

Dean's Newsletter

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The Future of Pediatrics

Most clinical services and specialties in medicine are evolving or changing due to new technologies, innovations, patient expectations, interest of trainees and opportunities for future advances science and healthcare. The care of children, as a specialty, is largely a product of the post-Civil War period. Although special care facilities first arose in England during the 18th Century, they were largely for social care and child welfare, which reached heightened expectations during the Dickensian era. The first children's hospitals were established in the USA in the 1860s and the discipline of pediatrics emerged during the latter portion of the 19th Century. Various models of pediatric care have evolved in the 20th Century and have resulted in striking differences in the roles of the pediatricians in the US vs. the UK. How this field will change in the future is an important question that has implications for how and where care is delivered, whom we

train, and what skills will be needed. At the annual Board Retreat for the Lucile Packard Children's Hospital that was held on Tuesday, May 4th, important perspectives were offered on this topic by Dr. Ed Clark, Professor and Chair of Pediatrics at the University of Utah, and Dr. Craig Albanese, who joined Stanford as Professor of Surgery (Pediatrics) and Chief of the Division of Pediatric Surgery at the Lucile Packard Children's Hospital (LPCH) two years ago.

Dr. Clark noted several trends impacting pediatrics – some quite concerning. Among these are that while a number of medical school graduates have entered pediatric training programs, three-quarters or more of whom are women, only 23% are currently pursuing subspecialty training. Considering that only about 10-15% of those who pursue fellowships will ultimately be involved in research, the field of pediatrics is currently – and will increasingly – suffer a workforce shortage. This is particularly pronounced in certain areas (e.g., pediatric neurology, pulmonary medicine, etc) and is already resulting in a shortage of clinical care providers in important pediatric subspecialties. As significant as these clinical shortfalls are and will be, I am equally concerned about the paucity of individuals trained in pediatrics who are pursuing careers in research. If sustained, we run the risk of a having a serious shortfall of individuals trained to do pediatric research at a time when science is bringing forth some of the most exciting opportunities of our lifetimes – and thus, of not having important research opportunities made accessible for children. Obviously this is one area where I believe that Stanford can make an important difference. This is an issue that relates to both the School of Medicine and the Residency and Postdoctoral Training that occurs at LPCH – and argues again for the importance of better aligning medical training through the continuum of undergraduate and graduate education and training.

Another issue Dr. Clark addressed was the position taken by the American Academy of Pediatrics that every child should have a “pediatric home” or, put another way, a pediatrician providing primary or coordinating care. He offered his disagreement with that position and, while I confess a bias, I agree with him, as I have long held that this was neither sensible nor necessary. Indeed, a considerable portion of what is often referred to primary care pediatricians can be quite successfully delivered by other care providers, including nurse practitioners. This raises the question of what the role of the future pediatrician should be. Given the number of children with chronic medical disorders, it is certainly clear that these children do need a general pediatrician to guide their care. This is not necessarily the focus of current pediatric training programs and yet it is an important area for the future.

Dr. Clark also emphasized the importance of better aligning care within a community to a team of providers. Included in this are pediatric hospitalists and pediatricians who serve as general consultants. Such a team approach is based much more on the UK model than the US model of child health care. This is a model I also agree with but which would require considerable change in the scope and organization of our training programs. It is an area where I also hope Stanford and LPCH can take a lead.

In addition to these changes in pediatric medicine, equally significant changes are occurring in pediatric surgery. Dr. Albanese reviewed some of the exciting results now emerging in what is now referred to as “minimal access surgery.” During the last ten years this approach has revolutionized pediatric surgery and permits even complex procedures to be done with the use of pediatric adapted endoscopes, telescopes and video imaging. The more recent addition of robotics to this field is literally transforming the role of the surgeon as well as the operating room. Indeed, Dr. Albanese described the impact of these changes on the new operating rooms that will be developed at LPCH in the years ahead, which will be notable for their very high tech features, including advanced robotics.

An equally challenging issue for surgery however, is the declining number of medical school graduates entering surgery residency training. In recent years, the selection of residencies has focused as much on programs that enable a more balanced lifestyle as on those that focus solely on the specialty itself. A number of important variables are at play here, including the fact that currently more than half of the graduating class of American medical schools are women (obviously a good thing) but relatively few choose surgery as a profession. This is due to the length of training as well as the schedule and human burdens involved in general surgery or related surgical specialties. Clearly, considerable reform and modifications are necessary to make these fields of broader interest. Apparently, Stanford has done better than most programs in attracting women to its surgical residency training. While this is important, it is also clear that more fundamental changes will be necessary since this cannot simply be perceived as a gender issue. Again, it is my hope that Stanford will play a leadership role here as well.

