Dr. John Eberth and his colleagues are coming up with a vascular conditioning program they hope will help surgeons build bypass grafts for success in the long run.
In the spring of 1976 — more than a year before the first medical students would arrive at our Columbia campus — a search committee met to identify a dean to lead the University of South Carolina School of Medicine. The committee tapped South Carolina native Dr. Roderick “Rod” Macdonald, chair of the Department of Ophthalmology at the Medical College of Virginia. The decision proved to be one of the most important moves made by our founding fathers, as Dean Macdonald provided exemplary leadership and stability in guiding the school through its challenging early years.

In this issue of South Carolina Medicine magazine, we pay tribute to Dean Macdonald, who passed away in November. Colleagues who knew him best share their remembrances of a man who stuck to his principles and succeeded in establishing a medical school that would serve South Carolinians for generations to come.

The legacy of Dean Macdonald carries on through the work we do today. Several of his original faculty hires remain with the School of Medicine and have committed their professional careers to educating nearly every medical student who has walked the halls of our campus. He initiated the application for a chapter of the Alpha Omega Alpha Honor Medical Society, a society that continues to grow in numbers with the induction of 22 new members this spring (see page 15). Finally, he helped secure the school’s first accreditation from the Liaison Committee on Medical Education (LCME). An appreciation for this accomplishment is shared by the many individuals at the School of Medicine who are working diligently to prepare for our next LCME review in 2017.

I am honored to follow in the footsteps of Dean Macdonald and the other deans who have led the School of Medicine. History reveals that the school has benefitted from the contributions and dedication of these individuals, who collectively met the unprecedented challenges put before them in maintaining our academic, research and clinical missions. We owe them our gratitude for their service and commitment to making the School of Medicine the thriving academic institution that it is today.

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Les Hall, M.D., began his tenure as executive dean of the University of South Carolina School of Medicine and chief executive officer of Palmetto Health-USC Medical Group on Feb. 1, 2015.

As executive dean, Hall leads the education, research and clinical missions at the School of Medicine. He oversees all academic and research programs and supports the growth of undergraduate medical education at the Columbia campus. He is the sixth permanent dean to lead the School of Medicine since the school opened in 1977.

As CEO, Hall oversees and advances the clinical integration of Palmetto Health’s physician practices and the School of Medicine’s clinical departments to create the Midlands’ largest multispecialty medical group. This new not-for-profit organization includes more than 1,300 health care professionals, including more than 400 physicians, and offers patients the broadest range of health care services in the region.

Hall received his medical degree from Washington University in St. Louis and completed an internal medicine residency at National Naval Medical Center in Bethesda, Maryland. A member of the University of Missouri-Columbia (MU) faculty since 1999, he held several leadership positions within the University of Missouri Health System (MU Health Care). He was appointed interim dean of the MU School of Medicine in 2012, and previously served four years as chief medical officer of MU Health Care and senior associate dean for clinical affairs at MU’s School of Medicine.

**Dr. Hall Questions:**

**What inspired you to be a physician?**

I started thinking about being a physician during high school. The combination of my love of science with my desire to be in some kind of a service, or helping profession, led me to medicine.

**What attracted you to this position at the University of South Carolina School of Medicine?**

First, I was really attracted to what USC and Palmetto Health were trying to do in forming the new Medical Group, which would be a huge advance in combining the academic mission of the School of Medicine with the clinical enterprise of the health care system. There has been a lot of thoughtful preparation over the last few years to create that vision and take the initial steps toward realizing that vision. I was convinced it was the right thing to do in terms of the delivery of health care services for the Midlands of South Carolina.

The second thing that attracted me to this job was the fact that clinical leadership was considered a strong qualifying factor. My experience leading physicians at the University of Missouri as chief medical officer, and later interim dean, helped prepare me for my leadership role here at the School of Medicine.

**You led the University of Missouri School of Medicine for two years as interim dean. What do you take away from that experience that will benefit you in your new role as executive dean?**

The experience was invaluable. Serving as interim dean gave me a much better understanding of the basic science research mission and helped me gain experience managing a large medical school budget. The job also gave me an opportunity to interface with the academic campus where I had a chance to develop wonderful working relationships with other deans and work collaboratively on educational and research projects. There will be new things to learn here at USC and a lot of things unique to this environment, but there is a lot that feels like very familiar terrain, as well.
As the leader of the newly formed Palmetto Health-USC Medical Group, how do you foresee the School of Medicine’s role in this new partnership with Palmetto Health?

The School of Medicine will play a significant role in the new Medical Group, as the group touches all three parts of our mission. If you look at the history of the School of Medicine, we have had wonderful physicians and staff providing great care, but we have never been able to provide a full range of comprehensive services. We have some specialties where we are market leaders in the Midlands, but we have other specialties that are missing from our portfolio. Palmetto Health has many specialties represented where they are providing great services, but they have gaps in their services as well, which we help to fill. When grouped together, you suddenly have something close to a comprehensive medical group that is stronger with much greater capabilities. I believe that same strength will enhance the clinical education mission, as it will open new doors for our students in new learning environments, and it will provide more opportunities for providers who are affiliated with the group to say, “Here is the way I would like to support the educational mission.”

On the research side, it will allow us to start making much stronger connections between the research programs at Palmetto Health, which are mostly clinical programs, and the basic science programs that are housed at the School of Medicine. We will develop a new portfolio of translational research programs where the basic scientists are working together with the clinical researchers in the health care system. We are already having conversations about what that may look like when you combine those research enterprises.

How will the formation of the Medical Group change the way health care is structured and delivered in the Midlands?

Academic health centers throughout the country are taking on new roles around health care delivery. Not only do we need to be the leaders in discovering new cures for today’s illnesses and new measures to prevent illnesses, but we need to be discovering the new processes that will allow health care delivery to become more cost effective, higher quality, higher value and where patients are receiving the right care at the right time at a cost that is ultimately sustainable. We can help by bringing the research expertise from the School of Medicine into partnership with the clinical care programs that are associated with a large hospital system like Palmetto Health. In that environment, you have champions on both sides who really are interested in helping to solve the issues and be part of the dialogue, creating real opportunities for us to emerge as an industry leader in helping contribute to the conversation of, “What is the most efficient way to deliver high-quality health care?”

How do you plan to manage the role as CEO of the Medical Group and as executive dean of the School of Medicine?

That is a question I thought a lot about before I applied for this job, and while I was going through the interview process. There are some real advantages to having both roles in terms of alignment of priorities and action plans for the school and the health system. I will really focus on the leadership piece and helping to set up the direction. We will establish the leadership team within the Medical Group that will do a lot of the day-to-day management of the operation. We need the right talent and the right people assigned to the right jobs and holding people accountable to do the things they are required to do. All that will be done, but that will be a work in progress for the next year or so.

What is your vision for the School of Medicine and what do you want to accomplish early in your tenure?

In my first week here, I had a chance to meet with the Executive Committee from the school. What I told them is that there are great points of pride in all of our missions. We have a lot of areas we do things very well, and we have a lot of areas we need to improve, and that is true anywhere. Everything we do needs to be done with the goal of excellence. As I see it, the University of South Carolina has established the reputation of producing excellent physicians who can deliver patient-centered care. Most of our graduates come here to prepare themselves to be practitioners of medicine, and they ought to believe the education and training they receive here is as high quality as any place in the country. There is no reason we cannot accomplish that.

We have a significant research mission and can be very proud of the growth quantitatively in research over the years, and we can be very proud of the quality that is done. There are some areas where we conduct research at the USC School of Medicine as well as any place in the world. In the current environment, you need to water where the grass is green. You need to take your strengths and build on those and not necessarily try and start from scratch and build new research enterprises where no activity exists right now. As we think about our strategic plan for research, we not only need to think about the national landscape and where funding seems to be headed in terms of priorities, but we also need to see how those priorities intersect with strengths that we have in place. In those areas, we ought to be able to compete with anybody for additional funding and expansion of our research enterprise.

How do you plan to involve alumni in your vision for the School of Medicine?

Our alumni are the best ambassadors we have for the School of Medicine. They are products of our institution. They are living out the values they brought and the skills they acquired while they were students at the University of South Carolina. Alumni can do two things that will make a huge difference in how successful we are going forward. One is to keep pointing students in our direction and telling them about the excellent education opportunities at the University of South Carolina School of Medicine. The second is to support the programs and initiatives that make a difference in the lives of our students and school. My vision is that all of us will become much more generous in supporting our students through scholarships, and that we begin to really think boldly how the school might look in 10, 15 or 20 years if we established multiple endowed faculty positions that would attract, on an ongoing basis, the best talent to the University of South Carolina. There is a real opportunity to help shape the destiny of the School of Medicine for future generations by beginning to make those investments now.

