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CHIRONIAN

NEW YORK MEDICAL COLLEGE

FALL / WINTER 2014



**SIMULATED ENVIRONMENT
REAL-LIFE LEARNING:**
NYMC Launches State-of-the-Art
Clinical Skills and Disaster
Medicine Training Center

CHIRONIAN

New York Medical College
A Member of the Touro College and University System

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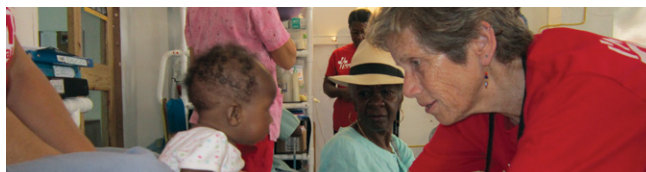


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LINEAR AND CIRCULAR TIME

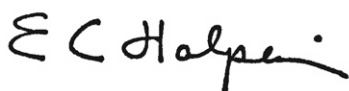
Time is both linear and circular. When it is linear we move from event to event in what we strive and hope to be a progressive, forward fashion. When time is circular we repeat events that we have previously experienced.

The time rhythms of this College are often circular. The National Residency Match occurs, then graduation, and the campus briefly becomes quiet as the senior students leave. Then, within a few weeks, there is a bustle of activity as the new class arrives, orientation takes place, and the student body settles down to the routine of lectures, laboratories, and examinations, clinical rotations, and laboratory research. Then, in the Spring, the Match takes place, another graduation, and another new class arrives.

Over the space of a year, time at the College is also linear. Over the past year there have been many events demonstrating, convincingly and repetitively, progress at New York Medical College.

- We have decommissioned the Munger Pavilion and renovated and occupied the new 250,000-square-foot Skyline Building containing faculty offices and administrative and instructional facilities;
- The School of Medicine has received a record high number of applications and the percentage of students accepting offers of admission over the past two years has risen 160 percent;
- We have renovated and opened the Dana Road building with its state-of-the-art Clinical Skills and Disaster Medicine Training Center and biotechnology incubator;
- The School of Medicine has continued our historic mission of educating those historically impeded in acquiring a medical education. Twenty-one percent of the first year class are under-represented minorities, one of the highest percentages in the state of New York;
- In partnership with Touro College we have obtained an investment grade bond rating for tax-exempt bonds, issued those bonds, and found that they were over-subscribed—a seal of approval in the financial marketplace;
- We have expanded our class size in the graduate programs in physical therapy and speech-language pathology;
- In partnership with Touro College we have opened a new M.S. in Biology Education to help supply science teachers to the school systems;
- We have signed new academic affiliation agreements with Brookdale University Hospital and Medical Center in Brooklyn and Saint Michael's Medical Center in Newark;
- Construction barriers are appearing on our Valhalla campus and our Paterson regional branch campus as we begin work on new walkways, a residency hall, and driveways;
- Our graduate medical education program has achieved the extraordinary milestone of 12 years of reaccreditation and 55 residency programs all fully accredited; and
- Our faculty continue to garner a substantial number of peer-reviewed research grants and contribute to the published biomedical literature.

While we remain true to the core values of New York Medical College in the circular rhythms of academic time, we are excited by our forward progress in linear time. Great things are happening here.



Edward C. Halperin, M.D., M.A.
CHANCELLOR AND CHIEF EXECUTIVE OFFICER



NEWS Briefs

NYMC Receives Unprecedented 12-Year ACGME Accreditation

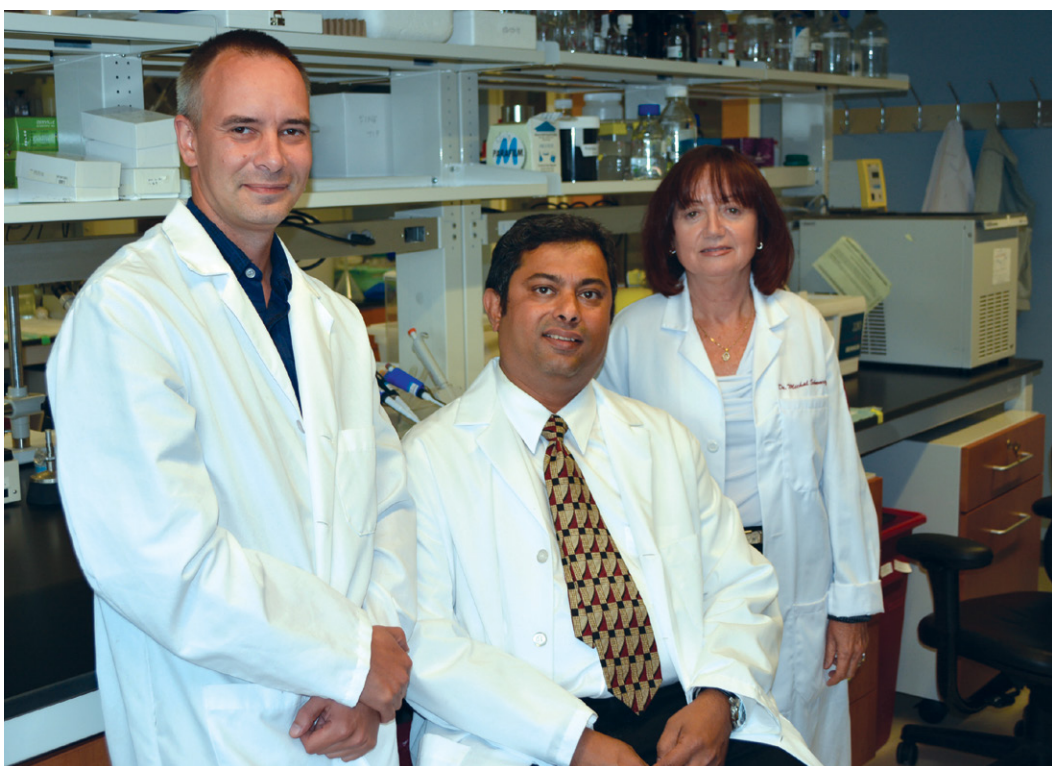
The Accreditation Council for Graduate Medical Education (ACGME), a professional organization that reviews and accredits institutions that sponsor residency training programs, has extended New York Medical College's accreditation for a period of 12 years. In May of last year, under the former accreditation system, the College was granted full accreditation for five years through 2018, the maximum period allowable for an institutional sponsor of residency and fellowship programs.

On July 1, 2013, the ACGME introduced a new accreditation model, the Next Accreditation System (NAS), a competency-based accreditation developed to reduce administrative burden, facilitate innovation, improve patient safety, and enhance quality of patient care. Under the NAS, New York Medical College's accreditation was extended to the year 2025. ■



The Department of Pharmacology is Proud to Host a Fulbright Scholar

In March 2014, Igor Kizub, Ph.D., arrived at New York Medical College from Kiev, Ukraine, as a Fulbright Visiting Scholar to conduct research under the mentorship of Sachin Gupte, Ph.D., associate professor of pharmacology. Dr. Kizub, a senior researcher at the Institute of Pharmacology and Toxicology of the National Academy of Medical Sciences of Ukraine, became interested in Dr. Gupte's work on the mechanisms of hypoxic pulmonary artery constriction. Both Drs. Gupte and Kizub had connected through a mutual colleague at King's College in London who works in the area of lung physiology and pharmacology. Fast-forward a few months after diligently working on and preparing the paperwork to achieve this prestigious award, the two researchers began their collaboration on "The Role of Gap Junctions in Hypoxic Pulmonary Vasoconstriction Development," and they are confident that it will be published at the end of the six-month program. ■



From left: Igor Kizub, Ph.D., Sachin Gupte, Ph.D., and Michal L. Schwartzman, Ph.D., professor and chair of the Department of Pharmacology.

NYMC is Pleased to Announce New Academic Affiliations

New York Medical College has increased clinical training opportunities for undergraduate and graduate medical students with two new affiliation agreements.

In June, the College announced an academic affiliation with Saint Michael's Medical Center (SMMC), in Newark, N.J., designating SMMC as a teaching site.

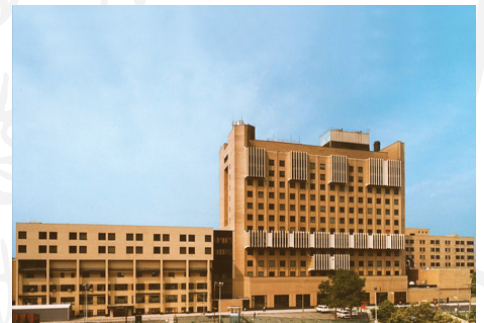
The new agreement sets forth SMMC's participation in NYMC's programs of undergraduate and graduate medical education, defines its responsibilities as a site for clinical rotations for medical students, and describes how it will support various research activities. Both institutions share a commitment to providing students with strong clinical education programs, research opportunities, and extensive resources.

In July, NYMC entered into an academic affiliation agreement with Brookdale University Hospital and Medical Center, in Brooklyn, N.Y. The partnership establishes an undergraduate medical student training program at Brookdale to train and educate NYMC's undergraduate medical students during required and elective

rotations in medicine, pediatrics, surgery, obstetrics/gynecology, psychiatry, family medicine, neurology, as well as other disciplines. Training opportunities also will be established at Brookdale for NYMC graduate students in speech-language pathology and physical therapy. ■



Saint Michael's Medical Center



Brookdale University Hospital and Medical Center

NYMC Welcomes New Chairman

Stephen J. Ferrando, M.D., a nationally recognized physician, researcher, author, and educator, has been named chairman of the Department of Psychiatry and Behavioral Sciences at New York Medical College and director of Psychiatry at Westchester Medical Center. Dr. Ferrando was previously professor of clinical psychiatry and clinical public health, as well as vice chair for psychosomatic medicine and departmental operations in the Department of Psychiatry at New York-Presbyterian/Weill Cornell

Medical Center. He also served as Dewitt Wallace Senior Scholar in the Department and the Associate Medical Director and Vice Chair for Clinical Programs for New York-Presbyterian/Westchester Division. He attended Northwestern University Medical School, completed his psychiatry residency training at the University of California, San Francisco, and subsequently did a National Institute of Mental Health-funded HIV/AIDS research training fellowship at Weill Cornell. ■



NEWS Briefs

Class of 2014 Finds the Perfect Match

The School of Medicine Class of 2014 waited patiently for the stroke of noon on Match Day, March 21, to tear open their envelopes from National Resident Matching Program, to find out where their residency training would be. Cheers, yells, and big smiles filled the Medical Education Center lobby when the Class of 2014 learned they will head off to train in 19 different

specialties in 24 different states—with the highest numbers in New York (48 percent), California (18 percent), Connecticut (12 percent), Massachusetts (8 percent), and Pennsylvania (7 percent). Fifteen percent will complete their residencies at NYMC-affiliated hospitals including Westchester Medical Center, Metropolitan Hospital Center, Norwalk Hospital, and

Saint Joseph's Healthcare System. Top career choices were internal medicine (16 percent), pediatrics (13 percent), radiology (12 percent), and anesthesiology (10 percent). Forty-two percent of the class chose programs in primary care, including internal medicine, pediatrics, family medicine, or ob/gyn. ■



Expanding Our Campus and Staying at the Forefront of Medical Education

New York Medical College has expanded and transformed its campus to offer students new opportunities and enhance their education. In 2013, NYMC acquired 19 Skyline Drive, a 250,000-square-foot, five-story building. In addition, 7 Dana Road has been completely redesigned into a state-of-the-art Clinical Skills and Disaster Medicine Training Center and biotechnology incubator.

These essential improvements were made possible when NYMC joined the Touro College and University System in 2011. “Joining with Touro brought an infusion of talented people with exciting ideas,” said William Angus Steadman II, vice president for strategic planning, vice provost, and senior associate dean, School of Medicine.

SKYLINE

The Skyline Drive building has provided NYMC with essential space for offices and new programs. Faculty and staff have moved out of the aging Munger Pavilion into Skyline Drive which offers three times the usable square footage. In addition to administrative offices and student services, the building is the future home of a dental school, a nursing school, as well as a new biomedical ethics program and a physician assistant program. The building has a 112-seat auditorium, a library, and a cafeteria. A driveway and a lit walking path are planned to improve campus connectivity.