It is clear that many changes are unfolding in the care of children. These include a shift to more care being delivered in ambulatory settings, a greater complexity of those admitted to the hospital, an expanding number of children with chronic medical illnesses, (some of whom will carry their disease to adulthood and thus impact the field of general and internal medicine), and a workforce that seems out of synch with where this field needs to go to assure success. The changes that will be necessary are cultural, political and economic and, of course, they are hardly restricted to pediatrics per se. But making them is essential to the future of pediatrics – and medicine.

Importance of Pediatric Research to the NIH: A Different Perspective

I had the opportunity to be in Bethesda on May 5th to help open the expansion to the Children’s Inn at the NIH, an event celebrated by Dr. Elias Zerhouni, Director of the NIH as well as Secretary Tommy Thompson, Secretary of HHS and numerous members of Congress and their spouses. This was personally meaningful, since the concept for the Children’s Inn at the NIH first emerged more than two decades ago through the initial advocacy of my wife Peggy and me. Over the ensuing years it engaged a large number of NIH health professionals.

Our initial efforts beginning in the early 1980’s were quite unsuccessful in convincing the NIH leadership that a facility to house children and families traveling to

Bethesda from around the nation - and world - to participate in clinical research protocols was important for their physical and emotional well-being. But we kept speaking on behalf of children and families, many with chronic and life-threatening illnesses. We championed the view that a home-like setting would improve the quality of their care, enhance participation in research and, in a number of important ways, serve as an important symbol to the NIH and its communities that pediatric research and the care of children is important.

Our first breakthrough occurred nearly 17 years ago when one of my patients, a young teenager with a form of Ewing's Sarcoma, turned out to be the babysitter to a Congressman's family. That offered an unexpected opportunity to describe our efforts to establish an inn for children on the NIH campus to this member and his spouse. Suddenly, doors once closed began to open. Over a period of a couple of years a new public-private partnership was forged between our NIH community, Congressional spouses and community leaders. Thanks to a generous gift from the Merck Foundation, the Children's Inn at the NIH was built and opened its doors in 1990.

Since its opening, more than 5,600 children, from all 50 states and nearly 50 countries, have stayed at the Children's Inn while participating in clinical research protocols at the NIH Clinical Center. This has not only led to a number of important advances in pediatric care and diagnosis, it has heightened the awareness of pediatric research to communities around the world. Indeed, it resulted in more and more children participating in clinical research so that it became necessary to expand the Inn by adding 22 new rooms to its original 37 rooms. This expansion was celebrated on May 6th.

Caring for children and carrying out pediatric research requires more time and resources than that necessary for similar procedures in adults. I am pleased that The Children's Inn at the NIH has helped facilitate these efforts and that it has served as an important symbol to the NIH and the Congress. The Children's Inn and its expanded facility are now located directly across the street from the new NIH Clinical Center. When you are next at the NIH stop by for a visit.

NIH Blue Ribbon Panel on Conflict of Interest

During the past three months you may have noted that my email response message indicated that I was spending a lot of time in Bethesda. The reason was my participation on the NIH Director's Blue Ribbon Panel on Conflict of Interest. This committee was charged to review some major concerns that were first expressed in a LA Times article (December 2003) about perceived infractions of conflicts of interest, especially by high ranking NIH leaders. Our committee was charged to review the NIH policies and procedures on conflict of interest and to make recommendations for their change or improvement – and to do so within 60 days. We completed that task and presented our 109-page report to the NIH Directors Advisory Group on May 6th. The report is available at http://www.nih.gov/about/ethics_COI_panelreport.htm.

Alumni Return to Renew Their Acquaintance with Stanford and Explore Medical Education for the 21st Century

On May 7-8th, the Alumni Association welcomed back Stanford Medical Graduates to renew acquaintances and friendships and to learn more about the current and future Stanford Medicine. While all returning alumni are appreciated, special recognition goes to the Class of 1954, who were celebrating their 50th Reunion. This year's Alumni Weekend featured the annual Senior's Luncheon, the Sterling Ceremony and Dinner and a terrific symposium entitled "Educating Stanford Physicians for the 21st Century and Beyond." In addition there was time for tours, luncheons and, of course, the Class Reunion Dinners.