Outside of your job responsibilities, what do you look forward to experiencing now that you are a new resident of South Carolina?

South Carolina is an area rich in culture and heritage, and my wife and I very much look forward to getting to know the state. My wife’s ancestors emigrated to Orangeburg from Switzerland in the early 1700s. One of our first trips outside Columbia was to visit the cemetery in Orangeburg County where her sixth- and fifth-great grandfathers are buried. Discovering the history and the heritage of the region will keep us busy for a long time. We are meeting many wonderful people from South Carolina who are making us feel very welcome.
Whole healing
As connections between mental illness and chronic medical illnesses are better understood, researchers and clinicians are looking for ways to integrate mental health care with primary care.

Because of a shortage of psychiatrists, the key to this integration might well be found in technology — the kind that allows a psychiatrist to “beam in” via tablet or computer screen to “meet” with a patient online, coupled with technology that keeps a patient’s health care record on one network that doctors can access with the touch of a button.

At the University of South Carolina School of Medicine, a team of researchers, clinicians and family doctors are identifying primary care patients who have symptoms of depression or anxiety. Using telemedicine, those patients are able to visit with a psychiatrist during their regular doctor’s visit and get an evaluation and course of treatment.

The goals are to make it easier for patients to get mental health care, which, in turn, can improve the way a patient handles co-occurring chronic illnesses, such as diabetes, high blood pressure or heart disease. For patients, this means no long waits for an appointment and obtaining a specialty care in the environment with which they are familiar. For doctors, it means that the specialist does not have to wait days to see patients or their lab work, and primary care providers are not waiting months to follow up with patients after a psychiatric consult.

Researchers also are hoping to show payers’ insurance companies and government health care programs like Medicaid and Medicare — how this collaborative treatment can save money in the long run while improving patient outcomes.

“The changing health care landscape has put a tremendous demand on providers and payers to improve health outcomes while reducing costs,” said Meera Narasimhan, M.D., professor and chair of the Department of Neuropsychiatry and Behavioral Science at the School of Medicine. “This can only be achieved by breaking down the silos between behavioral health and physical health.”

Narasimhan and Suzanne Hardeman, MSN, MRC, assistant professor of clinical psychiatry at the School of Medicine, are principal investigators on a three-year grant from the Fullerton Foundation to explore ways to use innovative technology to deliver affordable, collaborative health care. The team includes doctors at the Family Medicine Center, the university’s Palmetto Health-affiliated primary care clinic in Columbia. Family medicine clinicians identify those patients with depression or anxiety who would benefit from mental health consultations.

Without having to leave the doctors’ office, patients get a one-on-one session with a psychiatrist via a touchscreen tablet. Sometimes the interaction is so real, doctors say, patients will extend a hand to say goodbye before realizing the doctor isn’t in the room with them.

“Once I start the interview with the patient, it is just like the person is with me in the room,” said Asifa Choudhry, M.D., assistant professor of clinical neuropsychiatry and behavioral science and a clinician at University Specialty Clinics. “We are talking one-to-one, the patient is getting undivided attention, and the process is the same as seeing the patient in person.

“Patients seen via telepsychiatry get a complete assessment with the discussion of diagnosis and available treatment plan just as if they were seen in our clinic.”

Technology also plays a role in having the psychiatrist up to speed on patients’ lab work, medications and vital signs with access to the family medicine chart, Choudhry said. “It is so easy for me to go in and look up the vitals, all the previous labs, the medicine lists. When I write the medications, it is easy to check the drug-to-drug interactions and other medications they are on before prescribing.”

The medical goal is to help address both mental health concerns — primarily depression and anxiety — and accompanying chronic diseases like diabetes and hypertension. Managing the mental health issues can improve the way patients manage their physical illnesses.

“Some of these folks have been dealing with depression for quite a while,” Hardeman said. “Their physician introduces the idea of talking with a psychiatrist, so they are not totally apprehensive about seeing the specialist.”

Ashley Rippy, M.S., the study’s coordinator and health coach, works from the Family Medicine Clinic and takes the referrals. She coordinates the referrals with neuropsychiatry and prepares the patient for the telepsychiatry visit.

“Many of the patients have never used a tablet computer or heard of telemedicine,” she said. “Initially, they are skeptical but they quickly catch on to using the tablet and quickly get comfortable with talking to the doctor on the screen.”

Based on the clinician’s recommendations, Rippy provides health coaching for the patients.

Patient response has been positive, researchers say. “I liked it,” one patient said when asked for feedback. “I felt like I was able to talk more since the doctor was not actually in the room with me.”

The coordination also helps the primary care physician.

“Sometimes, it can be a struggle to get good feedback,” said Mark Humphrey, M.D., an assistant professor of clinical family and preventive medicine. “If I have to send them out to a specialist, it can be months until their next visit and I find out what the specialist said.”

That immediate feedback for the patient and doctor can lead to better management of diseases that are controlled as much by changes in diet and other behaviors as by medication.

“Definitely when someone’s mood is better, they treat themselves better,” Humphrey said.

Another piece of the study uses technology to help people who have depression or anxiety to quit smoking. “Everybody knows smoking is bad for you,” said Scott Strayer, M.D., a professor of clinical family and preventive medicine and a physician at Family Medicine Center. “And smoking rates are very high among people with serious mental illness.”

Using motivational interviewing techniques, Strayer developed an automated questionnaire called QuitAdvisor that patients can use on a touchscreen or laptop. The questions change based on the patient’s responses, which are used to gauge his or her willingness to quit smoking. From there, doctors can tailor a smoking cessation strategy based on the patient’s motivation to quit.

“I quit smoking in medical school and developed a passion for helping folks quit,” Strayer said. “There are many behavioral therapies that are very effective when they are used at the right time.”

The use of telepsychiatry in the outpatient clinic follows a similar research project that Narasimhan led on the delivery of psychiatric consultations via telemedicine in emergency rooms across South Carolina.

Patients needing mental health evaluations and treatment were able to see a psychiatrist immediately, even in rural areas where there were none on staff. After that project was completed and showed a cost savings of $2,500 per patient in the study.”

Cost saving appeals to insurance companies and other payers whose buy-in is key to getting psychiatrist participation, Narasimhan says. That is especially important in a state like South Carolina, which has just 10 psychiatrists for every 100,000 people. (That compares with the state of Maine, for example, which has 18 psychiatrists per 100,000 residents). Narasimhan and Hardeman have said they would like to see the current project spread beyond the university’s clinic after the research has been completed.
COMPETING IN A MARATHON CALLS FOR THE RIGHT TRAINING REGIMEN. DR. JOHN EBERTH AND HIS COLLEAGUES ARE COMING UP WITH A VASCULAR CONDITIONING PROGRAM THEY HOPE WILL HELP SURGEONS TRAIN BYPASS GRAFTS FOR SUCCESS IN THE LONG RUN.
The human heart chugs along 24 hours a day, running a relentless lifelong marathon. Modern medicine has extended the race for many people, and coronary artery bypass surgery is one reason why — more than 400,000 people a year undergo some version of the life-prolonging procedure in the U.S. alone.

John Eberth, Ph.D., an assistant professor of cell biology and anatomy in the School of Medicine, is working to ensure that as many of those patients as possible never experience a serious and not uncommon complication — the failure of the bypass itself.

Although complex in practice, a heart bypass procedure is simple in theory. When an artery that keeps the heart muscle supplied with oxygen-rich blood starts to clog, a surgeon will harvest a healthy blood vessel from elsewhere in the body and graft it into place to provide an alternate path for blood to flow.

Those newly grafted vessels, however, can become occluded and fail. Eberth is using a biomechanical approach to understand why — and develop ways to prevent failure.

“Historically, about 15 percent of grafts fail in the first year,” Eberth said. “But more recently surgeons started to harvest vessels from a different source, with better success.”

Originally, the primary source for coronary artery grafts was the saphenous vein, which comes from the leg. For many years, it was the blood vessel of choice for heart bypass surgery.

Over the past two decades, a vessel taken from the chest, the internal thoracic artery, has largely supplanted the saphenous vein as the blood vessel of choice for a bypass. Better long-term results is the major reason for the change. The 15 percent failure rate with the leg’s saphenous vein contrasts with about a five percent rate with the artery from the chest.

For an engineer with Eberth’s background — doctoral degree in biomedical engineering and bachelor’s and master’s degrees in mechanical engineering — the difference in results immediately begs a number of questions. To Eberth, the entire heart bypass enterprise seems to work a lot better than it might be expected to from a mechanical point of view.