7 DANA ROAD

Meanwhile, 7 Dana Road has undergone a dramatic transformation into a cutting-edge facility that houses NYMC’s Clinical Skills and Disaster Medicine Training Center and BioInc@NYMC. The 21,000-square-foot building was built with a target LEED (Leadership in Energy and Environmental Design) certification target of silver and boasts an auditorium with a 115-person capacity, as well as a conference area for multifunctional purposes such as small group learning.

The Clinical Skills and Disaster Medicine Training Center provides hands-on training to students, physicians, and other healthcare professionals in a simulated hospital setting. “Here, they can practice their skills in a very realistic environment,” said Robert W. Amler, M.D., M.B.A., vice president for government affairs and dean of the School of Health Sciences and Practice. “We are using actors that pose as patients and high-tech mannequins designed to exhibit specific clinical conditions.”

For example, the mannequins respond in a lifelike way to medications and interventions, such as intubation. “They actually gasp and sigh,” said Dr. Amler. “Students get to practice before they encounter actual patients.”

BIOINC@NYMC

BioInc@NYMC is a biosciences business incubator designed to house start-up biomedical research and development companies. Here, independent entrepreneurs will develop new drugs, medical devices, and medical apps for smart phones and tablets. “It’s for scientists and bioengineers who want to share their ideas, get feedback, and have access to NYMC’s intellectual resources,” explained Mr. Steadman. “The idea is to get people out of their garages and into labs where they can build new products and move forward.” The first incubator clients are expected to begin occupancy later this year.

All of these changes “set the stage for a new milieu for our educational mission,” stated Edward C. Halperin, M.D., M.A., chancellor and chief executive officer. “NYMC is very proud of our new facilities, technologies, and modalities for training and educating the healthcare leaders of tomorrow.” ■





ANNETTE CHOOLFAIAN, R.N., M.P.A.,

Rallies Students to Improve Health Care

BY Andrea Kott, M.P.H.

Some health policy experts will bend your ear about America's broken health care system. Others, like Annette Choolfaian, R.N., M.P.A., will make you want to fix it.

Choolfaian acknowledges the enormity of the challenge. As a clinician, administrator, and public health leader, she knows that poverty, access barriers, disparities in care, and fragmented delivery still plague the system. Yet, she believes that all health care professionals are bound to do something, no matter how small, to help improve it.

"It is our collective responsibility to provide organized, effective and efficient health care," the newly retired professor of practice and chair of the Department of Health Policy and Management in the School of Health Sciences and Practice, told the graduating Class of 2014. "Think about solutions. There are always alternatives."

EARLY ASPIRATIONS

The desire to make a difference in people's lives has shaped Choolfaian's career. From

“It’s one thing to care for hundreds of patients, and another to deal with hundreds of minds of people who organize and deliver patient care for many thousands of patients.”

Annette Choolfaian, R.N., M.P.A.

the time she was a teenager, caring for her ailing grandmother, she wanted to be a nurse. “My fundamental drive as an adult has always been a helping force,” she says. Steadily, this ambition became a crusade to improve access to and quality of care for all Americans, particularly the underserved.

Early on, she stood out as a leader. Just one year after graduating from the University of Bridgeport College of Nursing in 1964, she advanced from staff nurse at Montefiore Medical Center to nursing supervisor. Within a year, she became director of nurse recruitment, then assistant director of nursing. “Wherever I am, I’m always the go-to person,” she says.

Choolfaian loved nursing, but she wanted to have a broader effect on patients’ lives by tackling systemic barriers that

prevented them from getting the care they needed due to “cattle-car” clinics where patients competed for care, had inadequate rehabilitation services, and lack of health insurance. “You come to a fork in the road where you have to make a decision, either to advance your clinical skills or to go into management,” she says. “I understood that there was a lot we could do on an operating level at a hospital, but fundamentally, we could not change the way we delivered care if we didn’t change health policy.”

FROM PRACTICE TO POLICY

She charted her course toward health care management. She left Montefiore for Long Island Jewish-Hillside Medical Center, where she became associate administrator of community and ambulatory services, and later collaborated with Empire Blue Cross and Blue Shield to establish a hospital-based group practice. “We developed the first insurance-hospital partnership,” she says. “We changed ‘cattle-car’ clinics to primary care clinics.”

Robert W. Amler, M.D., M.B.A., dean of the School of Health Sciences and Practice and vice president for government affairs, says Choolfaian “has an extra ability to bring people together, rally them around an objective, and see it through to completion.” Indeed, these are the skills that she harnessed to help rescue the bankrupt St. Luke’s-Roosevelt Hospital Center. As executive vice president and chief operating officer from 1980 to 1990, she restructured the hospital’s ambulatory care services, revamped its teaching program, and secured better patient reimbursements. In response to the burgeoning AIDS crisis, while at St. Luke’s-Roosevelt Hospital Center she supported the establishment of the first patient care programs for AIDS patients. She and her team also worked with the New York State Department of Health to develop reimbursements and services for patients statewide. She also supported the effort to close New York City’s bathhouses. “We helped get the epidemic under control.”

In the accomplishments that have marked her 50-year career, Choolfaian modestly describes herself as “one of many players.” Individually, however, she has consulted for many local, state, and international organizations, like the Greater New York Hospital Association, The Health

Care Association of New York State, the U.S. Department of Health and Human Services, and the health ministries of the Armenian and Czech republics, among others. Her honors, too numerous to name, include the Ellis Island Medal of Honor, the American College of Health Care Executives’ Regents Award, and Teacher of the Year at the College’s School of Health Sciences and Practice.

ACADEMIA CALLS

In 1991, when she was asked to be a consultant for the Department of Health Policy and Management, Choolfaian hadn’t planned on becoming an academic. Yet, she concluded that teaching future health care managers was the most effective way to change the health care system. “It’s one thing to care for hundreds of patients, and another to deal with hundreds of minds of people who organize and deliver patient care for many thousands of patients,” she says. “What better effect can you have?”

In its earliest days, the Department had only one full-time faculty member, 40 students, and a master’s program. After thirteen years under Choolfaian’s leadership, it has 150 students, a doctoral program, both on-campus and online M.P.H. programs, certificate programs in emergency preparedness and global health, eight full-time faculty members, a large cadre of well-known adjunct faculty, and faculty with several research grants. “She helped to mature a small public health initiative into a full degree program with multiple specialties, and a sizeable faculty and student body,” Dr. Amler says. “She’s leaving a solid legacy that the program will build upon in the future.”

She’s also leaving her students with this dictum: “Make a difference.” They can do this, she insists, by learning the facts and informing others about health care programs and the Affordable Care Act, joining committees, volunteering for community groups, and participating in the electoral process. “Nothing ever happens if you don’t try to do something,” she says. “Every individual has the power to contribute to change.” ■

A photograph of three medical students in white lab coats practicing on a medical training mannequin in a clinical setting. The student in the center, wearing a red stethoscope and blue gloves, is focused on the mannequin's chest. The student on the right, also in a white lab coat and blue gloves, is observing the procedure. The student on the left, wearing glasses and blue gloves, is holding a yellow container. The mannequin is lying on a gurney, secured with black straps, and has various medical sensors attached to its chest. In the background, a monitor displays vital signs, and medical equipment is visible. A semi-transparent white box with the text "SIMULATED ENVIRONMENT, REAL-LIFE LEARNING" is overlaid on the center of the image.

SIMULATED ENVIRONMENT, REAL-LIFE LEARNING



NYMC Launches State-of-the-Art Clinical Skills and Disaster Medicine Training Center

By Nelly Edmondson

The patient was in bad shape. The 39-year-old male was having difficulty breathing, his arms, neck, and face were an angry red, and his tongue and face were swollen. His heartbeat was rapid, but his blood pressure was abnormally low. He said that his symptoms began shortly after he finished lunch at a health food restaurant, where he ate a grilled chicken sandwich, steamed vegetables, and salad. He said he was allergic to peanuts, but didn't recall eating any.

The medical students examined the patient and concluded that he was suffering from anaphylactic shock, surmising that something in his lunch—perhaps the salad dressing—had, in fact, contained traces of peanuts.

Fortunately, the patient wasn't a real human being. Rather, he is one of New York Medical College's computerized, mannequin-based simulators that are among the innovative teaching tools being used at the new Clinical Skills and Disaster Medicine Training Center. In addition to the mannequins, students work with standardized patients, specially trained, professional actors that play the role of patients with different symptoms and ailments.

A WELCOME ADDITION

Located at 7 Dana Road, the recently renovated 21,000-square-foot Training Center provides cutting-edge resources and technology to enable students to practice a wide range of clinical skills in a safe and controlled environment before treating actual patients. Inside the facility, there are 20 fully equipped exam rooms complete with two closed-circuit cameras, multi-directional microphones, and two-way speakers so instructors can monitor and evaluate the students' interactions with standardized patients. The Training Center also houses two large simulation rooms featuring three Laerdal SimMan 3G high fidelity patient simulators. These mannequins are wireless simulators, which allow learners to manage all aspects of patient care and procedures.

"Having the Clinical Skills and Disaster Medicine Training Center is a critical resource that will provide more educational opportunities for our students," said clinical skills director David Patterson. "It is a major boost to the entire NYMC community. We have increased the number of resources in place for faculty members to teach and students to learn how to deal with clinical situations ranging from seizures to internal injuries resulting from accidents to cardiac arrest," he added. "Before the Training Center opened its doors last spring, NYMC had to send its students elsewhere for high stakes assessment activities; now students can practice and be assessed on their clinical skills on our own campus."

The Training Center also provides opportunities to include simulation modalities in instruction as well as assessment. There are a myriad of educational programs planned in the Foundation of Clinical Medicine courses, pre-clinical skills classes for first- and second-year medical students, notes Ofelia Martinez, M.D., M.P.H., medical director of the Training Center and assistant professor of medicine. "The clerkships involve learning with the help of standardized patients, task trainers, and the high fidelity simulation equipment," she adds. This promotes "hands-on" active learning, which not only enhances integration and retention of information; it also underscores the importance of learning medicine with the patient as the central focus.

A HOT TEACHING TOOL

Simulation-based medical education using mannequins and actors has become increasingly important and more widely used. In the past, medical students and other health care workers learned much of what they needed to know by watching more experienced colleagues interact with real patients in a hospital, and then performing those procedures on patients themselves. Spurred by the growing patient safety movement, many medical schools, like NYMC, are working more extensively with simulated patients—

both actors and mannequins. Extensive simulation training shortens the learning curve by giving students the opportunity to hone their basic communications and doctoring skills before encountering actual patients and allowing students to learn from their mistakes.

This is made easier by the fact that today's high-tech mannequins are incredibly lifelike. Many are pre-programmed with heart, lung, organ, and vocal sounds, a movable head and jaw, and open airways that allow students to practice techniques like intubation, placing a catheter, and conducting breast and pelvic exams. The mannequins can also be programmed to have features consistent with allergic reactions, heart attacks, and asthma exacerbations, as well as to speak, moan, and froth at the mouth.

"All students, including first-year medical students, have exposure to both simulation and standardized patient interactions," noted Michael Reilly, Dr.P.H. '10, M.P.H., director of the Center for Disaster Medicine and associate professor of environmental health science in the School of Health Sciences and Practice. "Students are excited to participate in these learning activities within the Center. The earlier we can expose students to the practice of clinical medicine, the better prepared physicians they will be."

In addition to simulation, the Training Center offers valuable opportunities for students to interact with standardized patients. They are able to practice the clinical skills they are learning, and to ask questions they have never asked before. They also can learn how to talk to patients about difficult or sensitive topics, navigate communication challenges and receive specific, detailed feedback from trained, experienced standardized patient-educators. This valuable feedback provides insight into the patient's perspective that is rarely possible in typical clinical practice. This is a unique experience that is extremely useful in honing clinical skills for both learners and faculty.

Participating in these simulated clinical scenarios, students learn basic clinical skills, such as how to conduct a thorough physical exam, how to secure an airway, and insert an IV. And, they can do it over and over and over again, until they are very comfortable with the procedure.

