75, of Collingswood, N.J., died on September 26, 2023, at the age of 79. He served as a professor at the Sidney Kimmel Medical College at Thomas Jefferson University in Philadelphia for 48 years. While there, he held numerous roles, including vice chair of educational development in the department of pathology, anatomy and cell biology, and taught more than 10,000 medical professionals.

1990s

Dorothea Dillman, MSN ’87, died on January 10, 2024, in Notasulga, Ala., at the age of 74. She was director of the Alabama Nurses’ Station and the state nurse liaison.
for the American Red Cross. She also was a clinical instructor at Auburn University Montgomery School of Nursing.

Judith Menning, MSN ‘87, died on October 6, 2023, in Shawano, Wis., at the age of 84. She was supervisor of surgery and in the emergency room at the Shawano Hospital for more than 15 years, and was director of nursing for eight years. She also worked for the Shawano County Public Health Department for 10 years.

1990s

Frank J. Bender, III, MD ‘90, died on December 24, 2023, in Indianapolis, Ind., at the age of 65. He was a physiatrist and pain medicine specialist with HSHS St. John’s Hospital in Springfield, Ill., and HSHS St. Francis Hospital in Litchfield, Ill.

2020s

Aaron Jurgens Bauer, MD ‘02, died on September 27, 2023, at the age of 47. He was a pediatrician with offices in Kenosha and Mt. Pleasant, Wis., and served on the medical staff of both Children’s Wisconsin and Aurora Burlington hospitals.

Karen J. Marcdante, MD ‘80, GME ‘83, FEL ‘87, of Greendale, Wis., MCW professor emerita of pediatrics, died on February 7, 2024, at the age of 68. She graduated from MCW in 1980 and in 1983, completed her pediatrics residency at MCW/Children’s Hospital of Wisconsin, after which she became an instructor within the MCW department of pediatrics (DOP). She completed her pediatric critical care fellowship in 1987 and medical education fellowship in 1993, also at MCW. Dr. Marcdante became a full professor at MCW in 2000.

Dr. Marcdante’s career was defined by a passion for critical care medicine, medical education, mentorship and coaching. Dr. Marcdante served as vice chair of medical education for the DOP; senior associate dean for academic affairs; and director of the Clinician Educator Scholarly Pathway. She also led and participated in numerous institutional and national committees and was a collaborative and well-funded researcher, a sought-after presenter and a trusted mentor and coach. Her most recent collaborative research was focused on teaching medical educators how to ensure that students feel they matter when in the learning environment. She received MCW’s Distinguished Service Award in 2009.

Dr. Marcdante dedicated her life to expertly caring for the most vulnerable patients in the Children’s Wisconsin Pediatric Intensive Care Unit and educating MCW learners. She retired in the summer of 2023, but continued working on a variety of projects until a few weeks before her passing. Prior to her death, she established a fund to assist medical students facing food anxiety.

David Rosenzweig, MD, professor of medicine (pulmonology) emeritus, died on October 30, 2023, at the age of 90. While at MCW, he received a National Institutes of Health fellowship to conduct pulmonology research at Hammersmith Hospital in London, England.

Special Remembrances

James Masao Fujimoto, PhD, a professor emeritus of pharmacology and toxicology at MCW, died in Wauwatosa, Wis., on January 16, 2024, at the age of 95. He joined the faculty of MCW (then the Marquette School of Medicine) in 1968, where he spent the remainder of his career. His research focused on the study of opioids and pain mechanisms. He received decades of continuous research funding from the National Institute on Drug Abuse, published hundreds of articles and mentored dozens of graduate students and postdoctoral fellows. In 1996, he received MCW’s Distinguished Service Award, its highest honor.

Paul Jacobs, MD, a major donor and long-time volunteer faculty member at MCW, died on July 15, 2023, at the age of 92. Dr. Jacobs moved to Milwaukee in 1961 and became a partner in the Milwaukee Orthopaedic Group, where he practiced until retiring at age 75. He didn’t consider pursuing orthopaedic oncology until after he was asked to join the volunteer faculty at the Marquette University School of Medicine (MCW’s predecessor institution). Dr. Jacobs served as a clinical professor of orthopaedic surgery at MCW for more than 40 years. In 2008, he provided a gift to MCW that created the Paul A. Jacobs, MD, Endowed Chair in Orthopaedic Surgery. Dr. Jacobs also served for 25 years as team physician for the Milwaukee Brewers.

Ikar J. Kalogjera, MD, GME ’74, of Elm Grove, Wis., died on December 24, 2023, at the age of 78. Before going into a private psychiatric practice in 1981 in Wauwatosa, Wis., he was director of the inpatient behavioral health unit, and, later, director of adolescent services for MCW’s department of psychiatry and behavioral medicine. He continued as a clinical professor and was honored with the department of psychiatry and behavioral medicine’s Distinguished Service Award, two Give a Damn awards, two Golden Apple Teaching awards and MCW’s Marvin Wagner Clinical Preceptor Award.

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Success in the third year hinges on treating patients as if you are their primary doctor, demonstrating eagerness to learn, supporting the team with notes, calls or updates, and actively seeking and applying feedback.

Consider the following two patients who were hospitalized for pneumonia treatment: one is an elderly male with chronic kidney disease who uses a CPAP for sleep apnea and the other is a young athletic female who recently returned from overseas travel. At the start of my third year of medical school at MCW in the fall of 2023, I would have said that we could simply fix both of their illnesses through antibiotic coverage. While this is still true to an extent, I have learned that both patients’ “normal” health is worlds apart. The term “normal” is a misnomer; a more fitting term is “baseline.”