“I was asking the question, ‘How do these vessels work, either of them?’” Eberth said. “How do saphenous veins even work 85 percent of the time? Because a vein is not an artery — it’s from a completely different environment.”

Arteries deliver blood from the heart to the extremities, whereas veins return blood to the heart. By virtue of being further downstream from the pump, veins operate under more steady-flow, lower pressure conditions than arteries.

Trying to get a vein to work in an arterial environment — particularly in one as demanding as that experienced by a coronary artery — would likely fail a lot more often if the grafted vessel remained unchanged. But, fortunately for bypass patients, blood vessels have an inherent adaptability.

The vasculature is able to ‘remodel’ its structure in response to new stresses. Generalized high blood pressure, for example, can bring about biomechanical changes in blood vessels that help ameliorate the overall effect. A vein placed in an arterial environment doesn’t stay the same in a cellular and biomechanical sense — it adapts.

Eberth and colleague Tarek Shazly, an assistant professor in USC’s Department of Mechanical Engineering, have begun looking carefully at the biomechanical makeup of grafted veins and arteries before and after placement. They have built and patented what they call the Descartes Perfusion Bioreactor, a device that can gradually change the pulsatile pressure and flow on a harvested vessel over the course of weeks to achieve mechanical objectives.

With it, they can assess how microstructure both correlates with mechanical conditions and changes when a vessel encounters new environmental conditions. Eberth has established that a saphenous vein and a thoracic artery have distinct baseline differences in the quantity and placement of fibrous, muscular and elastic tissue, and the Descartes Perfusion Bioreactor can be used to guide the remodeling processes.

Their device is more than just a research tool: The ultimate goal is to develop a way for physicians to condition blood vessels so that they are ready to be grafted into entirely new environments.

“Sometimes surgeons cannot use their first choice for a graft,” Eberth said. “Maybe the thoracic artery is compromised, or it is a quadruple bypass and you need to use more than one vessel. We want to develop a system where you can take the first, second or third option and condition it for the new environment.”
Keeping KeKe’s legacy alive through scholarship

THE KENSLEY “KEKE” FULLER MEMORIAL ENDOWED SCHOLARSHIP HELPS A SCHOOL OF MEDICINE STUDENT LIVE OUT THE DREAM OF AN ASPIRING YOUNG DOCTOR
KeKe Fuller was never your average little girl. Instead of a play kitchen, her playroom was set up like a doctor’s office where she wore scrubs and a surgical mask.

On a visit to the bookstore, she picked out an illustrated volume of human anatomy and physiology and had her dad, a family practice physician, read it to her at night. Her fascination with medicine began even earlier.

“When she was two and a half, KeKe saw me stretched out on the couch and asked me how tall I was,” said Sean Fuller, a 1995 School of Medicine graduate. “I told her, then she thought it over for a second and announced that she was going to be a six-foot woman doctor.”

By the time she was six, KeKe had settled on becoming a cardiothoracic surgeon — she learned to pronounce the word — and informed her science teacher she would not practice medicine with her father because he was “just a family practice doctor.” Every time the family drove past the School of Medicine, she declared that is where she would go.

But all of that precociousness and childhood energy disappeared on Memorial Day weekend in 2013 when the Fullers’ little girl developed a fever. Severe respiratory distress soon followed and within a week KeKe was at the Medical University of South Carolina receiving extracorporeal membrane oxygenation through a lung bypass machine.

“The hope was that her lungs would have a rest. But things never improved,” said her mother, Jillian Fuller.

Forty-seven days later, KeKe passed away, the precise cause of her respiratory failure a mystery even after extensive testing by the Centers for Disease Control.

“The hardest day of my life was when she died,” Sean Fuller said. “The second hardest was the next day when I had to tell her twin, Jack, that his sister was gone.”

In the free fall of grief that followed, the Fullers considered one idea and another to memorialize their daughter. How can anything capture the essence of a cheerful little girl who wanted to become a doctor and save lives? A memorial tree or bench just didn’t feel right.

“We no longer have our daughter’s future so memories of her become — ‘precious’ is not the word. You long for people not to forget,” Jillian Fuller said. “We want you to talk about our child.”

To that end, the Fullers and many of their friends and family created the Kensley “KeKe” Fuller Memorial Endowed Scholarship, a merit-based four-year scholarship for a USC School of Medicine student who has demonstrated interest in community service. The scholarship currently provides $5,000 per year, and the hope is to continue adding to the fund.

“We will never send KeKe to the School of Medicine, but with this scholarship, we can help someone else attend,” Jillian Fuller said. “So many people contributed to this scholarship, and they have a vested interest in how the scholarship recipient is doing.

“We’ve kidded John [Stathopoulos, the first scholarship recipient] that he might have seemingly random people stopping him on the street and giving him a hug.”

INSPIRED TO DO HIS BEST

Looking back, John Stathopoulos realizes that what inspired him toward a career in medicine was also a source of angst for his parents.

Stathopoulos, a rising M-II student at the School of Medicine, remembers as a kid going from one children’s hospital to another for his younger sister Julia. Now a student at Furman University, Julia was born with Freeman-Sheldon Syndrome, a very rare type of distal arthrogryposis that required — and continues to require — many corrective surgeries.

“Oh my God, they are doing something with my sister,” he recounted. “I was terrified. I decided that I needed to do something to help.”

Stathopoulos, who completed a biology degree at USC in 2014, uses his receipt of the Kinsley “KeKe” Fuller Endowed Memorial Scholarship as motivation, especially when he’s studying. “I don’t want to let them down; I push myself to do better,” he said.

Stathopoulos is leaning heavily toward becoming a pediatrician and realizes that the rewards of that calling are tempered by those inevitable cases when efforts to heal fall short. One of his mentors, Elizabeth Mack, M.D., ‘83, was Keke Fuller’s attending physician when she was first admitted to the hospital.

“She told me that you have to remind yourself as a doctor that you are doing your best. As long as you are doing your best, you can live with yourself,” he said.

To make a donation to the Kensley Fuller Memorial Endowed Scholarship Fund, please make check out to USC Foundations and mail to:

USC Gift Processing
1027 Barnwell Street
Columbia, SC 29208
Please note account number B11862 on the check.
As we tooled from interview to interview in his sporty AMC Pacer in the fall of 1977, Dr. Rod Macdonald regaled me with his vision for the newly minted medical school in Columbia and explained all the reasons why I should entertain joining his fledgling faculty. His enthusiasm and infectious salesmanship easily won me over, and for the next 30 plus years I had the privilege of being a part of his dream as the USC School of Medicine began to fulfill its “Promise in Practice” slogan.

Extremely affable and engaging, Dr. Macdonald could at times be domineering and forceful when necessary. He ran his weekly executive committee meetings with the precision of a surgeon (which he was) and, although his style was somewhat autocratic, he sought and listened to advice. Without question, under his leadership our fledgling medical school thrived. We admitted and graduated the first class of 24 medical students, achieved full accreditation, renovated and moved into the VA campus, and forged an affiliation with Richland Memorial Hospital. And, along the way, he successfully fended off legislative efforts to merge with MUSC and to abolish the school. Dr. Macdonald was one of the founding fathers of our School of Medicine in every sense of the word.

**Warren Derrick Jr., M.D.**
Professor Emeritus of Clinical Pediatrics
Chair of the Department of Pediatrics from 1977 to 2006

Dr. Roderick “Rod” Macdonald Jr. (1926-2014), the first permanent dean of the School of Medicine, died on November 24, 2014. Under his leadership, the school received accreditation and graduated its charter class in 1981. He initiated the application for a chapter of the Alpha Omega Alpha Honor Medical Society and became the first faculty member elected to the chapter in 1983. In 2001, he was named distinguished professor emeritus and dean emeritus of the School of Medicine. His friends and colleagues remember him as the steady voice that helped the School of Medicine navigate the challenging early years of launching a new medical school in Columbia.

Dr. Roderick Macdonald possessed remarkable skills and was a remarkable person. His public demeanor was quite formal, and he had quite a formidable exterior. Now, 35 years after I first met and worked for him in the dean’s office, I still vividly recall his pocket handkerchief, the huge MontBlanc fountain pen with which he initialLED memos and signed acceptance letters to applicants, his impressive desk, his high-backed leather desk chair, and his car’s “USCMD1” license tag. To this day, I still think that his photo or portrait would be the perfect illustration to accompany any dictionary’s definition of “medical school dean.”