This kind of learning is now mandatory. In 2004, the Step 2 Clinical Skills examination became part of the United States Medical Licensing Exam sequence. This exam assesses students' clinical skills through their interactions with standardized patients. Each student meets with a dozen standardized patients and has 15 minutes to take a history and perform a clinical exam for each patient, and then 10 additional minutes to write a patient note describing their findings, their initial differential diagnosis list, and a list of initial tests.

"All students, including first-year medical students, have exposure to both simulation and standardized patient interactions. The earlier we can expose students to the practice of clinical medicine, the better prepared physicians they will be."

*Michael Reilly, Dr.P.H. '10, M.P.H.,
director of the Center for Disaster Medicine
and associate professor of environmental
health science in the School of Health
Sciences and Practice.*



These educational modalities are relevant to basic science instruction as well, since it incorporates clinical relevance and makes the science "come to life" in a tangible way. This can enhance integration of basic science concepts into clinical practice, which optimizes diagnostic reasoning and ultimately, patient care.

CURRICULUM 'RENAISSANCE'

NYMC officials credit the 2011 merger of NYMC and the Touro College and University System with bringing many of the resources and ideas needed to develop the Training Center, as well as a number of other additions and improvements to the College and its campus. "Since our affiliation with Touro, we have had a renaissance taking place on the campus. The Clinical Skills and Disaster Medicine Training Center is the focus of this robust reimaging of the curriculum and a focus for enhanced student-teacher learning and assessment," said Jennifer L. Koestler, M.D., senior associate dean for medical education. Speaking of the entire NYMC community, she added, "There is a stronger sense of community, several opportunities for interprofessional education and renewed excitement about being part of something bigger."

Working with actors was a completely new experience for second-year student Cyril Rosenfeld, 25, and she is appreciative of the learning opportunities she is having at the Training Center. "Our teachers want us to learn how to ask questions and delve further for information," she said. "Communication is paramount in medicine, and students should take as much advantage of the Training Center as they can."

Katharine Yamulla, director of standardized patient training and assessment at the Training Center, is responsible for creating the training sessions that include mannequins and/or actors, and works alongside the curriculum directors to write clinical cases relevant to what students are learning.

For example, during their first week of medical school, students have an initial encounter with a standardized patient. "Before they've even opened a medical textbook, students will go through a 20-minute patient life history so we can get a reading of how well they communicate," said Yamulla.



Eventually, students are placed in more challenging scenarios. They will confront patients who are recovering from heart attacks, have been diagnosed with diabetes, depression, or are unsure whether to vaccinate their children, among others. “The standardized patients are highly trained and many belong to SAG and EQUITY—he cream of the crop,” said Yamulla. “Being able to consistently present symptoms to each student and provide detailed feedback is a real skill.”

During the course of their medical training, students will take part in encounters that run the gamut of situations they will encounter during their rotations. For example, they may be placed in a situation where a patient comes in complaining of menstrual problems, but careful questioning reveals that she is experiencing domestic violence at home. “We’re deliberately adding all of these encounters into the curriculum,” said Yamulla.

After each encounter, the standardized patient and faculty will provide students with detailed feedback. They may suggest ways the student could improve his or her interview techniques, and point out important questions that went unasked. One of the key goals is to teach the students to become better communicators.

CREATING TEAM PLAYERS

Teaching NYMC students how to function as part of a team is another important goal of the Training Center. These days, medical practice is becoming more and more a team initiative. Large health care systems are increasingly using interdisciplinary teams to provide patients with coordinated care

across specialties. Dr. Koestler says that teamwork is an integral part of the training students receive. “We think about all health care providers—doctors, nurses, physical therapists, pharmacists—all working together to provide safe, skillful, and humanistic patient care.”

An increase in natural and man-made disasters, such as terrorism, hurricanes, earthquakes, and floods, has recently put the spotlight on the need for medical care in extreme situations. Centers like the one at NYMC are placing heightened emphasis on preparing health care professionals to function outside the hospital, in much more chaotic settings. “Disaster medicine is an application of emergency medicine,” explained Dr. Reilly, “but it is practiced in austere environments,” such as an out-of-hospital setting, where there are few diagnostic and ancillary resources and no access to other amenities found within an intact health care facility. In disaster settings, he added, physicians and other health care providers must be able to assess and manage life-threatening illnesses and injuries without the use of diagnostic tests and using clinical skills alone.

“Putting students and other practicing health care professionals through clinical scenarios in a safe environment means they can make mistakes here, and we can help perfect their skills,” said Dr. Reilly. “We debrief the students, and teach them ‘clinical pearls’ and tricks of the trade as appropriate.” With simulation training, “we are able to replicate actual cases and patient encounters. So when the learner is faced with a particular presentation they know they can rely on their skills and

are up for the challenge of managing a complex patient.”

Disaster medicine training also can open doors students may never have thought of before. “In disaster medicine education programs I like to expose learners to new concepts of assessment and management in a comfortable, non-threatening environment,” said Dr. Reilly. After undergoing disaster training through the disaster medicine internship and elective programs, he explained, students are usually more motivated to pursue emergency medicine residencies, volunteer to practice overseas, or be interested in contributing to international humanitarian missions with groups like Doctors Without Borders. Providing medical care in these extreme and non-traditional settings can be very rewarding and satisfying. In the practice of disaster and austere medicine, physicians get “a variety of clinical opportunities to treat clinically severe illnesses and injuries and quickly see how the correct treatment can improve the quality of life for patients,” explained Dr. Reilly.

“The opportunities afforded to students at the Clinical Skills and Disaster Medicine Training Center are boundless,” concluded Dr. Koestler. “Our ability to allow students to practice clinical skills—from taking a medical history, refining his/her physical examination skills, to practicing procedural technique—has expanded tremendously. We have already engaged our clinical partners to develop relationships to further enhance training of residents and practicing clinicians to ensure that all members of the NYMC community can take advantage of this amazing resource.” ■

The Challenge of Change



“It takes a special type of person to work with children. You have to want this to be good at it.”



The Child and Adolescent Psychiatry Fellowship helps budding child psychiatrists learn to pursue a moving target—easing youthful pain—amid the constraints of an evolving health care system.

BY ROBERT S. BENCHLEY

“It’s never just about the child,” says Veraanong (“Vera”) Srakhao, M.D. “It’s about the child in their environment.”

Dr. Srakhao, chief fellow in the Child and Adolescent Psychiatry Fellowship program, could be talking about her own childhood. The daughter of immigrant parents from Thailand, she grew up in a Buddhist household in the Bronx, but she attended a Catholic school. That range of formative experiences provided a mix of inspiration and aspiration that ultimately led her to New York Medical College.

“At home, I was raised with my parents’ work ethic, and was taught the importance of applying my education to help other people,” she says. “All around me, I saw families struggle with the lack of access to health care. It made me want to be an advocate for people and to provide a service. I thought that being a physician would enable me to do that, and I began thinking of a career in medicine as early as eighth grade.”

Still, Dr. Srakhao’s choice of specialty didn’t happen until her psychiatry rotation in the third year of medical school.

“I enjoyed the variety of challenges, and the idea of diagnosing something without a lab test or an x-ray to back you up was fascinating to me,” she says. “It’s like the way astronomers discovered Pluto when they couldn’t see it—through its interaction with other objects. That’s similar to working with people with mental illness.”

Dr. Srakhao’s specific focus on child psychiatry, however, has its roots in an older experience—a personal sabbatical she took between college and medical school to teach English to children in Japan.

“Working with children, you have to multiply everything by 100,” she says. “Foolishly, I thought it would be easy. I was a quiet person, shy even, but after the first month with the kids I changed. I had to. I opened up as a person and found I had more energy. Kids can read you. If you present to them as reserved and disinterested, they become guarded and withdrawn. If you approach them with energy and interest, they get excited.”

SEEKING THE BEST

Dr. Srakhao’s approach to her chosen field—smart, intuitive, driven—reflects the type of candidate David Steinberg, M.D., clinical associate professor of psychiatry and behavioral sciences and director of the fellowship program, seeks.

“I bring on the best future child psychiatrists I can find,” Dr. Steinberg says. “It takes a special type of person to work with children. You have to want this to be good at it. You have to believe this is what you want to do and really love kids.

“Part of my selection process is identifying people I believe will stimulate each other, and who will learn and grow together,” he says. “Two years isn’t much time, and I want people who can maximize the experience. They have to be hard workers who are

“ It’s never just
about the child.

It’s about the
child in their
environment.”

SAYS VERAANONG (“VERA”) SRAKHAO, M.D.





willing to take on difficult cases. The only way to become the best trainee is to get your hands dirty.”

Dr. Steinberg has made significant changes to the program since he arrived at NYMC two and a half years ago. He has revamped the entire didactics program, and the lectures now include more material on pharmacological intervention and other types of therapeutic interventions. Clinical rotations have also been revamped; additions include a rotation in early childhood intervention and a research rotation that generates a scholarly paper.

“We’re very fortunate to have Dr. Steinberg in charge of the program,” says Richard G. McCarrick, M.D., vice dean for graduate medical education, who is himself a trained forensic child psychiatrist. “He brings a broad perspective that includes both neurodevelopmental and psychodynamic issues. That mix is essential to the program, but it is not common to find it in one person.”

Despite curriculum changes, the fellowship has retained the deeply personal interaction that is the hallmark of all programs at NYMC, as well as its substantial mix of clinical opportunities at the Behavioral Health Center at Westchester Medical Center on campus and at nearby affiliate medical centers.

SUPPORTIVE ENVIRONMENT

“The fellows have very strong relationships with the faculty, and with each other,” says Dr. Steinberg. “In some programs, there is an element of remoteness that is not found here. Instead, it’s warm and intimate.”

The fellows pick up on this, even during the application process. “I interviewed at several programs, and I chose this one because of the variety of psychopathology I would see,” says Dr. Srakhao, “but I also like the close-knit supportive environment and the excellent supervision.”

“Child psychiatry is an integrative field that ranges from the genetics of autism to the epidemiology of teen substance abuse,” says Dr. McCarrick. “To become a child psychiatrist, first you become an adult psychiatrist; then you take additional fellowship training for a total of six years post-medical school. Because of the nature of the work, you need to take advantage of the expertise offered by both the Department of Pediatrics and the Department of Neurology. Child psychiatry is one of the subspecialties in greatest need and shortest supply in the country.”

And although Dr. Steinberg has made both didactic and clinical changes, the program continues to evolve with the times.

KEEPING CURRENT

“Our field today is much faster than it was ten years ago, not only because of the requirements of managed care and insurance, but also because of the way society is progressing,” says Dr. Steinberg. “We often see kids who are more acute, and we have less time to treat them before they move on. We don’t have the ability to spend months before we come to a diagnosis of a child; ten years ago we did. On the other hand, our ability to make a diagnosis has progressed greatly.”

“These are changes that cut across all medical specialties, and they are happening at the national level,” says Dr. McCarrick. “We have to prepare our fellows—and all of our students, in all programs—to succeed in the real world in which they will be practicing.”

An excellent example is the program’s relationship with The Children’s Village, a residential treatment facility in Dobbs Ferry, N.Y. Its medical director, Paul Kymissis, M.D., is a former section chief of the Child and Adolescent Psychiatry program.

“The fellows are exposed here to the kind of patients they would see in a hospital,” Dr. Kymissis says. “They also get to see what it’s like to work in an agency environment. That’s important because many of the graduates no longer go on to work at a hospital. With short-term stays now the norm, the emphasis is more on working in the community. We used to have 300 kids on campus; now we have a little more than 100. They tend to be put into foster care, group homes and other types of facilities. We don’t want to see kids in institutions any more. Our work with the fellows prepares them to deal with the challenges of the new era.”

The treatment philosophy may change, but the goal remains the same—change, for the better, in the child. It’s difficult for the fellow not to change, as well, according to Dr. Srakhao.

“Psychiatric patients challenge you to be more kind and generous than you could ever imagine,” she says. “The fellowship experience has not only made me a better clinician, but also a better person.” ■

Healing in Haiti

In a country where the injured rely on physical therapists for primary care, a group of students committed to global outreach gave hope and changed lives.



By MELISSA F. PHETERSON

Lessons in limited resources but limitless ingenuity—Velcro, wood, foam, and tube socks stuffed with kernels—heightened appreciation for physical therapy, and connections have set in motion better health care for a beleaguered country.