In addition to antibiotics, both patients received supplemental oxygen. However, their discharge stories were different. Our team had to ensure that the athlete could maintain normal oxygen saturations on room air because that was her baseline. However, the elderly male could go home even if he still required supplemental oxygen at night because he used a CPAP. Learning to adapt treatment to patient baselines has been a cornerstone of my third year.

I am learning another crucial skill: presenting patients. No, not the formal lectures with slides and animated figures – but rather concise oral briefings to inform the medical team about each patient’s status, guiding treatment plans, specialist consultations and discharge goals. The challenge lies in prioritizing patient care details and determining their relevance.

Referring to the same elderly male as noted above, his morning presentation of overnight events may include: 1) the infectious disease team recommended an increase in his antibiotic dose; 2) he required a large increase in oxygen supplementation; and 3) his nurse gave him several tablets of pain medication. Deciding which item to report first, which item to share last and which item is unnecessary to report dictates how each presentation is organized. One of the best resident educators explained that the next part of the medical student journey was the transition from being reporters of facts to analyzers who can assess healthcare implications.

We start from being able to discuss subjective information such as patient complaints and objective information such as labs, vitals and imaging. Next, we synthesize this information to offer a general assessment with likely diagnosis, identifying pertinent positive or negative findings that support the diagnosis. We conclude with the treatment plan or suggestion for further workup.

Conversations with my peers have revealed a common thread of nervousness and apprehension during our clinical years. The prevailing advice for new third-year students is “to go with the flow.” Expectations may change with different advisors and rotations, time to study or sleep can be difficult to pinpoint, and luck can play a role in how an experience unfolds. However, success in the third year hinges on treating patients as if you are their primary doctor, demonstrating eagerness to learn, supporting the team with notes, calls or updates, and actively seeking and applying feedback.

Reflecting on my initial apprehensions following five years of graduate and postgraduate research, I’d advise my past self not to fret over impressing with knowledge or completing assignments. The most valuable learning comes from patient interactions in the clinical environment – a realization that has eased my earlier worries and profoundly shaped my clinical education.

– DR. SUMA THAREJA

Dr. Suma Thareja (Samudrala) is a student in MCW’s MD/PhD program. After receiving her PhD in May 2022, she completed a one-year postdoctoral fellowship and has entered her third year of medical school at MCW.
Dr. Lawton retired from MCW in January 2024, after a distinguished career spanning more than four decades. She began her journey at MCW as a medical student, progressed through a residency in radiation oncology and joined the faculty in the MCW department of radiation oncology in 1987. Ten years later, Dr. Lawton became the 33rd woman at MCW to be promoted to the rank of professor and was awarded tenure in 2002.

A trailblazer in her field, Dr. Lawton’s significant clinical contributions have defined the role of radiation therapy in treating prostate cancer and other genitourinary malignancies – leaving an indelible mark on the landscape of oncology. She also played a pivotal role in establishing a world-class bone marrow transplant (BMT) program at MCW, which has grown to become the largest BMT program in Wisconsin.

Dr. Lawton served as the radiation oncology residency program director from 1990-2014 and as department vice chair from 2011 until her retirement. Her influence extends well beyond MCW, as she has served in several national leadership roles including president of the American Society for Radiation Oncology (ASTRO) and co-chair of the ASTRO Development Committee that established the Radiation Oncology Institute – a nonprofit foundation dedicated to advancing the role of radiation therapy in cancer treatment (where she currently serves as president).

Dr. Lawton has been recognized for the immeasurable impact of her career as a recipient of the Lifetime Service Award from the American Board of Radiology in 2015 and the ASTRO Gold Medal, the organization’s highest honor, in 2021. Her legacy at MCW and in the broader field of radiation oncology will continue to shape education, patient care and research for many years to come.

What Drives You?
I’m very motivated to do the most I can with the talents I have. Science and math always came easy to me, so medicine was a natural choice. Making a difference in patients’ lives is a huge motivator and cancer is a scary diagnosis to receive, so as an oncologist I was motivated to give my patients the best care possible and to try to further improve their outcomes through cancer research.

What Has Been the Highlight of Your Career?
I’ve been fortunate to have many highlights: training the next generation of radiation oncologists; helping my faculty colleagues succeed; my election to national leadership at ASTRO and receiving ASTRO’s Gold Medal – an immense honor. And there’s nothing like seeing a patient years after treatment and having them look you in the eye and thank you for helping to save their life. That is a wicked highlight.

What Do You Still Hope to Accomplish Over Your Career?
I retired in January 2024 with the hope of starting a new phase of life focused on hands-on volunteerism. Doing volunteer work is something that I’m passionate about and now enjoy that simply wasn’t possible during my radiation oncology career. I also still want to support my younger colleagues as they make their way. They know that they can reach out for advice anytime!

What Would You Like Your MCW Legacy to Be?
When I started in medicine over 40 years ago, it was unusual for a woman to have a successful academic career and a family. There were essentially no examples to emulate, and society wasn’t very supportive of working moms (and even today it is still not easy!). I hope that my ability to do both encourages other women who want to be moms to consider an academic medical career. I wouldn’t change my career despite the challenges, and being a mom is the most significant work I’ve ever done.

What One Piece of Advice Would You Like to Share With Your Colleagues?
“The cream rises to the top.” Just keep doing your important hard work and with time it will be noticed, allowing you to rise to the top of whatever it is you are working on.
You make tomorrow’s breakthroughs possible.

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