His imposing public persona enabled him to fulfill his responsibilities at the then-unstable school: to maintain morale among the troops and recruit additional faculty and staff, protect the school from incursions while simultaneously fostering relationships within the community, develop a much-needed infrastructure and plan, implement a curriculum, and last, but not least, attract and retain excellent medical students. The strong foundation laid by Dean Macdonald has assisted the school in continuing to fulfill its mission “to improve the health of the people of the state of South Carolina…”

Beyond his serious exterior, Roderick Macdonald was a proud son, husband, father and physician. He was obviously smart, but he was also wise. He was a strong, but not overbearing leader, and he listened carefully to and responded to feedback. On a one-on-one basis, he was quite warm and personable, and he loved to tell and hear good jokes and stories. Somewhat surprisingly to some, he was open-minded in novel situations and could be a patient, helpful and empathic listener and colleague to faculty, staff and students who found themselves facing personal or professional challenges. Most important to me, he was a man of principle and lived out his principles every day.

**Robert Sabalis, Ph.D.**
Former associate dean for medical education and academic affairs
Worked at USC School of Medicine from 1978 to 2000
Dignified, highly intelligent, focused, kindly, principled—these are a few of the adjectives that come to mind when thinking of my late friend, Dr. Roderick Macdonald Jr., the first durable dean of the University of South Carolina School of Medicine. Dr. Macdonald is properly considered the founding dean since it was he who recruited most of the charter faculty, oversaw enrollment and graduation of the first class, and steered the school through its infancy despite opposition from some quarters. As a native son, whose father was a one-time president of the South Carolina Medical Association, Rod responded to the call to increase the number of practicing physicians in the Palmetto State.

Dr. Macdonald never claimed to be a visionary. I vividly recall lunch with him as I was considering leaving a nice private practice to become the first division director of infectious disease. I asked him point-blank: “What kind of medical school do you envision? Will this be a traditional medical school, or a new type of community-based medical school with little emphasis on research, geared mainly toward producing family doctors for rural areas?”

His answer was straightforward: “It will be a traditional medical school.” New medical schools — then as now — were being started with the hype that many, and perhaps most graduates, would become family doctors in medically-underserved areas. He understood correctly that medical school education provides undergraduate medical education for would-be-doctors. “Our aim,” he often said, “is to produce a totipotent medical graduate.” That was Rod: honest and straightforward.

Rod’s principles shone through when he resigned while under pressure to compromise the school’s integrity, bowing to an unreasonable request from a politician. Like Cincinnatus, he went back to his previous trade, which in Rod’s case was practicing ophthalmology in Richmond, Virginia. Fortunately, after retiring from practice, he came back [to Columbia]. For me, it was always a pleasure to see him — usually at Trinity Cathedral or at the convivial meetings of the St. Andrew’s Society. He was the quintessential southern gentleman.

Charles S. Bryan, M.D.
Heyward Gibbes Distinguished Professor of Internal Medicine
Director of the Division of Infectious Diseases from 1977 to 1993
Chair of the Department of Medicine from 1992 to 2000
Match Day ceremony reveals medical students’ future residency program

The culmination of four years of medical school came down to a few exhilarating minutes for 85 University of South Carolina School of Medicine students, as one by one they opened envelopes to learn their residency match and where they will start their careers as doctors.

USC students joined peers across the country in celebrating Match Day, the annual tradition where graduating medical students find out their future specialty and the hospital where they will begin residency. Hundreds of family, friends, classmates and supporters joined School of Medicine Executive Dean Les Hall, M.D., in celebrating the students’ achievements at the March 20 ceremony.

“We are proud of all of our students who reached this milestone in their medical careers,” Hall said. “The quality of the hospitals that they matched reflects well on the outstanding education they received from the School of Medicine.”

For fourth-year student Andy McNulty, Match Day represented an opportunity to follow in the footsteps of his father, William McNulty, M.D., ’82, and his brother, Sam McNulty, M.D., ’08, both graduates of the School of Medicine.

“It is meaningful to be part of family tradition at the School of Medicine and match at the same residency program as my brother,” McNulty said.

Andy matched in internal medicine at the Medical University of South Carolina in Charleston, the same program Sam matched seven years earlier. The aspiring medical oncologist sought advice from his dad and brother prior to ranking his preferred residency programs.

“My dad and brother told me repeatedly that this has to be my decision, and I needed to do what felt right to me,” McNulty said. “In the end, going to MUSC was the right choice for me.”

More than one-third of the class of 2015 will stay in South Carolina for residency training, including 11 students who matched with Palmetto Health/USC Residency Program.

The School of Medicine continued its tradition of training future physicians in the primary care areas of medicine. Of the 85 students who matched, 43 did so in the primary care specialties of family medicine, internal medicine or pediatrics. Additionally, 14 students matched in the specialties of emergency medicine, OB/GYN or psychiatry, which are all underrepresented in South Carolina.

To view the residency appointments for the Class of 2015, visit: http://www.med.sc.edu/2015_Match_Day_Results.pdf
**Watch recruitment video online**

A new recruitment video for the School of Medicine’s medical degree program debuted in February. The four-minute video invited future physicians to discover what makes the School of Medicine an outstanding institution for medical education and featured more than 20 current USC faculty and students. Production of the video was directed by the school’s Office of Marketing and Communications and the Office of Curricular Affairs and Media Resources. You can watch the video online at [www.youtube.com/USCSchoolofMedicine](http://www.youtube.com/USCSchoolofMedicine).

**Florence Day introduces students to clinical training opportunities**

More than 20 second-year medical students joined civic and health care leaders in Florence Day activities on February 25. The events introduced School of Medicine students to the Florence clinical training site and allowed them to tour health care facilities and explore potential medical education opportunities in the region. The School of Medicine partnered with McLeod Health, Carolinas Hospital System, Francis Marion University and the City of Florence to host the day.

**South Carolina Beta Chapter of Alpha Omega Alpha Honor Medical Society holds spring induction**

On March 19, the South Carolina Beta Chapter of Alpha Omega Alpha (AΩA) Honor Medical Society held its 2015 spring induction banquet. With 100 attendees, 15 students from the classes of 2015 and 2016 were inducted into AΩA, along with three resident physicians, two School of Medicine faculty members and two alumni. Don W. Powell, M.D., director for the Institute for Translational Sciences-Clinical Research Center at the University of Texas Medical Branch, was the AΩA visiting professor and guest speaker for the event. In addition, Charles T. McElmurray, M.D., associate professor of clinical family and preventive medicine at the School of Medicine, was recognized with the AΩA Volunteer Clinical Faculty Award.

**Inductees to the South Carolina Beta Chapter of Alpha Omega Alpha (AΩA) Honor Medical Society included:**

**Class of 2015**
- Megan Elizabeth Busch
- Christopher K. Clarke
- Scott Alan Davis
- Wallace Taylor Harris
- Collins M. Harrison
- Greg Hertwig
- Annemarie Verdin Neal

**Class of 2016**
- Kent Russell Edwards, Jr.
- Ashely Evens
- Brett Barbree Fowler
- Joseph Daniel Galloway
- Christina Hechu Li
- Rishi Ashok Patel
- Eric J. Schmieler
- Sean Michael Wadley

**Resident Physicians**
- Robert J. Collins III, M.D.
  - Internal Medicine – Palmetto Health
- India K. Holloway, M.D.,
  - Internal Medicine – Palmetto Health
- Cory Marie Mitchell, M.D.
  - Internal Medicine – Greenville Hospital System

**Faculty**
- Brian Keisler, M.D.
  - Department of Family and Preventive Medicine
- Thomas Oliver Young, M.D.
  - Department of Surgery, GHS

**Alumni**
- Tripp Jennings, M.D. – Class of 2003
- Dorothy Fowles Kendall, M.D. – Class of 1988
USC Family Medicine clinic opens at Two Medical Park

The Department of Family and Preventive Medicine is providing patients a new option in primary care medicine with the opening of the USC Family Medicine at Two Medical Park clinic in January. The nearly 5,000-square-foot clinic offers a comprehensive array of primary care services to meet the health care needs of patients of all ages including faculty and staff at the University of South Carolina.

Johan Hernandez, M.D., a bilingual and board-certified family medicine physician, leads the medical team at USC Family Medicine. The physicians and caregivers provide a variety of medical services including preventive care, chronic disease management, sports medicine, pediatric, women’s health and geriatric care.

Patients visiting USC Family Medicine enjoy the clinic’s innovative care delivery system. The new approach to delivering health care means the medical team meets a patient the minute he or she walks in the door and stays with the patient throughout the visit. There is no longer an extended period of waiting in the waiting room or time spent sitting alone in an exam room.