These are legacies of a trip to Haiti initiated and organized by Class of 2015 students in the Department of Physical Therapy in the School of Health Sciences and Practice. The trip was an extension of their community service requirement supporting the Afya Foundation, by refurbishing equipment like crutches, canes, and wheelchairs to ship to Haiti from a warehouse in Yonkers, N.Y.

“As a department, we’re very proud of our school’s history of serving the underserved, and continue that tradition as part of our program activities,” says Michael Majsak, P.T., Ed.D., associate professor and chairman of the Department of Physical Therapy. A project in global initiatives is one of three options for service for second-year students. “Historically, this has been supporting domestic groups who serve international needs, but we never really got our feet out of the country. Last year, a group of students decided to take the time and energy to evaluate firsthand the efforts and utility of what they had designed.”

A “BOLD” IDEA

The pieces connecting Valhalla to Haiti were about to fall into place. In 2011, Gale Lavinder, P.T., Ed.D., assistant professor of physical therapy, director of clinical education and faculty advisor to the trip’s students, attended a conference and met the physical therapy program director for Medical Teams International (MTI), a nonprofit that sends teams of medical professionals and supplies to care for people after disasters—in Haiti’s case, an earthquake in 2010.

When Dr. Lavinder met with students in the Class of 2015 who had selected the Global Outreach project, working with the Afya Foundation to supply Haiti with refurbished equipment, “a few raised their hands and said, ‘We want to go to Haiti.’ It was bold and I loved it,” says Dr. Lavinder. While she coordinated with MTI, D.P.T. students Jillian Erickson, Dominique Torres, Jennifer



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associate professor and chairman of
the Department of Physical Therapy

DeMarco, and Althea Parry-Childerley set about raising funds, from personal web pages to grilled cheese and coffee sales during finals week. They split into two teams headed by Dr. Lavinder and Kevin Spangenberg, P.T., Erickson’s instructor during her clinical rotation.

In mid-March, Dr. Lavinder’s team flew to Port-au-Prince and began the four-hour drive to Les Cayes, often on unpaved roads thronged with people. Spangenberg’s team followed a week later. They stayed at a guest house run by missionaries, who drove them to mobile clinics and home visits, packed them lunches, and provided breakfasts and dinners.

THERAPISTS ON THE FRONT LINES

It didn’t take long to realize the stark differences in physical therapy there—starting with how patients got to the clinics.

“People with fractures and crutches on the back of a tak-tak,” old pick-up trucks used as public taxis stuffed with passengers, says Dr. Lavinder. Lack of equipment was a daunting obstacle, too. For one 14-year-old boy with seizures who had grown too heavy for his mother to carry, her team found a donated wheelchair they scrambled to modify to suit the boy’s needs. “We made lateral supports, put Velcro straps on the arms and foot pedals, and created a back support with wood and foam,” she says. “We worked all afternoon, but it was worth it.”

Equally jolting was the role of therapist on the front lines, not on referral. “People walked into the clinics with strokes and fractures that had never set, looking for the treatment Americans get in the ER,” says Spangenberg, who works in private practice in California. “They have no other option. You need to think about easing their pain, positioning their arm—things you’re exposed to in school, but rarely come across at work.”

Parry-Childerley had been to Haiti after the earthquake, “but I wanted to give back in a more skilled way as a physical therapy student,” she says. “In the clinics we were doing evaluations in 15 minutes that would normally take an hour. It was intense.” The chronic conditions she



found warranted a doctor's care—but the challenges plaguing the medical system meant it was rarely practical. For one young woman complaining of knee pain, "it was clear from my screening that her ligament was torn. I told the clinic's occupational therapist I needed to refer her to a doctor and once it was fixed, she could return to us for a great prognosis. But she warned me not to refer her, because a doctor would cast the leg and decrease the range of motion, making things worse. All I could do were Ace bandages and knee braces. There's a lot of creative thinking, and critical thinking, involved." She credits Dr. Lavinder with devising such out-of-the-box solutions such as tube socks filled with kernels for ankle weights. The teams were able to witness the importance of the College's support for Afya. "Donated supplies are the lifeblood of health care there," says Spangenberg.

A "LIFE CHANGE"

Back-to-back trips allowed Spangenberg, Erickson, and DeMarco to build on the first group's efforts, including a life-changing intervention for a paraplegic living with his mother and sisters in a one-room shanty. One Friday afternoon, Dr. Lavinder's team assessed the situation. "He had a chair with a wooden seat, and a mattress," she says. "No cushion, no removable arm rests or foot pedals and no lateral support." Spangenberg's team came on Monday with a cushion for his chair, and by week's end the man had an abdominal binder to sit up independently, wound-care supplies for his ulcers, and a wheelchair for paraplegics. He was no longer confined to a bed. "It's a small thing to us, but a life change for them," says Spangenberg. "Just having those little moments added up to be the biggest blessing."

For DeMarco, who's pursuing a dual degree in physical therapy and public health, the trip yielded valuable insights. "It allowed me to grasp how P.T. is viewed in other countries where life is mostly about survival, and how we can improve that quality of life on a broader scale," she says. "Despite the language barrier and our limited time, we were able to create an influence—to help the lines of patients waiting for us understand they could improve, and didn't have to accept the pain they lived with."

The trip had its lighter moments, too. Whenever Dr. Lavinder, Torres, and Parry-Childerley set out, children swarmed around them and refused to leave their sides until sundown. "The second night it started to downpour and we ran under a banana tree," says Parry-Childerley. "The family across the way was motioning for us to take shelter. They were warm and friendly."

The College contingent may have changed lives, but treating these patients will remain with them, too. "It's shocking and amazing how appreciative people are, and it's definitely changed my outlook on the profession," Spangenberg says.

FROM ONE TRIP, A TRADITION

This fall, at least 10 D.P.T. students in the Class of 2016 have expressed interest in going to Haiti. Dr. Lavinder is working to connect Afya with MTI to ship supplies needed at the clinic in Les Cayes, and students keep in touch with clinic staff through Facebook. Parry-Childerley would like to join the trip each year, eventually as a mentor. "It's reinforced my desire, passion, and motivation to work and even live abroad," she says.

An annual trip to Haiti would also advance the mission of physical therapy. "People think the focus of physical therapy is the rehabilitating of damaged bodies. However, the physical therapy profession, for quite a few years now, has also been providing services in preventative health care and wellness. At NYMC we are particularly dedicated to serving those in need," says Majsak. "This trip shows how our students fulfill and even go beyond our expectations of providing service to others. Their work will encourage future generations of D.P.T. students at NYMC to look beyond themselves and turn their idealism and hopes into reality. It is truly gratifying to see what their passion compelled them to do." ■



James Carter, M.D. '55, INVESTS IN MEDICAL STUDENTS' FUTURES

By Andrea Kott, M.P.H.

Born and raised in Great Neck, N.Y., Dr. James Carter attended the University of Vermont before entering New York Medical College in 1951. His work with several of NYMC's faculty inspired him to specialize in obstetrics and gynecology. He completed his internship and residency at Indiana University, and began practicing and teaching there in the Department of Obstetrics and Gynecology, and Pathology. Eventually, he also served as associate dean for student affairs and associate dean for student and curricular affairs until his retirement in 1995.

When Dr. Carter recalls his days as professor at the Indiana University School of Medicine, a significant issue that was confronting many of the students was the financial indebtedness they were acquiring. "I knew of students who in their

freshman year were planning to go into primary care and some who were thinking about medical missionary work. However, their fears about not being able to repay school loans were forcing them to forego their original plans and to consider other medical careers. Financial concerns were having an inappropriate influence on what students did," he said.

Dr. Carter made a pledge with his late wife, Claire, to give back to his alma mater, New York Medical College, in appreciation for the medical education and support he received. Through the endowed \$1.2 million Dr. James and Claire Carter Scholarship Fund—New York Medical College's single largest gift for a scholarship—Dr. Carter is working toward this pledge. The fund will be used to provide scholarships to medical students

based on academic merit and financial need. A scholarship committee will decide the award. It is the Carters' hope that this will provide some freedom from financial concerns for some of the students, as well as recognize fine academic performance.

"Dr. Carter's very generous donation to New York Medical College will make it possible for talented medical students with financial need to fund their medical school education and reduce their reliance on student loans. The scholarship will ease the worry of student indebtedness and also encourage students to pursue any medical career choice, especially a career in primary care," said Anthony M. Sozzo, M.A., M.S.Ed. associate dean for student affairs and director of student financial planning and student activities. ■



ALUMNI and DONOR Events

Florida Reunion

In January, intimate gatherings were held in Florida—Miami, Boca Raton, and Naples—to introduce Edward C. Halperin, M.D., M.A., chancellor and chief executive officer, to Floridian alumni and their families.



Chancellor's Circle

Dr. Halperin hosted a Chancellor's Circle reception on June 18 for donors and guests. Guests had the opportunity to tour 19 Skyline Drive and the Clinical Skills and Disaster Medicine Training Center during the evening as well.





Alumni Reunion

The 131st anniversary of the School of Medicine Alumni Association was celebrated at the Reunion Banquet on May 18 at the Sheraton Hotel in New York City. The gala event was attended by more than 360 guests. Alumni celebrating 25th, 40th, 50th, and 60th anniversaries were honored. Silver diplomas were presented to members of the Class of 1989 and gold diplomas were bestowed upon members of the Class of 1964.



Alumni Cruise

On June 25, New York metro area alumni gathered on the World Yacht "The Princess" as it set sail around the Statue of Liberty and afforded other unforgettable sights of New York Harbor and camaraderie.



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ALUMNI PROFILE

John-Ross Rizzo, M.D. '08

Overcoming Obstacles to Help the Visually Impaired

BY ANDREA KOTT, M.P.H.

Some might consider it a cruel twist of fate that John-Ross Rizzo, M.D. '08, a once-aspiring ophthalmologist, is gradually losing his vision to an incurable eye disease. Dr. Rizzo considers it a blessing in disguise.

Indeed, most people would have shelved the dream of becoming a physician after receiving a prognosis of total vision loss, but Rizzo grew tenacious. He pushed himself through medical school and an internship at St. Vincent's Hospital. When his dimming eyesight ruled out a career in ophthalmology, he launched his new aspirations as a physiatrist and vision researcher, looking for ways to rehabilitate people who have lost their sight through brain injury, aging, or illness. The research inspired Tactile Navigation Tools, the company Rizzo founded to develop technology for the visually impaired and earned him a spot on *Crain's New York Business* "40 under Forty" list.

"I've been given a unique set of lemons," says the 32-year-old clinical instructor at the New York University School of Medicine and director of the Visuomotor Laboratory at the Rusk Institute of Rehabilitation Medicine. "I'm just making lemonade."

Since childhood, Rizzo—J.R., as he likes to be called—wanted to be a doctor. Like his grandfather, an anesthesiologist and his role model, he wanted to help people. But at age 15, Rizzo learned he had choroideremia, a rare, genetic condition that degenerates the choroid and retina, causing progressive vision loss.

Undaunted, Rizzo pursued his medical education. He labored through histology classes. He devised a system of multidirectional lighting so he could read late into the evening. When he could no longer see the screen, he read printouts. "Doctors said that I was going to accelerate the degeneration of my retinas," he says, "but what else was I going to do?"

As the disease progressed, Dr. Rizzo developed the severe tunnel vision that characterizes choroideremia. His doctors advised him against a career in ophthalmology. "It was a difficult pill to swallow," he says. But it was not the end of his medical career. "I had to make a pivot," he explains. "I couldn't become an ophthalmologist, so I figured I'd be a vision researcher." He already had an interest in research. When he was a student at NYMC, he was a member of the Medical Student



Research Committee and in 2006 he won the Dean's Award for Excellence in Research as a second-year medical student.

He chose a new specialty, physical and rehabilitative medicine. As a fourth-year chief resident in NYU's department of rehabilitative medicine, he won a year-long clinical research fellowship that supported his study of eye-hand coordination and acquired brain injury. Currently, with funding from the National Institute on Aging, he is studying eye-hand coordination and brain injury in conjunction with aging, particularly among young and older stroke patients.