Of special interest this year was an interactive symposium that helped introduce the New Stanford Curriculum to our alumni visitors. Following an orientation to the New Curriculum by Dr. Ted Sectish, our guests had an "Introduction to Molecular Medicine" by Dr. Gil Chu, Professor of Medicine and Biochemistry, that was modeled after the new – and very popular – course on "The Foundations of Molecular Medicine." They then rotated through five small group interactive teaching sessions that exposed them to various teaching methodologies and techniques. Included were:

1. *Physician as Knowledge Navigator* – with Dr. Henry Lowe, Senior Associate Dean for Information Resources and Technology.
2. *Anatomy – A New Approach to an Old Topic* – with Dr. Larry Mathers, Associate Professor of Pediatrics and of Surgery
3. *Launching the Future of Medical Education at the CAPE (CAPE) for Advanced Pediatric Education* – with Dr. Lou Halamek, Associate Professor of Pediatrics
4. *Demonstration of Small Group Pathology Laboratory* – with Dr. Don Regula, Associate Professor Pathology
5. *Learning Technologies in Medical Education* – with Dr. Parvati Dev, Associate Dean, Learning Technologies Director, SUMMIT

This was followed by an open discussion session that addressed observations, concerns and suggestions of the alumni. It was clear that virtually everyone found the Saturday morning symposium to be an informative and enjoyable experience. The questions focused on how to balance the high tech learning technologies with the important human proficiency knowledge and experience that a physician should have, but which many observe to be increasingly lacking. This includes competence in physical diagnosis and in humanistic interactions with patients. While I described how we are trying to accomplish this in our education programs, it is also clear that these fundamental underpinnings of medical education are areas where we still need improvement. Balancing high technology with high-tech (and not using technology as a surrogate for listening and making human contact with patients) is essential if we are to truly re-engage public trust and confidence in the medical profession.

Report on the Department of Microbiology and Immunology

At the May 7th Executive Committee meeting, Dr. Mark Davis, Chair of the Department of Microbiology and Immunology, provided an overview of its history and current activities. The department was founded in the first years of the twentieth century (circa 1910) by Hans Zinsser, an early and distinguished scholar in the field of microbiology. Today the department consists of 14 faculty with primary appointments and, importantly, roughly an equal number with joint appointments. Indeed, the department is unusual in its number of joint appointments and may serve as a model for the types of interdepartmental and interdisciplinary initiatives the School hopes to foster in the coming years.

The department currently has 54 Ph.D. students, 72 post-doctoral fellows, 48 scientific staff and 15 administrative staff members. Faculty teach a wide range of courses across multiple levels, from freshman seminars on modern plagues and infectious diseases to courses in the medical curriculum and doctoral courses in immunology, virology, pathogenesis of bacteria, viruses, and eukaryotic parasites, and stem cells and gene therapy. The major research themes of the faculty are virology, parasitology, immunology, bacterial pathogenesis and physiology, and mammalian cell biology and differentiation. Dr. Davis briefly described the current research of the departmental faculty.

The Department of Microbiology and Immunology is engaged in exciting research and a broad array of important teaching activities.

California Stem Cells for Research and Cures Initiative

Also at the May 7th Executive Committee meeting, Mr. Ryan Adesnik, Director of Federal Relations, described the activities underway to advocate the passage of the California Stem Cells for Research and Cures Initiative, which will be on the November ballot in California. The initiative is a bond measure that would provide \$3 billion over ten years to fund promising California-based stem cell research. One of the activities he described was an event in Los Angeles on Saturday, May 8th in which Nancy Reagan spoke in support of the initiative. Members of the Executive Committee were encouraged to become informed about the initiative and to participate in it if they wished.

Our New Interdisciplinary Grants Manager will Help You with the NIH Road Map

Finally, at the Executive Committee meeting on May 7th, Dr. Chris Webb, who recently joined the School in the new position of Interdisciplinary Grants Development Manager, described the services he offers. Chris's role is to provide expertise and direct assistance in organizing and assembling large multi-faculty, multi-departmental grant applications. Among the services he provides are the following:

- Scheduling: setting up deadlines and check-points for various steps in the process of writing and assembling a proposal
- Organization and outline: generating an outline and overall organization of a document
- Writing: writing summary material, such as introductions, abstracts, and general overview sections
- Technical editing: making scientific concepts more understandable by a non-expert

- Stylistic editing: improving flow and clarity of the text
- Formatting: ensuring that the document is properly formatted and adheres to guidelines
- Budgeting: helping develop the budget, ensuring that the budget is in rough agreement with the project described in the proposal, helping to write the budget justification

I am very pleased to have Chris in the School, and I encourage faculty who are working on large interdisciplinary grant proposals to contact him at cdwebb@stanford.edu.