“Patients enjoy the shorter wait times and personalized approach that we will offer at USC Family Medicine,” said Hernandez, an assistant professor of clinical family and preventive medicine. “Every aspect of this clinic’s design came with the patient in mind. We want to provide quality and efficient health care that will ensure our patients will continue to lead a happy, healthy life.”

USC Family Medicine is open 8 a.m. to 5 p.m., Monday through Friday and is conveniently located in suite 203 at Two Medical Park. The clinic will offer same-day appointments to patients needing immediate medical care. To make an appointment, call 803-545-6200.

Vital Signs

Department of Orthopaedic Surgery’s S.M.A.R.T. program exams prepare student athletes for competition

More than 1,700 student athletes from 52 local high schools, prep schools and middle schools received free pre-participation exams during the 14th annual S.M.A.R.T. (Sports Medicine for Athletes and Recreational Teams) event on April 24-25 at Carolina Coliseum.

Hosted by the School of Medicine’s Department of Orthopaedic Surgery, in partnership with Delta Dental, Palmetto Health Children’s Hospital and the Marcus Lattimore Foundation, the event allowed medical professionals to examine local athletes and identify any potential health risks prior to competition. Several student athletes had the opportunity to meet former Gamecocks running back Marcus Lattimore and some were surprised to have Lattimore participate in their height and weight measurements.

In addition to having height and weight measured, student athletes received vision, blood pressure, general medicine and orthopaedic screenings during the event.

More than 100 physicians, athletic trainers, nurses and volunteers from the following organizations volunteered their time and expertise to provide the health exams:

- USC Department of Orthopaedic Surgery
- USC Department of Family and Preventive Medicine
- USC Department of Pediatrics
- USC Athletic Training Education Program
- Palmetto Health Emergency Department
- Palmetto Health Surgery Department
- Palmetto Health Parkridge Baptist Surgery Center
- Drayer Physical Therapy

The S.M.A.R.T. program was developed in 2001 by Jeffrey Guy, M.D., assistant professor of clinical orthopaedic surgery at the USC School of Medicine and medical director for USC’s Department of Athletics. The program was established to increase the level of medical care available to South Carolina’s secondary school athletes, especially those involved in high-risk contact sports.
Donald DiPette, M.D., FACP, FAHA, professor of medicine at the School of Medicine and health sciences distinguished professor at the University of South Carolina, has been named the South Carolina Department of Health and Environmental Control’s Hypertension Champion of the Year. The award recognizes a physician who has made significant improvements in the quality of care for patients diagnosed with hypertension. He received the honor during the 13th Annual Chronic Disease Symposium in Myrtle Beach.

Janice Edwards, MS, CGC, clinical professor and director of the School of Medicine’s Genetic Counseling Program, facilitated a joint statement from five of the nation’s leading reproductive medicine societies regarding expanded carrier screening in reproductive medicine. The joint statement was published in the March issue of the American College of Obstetricians and Gynecologists and advised health care providers how to perform expanded carrier screening, which can test for more than 100 genetic conditions simultaneously.

Richard Hoppmann, M.D., director of the Ultrasound Institute and the Dorothea H. Krebs Endowed Chair of Ultrasound Education, was elected president-elect of the Association of Academic Health Sciences Libraries (AAHSL) at the November meeting of the Association of American Medical Colleges (AAMC) in Chicago. AAHSL members include 158 health sciences libraries on campuses in the United States, Canada and overseas. Riley assumes the president position in November 2015.

Frank Spinale, M.D., Ph.D., professor in the Department of Cell Biology and Anatomy, received the USC Education Foundation’s Award for Research in the Health Sciences at the university’s faculty awards ceremony on April 29. Established in 1984, the award is considered among the most prestigious annual recognitions for research and scholarship given at Carolina and recognizes the many contributions of Dr. Spinale to the cardiovascular field.

Ruth Riley, assistant dean for executive affairs and director of library services, was elected president-elect of the Association of Academic Health Sciences Libraries (AAHSL) at the November meeting of the Association of American Medical Colleges (AAMC) in Chicago. AAHSL members include 158 health sciences libraries on campuses in the United States, Canada and overseas. Riley assumes the president position in November 2015.

Dora Woodrow, a manager in the Office of Human Resources, is the recipient of the School of Medicine’s William C. Gillespie Staff Recognition Award. Named after William Gillespie, a former employee in the School of Medicine’s finance office, the award recognizes an outstanding staff member at the school whose work performance stands out as an example for all to emulate. Woodrow joined the School of Medicine in 1996, and coordinates employee benefits among her many responsibilities.

Jack Wells, M.D., interim chair of the Department of Ophthalmology, chaired a study sponsored by the National Eye Institute and published by the New England Journal of Medicine that compared the effectiveness and safety of Eylea, Lucentis and Avastin, three commonly prescribed drugs to improve eyesight in diabetic patients suffering from macular edema. Researchers found all three drugs were effective in improving eyesight for people entering the study with mild vision loss. However, Eylea showed the most significant improvement in restoring vision for diabetics with eyesight of 20/50 or worse at the beginning of the study.

Katherine G. Stephens, PhD, MBA, FACHE, has been appointed as the associate dean for Graduate Medical Education (GME) by the University of South Carolina School of Medicine Executive Dean Les Hall, M.D. She will continue to serve as system vice president for medical education for Palmetto Health and as the designated institutional official for the Palmetto Health/USC School of Medicine GME programs.

In this joint leadership role, Stephens will oversee the administration of all GME programs, with responsibility for developing strategy to maintain program accreditation, innovating educational programs and efficiently operating the GME programs.

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Raising the Mainsail

Randy Bolton’s first sailboat was a catamaran named Dream Catcher. A few years later, eyeing the next horizon, the S.C. native and his wife bought two slips on the backside of Folly Beach and upgraded to a more tricked-out multihull, which the couple named Imagine. He envisions someday being on the water fulltime — just sailing, diving and enjoying a well-deserved retirement with his wife.

“Eventually, I would like to live on the boat and just sail around the Caribbean,” he said from behind his desk at the William Jennings Bryan Dorn V.A. Medical Center. “But I’m not ready for that yet.”

And that’s the thing about Bolton, who was named chief of surgical services at the V.A. in November. The University of South Carolina School of Medicine alumnus has a clear vision for the future — those two catamarans in the photographs on his office wall could not be more aptly named — but the only anchor he is truly ready to drop at this point is at the V.A.

It is not unfamiliar waters for the Greenwood native. Bolton received two degrees from The Citadel (physical education and biology) and was stationed in Charleston with the Army National Guard before coming to Columbia to enroll at the School of Medicine in 1980 on the G.I. Bill. He graduated in 1984 and completed his surgery residence in 1989.

After a branch transfer to the Air Force, the military sent Bolton to Boston University for additional surgery training. He spent three years at Boston Children’s Hospital performing cardiac and pediatric cardiac surgery.

A veteran heart and thoracic surgeon, Bolton can now point to extensive experience in private practice, academic practice and with the U.S. military. His transition into hospital consulting and administration began several years ago while with the Air Force at Wilford Hall Ambulatory Services Center in San Antonio. Since then, he has been recruited to build or improve multiple cardiothoracic surgery programs, including, most recently, the Cardiothoracic Surgery Clinic at Saint Rose Dominican Hospital in Las Vegas, an affiliate of Stanford University Hospitals.

“As I have gone along, I have enjoyed the administrative side of medicine at the same pace that I’ve enjoyed the surgical side,” he said. “For me, if I do two or three cases a week, I will be happy. I can spend the rest of my time taking care of the administrative side.”

At the V.A., among other things, he has been tapped to improve collaboration with the School of Medicine, where he has a joint appointment as a clinical professor. One of his first goals, he said, is to get the surgery residency program off probation.

It is a big job, but he is not under any illusions about what it will take to achieve everything he wants to accomplish. “The surgeon in me wants to see immediate results,” he said. “The hospital administrator in me realizes we’re talking fiscal years, not three weeks.”

As he has done at previous stops, Bolton has put together a wide-ranging but detailed agenda that includes everything from updating operating rooms to implementing more robotic technology; from recruiting new doctors with a strong academic background to encouraging students to publish; from reviving the thoracic and vascular surgery residency programs to, eventually, implementing a heart surgery program at the V.A.

“I will be satisfied when we get students, residents and faculty really close again, where we are all publishing, where that academic piece is really strong, where the students want to stay here to do their surgery residency,” he said. “And when they leave here, I want them to feel that they received an outstanding education.”

What he wants, in other words, is something like what he experienced as a medical student and resident back in the 1980s.