Having lost 90 percent of his vision, Rizzo no longer treats patients. Instead, as founder and chief medical officer of Tactile Navigation Tools he concentrates on researching and developing products like the Cumba Cane and the Eyeronman. Cumba Cane has a wide, two-wheeled base that pushes small obstacles out of the way as a person walks (it also collapses into a conventional cane.) The Eyeronman, a sensor-equipped vest vibrates in response to nearby obstacles, to alert wearers—including first-responders—of tripping hazards. He hopes to have the Cumba Cane on the market by the end of this year and the Eyeronman by 2015.

He won the Rising Star Entrepreneur Award at the Oxford Center for Entrepreneurs 2014 Get Real Conference.

Losing his eyesight has made life difficult. Yet, it has given Rizzo an invaluable opportunity: to put himself in patients' shoes. And that, he says, is a blessing. ■

MILESTONES

Alumni Achievements

STAY IN TOUCH

We would love to share your most recent news and accomplishments in our next issue of the *Chironian*. If you have any professional accomplishments or developments, published a book, or have any family news to share we would love to hear from you.

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The 10s

Dhara P. Patel, Ph.D. '13, was one of ten people nationwide selected by American Society for Pharmacology and Experimental Therapeutics (ASPET) for the 2015 Washington Fellows Program.

Monae Raphael, Dr.P.H. '13, formerly Monae Johnson, was married in March 2014.

Edward H. Hurley, M.D. '12, a third-year pediatric resident at Hasbro Children's Hospital/Brown University, is happy to report his first paper was published in the August 6, 2014 issue of the *American Journal of Medical Genetics*. He got the idea for the topic "Differences in perspective on prognosis and treatment of children with trisomy 18" in medical school during his third-year pediatrics clerkship. "It took three years, more than 500 mailings and countless revisions but it was finally published," he writes. He is also in the process of applying for a neonatology fellowship.

Carol Pak-Teng, M.D. '12, started her second year of EM residency at St. Luke's-Roosevelt. "This past year we welcomed our second daughter, Nadia Teng. Chelsea, Ed

and I enjoy the new challenges and overwhelming joys that come with growing our family during residency," she writes.

Angie C. Birnbaum, M.P.H. '11, a biosafety program manager at Harvard University, became a registrant of the National Registry of Certified Microbiologists. She is certified as a specialist microbiologist in biological safety microbiology.

Patricia M. Raciti, M.D. '11, was recognized by the College of American Pathologists Foundation with a leadership development award for her commitment to the specialty of pathology and patient care.

Karel R. Amaranth, M.P.H. '10, recently traveled to Uganda to further the work of the women's health project, Holistic Care for Mothers, that she co-founded with the Rotary of Makindye, Kampala. She visited several rural clinics and hospitals and met with women's groups to provide community education on the use of birthing kits and safe deliveries. She also met with several Rotary Clubs, government officials and health providers to promote support for the project and initiate evaluation procedures.

The 00s

Hui Gong M.D., Pre-Internship Program '08, finished his neuro-physiology fellowship in the Department of Neurology at the University of Southern California in June.

Kanwal M. Farooqi, M.D. '07, is the recipient of the New York Academy of Medicine 2014-2015 Glorney-Raisbeck Fellowship in Cardiovascular Diseases.

Gudrun E. Mirick, M.D. '06, is currently working as an academic orthopedic surgeon specializing in trauma at Hennepin County Medical Center in Minneapolis, Minn.

Teviah E. Sachs, M.D. '06, M.P.H., was named assistant professor of surgery at Boston University School of Medicine and is an attending surgeon in the section of surgical oncology at Boston Medical Center.



Jeffrey J. Siracuse, M.D. '05, is assistant professor of surgery and assistant professor of radiology at Boston University School of Medicine and an attending surgeon in the division of vascular and endovascular surgery at Boston Medical Center.

Julia M. Braza, M.D. '04, and her husband Anthony Martyniak, welcomed their third son, Christian Lawrence to the family on January 7, 2014. He joins older brothers Anthony Joseph, age 3, and Thomas Francis, age 2.

Sachin Chopra, M.D. '03, was recognized with a 2014 IPRO Quality Award for demonstrating a commitment to improving the quality care provided to Medicare beneficiaries.

Mill Etienne, M.D. '02, was named a top doctor by Castle Connolly Medical Ltd., and was featured in the June 2014 issue of *Hudson Valley Magazine*.

Marsha C. Nelson, M.D. '02, moved to Fayetteville, N.C., and joined Village Surgical Associates, a group practice in her town. She and her husband, Kenneth, have four children, Joseph, Thomas, William and Michael.

Timothy M. McClung M.P.H. '01, was appointed director of quality and patient safety at Westchester Medical Center. He also serves as commissioner of the Healthcare Quality Certification Commission of the National Association for Healthcare Quality.

The 90s

Roy H. Constantine, Ph.D., M.P.H. '94, was inducted as a fellow of the American College of Critical Care Medicine, part of the Society of Critical Care Medicine that helps foster the Society's mission by recognizing the highest achievements in multiprofessional critical care.

Marc D. Danziger, M.D. '92, is a partner at NY Urological Associates in Manhattan, an attending urologist at Lenox Hill Hospital and a clinical instructor in urology at Weill Cornell Medical College.

After serving nearly 24 years in the Army Medical Department, **Col. Roman O. Bilynsky, M.D. '90**, is currently overseeing medical readiness for the U.S. Army in the Office of the Surgeon General.

Gabrielle L. Shapiro, M.D. '90, is working with Latino patients in East Harlem and is very involved in MSSNY, ACAP and NYPS on advocacy issues for physicians affiliated with Mount Sinai.

Nicholas G. Tsamparlis, M.D., Fifth Pathway '90, left the Montefiore Medical Group and has been working with Lawrence Medical Associates since April.

The 80s

Deepak G. Azad, M.D., M.P.H. '89, was elected president of the Indiana State Medical Association in September 2013.

Eugene A. Conrad, M.S., Ph.D., M.P.H. '89, was highlighted by the Connecticut chapter of the Alzheimer's Association for National Family Caregiver Month in November 2013.

ALUMNI PROFILE

Karen Panzirer, M.S. '95

A Personal Stake in Her Profession

BY LARISSA REECE, M.A.



Karen Panzirer, M.S. '95, discovered her passion for nutrition and healthy living early on. While working toward her master's degree in nutrition at New York Medical College, she also managed a fitness club that she and her sister had decided to open—a daytime joint venture that left evenings free for study.

"Every class struck a chord with me. I would actually get to spend three hours just learning about Vitamin D," she says of her rigorous, yet rewarding, courses.

Panzirer's internship at Greenwich Hospital also proved to be challenging and rewarding in unexpected ways. "During my third day at work," she begins, "I got called into the medical director's office. He informed me that there was a patient on the third floor that needed a consult. It was my first solo experience." Steeling her nerves, she walked in the patient's room and after more than an hour of conversation with the patient and his wife, the woman insisted on Panzirer meeting

her grandson. Today that grandson, David Panzirer, is her husband and they have three children together.

When their daughter, Morgan, was six years old and exhibiting frequent thirst and urination, Panzirer decided to have her tested for diabetes—hoping that she was just worrying over nothing. “We had no genetic link to type I diabetes, and I know genetics is a key indicator, so I was sure I was wrong.”

The test confirmed her fear, however, and Panzirer spent the next day at Columbia with an endocrine specialist. “We were there all day learning how to test Morgan’s blood, how to give her shots, what to feed her, and when. It was overwhelming,” she recalls.

The Panzirers, who also had a three-year old and a three-month old at the time, received a great deal of emotional support from their families. David Panzirer was the one who got up with Morgan at night to test her blood every three hours. Drawing on her education, Panzirer says, “I began to focus on Morgan’s nutrition and taught her what to eat to manage her diabetes.”

Today Panzirer feels good about shifting her family’s focus to healthy habits. “Morgan can look at a cupcake and tell you how many carbs are in it,” she jokes. She has tapped her passion for physical fitness to raise awareness by running marathons for the Juvenile Diabetes Research Foundation. She even appeared on television with Martha Stewart to discuss diabetes. For his part, David has become a trustee for the Helmsley Charitable Trust, the largest private foundation funder of type I diabetes—spearheading its efforts to develop better therapies, devices, and services for the autoimmune disease.

The couple’s advocacy and support are making a difference in the field—and at home. Eventually Morgan was able to transition from constant injections to a pump. Today she wears a continuous glucose monitoring (CGM) wireless device that monitors her blood levels, provides insulin, and alerts her of changes in glucose levels to avoid needle sticks in the middle of the night.

“Part of my advocacy is to inform patients and doctors alike that the treatment options have improved since the 1980s,” Panzirer says, noting her surprise that one of Morgan’s doctors had never heard of the newer methods like CGM devices. “There are new treatments and disease management techniques that can make living with diabetes easier. You can have type I diabetes and still have a full life.” ■

Paul D. Corona, M.D. '89, has been in private practice in Orange County, Calif., for more than 20 years focusing on treating psychiatric issues such as mood disorders and chronic physical problems related to stress and mood. He has a three-book series for patients and doctors regarding mind-body medicine covering recognition, diagnosis and treatment. Visit his website at www.drpaulcoronamd.com.

Robert M. Yacynych, M.D. '88, is proud of his son Eddie who competed twice on the television show *America’s Got Talent*. He was part of a precision jump rope team called Flight Crew.

Shirley U. Salvatore, M.D. '87, reports she has a new position as a physician at Innovage, a PACE Center, in Pueblo, Colo. She was associate director at Southern Colorado Family Medicine for 20 years. She is married to **James Salvatore, M.D. '87**.

Randolph L. Trowbridge, M.D. '86, was re-elected vice president of the Fairfield County Medical Association.

Mitchell S. Kramer, M.D. '85, was named Castle Connolly top doctor for the 14th consecutive year. He was also in *New York Magazine’s* Best Doctors of 2014 issue in June.

Elaine M. Grammer-Pacicco, M.D. '85, and **Thomas J. Pacicco, M.D. '85**, were excited to hood their son, **Thomas A. Pacicco, M.D. '14**, at Commencement on May 22 at Carnegie Hall. He is doing his internship in Massachusetts and will do his residency in radiology in Dallas next year. Dr. Grammer-Pacicco is a pediatrician and Dr. Pacicco is a gastroenterologist in Charlotte, N.C. Their son, Michael, is an associate producer in Los Angeles and their daughter, Elise, is a graduate student in dance at NYU Tisch School of Arts.

Mark J. Cerbone, M.D. '84, **Kevin C. Delahanty, M.D. '84**, and **Mario F. Tagliagambe, M.D. '84**, travelled to the Greek isle of Kos to visit the temple of Asclepius and statue of Hippocrates and present their list of grievances.

Joseph S. Cervia, M.D. '84, is proud to report his wife, Denise Blumberg, M.D., received her M.P.H. this past winter, and daughter, Lisa, earned her M.S. in biomedical

engineering from Duke University, where she is continuing on for her Ph.D. He wishes all his classmates a happy 30th anniversary.

Andre A. Konski, M.D. '84, was named among the 30 fellows of the American Society for Radiation Oncology.

Jeffrey N. Broder, M.D. '83, closed his medical practice of 23½ years as of May 30. As of June 30, he is working at the Augusta VA OEF/OIF clinic taking care of veterans who returned from Afghanistan and Iraq.

Steven M. Cohen, M.D. '83, is chief of ultrasound services, partner and chairman of the board at Advanced Radiology Consultants in Southwest Connecticut/Fairfield County. He also works at St. Vincent’s and Bridgeport Hospitals. “Best regards to my classmates from NYMC Class of '83,” he writes.

Deborah Fried, M.D. '83, writes, “I am loving teaching med students and residents!”

After spending the last 22 years of her career in Maine, **Sue A. Mandell, M.D. '83**, recently started working as the medical director at the Tri-Cities Cancer Center in Washington State. “My husband Steve grew up in the Seattle area and with one son in college at the University of Washington and another heading west, it was time to move. I love it here in the desert part of the state, surrounded by vineyards and wineries. I do not miss all the Maine snow,” she writes.