Some Notable Events

- ***Memorial Service for Robert WP Cutler***: On May 11th, a Memorial Service celebrating the life of Robert WP Cutler was held in the Stanford Memorial Church. As noted in a prior Newsletter, Dr. Cutler, Professor Emeritus of Neurology and Neurological Sciences died on April 12th. During his tenure at Stanford, Dr. Cutler was an esteemed and valued faculty member who also served 13 years in the Dean's Office, first in Medical Education and subsequently for Faculty Affairs. Friends and colleagues of Dr. Cutler, including Drs. William Hofmann, James BD Mark, Fernando Mendoza and J. William Dawson, offered words of remembrance. The portrait of a wonderful human being, expert clinician, astute administrator, builder and author, among other many other talents, emerged. He is clearly missed. Dr. Cutler is survived by his wife Maggie, their son Aaron and grandchildren.
- ***HBO Screening Engages Community About the Stanford Cardiovascular Medicine Institute***. On Friday evening, May 14th, we hosted the premier of a soon- to-be released HBO movie entitled "Something the Lord Made" based on the remarkable lives and contributions of Dr. Alfred Blalock and his lab technician, Vivian Thomas, who pioneered cardiac surgery in the 1940's. This is a remarkable story, and the HBO movie, which will be aired on May 30th, is definitely worth seeing. More than 350 members of the community attended this special event and had the opportunity to not only learn about the pioneering work of Blalock and his collaborators at Johns Hopkins but also to learn more about our new Stanford Institute for Cardiovascular Medicine.

As you know, Stanford also has a rich history of contributions to innovations in cardiovascular surgery, heart transplantation and new diagnostic and therapeutic devices. This positions us well for the new Institute that will be led by Dr. Bobby Robbins, Associate Professor of Cardiothoracic Surgery, who offered a number of examples about areas for future progress. Dr. Robbins also invited the attendees of this very well-received event to return on September 21st for the Mini-Medical School that the Cardiovascular Institute will host to better inform and engage the community in new research and clinical advances. This is part of our overall effort to move and translate knowledge gained in the laboratory more rapidly to the care of adults and children with cardiovascular disorders.

- ***National Center for Space Biological Therapeutics is Launched!*** On Monday, May 10th, a reception was held to celebrate the kick-off of the new Stanford/NASA Ames National Center for Space Biological Technologies – the result of a \$9M funding from NASA. Dr. Greg Kovacs, Associate Professor of Electrical Engineering is the Principal Investigator along with Co-Investigators Dr. Judy Swain, Professor and Chair of the Department of Medicine and Dr. Steve Schendel, Professor of Surgery. This new Center will develop technologies, instruments and systems for physiological monitoring of humans in space and for developing advanced instrumentation for fundamental and applied space biology research. The Center will also promote educational opportunities and will, undoubtedly, engage and produce technologies that will impact human health on earth as well. This is a very exciting opportunity and if you want to learn more about it feel free to get in touch with Drs. Kovacs, Swain or Schendel.
- ***Annual Dinner to Thank Donors to Medical Education.*** On Tuesday, May 11th, we held our annual dinner to thank donors to medical education. This is a wonderful event, and this year's dinner was no exception. The cost for medical education is significant and the average indebtedness of medical students is nearly \$125,000. Thanks to the support of donors and alumni, we are able to provide significant financial aid to Stanford students so that their average indebtedness is \$64,000. Not only does this support enable our graduates to pursue careers that are of the greatest interest to them, it also enables many students to attend medical school who might not otherwise have been able to do so. This is a wonderful gift and I am most thankful to all who have helped make these financial resources available to our students.

The highlight of the so called “financial aid dinner” is commentaries from a small number of students about how coming to Stanford, and of course receiving financial aid, has changed their life. While it is certainly the case that virtually any one of our students could provide a compelling personal story, we heard three representative ones on May 11th – each extraordinary in their own way. I particularly want to thank Leroy Sims (SMS 2), Pamela Mosher (SMS 3) and Richard Cano (SMS 4) for offering very personal glimpses into their lives, including the road they traveled before coming to medical school and how being at Stanford is shaping the course they will follow in the future. The personal stories they provided were compelling and moving to all who attended this wonderful event.