“When I left here, I’d had as good an experience as anyone could have anywhere, both in the medical school and in the residency program,” he said. “I did things and was exposed to things that I would not have seen elsewhere. I have always been able to hold my own in the medical profession with people who trained at the high-powered programs. Some of those folks did not get the same experience I had here.”

Call it a homecoming, call it the next chapter, call it going out on top — for now, the veteran surgeon just sees his new appointment as another case in need of his guidance and expertise. It also just feels right at this point in his career.

“My wife’s family is from this area, I am from this area. We knew we wanted to come back here to retire anyway, so we thought, ‘Why not move now and spend the rest of my career tackling a different sort of challenge?’”

After that, maybe he can lift anchor, he said, but right now retirement is the furthest thing from his mind. “I will get to that eventually,” he said. “But I am not ready to live on the boat just yet.”
Calendar of Events

**FRIDAY, SEPTEMBER 18**
**PLEDGE OF COMMITMENT CEREMONY**
5 p.m.
Koger Center for the Arts

**FRIDAY, OCTOBER 9**
**FALL ALUMNI BOARD MEETING**
3 - 4:30 p.m.
Humphries Board Room, Bldg. 3
Second floor, VA Campus

**SATURDAY, OCTOBER 10**
**SCHOOL OF MEDICINE TAILGATE**
Three hours prior to kickoff
Louisiana State University vs University of South Carolina
ETV, 1101 George Rogers Blvd.
Register by contacting Debbie Truluck at 803-216-3303 or Debbie.Truluck@uscmed.sc.edu

**FRIDAY, OCTOBER 23**
**WOMEN’S HEALTH RESEARCH FORUM**
8:30 a.m. - 3:30 p.m.
Russell House, University of South Carolina
whrf.med.sc.edu

**FRIDAY, MARCH 4, 2016**
**SPRING ALUMNI BOARD MEETING**
3 - 4:30 p.m.
Humphries Board Room, Bldg. 3
Second floor, VA Campus

**BLACK TIE/WHITE COAT GALA AND SILENT AUCTION**
6 - 11:30 p.m.
Location to be announced
Register/Gifts: Contact Debbie Truluck at 803-216-3303 or Debbie.Truluck@uscmed.sc.edu
All proceeds will benefit the School of Medicine Alumni Scholarship Fund and The Free Medical Clinic in Columbia. btwcgala.med.sc.edu

**SATURDAY, MARCH 5, 2016**
**CLASS REUNION DINNER**
6 - 9:30 p.m.
Location to be announced

Register by contacting Debbie Truluck at 803-216-3303 or Debbie.Truluck@uscmed.sc.edu

**ALUMNI, STUDENTS RALLY AT CAROLINA DAY AT THE STATEHOUSE**
An enthusiastic group of School of Medicine alumni, faculty and students rallied at My Carolina Alumni Association’s annual Carolina Day at the Statehouse on February 3. Wearing their white coats proudly, students met with local legislative leaders to advocate for continued support of medical education in South Carolina. The contingent from the School of Medicine joined more than 200 other USC supporters in lobbying legislative leaders to keep higher education affordable and sharing more about USC’s role in improving our state.
CLASS OF 1981
- John L. Holcombe, M.D. (family medicine) — “I was appointed to the full-time faculty in the UAB Department of Medicine, section of palliative medicine in May 2014. I am no longer seeing primary care patients. I enjoy the new challenge to develop as an educator for fellows, residents and students in the area of palliative medicine.”

CLASS OF 1984
- David W. Stroud, M.D. (obstetrics and gynecology) — “I am medical director for the Pregnancy Resource Center of Sikeston, (PRSC) a collaborative effort by local churches to provide an alternative to abortion and support for pregnant women throughout the Missouri Bootheel area. I became the first (PRCS), medical director in January of 2015. In addition to my medical duties, I was ordained to the priesthood in 2011, and installed as the Rector of St. Luke Orthodox Anglican Church, Diocese of the South, Anglican Church in North America in August of 2014.”

CLASS OF 1985
- Helen Stockinger, M.D. (internal medicine) — “I am working as a hospitalist at Spartanburg Regional Medical Center, which was chosen as one of the best hospitals in South Carolina by U.S. News & World Report. I will be teaching residents full time and am looking forward to that aspect of my job. I have been precepting Edward Via College of Osteopathic Medicine DO medical students and didn’t realize how much I loved teaching. It makes me appreciate my USC professors so very much.”

CLASS OF 1987
- Katie Hanna, M.D. (family medicine) — “I have taken a position on the Palliative Medicine Consultative Team at Greenville Hospital System. I’m excited about this new opportunity, after more than eight years doing home-based hospice practice. I also just attended a great palliative care immersion course in Asheville conducted by Four Seasons. If anyone has a chance to go, it is well worth it.”

CLASS OF 1988
- Steven Corso, M.D. (hematology/oncology), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

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CLASS OF 1994
- Lilly S. Filler, M.D. (obstetrics and gynecology) — “I retired June 30, 2014, after 22 years in private practice at Women Physicians Associates (WPA), OB/GYN. WPA was founded in August 1992, where I was a single practitioner initially, and then it grew to have seven female physicians. It was a wonderful experience for me, and one I enjoyed every day. I plan to spend my time enjoying and visiting our five grandchildren, doing community work, and editing the annual spring Holocaust Supplement in The State newspaper. I retired knowing I was leaving my practice to some wonderful, capable and talented physicians. Thank you to all of you who made my ride in medicine an experience of a lifetime.”

- Richard Frierson, M.D. (neuropsychiatry and behavioral science), was presented with the American Academy of Psychiatry and the Law’s Outstanding Service Award during the academy’s annual meeting in Chicago.

- Douglas Holtzman, M.D. (pediatric emergency medicine), is the medical director of pediatric emergency services for Trident Health. He helped open a new pediatric emergency department at Summerville Medical Center in November.

CLASS OF 1995
- Marilyn Ciesla, M.D. (anatomic and clinical pathology) — “I am still with Alexian Brothers Hospital in Illinois. This is Rebecca’s senior year in high school, and Jim is an associate dean at one of the colleges at Northern Illinois University.”

CLASS OF 1999
- Terry Gemas, M.D. (orthopaedic surgery) — “I am involved with my church, Saint Thomas Aquinas in Dallas, Texas, and the support I give to our military vets and local police and firemen through the nonprofit organization, Carry The Load. To honor them, I plan to walk at least 50 miles in 20 hours Memorial Day weekend...Holy, blisters!!!”
CLASS OF 1998

- **Tisha Boston, M.D.** (family medicine) — “When I applied to medical school, I wrote in my essay that I wanted to be able to provide care for those that otherwise might not have access to care. I recently took over as medical director for Palmetto Health’s Celia Saxon Clinic, an indigent clinic Palmetto Health has been running for years in the housing authority community that used to be Saxon Homes. I have also been named the medical director for the Palmetto Cares Program, Palmetto Health’s program that provides care system-wide for their uninsured population.”

- **Robert Underwood, M.D.** (emergency medicine), completed the Master of Health Care Delivery Science (MHCDS) program at Dartmouth College in Hanover, New Hampshire. This is a master’s degree that evaluates health care delivery system redesign from micro to macro levels, developing models that will maximize quality while decreasing cost — bending the value curve up in the new health care delivery environment.

- **Bauer Vaughters, M.D.** (endocrinology), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

CLASS OF 1999

- **Lisa Durette, M.D.** (child and adolescent psychiatry) — “As a Nevada Council of Child and Adolescent Psychiatry alternate delegate, I presented twice before the Nevada legislature as part of Nevada Children’s Week. I delivered presentations to key legislators, staff, and event attendees about workforce shortage issues and the expectations surrounding mental health services. I will be going to Washington, D.C., to participate in the legislative conference with AACAP (American Academy of Child and Adolescent Psychiatry), as I serve as the assembly delegate to AACAP from Nevada. It is an exciting year/legislative session with many mental health-related bills being proposed.”

- **Lloyd Kapp, M.D.** (pediatrics), started working as associate medical director at BlueCross BlueShield of South Carolina in December 2014.

- **Emily Nabors, M.D.** (family medicine), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

CLASS OF 2000

- **Courtney Rowell Tate, MGC** (genetic counseling), — “Pictured are Madison Elyse, 22 months, and Mason Emery, three years.”

CLASS OF 2001

- **Mitch Gunsky, M.D.** (family medicine) — “Nicole and I are doing great in Sumter. I have had the pleasure of working alongside some incredible folks at Colonial Family Practice during the past 10 years. We have actually expanded into a multispecialty group in order to take advantage of some of the talented doctors God has sent our way and to better serve our patients. Besides work, Nicole and I have kept busy with our church youth group, the new Sumter Free Medical Clinic, fishing, shrimping and taking some vacations. We just got back from snow skiing in Utah and this past summer we checked out Yellowstone with my parents.”