George V. Tsimoyianis, M.D. '82, continues to enjoy practicing adolescent and young adult medicine in Darien, Conn. His daughter, **Christie M. Tsimoyianis, M.D. '12**, is a third-year resident in psychiatry at Mount Sinai/St. Luke’s-Roosevelt Medical Center in New York City.

William C. Reha, M.D. '81, was installed as president of the Medical Society of Virginia on October 25, 2014, in Williamsburg, Va.

Jeffrey J. Silbiger, M.D. '81, was promoted to associate professor of medicine at the Icahn School of Medicine at Mount Sinai.

Jill S. Hirsch, M.D. '80, and her husband, Randolph, are very proud of their three daughters. Allison is a postdoctoral fellow at Moffitt Cancer Center in Tampa, Fla., Jessica is a postdoctoral fellow at University of Massachusetts Medical Center, and Larissa is a high school chemistry teacher at Monticello High School. They enjoyed a family vacation to Greece last summer.



Richard F. Wagner, M.D. '80, is professor of dermatology and dermatology program director at the University of Texas Medical Branch. He has been the university Mohs surgeon since 1988. His son, Keith Wagner, has applied to NYMC for the School of Medicine Class of 2019.

The 70s

Richard H. Becker, M.D. '79, has accepted a position as vice president at Phelps Memorial Hospital Center in Sleepy Hollow, N.Y. He is the now the physician administrator in charge of Phelps's multi-specialty group.

Jack A. DiPalma, M.D. '78, was recently honored with the American College of Gastroenterology Weiss Award for Exemplary Service.

Matthew C. Frankel, M.D. '78, received Patient-Centered Medical Home Recognition for using evidence-based, patient-centered processes that focus on highly coordinated care and long-term, participative relationships from the National Committee for Quality Assurance.

William Zarowitz, M.D. '78, was named a best doctor by *Westchester Magazine*.

Neil T. Choplin, M.D. '76, is happy to report the publication of the third edition of his textbook, *Atlas of Glaucoma*. "It is lots of work but feels great to hold it in my hands," he writes.

Stephen G. Marcus, M.D. '76, was awarded U.S. Patent 8,734,804, for inventing methods of attenuating myelosuppressive side effects of treatment regimens, and increasing efficacy of treatment regimens.

Catherine L. Dunn, M.D. '75, is looking forward to the 40th year reunion in 2015.

Neil S. Silber, M.D. '75A, retired from his practice of internal medicine, wound healing and hyperbaric medicine. He retired two years ago and now travels extensively. He winters in southwest Florida and summers at the New Jersey shore. He enjoyed practicing, having never participated in managed care.

Vincent F. Mileto, M.D. '74, retired from ob/gyn practice in December 2013.

Alan S. Sacerdote, M.D. '74, has a book chapter in press, *Treating Congenital Adrenal Hyperplasia by Addressing Insulin Resistance and Neurocyticercosis-Induced Polycystic Ovarian Syndrome in Gynecologic Practice*.

John Boyer, M.S. '73, received a 2013 Robert F. Kennedy Ripple of Hope Award for his contributions to affordable health care access. He is married to **Sarah Pursglove Boyer, M.S. '73**.

Frank P. Bongiorno, M.D. '70, is now in Catholic ministry in Murfreesboro, Tenn., which includes a medical ministry to Haiti. He lives at the Carriage Lane Inn in Murfreesboro and is in charge of community relations. "If you are in the Nashville area check us out www.carriagelaneinn.com," he writes.

Robert E. Crootof, M.D. '70, is retired and he and his wife, Linda, divide their time between Wolfeboro, N.H., and Sarasota, Fla. They still own the 310-year old home in Norwich, Conn. where they worked and raised their children who are now scattered in different time zones. Dr. Crootof enjoys photography, plays tennis and is president of a 100 member tennis club. "Despite some serious illnesses,

ALUMNI PROFILE

Stanley J. Wertheimer, Ph.D. '87

Finding Solutions in Scientific Mystery

BY ANDREA KOTT, M.P.H.

Anyone who watched science fiction or horror movies as a child may remember the thrill of being scared, of being glued to the television screen until the aliens appeared, or of peeking out intermittently from under the covers to see if they were gone. Stanley J. Wertheimer, Ph.D. '87, loved these movies, but he didn't cower under the covers. He got curious.

Mystery has always intrigued Wertheimer. Tales from outer space ("I'm a huge Star Trek fan") and mythology or folk stories with other-worldly creatures ("I read every Frank Baum book about Oz that there was") fed his fascination with the unknown and, particularly, with science. "It created an inquisitive mind," he says.

Wertheimer is an explorer. He loves roaming uncharted territory and science is the ultimate exploration. But he doesn't probe idly. He needs to connect the dots, to unscramble puzzles. "I always want to know why I am doing something."

He began his scientific training majoring in biology at Rutgers University. After earning his bachelor's degree, he entered New York Medical College's Department of Microbiology and Immunology and completed a master's focusing on mutagenesis and enzymology. "Originally, I thought I'd just be a guy working in a lab," he recalls. "But the research bug bit me." The research scientist wanted to do more than examine samples on slides. He wanted to find solutions in scientific mystery. "I'm an issue-oriented fellow," he says. "I didn't just want to be the guy working on the bench. I wanted to bring in ideas."

Under the tutelage of Ira Schwartz, Ph.D., professor and chairman of the Department of Microbiology and Immunology, Wertheimer earned a doctorate from the College with a focus on molecular biology and the regulation of gene expression. Uncertain about a career in academia, he completed a three-year fellowship at the Albert Einstein College of Medicine and one at Boehringer-Ingelheim Pharmaceuticals. Through drug research and development, he found his purpose in scientific exploration. "I'm an experimentalist," he says. "I looked forward to solving problems. It's one of the great thrills of being a lab scientist."

For the next nineteen years, Wertheimer worked for Hoffmann-La Roche Pharmaceuticals, investigating drugs



to treat arthritis, broncho-pulmonary diseases, kidney disease, and diabetes. When his job became a casualty of corporate reorganization and cutbacks, he joined Regeneron Pharmaceuticals in Tarrytown, N.Y., where he is an associate director of translational medicine.

Instead of researching and developing drugs in response to disease, he now works as a clinical strategist, bringing promising drugs "from bench to bedside" by identifying diseases that might benefit from molecules that he and his colleagues identify. "Other companies would have a biologic target and go after it," he says. "We see a particular molecule, develop an antibody, review the target biology, and ask, 'What disease or population can we direct this to?'"

As Wertheimer explains, translational medicine fills the gap between basic research and early clinical studies. Indeed, he follows compounds from discovery all the way to clinical trials. "One of the biggest rewards for me would be if something I worked on became a medicine." Until then, he remains committed to finding answers in the scientific unknown. "There's a lot of mystery for us to unwind." ■

I am on the court about five or six days a week in the summer, less in the winter when I throw in some bad golf, and try to go on one ski trip. We travel to see our kids, and have been to Venice, Barcelona, southern France, and to Peru in the last three years, the latter two with my college roommate. In 2016, I will chair my Wesleyan class' 50th reunion, my eighth and final time as chair," he writes.

Ian A. Gale, M.D. '70, will be retiring in December 2014 after 37 years of practicing urology in Los Angeles. He and his wife, Lisa will be moving to the Phoenix area. They plan to travel the world extensively even though they have already visited 60 countries in the last five years. They will have time to see their seven children and four grandchildren. He is looking to seeing everyone at the 50th reunion in 2020.

The 60s

Lewis M. Feder, M.D. '68, presented two lectures at the annual meeting of the American Academy of Aesthetic Medicine in November in Las Vegas. Both lectures concern new advances in facial aesthetic surgery. Dr. Feder has been named one of the organization's esteemed researchers.

Craig Allen Fenton, M.D. '68, retired from the practice of radiology and nuclear medicine in June 2009.

Richard J. Fogler, M.D. '68, retired from practice and from Brookdale University Hospital. He is now senior associate director of case management at Coney Island Hospital Center.

Richard K. Stone, M.D. '68, senior associate dean at NYMC and former medical director at Metropolitan Hospital Center, was recognized at the New York College Podiatric Medicine commencement exercises in May. He received a special recognition award for distinguished service to the college. Dr. Stone was also honored at this year's NYMC Founder's Dinner on October 26. He received the Jackson E. Spears Community Service for exceptional service and commitment to the community.

Victor G. Ettinger, M.D. '67, retired from private endocrinology practice in March 2014. He continues to consult for a local hospital, developing an inpatient diabetes



program and works in the field of telemedicine doing endocrinology care for several underserved and needy communities. He is working with a FNP-CDE to develop a local diabetes outpatient education service for the San Fernando Valley in Los Angeles. He is the medical director of Diabetes Inpatient Program for Life Extension at San Joaquin Community Hospital in Bakersfield, Calif. "I'm very much enjoying my new life and expect to move back to Southern California sometime after June 2015," he writes.

Marc Lowen, M.D. '67, works at a private gyn practice one day a week and works 20 hours a week for the State of Maryland. His wife Elaine, is busy with their 13 grandchildren, 8 boys and 5 girls—9 of them live within a mile of their home. "I would love to hear from the Class of '67," he says.

Tony Cohen, M.D. '66, is re-enjoying biochemistry and physiology with his new hobby (meta-profession), beekeeping.

Morton A. Meltzer, M.D. '65, still works 50-plus hours a week in psychiatry.

Richard Besserman, M.D. '64, serves as an operations executive for the Center for Emergency Management and Homeland Security (CEMHS). He has more than 25 years of experience as a surgical specialist and more than 15 years as an executive in bioengineering and software development.

William Glatt, M.D. '64, and his son **Daniel J. Glatt, M.D. '92**, are partners in their internal medicine and addiction medicine practice in Burlingame, Calif. "The San Francisco area has been a wonderful place to raise our family," writes the elder Dr. Glatt. "My wife Florence and I celebrated our 50th anniversary with our three children and four grandchildren at Club Med in Florida."



Joel Kupersmith, M.D. '64, recently stepped down as chief research and development officer of the VA, directing its large medical research program nationally. "My eight year run, the longest ever, was very successful including numerous transformational advances such as the Million Veteran Program, on its way to becoming the world's largest genetic database, groundbreaking research, development of new ways to do research, numerous congressional testimonies and a winning the prestigious Presidential Baldrige Award," he writes. He had previously had an academic career culminating in the deanship of Texas Tech University School of Medicine and is now on the faculty of Georgetown University. Read more about Dr. Kupersmith at http://en.wikipedia.org/wiki/Joel_Kupersmith.

Francis P. MacMillan Sr., M.D. '64, enjoyed the 50th reunion. "It was great to see so many old classmates. I am looking forward to the 55th," he says.

Louis A. Privitera, M.D. '64, writes, "I am 78 years old and still in the O.R. Keeps me off the streets and out of trouble."



John J. Healy, M.D. '63, is retired and living on Cape Cod. He spends lots of time boating and gardening.

Stuart F. Mackler, M.D. '63, is serving on the board of directors of the Virginia Board of Medicine for the sixth year. He just completed his term as board president. He also formed and now runs a 501(c)(3) that provides prosthetics to victims

of the 2010 earthquake in Haiti and serves on the board of the Virginia Medical Society and as a consultant for Operation Smile. "My wife tells people that I am retired and in fact, I have not done any surgery since 2010 in Haiti," he writes.

Robert A. Harwood, M.D. '62, is finally retired. He and his wife, Gwendolyn, are now permanent residents of Scottsdale, Ariz., after 39 years in Los Angeles. "We've always enjoyed the outdoor life and are now active in this beautiful desert community," he says.

Michael Schlossberg, M.D. '62, reports he is happily retired and living in Atlanta. He was a major lender to the exhibition, David d'Angers—Making the Modern Monument, held at the Frick Museum in New York City from September 17 to December 8, 2013. It was the first exhibition of David d'Angers held in the U.S. Dr. Schlossberg and his wife, Lana, were joined by **William F. Bierer, M.D. '62**, and his wife, Beverly, at the exhibition.

Elizabeth (Betty) Muffet Craven, M.D. '61 and **Wales Craven, M.D. '63**, are happily retired in sunny Florida. They enjoy swimming, biking, croquet, bridge, making model boat and painting in water colors.

Ronald W. Dreyer, M.D. '61, has retired after 53 years of pediatric practice.

Howard D. Harrison, M.D. '61, is past president of the Scientists Society of Southwest Florida.

Robert D. Hirsch, M.D. '61, has been fully retired for seven years and living an active post-medicine life in sunny Florida. He attends grand rounds at Sarasota Memorial Hospital to keep up with medical developments.

Robert Kirschner, M.D. '61, writes "I've never been to Valhalla."

Carl M. Marchetti, M.D. '60, continues as president of Meridian Practice Institute, a physician enterprise of Meridian Health in Wall, N.J. He takes 26 weeks of vacation per year to serve on national board of the Boy Scouts of America, visit grandchildren, ski and travel. He is travelling to Russia this year with classmate, **Robert E. Fabricant, M.D. '60**.

James M. Rubin, M.D. '60, retired from private practice but remains chief of the Division of Allergy at Mount Sinai/Beth Israel in New York City. He lives on Long Island and spends time on the North Fork.

The 50s

Richard J.R. Byrne, M.D. '59, reports his wife Maryanne died in June, 2012. He met Barbara at a Catholic singles/widowers meeting in December 2012 and they got married on June 15, 2013. She has four children and eight grandchildren and he has five children and eight grandchildren, the youngest Hunter Campbell Rennie born on August 28, 2014. They live near several of their children and grandchildren in Roswell, Ga. and welcome classmates to call or visit when in Atlanta.

Howard J. Kline, M.D. '58, received special recognition for his contributions as a member of the clinical faculty at the University of California, San Francisco, School of Medicine. He still practices and is a clinical professor of medicine and an attending cardiologist for cardiology fellows. He is a member of the University of San Francisco masters competitive swim team.

Martin H. Floch, M.D. '56, is the editor-in-chief of the *Journal of Clinical Gastroenterology*.

James B. Leach, M.D. '56, reports his family is still growing—13 grandchildren, 2 great-grandchildren and more marriages on the way. Everyone is healthy and he is moving up to the gold tees, 6,000 yards.

James P. Mooney, M.D. '56, writes he is "still sitting up and taking nourishment."

David I. Stein, M.D. '56, resides in Jerusalem and would like to hear from members of the Class of '56 who travel there. He helps patients with rare diseases obtain information on the condition and what treatments are available worldwide.

David Werdegarr, M.D. '56, still practices medicine, mainly administration as consultant to Kaiser in California. He is married 52 years to Kathryn (Kay), a justice of the California Supreme Court. They have two married sons and five grandchildren. They live in

Ross, a town ten miles north of San Francisco, across the Golden Gate Bridge. "I am grateful to NYMC for a wonderful career," he writes.

Anita Smith, M.D. '55, M.P.H., is retired but very active in her townhouse community. She is chair of the recreation committee, a member of the environmental committee, a member of the book club, and plays bridge and Pinochle. She enjoys photography and just had her 85th birthday.

Gabriel Gregoratos, M.D. '54, has been retired for four years and is professor emeritus at UCSF. He continues to teach student electives in cardiology and does consulting work on the wards.

Paul D. Fuchs, M.D. '51, writes, "Had a bad year. I fell and fractured my left femur and recovered. Then my wife, Rhoda, and I were vacationing in Puerto Vallarta and got hit by a bus. I smashed my left leg and had four surgeries and two skin grafts. I am lucky to be alive and my recovery was called "awesome." I will be back in New York City this summer to celebrate my wife's 85th birthday with our two children, seven grand children and four great-grandchildren. I am still getting stronger and would like to hear from classmates at paradocsis@aol.com.

Mrs. Isabelle Whelan is sorry to report, "My husband, **Joseph R. Whelan, M.D. '50**, is not doing too well. He has lost most of his vision due to complications of glaucoma and diabetes."

The 40s

Lesley M. Warshaw Sr., M.D. '46, writes, "Still kicking!"

J. Conrad Greenwald M.D. '45, was recognized at a special presentation for his many years of service to Eisenhower Medical Center and for his dedication to the health and well-being of women in the Coachella Valley.

IN MEMORIAM

Alumni

Sumita L. Adhya, M.D. '06, died July 5, 2014. She was 36.

Hople R. N. Hamilton-Rodgers, M.D. '98, died on April 27, 2014.

William D. Parr Jr., M.D., Fifth Pathway '92, died May 29, 2014. He was 70.

Francine D. Morrison, M.D. '86, died on April 27, 2014. She was 63.

Helen P. Papastrat, M.D. '85, died July 15, 2014. She was 56.

James C. Spencer, M.D., Fifth Pathway '83, died on March 2, 2014.

Patrick V. Napolitano, M.D., Fifth Pathway '79, died June 28, 2014. He was 62.

Elliott C. Mason, M.D., Fifth Pathway '78, died on February 8, 2014.

Stephen R. Dinnerstein, M.D. '70, died in 2012. He was 71.

George M. Hollenberg, M.D. '69, died on November 26, 2013. He was 70.

Frederick G. Heller, M.D. '68, died July 28, 2014.

Manfred Hahn, M.D. '66, died on October 2, 2013.

William L. Turano, M.D. '66, died on May 17, 2014.

Lawrence D. Harter, M.D. '64, died on January 9, 2014. He was 84.

Donald M. Sloan, M.D., G.M.E. '63, died on September 30, 2013. He was 85.

Joel Franklin Smith, M.D. '63, died on January 14, 2014. He was 77.

Robert C. Lieberman, M.D. '62, died on June 17, 2014. He was 77.

Robert M. Marchant, M.D. '62, died on November 19, 2013.

David T. Mininberg, M.D. '61, died on July 22, 2013.

Donald S. Gromisch, M.D. '60, died on February 9, 2014. He was 83.

Eugene F. Lawlor, M.D. '59, died on March 22, 2014.

Hugh F. McCarthy, M.D. '59, died in April 2014. He was 83.

James J. Cavanagh, M.D. '58, died on December 14, 2013.

Timothy F. Brewer, III, M.D. '57, died on January 31, 2014.

James B. Dorsey, M.D. '57, F.A.C.S., J.D., died on March 29, 2014. He was 86.

Louis R. Gaudio, M.D. '57, died on March 15, 2014.

Arno R. Hohn, M.D. '56, died on March 21, 2014. He was 82.

William F. Quigley, M.D. '56, died on March 3, 2014. He was 83.

George F. Scheers, M.D. '56, died on October 7, 2013. He was 84.

Frank F. Schuster, M.D. '55, died on June 3, 2014. He was 85.

James N. Trone, M.D. '55, died on October 10, 2013. He was 88.

David B. Karlin, M.D. '54, died on May 10, 2014. He was 85.

Robert S. Manogue, M.D. '54, died June 25, 2014.

Walter Z. Newman, M.D. '54, died on March 9, 2014.

Mabelle A. Cremer, M.D. '53, died December 8, 2012. She was 85.

Edith D. McDonough, M.D. '53, died on December 14, 2013. She was 86.

John L. Duffy, M.D. '52, died on April 29, 2014.

Stephen S. Cost, M.D. '51, died on February 20, 2014. He was 91.

Gerald H. Kass, M.D. '51, died on April 22, 2014. He was 91.

David D. Giardina, M.D. '50, died July 10, 2014. He was 95.

Philip A. Marraccini, M.D. '50, died in April 2014.

Charles L. Swarts II, M.D. '50, died on June 16, 2014. He was 89.

Myrton F. Beeler, M.D. '49, died on December 25, 2013.

Howard A. Britton, M.D. '48, died on March 1, 2014. He was 87.

Robert F. Goldberg, M.D. '48, died on June 12, 2014.

Herbert M. Eskwitt, M.D. '47, died May 23, 2014. He was 90.

Armand F. Leone, Sr., M.D. '47, died on April 28, 2014.

Richard F. Riordan, M.D. '47, died on April 16, 2014. He was 93.

A. Robert Robbins, M.D. '47, died December 1, 2013. He was 92.

Robert S. Minnick, M.D. '46, died January 2, 2014. He was 96.

George B. Smithy, M.D. '45, died on March 6, 2014.

Victor S. Altchek, M.D. '42, died on October 23, 2013. He was 95.

William H. Hewes, M.D. '41, died July 17, 2014. He was 98.

Ellsworth S. Deuel, M.D. '39, died on December 11, 2013.

Harold L. Jellinek, M.D. '39, died on January 28, 2014. He was 99.

Deaths reported as of July 31, 2014

Alumni of NYMC Graduate Medical Education Programs

Karl S. Buekers, M.D., died on January 9, 2013. He was 41.

Faculty

Herbert Bengelsdorf, M.D., former clinical associate professor of psychiatry and behavioral sciences, died on January 21, 2014.

Bertram Blum, D.D.S., former adjunct associate professor of dental medicine, died May 14, 2012.

Andrew Gibson, M.D., assistant professor of anesthesiology, died on March 14, 2013.

Lambert N. King, Ph.D., clinical professor of family and community medicine, died on March 13, 2014.

Arturo C. Modesto, M.D., former instructor of obstetrics and gynecology, died on April 1, 2014.

Sidney Shulman, Ph.D., former professor of microbiology and immunology and research professor of urology, died in April 2014.

Paul Singer, M.D., professor emeritus of psychiatry and behavioral sciences, died on December 4, 2013.

John H. Weisburger, Ph.D., research professor of pathology, died on February 17, 2014.

Administration

Thomas J. Martin, Esq., died on September 28, 2014. He was vice-president and general counsel for more than 23 years before retiring in 2008. He was 71.

Board of Trustees

Philip A. Marraccini, M.D. '50, died in April 2014. He was a member of the Board of Trustees from 1987 to 2011.

NYMC Remembers Milton Tabachnick, Ph.D.

BY KIMBERLY GAUDIN DE GONZALEZ

Milton Tabachnick, Ph.D., who served as the first dean of the Graduate School of Basic Medical Sciences, is remembered by colleagues as a highly accomplished man who also displayed a humble spirit, a disarming smile, and a whimsical sense of humor.

Dr. Tabachnick, dean from 1973 to 1980, died at his home in Madison, Wisconsin, on April 27, 2014, after a brief illness. He was 91.

Dr. Tabachnick rose to prominence as a biochemist by applying, what was then a new technique, radioimmunoassays, in his studies of the binding of thyroxine and growth hormone to albumin and their effects on glucose metabolism.

"Born in the Bronx and educated in biochemistry at City College of New York and University of California-Berkeley, Dr. Tabachnick was renowned for his research on the thyroid and the thyroid hormone thyroxine," said Edward J. Messina, Ph.D. '73, professor of physiology, who recalls Dr. Tabachnick from his days as a student at NYMC "He was well-liked and on several occasions he was voted 'funniest professor' by his students."

Dr. Tabachnick and his wife, Elizabeth Tabachnick, were active supporters of many New York City cultural institutions. He moved to Madison, Wisconsin, after his wife died in 2005. ■

CEMENTING A PLACE ON CAMPUS FOR ALUMNI

Since its new lease on life thirty years ago, the Alumni Center has become a fixture at the College.

Its fate was reversed only by the vision of alumni—and a resonant campaign to save and build on the house's history.

By Melissa F. Pheterson





It's now a campus gem: a charming, sought-after spot for meetings, receptions on the portico, and chats around the fireplace. Yet the Alumni Center tucked into the New York Medical College campus was once a smoke-charred concrete husk with rich history but little else to save it from demolition. It took the vision of a group of alumni to revive the building's heart and soul.

Joseph F. Dursi, M.D. '59, associate dean for continuing medical education, associate professor of surgery, director of health services, and former president of the Alumni Association, first took note of the simple structure as a potential new place for alumni meetings, once the College had relocated from Flower Fifth Avenue Hospital. The site of the house has a history dating back to pre-Revolutionary times. The first occupant of this dwelling was believed to be Captain Thaddeus Avery. Avery, a farmer, was instrumental in hiding money needed to pay Washington's troops. In later years, the poured concrete structure was occupied by Westchester County Commissioners of Public Welfare V. Everitt Macy and Miss Ruth Taylor, among others, and became known as the "Commissioner's House." The Strawson family was the last to occupy the house from 1944-1960. After that period, the "Strawson House" stood abandoned for many years. The building had been scheduled for demolition by the Department of Public Works and, in the interim, was used by the Fire Safety Training Unit for practice in putting out fires, leading Dursi to believe restoration was especially "insurmountable."