- **B. James McCallum, M.D.** (internal medicine), was appointed associate chief of staff for education at the Dorn VA Medical Center.

CLASS OF 2002

- **Jean Ann Lambert, MRC** (rehabilitation counseling), celebrated her 30th anniversary to Steve Lambert (Class of 1990, biochemistry doctorate program), a professor at Newberry College, with a trip to Italy and Malta. They have three children, Ben, who graduated from USC in philosophy, ’10, and works for Carnival Cruise Lines as assistant director in the entertainment department; Carson is at Newberry College and will be in the “Unto These Hills,” drama in Cherokee, N.C., this summer; and Anne Marie is an athlete and senior in high school. Jean Ann serves as the community resource director of Mental Health America of South Carolina, a non-profit advocacy, education and service agency. She travels the state educating the community on mental health issues and offering mental health first aid and suicide prevention certifications.
Kristen (Thomas) Zeller, M.D. (general surgery), welcomed a third child, Anna Fern, on March 24, 2014. She joins big brothers, Zachary (6), and Owen (2).

Christian, M.D. (anesthesiology/pain medicine), was elected to the School of Medicine Alumni Board at the full membership meeting October 31.

Wenzie Sun, M.D. (OB/GYN) — “Since I graduated, I married Henry Chang, M.D., ’04, (pediatrics). We both work in private practice in Columbia, Maryland. I work for Signature OB/GYN, which is part of Johns Hopkins. Henry joined The Pediatric Center, a private practice. We both help train residents from time to time. We have a two-year-old son named Alex.”

Heather J. Evans-Anderson, Ph.D. (biomedical science) — “I was awarded tenure and a promotion to associate professor at Winthrop University in May 2014. I was also elected vice president of the South Carolina Academy of Science.”

Tenley Murphy, M.D. (primary care sports medicine), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

Neesha Patel, M.D. (emergency medicine), and her husband, Kavan, welcomed their first baby, a son, named Mohan Kavan Patel, on January 18.


Heather H. Eidson, CRNA, MSN, MNA (nurse anesthesia), went on a mission trip to Ecuador with BaySide Medical Missions in November 2014.

Erin V. Trakas, M.D., FAAP, FCCM (pediatrics) — “After several years as a general pediatrician in Columbia, South Carolina, my husband and I moved to Pittsburgh so that I could complete a PICU fellowship. I have now completed the fellowship, and we have moved to Rochester, New York, where I am an assistant professor of pediatrics in the Division of Pediatric Critical Care at the University of Rochester Medical Center. We are expecting our first baby and could not be more excited.”

Courtney Brooks, M.D. (OB/GYN), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

Karissa Wilson, M.D. (family medicine) — “Jeremy and I have welcomed two children to our family, Anna Pauline (August 2013), and Benjamin James (November 2014). Jeremy and I both work at Christ Community Health Services in Augusta, Georgia.”
CLASS OF 2009

**Jared Gamet, M.D.** (emergency medicine) — “My wife, Sarah, and I are living in Windsor, Colorado. I continue to work at Cheyenne Regional Medical Center in Cheyenne, Wyoming, as a board-certified emergency medicine attending physician. I have been there since graduation from residency (summer 2012) and have thoroughly enjoyed it. It is a small-town emergency room but is still a Level II trauma center and provides a great working atmosphere. My wife is an emergency room nurse in the same ER. We have four girls, Adelae (6), Emi (4), Ellie (3), and Annabelle (born April 7, 2015). I never thought we would be a family of four girls! We are doing great and absolutely loving northern Colorado.”

**Leslie Gilbert, M.D.** (pediatrics), completed a pediatric hematology/oncology fellowship at Vanderbilt in June. She is moving back to South Carolina to work as a pediatric hematologist/oncologist at the Greenville Health System Children’s Hospital.

**Angelia Smith Natili, M.D.** (otolaryngology), will join Iredell Head, Neck, and Ear Surgeons, a private practice ENT group in Statesville, North Carolina, in August.

**William C. Richards, M.D.** (anesthesiology) — “After graduating from residency at the Medical College of Georgia in June 2013, I did locums work primarily at Tuomey Healthcare System in Sumter, S.C. In the meantime, I studied for, and passed, my anesthesiology boards in October 2014. I am now practicing at Lexington Medical Center where I started full time at the beginning of 2015.”

CLASS OF 2010

**Natalie Barnett, M.D.** (anesthesiology), welcomed a son, Whittaker Asher Pavlock, on January 28, weighing in at 9 lb. 4 oz.

**Andrew Glover, M.D.** (internal medicine), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

**William Palmer, M.D.** (internal medicine), was selected for the 2015 Mayo Brothers Distinguished Fellowship Award, the highest honor given nationwide by Mayo Clinic School of Graduate Medical Education nationwide. Endowed in 1915 by founders Drs. William J. and Charles W. Mayo, the award recognizes outstanding clinical performance, humanitarianism and scholarly activity.

CLASS OF 2011

**Timothy Bryan, M.D.** (orthopaedic surgery) — “My wife, Johanna, and I have had two more children while in Buffalo, New York. We are now a family of five with Savannah (5), Jackson (3), and Colton (8 months). We will finish orthopaedic residency in June 2016. I recently matched into my number one choice for spine surgery fellowship at Washington University in Saint Louis. I will start there in August 2016.”

**Ashley Davis, M.D.** (emergency medicine), and her husband, welcomed a boy to their family on January 15. She completed an emergency medicine residency at Palmetto Health Richland, and is currently working as a member of Carolina Care at Baptist Parkridge and Baptist hospitals in Columbia.

CLASS OF 2012

**Johanna Innes, M.D.** (emergency medicine) — “Chris Gainey, M.D., Ryan Smith, M.D. and I from the class of 2012 matched into emergency medicine at Palmetto Health. We enjoyed having the extra three years together, but now we are parting ways. Chris is staying at Richland to do a combined simulation medicine and EMS fellowship. Ryan is headed to Spartanburg to join the Spartanburg Regional Health System as an emergency room attending, and I am heading north to do an EMS fellowship at Erie County Medical Center/SUNY Buffalo. Chris and I went on a medical mission to Haiti in January with Heather Brown, M.D., ’08. It was an eye-opening experience for us, and a chance to share some of what we have learned here at Palmetto Health.”

CLASS OF 2014

**Cindy Oliva, M.D.** (emergency medicine), was elected to the School of Medicine Alumni Board at the full membership meeting on October 31.

**Meredith Richmond, M.D.** (family medicine) — “My husband, Chris Richmond, M.D., ’13, recently left for deployment to serve as a United States Navy flight surgeon as they tour around the world.”

**Hailey Woollen, M.D.** (pediatrics), was elected to the USC School of Medicine Alumni Board at the full membership meeting on October 31.
DISTINGUISHED PHYSICIAN ALUMNI AWARD

Barbara H. Amaker, M.D., class of ’90, is board certified in anatomic/clinical pathology and neuropathology and works with Pathology Sciences Medical Group (PSMG) in the Hampton Roads area of Virginia. The group provides pathology services to six area hospitals. In addition to her full time practice, she is in her third term serving as president of PSMG. She recently completed her term as president of the Virginia Society for Pathology and continues to serve as the chair of the credentials committee and president elect of the medical staff for Sentara Hospitals of Norfolk. As a community appointed faculty member at Eastern Virginia Medical School, she teaches second-year students and provides a one-on-one elective in gynecologic pathology for third-year students. When away from her duties, she sings in the church choir, does some acting with the church drama team and teaches an adult Sunday school class.

HUMANITARIAN ALUMNI AWARD

R. Thomas Reach, M.D., class of ’86, is president and founder of Watauga Recovery Center and president of the Watauga Foundation, a non-profit organization helping individuals recover from substance abuse in Johnson City, Tennessee. He opened the center in 2010 after a lengthy career in family and emergency medicine in the Tri-Cities area. His vision was to establish an addiction practice with a medical, psychosocial and spiritual approach. Today, the center has five locations offering a message of hope, compassion and non-judgmental treatment to those suffering from active addiction. A board-certified physician in family medicine, as well as addiction and emergency medicine, he completed residency training at Roanoke Memorial Hospital in 1987, and family medicine training at East Tennessee State University—Johnson City in 2007.