"One day as I was coming onto campus, I said, 'Oh no, there's a fire—people are jumping out of windows; this is awful.' But when I got a closer look, it was just a firemen's exercise," he recalls. "The smoke had really damaged the inside, though." In 1978, the School of Medicine Alumni Association voted to raise money to restore the house and sprung into action, racing against the county's demolition plans. "I saw it as a personal undertaking," says Dursi.

Prior to the four years of his presidency, alumni giving totaled approximately \$60,000 per year. Dursi raised \$250,000 from alumni toward the project, solely through letter writing and chapter meetings. All told, the Alumni Association contributed \$320,000, with additional sums donated by the College and Parents' Council.

"I never saw myself as a fundraiser; I'm a surgeon," Dursi says. "But I wrote letters with some humor, I guess. I had alumni write letters back complimenting my letters. My wife and I went down to an alumni chapter meeting in Miami. We were in the bar of Joe's Stone Crab having drinks, and the guys could relate

to why this was important to me; they were stuffing envelopes in my pocket. I went back to my hotel room and counted: one thousand, two thousand, five thousand. One man gave me \$50,000 to name the living room after his father. Another gave me \$30,000 for the dining room. The alumni responded in a positive, beautiful way."

In 1982, Dursi and two alumni negotiated a 99-year lease from Westchester County to the College. Renovation began the next year. Dursi's friend, William Widulski, an architect and engineer, agreed to balance faithful restoration with aesthetic enhancement.

"I asked him to put porticos on the rear and front, because it was just a plain building: four walls and a concrete roof," says Dursi. Builders gutted the interior, restoring the paneling and sanding the wood floors of the living room, dining room, and kitchen. An open porch was enclosed to create a boardroom.

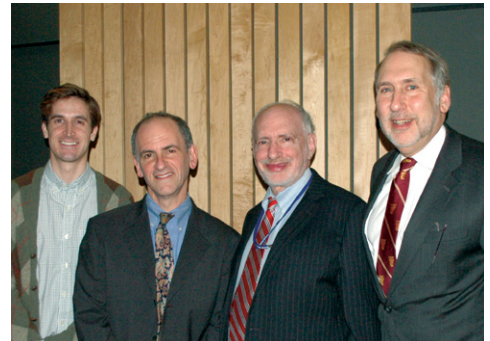
One year later, in March 1984, the Alumni Board of Governors held its first meeting in the Center—chilling a bottle of champagne in the snow. The Center now houses alumni administrative offices and hosts meetings, functions, and receptions. "It's been used as I envisioned, and then some," said Dursi. Ever since Dursi's campaign, robust alumni giving has continued. "The house has been a shot in the arm," he says.


To honor Dursi's leadership, the boardroom in the Alumni Center has been renamed in his honor. For the 30th anniversary celebration this year, the Center received several touch-ups, including the repair of cracks in the wall panels and woodwork, refinishing of the wood floors, and a fresh coat of paint.


"It's pretty amazing to work here, to feel the history and longevity of the College," says Diane Krusko, M.B.A., director of university alumni relations. "You get the feeling this was meant to be a home for alumni to gather with college family and friends." Historic photos adorn the walls, including several graduating classes of the 1800s. Over the fireplace hangs a reproduction of the famous painting, "Agnew Clinic" by Thomas Eakins, donated by Jay Tartell, M.D. '82 depicting 19th century medical students observing their professor in a surgical amphitheater.


"We wanted a painting that resonates with everyone that visits the Alumni Center—students, faculty, and, of course, alumni," says Krusko. "You see the students gazing with eyes wide open, hungry for knowledge. This makes clear what this house means to alumni: a history, a connection." ■


GREAT THINGS ARE HAPPENING HERE




 Edward C. Halperin, M.D., M.A., chancellor and chief executive officer, presented Marietta Lee, Ph.D., professor of biochemistry and molecular biology, with the 2013 Dean's Research Award on March 12 for her seminal contributions to the field of enzymology, specifically to the regulation of human DNA polymerase and its role in DNA replication and repair.


 The School of Health Sciences and Practice hosted the 2nd Annual Innovation and Scholarship Day on May 7. Students, faculty and staff members shared their innovative health projects and scholarly activities in research, teaching, and the integration and application of research and theory to professional service and practice. The project, Sustainability: On the Road to a Green New York Medical College, won first place in the application and practice category.


 The 18th Annual Medical Student Research Forum featured keynote speaker Lee Goldman, M.D., M.P.H., left, the Harold and Margaret Hatch Professor and Executive Vice President for Health and Biomedical Sciences at Columbia University. Edward C. Halperin, M.D., M.A., chancellor and chief executive officer, conferred with Dr. Goldman, an internationally recognized expert in health outcomes research and public health.


 The Health Sciences Library hosted the 20th Annual Author Recognition Event on January 8 to recognize the scholarly publications of faculty representing materials published from July 2012 through June 2013. Diana J. Cunningham, M.L.S., M.P.H. '00, retired associate dean and the Lillian Hetrick Huber Health Sciences Library Director, presented a special recognition award to faculty author Fred Moy, Ph.D., M.B.A. associate professor of clinical pathology and director of the M.S. program in experimental pathology, for his many years of support for the library programs.

 The Graduate Student Association of the Graduate School of Basic Medical Sciences hosted the 26th Annual Graduate Student Research Forum on March 20 featuring oral and poster presentations by 28 student researchers. Graduate Student Association Vice President Julia Singer and Francis L. Belloni, Ph.D., right, dean of the Graduate School of Basic Medical Sciences welcomed keynote speaker Victor M. Hesselbrock, Ph.D., left, professor and vice chair of the Department of Psychiatry at the University of Connecticut School of Medicine, to the event.

 The College community was proud to "Light It Up Blue" for World Autism Awareness Day on April 2 and raise money for Autism Speaks.

 At the Author Recognition Event, Michael Wolin, Ph.D., right, professor of physiology and chair of the Library and Academic Support Committee (LASCOM) presented an award to Chancellor and Chief Executive Officer, Edward C. Halperin, M.D., M.A., for editing the book, *Perez and Brady's Principles and Practice of Radiation Oncology*.

 The Class of 2017 paid their respects to the anatomical donors at the 26th Annual Convocation of Thanks in a standing-room only auditorium filled with the donors' family and friends. Students used music, song, poetry, personal reflections and art to express their unwavering appreciation and respect for the selfless generosity of those who donated their bodies.

 Barron H. Lerner, M.D., Ph.D., was the keynote speaker at the Second Annual Saul A. Schwartz, M.D. '30, Alpha Omega Alpha (AOA) History of Medicine Visiting Professor Lecture, on Tuesday, February 4 Dr. Lerner, second from left, who is professor of medicine and population health at the New York University Langone School of Medicine, met up with Iota Chapter President Zachary LoVerde, Class of 2014, Iota Chapter Councilor William H. Frishman, M.D., the Barbara and William Rosenthal Professor and Chairman of Medicine, and Edward C. Halperin, M.D., M.A., chancellor and chief executive officer.

COMMENCEMENT 2014



College leadership joined Commencement speaker Elizabeth G. Nabel, M.D., president of Brigham and Women's Hospital and professor of medicine at Harvard Medical School at Carnegie Hall on May 22. From left were: Edward C. Halperin, M.D., M.A., chancellor and chief executive officer; Rabbi Moshe D. Krupka, executive vice president for college affairs, Touro College and University System; Alan Kadish, M.D., president; Dr. Mark Hasten, chairman of the Board of Trustees; Francis L. Belloni, Ph.D., dean of the Graduate School of Basic Medical Sciences; and Robert W. Amler, M.D., dean of the School of Health Sciences and Practice and vice president of government affairs.



Proud alumni and faculty parents and an alumna spouse of graduates gathered before the ceremony.



The College's cappella group, the Arrhythmias, led the National Anthem.



Student Speaker Nathaniel Lepp and Student Senate President Amin Esfahani.



Ph.D. candidates in the Graduate School of Basic Medical Sciences.



Master of Science candidates in the School of Basic Medical.



Master of Public Health candidates in the School of Health Sciences and Practice.



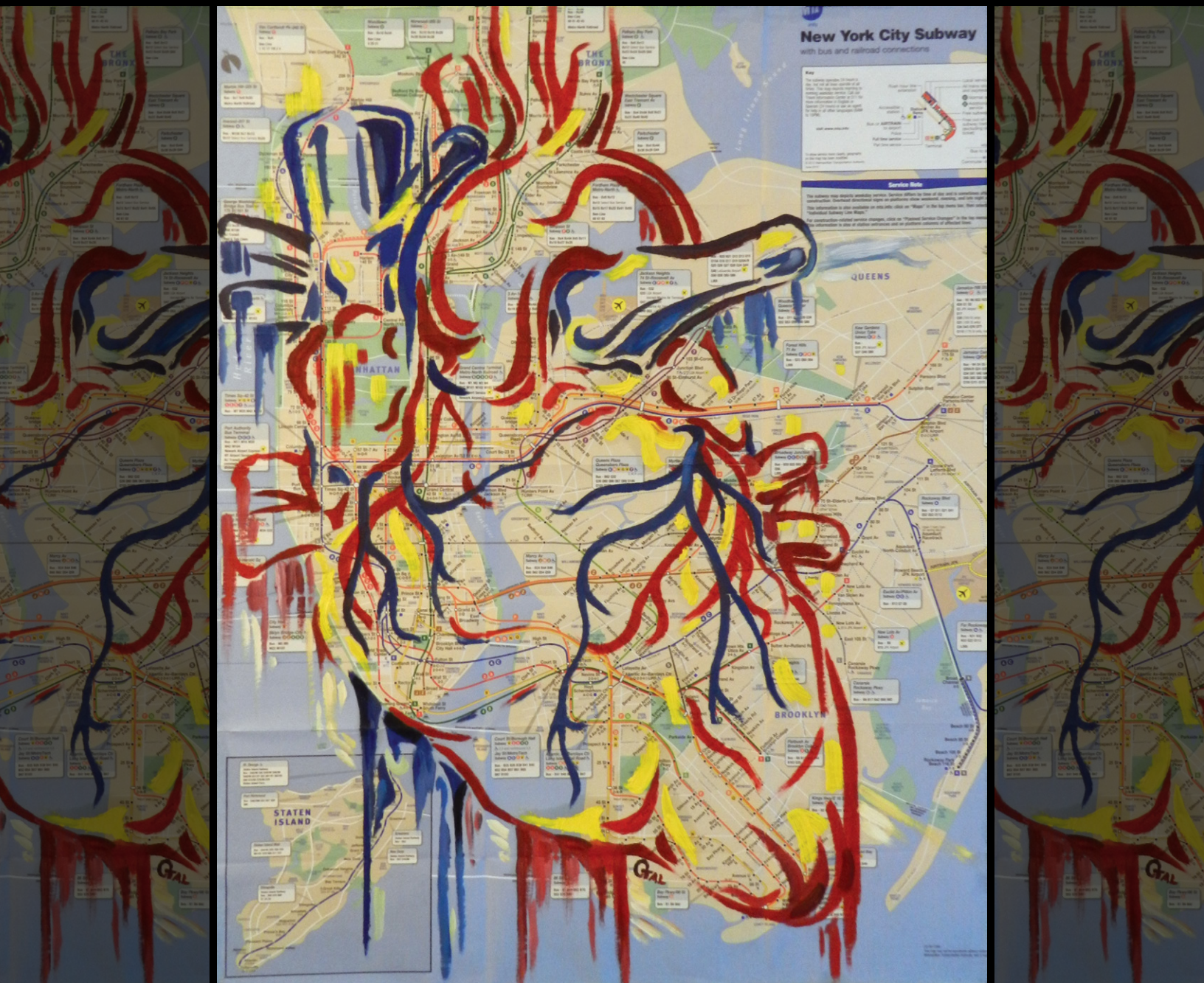
These soon-to-be doctors reflected on the words of Commencement speaker Elizabeth G. Nabel, M.D.

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Heart of the City by Oded Tal, School of Medicine Class of 2016