DISTINGUISHED YOUNG PHYSICIAN ALUMNI AWARD

William E. Bynum, M.D., class of ’10, is an attending faculty member at the National Capital Consortium’s Family Medicine Residency in Ft. Belvoir, Virginia and an assistant professor at Uniformed Services University of the Health Sciences in Bethesda, Maryland. As a junior faculty member, he has immersed himself in training residents and students in the U.S. military and currently cares for military members, veterans and their families. He has traveled with two U.S. Congressional delegations to 10 overseas countries as the delegation’s physician, and he is currently developing a five-year project between the NCC Family Medicine Residency and a military hospital in El Salvador. Since 2011, he has served on the Association of American Medical College’s Organization of Resident Representatives (ORR) and recently completed a year as chair of the organization. During his time in ORR, the group has emerged as a national leader in efforts to understand and eradicate learner mistreatment, and he has presented widely on the topic.

DISTINGUISHED DOCTORATE ALUMNI AWARD

Xingzhi Xu, Ph.D., class of ’00, is a professor at Capital Normal University (CNU) College of Life Sciences in Beijing, China. He is the founding director of the Beijing Key Laboratory of DNA Damage Response and the deputy director of the Beijing Society for Cell Biology. His research focuses on how DNA damage response maintains genome integrity and prevents carcinogenesis. He has 51 peer-reviewed publications and serves on the editorial boards for DNA Repair, Scientific Reports, and several other journals. Since 2009, he has served on the study sessions for the National Science Foundation of China. Following his graduation from USC, he completed a postdoctoral fellowship at Yale Medical School and a Beckman Fellowship at the City of Hope National Medical Center in California. He joined the faculty at CNU in 2006.
DISTINGUISHED MASTER’S IN GENETIC COUNSELING ALUMNI AWARD

Peggy M. Walker, M.S., CGC, class of ’08, is a board-certified genetic counselor and clinical assistant faculty member at the University of South Carolina’s Genetic Counseling Program. In her role, she counsels patients with hereditary breast cancer and other hereditary cancer syndromes. As an educator, she teaches core courses in medical genetics to genetic counseling students and provides the only human and medical genetics course at USC for allied health care graduate students and honors college students. Her strong commitment to patients is evidenced by her regular attendance at weekly Palmetto Health Richland and Palmetto Health Baptist multidisciplinary breast cancer case conferences for individual patient reviews and treatment planning. She also provides genetic counseling services monthly at an outreach clinic at McLeod Oncology Associates in Florence, S.C. Prior to entering the genetic counseling field, she worked 20 years at 3M Company in St. Paul, Minnesota, with her last position as a marketing and business development manager in 3M pharmaceuticals.

DISTINGUISHED MASTER’S ALUMNI AWARD

Catherine G. Gutshall, CRNA, DNAP, class of ’11, is an assistant professor and assistant director of the University of South Carolina School of Medicine’s Nurse Anesthesia Program. After 15 years of nursing — primarily in the ICU — she pursued a career in nurse anesthesia at USC School of Medicine. With an interest in patient safety and simulation, she continued her education at Virginia Commonwealth University, receiving a doctor of nurse anesthesia practice degree in 2012. Her doctoral project, Emotional Enhancement of the Simulation Experience, received the A.D. Williams Scholarly Achievement Award. In the nurse anesthesia program, she is developing a simulation program that focuses on Dr. David M. Gaba’s principles of anesthesia crisis resource management.

HONORARY LIFETIME MEMBERSHIP AWARD

Nancy A. Richeson, M.D., is assistant dean for clinical curriculum and assessment at the University of South Carolina School of Medicine. She joined the school as an instructor of medicine in 1983, following residency training at Richland Memorial Hospital and Dorn VA Medical Center. During her more than three decades of service to the School of Medicine, she has touched the lives of many students and helped shape their education and understanding of medicine. For 17 years, she served as a faculty member in the Department of Internal Medicine holding various roles including residency program director and vice chair for education. In 2000, she was appointed as the school’s first and only assistant dean for clinical assessment. As a medical educator, she has directed the second-year introduction to clinical medicine course for 15 years as well as overseeing the fourth-year capstone experience. Recognized four times as teacher of the year, she has made it her mission to ensure that students have the best clinical skills training possible, particularly in the areas of medical history taking and physical diagnosis.
School of Medicine alumni from across the country traveled to Columbia for the annual class reunions dinner on March 7. The gathering offered the opportunity for classmates to reconnect and relive their days as a medical student at USC. More than 150 graduates from the classes of 1985, 1990, 1995, 2000, 2005 and 2010 enjoyed dinner and a program led by Executive Dean Les Hall, M.D., and Alumni Director Debbie Truluck. The graduating classes raised $35,000 to support the School of Medicine’s Alumni Scholarship Fund.

1. Class of 1985 (left to right) — Bob Dorn, Craig Ward, Darrell Boykin, Earl Scott, Jamie Koenig, Bob Ireland, Chuck Heath and Hud Paschal

2. Class of 1990 (left to right) — Front Row: Leroy Robinson, Barbara Amaker, Brigid Morris, Cynthia Snell and Carol Heebner; Back Row: Steve McElveen, Myron Barwick, Dave Amaker, Rob McElyman, Kevin Baugh, Terry Norton and Stuart Hooks

3. Class of 1995 (left to right) — Front Row: Brandon Whiteside, Brian Polsky, Rohit Taiwani, Tracy Tindle, Toni Hogan, Kylian Hutchinson, Charlotte Riddle, Jerri Lynn Shealy and Terry Gemas; Back Row: Kevin Sattele, Mike Metford, Doug Morrison, Steve Freeman, Laura Ledlie, Eric Lewkowitz, Bill Phillips, Paul Alitchison, Eric Beckner and Keels Jorn

4. Class of 2000 (left to right) — Front Row: Tanya Seawright, Melissa Hummel, Eva Imperial, Nikki Campbell and Natalie Sharp; Back Row: Mike Kaczmarek, Brandon Brown, Glen Dougherty, Kyle Hewett, Trey Brown, Trey Darby, Tasha Ruth, Carols Sanchez and Tripp Bell

5. Class of 2005 (left to right) — Front Row: Stephanie Matthews, Joe McGowan, Tyler Smith, Beth Remwic, Melanie Blackburn, Rebecca Payne, Jennifer Knight and Alex Duvalt; Back Row: Blake Long, Bethany Markowitz, Becky Coefield-Floyd, Daniel Dick, Alison Johnson, Eric Rowson, Chris Ballou and David Stoll

6. Class of 2010 (left to right) — Holly Glover, William Palmer, Virginia Earnest, Robert Hazelrigg, Celeste Beaudoin, Matt Gaskins and Andrew Glover
The School of Medicine’s largest fundraising event of the year proved to be another memorable evening for the more than 500 friends and supporters who attended the Black Tie/White Coat Gala at 701 Whaley on March 6. Guests enjoyed fabulous food, entertainment and silent auction items. The event raised more than $60,000, with the donations split evenly between The Free Medical Clinic in Columbia and the Alumni Scholarship Fund.

1. Guests arrived by car and by...bus? Alumna Beth Renwick, ’05, arranged for some of her classmates to make their entrance at the gala on the Midlands Biofuels bus

2. Cocky with (left to right) Rose Ann Hall, Les Hall, M.D., Souvik Sen, M.D., Nandini Sen, Ph.D., James Selph, M.D., Carter Hassinger, R.N., and Maggie Jamerson Selph, DNP

3. The class of 2015 breaks out in a flash mob to Bruno Mars’ song “Uptown Funk”


5. The 2015 Black Tie/White Coat Gala planning committee (left to right)
   Front Row: Kourtney Snodgrass, Emily Miller, Meg Maultsby, Hannah Purcell, Mackenzie Gwynne, Tara Hoff, Christina Abrams, Sierra Burgin and Kiera Goff;
   Back Row: Blake Goodbar, Joey Cao, Scott Davis, Garrett Holder and Andrew Peters

6. Kourtney Snodgrass from the class of 2015 enjoys a dance with Cocky
Dr. Atul Gawande delivers commencement address to class of 2015


During his remarks, Gawande reflected upon the difficult decisions everyone faces when confronted with one’s own mortality and the mortality of loved ones. His message was of particular importance to the 135 School of Medicine graduates about to enter the health care profession as they face the realities of caring for, or contributing to, the health and well-being of patients.

“Everyone has loyalties that they live for larger than themselves,” Gawande told graduates. “Those loyalties, in the end, are what they want us to serve with our care.”

Gawande ended his remarks by reminding graduates not to lose sight of priorities in people’s lives and that there are few greater privileges in the world than being a doctor and health care provider.