- ***Twenty-First Annual Stanford Medical Student Research Symposium:*** On Thursday, May 6th, the Stanford Medical Student Research Symposium was held. This year's event was dedicated to the memory of Dr. Robert Cutler (see above), who began these annual symposia when he was in the Dean's office some 21 years ago. Thanks to the support of the Alumni Association, this event allows our students to share the results of their research data through poster presentations. This year, 38 students participated in the program and offered a wide array of

topics and results. I want to thank Dr. Pat Cross, Associate Dean for Medical Student Research and Scholarship, and Maria Berumen, Symposium Coordinator, along with students Benjamin Berk, Benjamin Hoehn, Eliza Long, Mary-Elizabeth Muchmore, Marie Huong Nguyen and Al Taira, for their work on the symposium. I also want to thank the faculty advisors and research mentors who helped students with their research.

This year's presenters included Antonio Alvarez, Roger Bartolotta, Benjamin Berk, David Berk, Rebecca Berquist, Alyssa Brewer, Joanna Chan, Eric Cornidez, Megan Daly, Jason Davies, Melissa Enriquez, Noah Epstein, Oscar Gonzales, Karen Hirsch, Michael Ho, Wan-Jen Hong, Paul Johnson, Lily Kao, Melissa Ketunuti, Holbrook Kohrt, Andrew Kopelman, Darren Lebl, Cheryl Levin, Dhara MacDermed, Lauren Maeda, Ellen Morrow, Amy Neuder, Rebecca Rakow, William Ryan, Ramin Saketkhoo, Naileshni Singh, Glenn Valenzuela, David Wang, Deborah Williams, Lisa Wong, Joanna Wrede, Gerado Zambrano and Alenka Zeman. I also want to thank each of these students for taking part in this important research symposium.

- ***Medical Student Panel on “Universal Healthcare: Options for Change.”*** On Wednesday evening, May 12th, an excellent panel debate was organized by first year medical students as part of the health policy component of the Practice of Medicine course. The symposium featured a panel debate by three authorities representing different point of views. Dr. Don Barr, Associate Professor in the Department of Sociology served as the moderator; the panelists included Dr. Victor Fuchs, the Henry J Kaiser, Jr. Professor Emeritus, Dr. Anmol S. Mahal, Chair of the Board of Trustees of the California Medical Association and Dr. Don McCanne, President of the Physicians for a National Health Program. Each presented their specific points of view or recommendations and then responded to questions generated by the students. It was a very thoughtful dialogue and I commend the students for organizing this event. Special thanks to first year students Erik Cabral, Christle Layton, Lori Rutman, Ryan Williams and Joanna Wrede.
- ***Stepping Up: Actions to Improve Asian American and Pacific Islander Health:*** On Saturday, May 8th, the Asian Pacific American Medical Student Association held its 2004 Western Regional Conference at Stanford to provide the university community with suggestions and options “to get involved and take action to improve the health of Asian and Pacific Islanders both now and as health care providers in the future.” The all day event featured presentations, workshops and networking opportunities. A truly excellent program was presented. Special thanks go to the Conference co-chairs Bory Kea and Jolene Nakao.
- ***Medicine and the Muse:*** On Thursday, May 13th, the School was privileged to host Medicine and the Muse, an Arts, Humanities and Medicine Symposium. This event was supported by generous grants from Helen and Peter Bing, The Osher Foundation, and The Vera M. Wall Center at Stanford. It was sponsored by the

Biomedical Ethics and Medical Humanities Scholarly Concentration and the Stanford Center for Biomedical Ethics. The keynote speaker was Dr. Rafael Campo, author of *The Healing Art: a Doctor's Black Bag of Poetry*. Sarah Bain moderated the event. Michelle Rhee, Joshua Spanogle, Elise H. Lawson, and Sarah Hilgenberg presented their Arts and Humanities Medical Scholars projects. Matt Bucknor and John Nguyen each sang and played original guitar compositions; Nguyen was accompanied by Merritt Schader on the xylophone. Bryan Maxwell, Sarah Langley and Cheri Blauwet read their creative writing. Sheri Chevez, Sharon Kwan, Sarah Ratanasopa and Tracy So displayed their work in the visual arts exhibit. The audience was visibly moved and impressed by the depth of talent and dedication displayed by these students. Thanks to everyone involved in making this symposium such a successful and meaningful event.

- ***Dedication of the Vera Moulton Wall Laboratory for Pulmonary Vascular Research:*** On Thursday, May 13th, the dedication of the Vera Moulton Wall Pulmonary Vascular Research Laboratory was held in the courtyard of the Center for Clinical Sciences Research (CCSR). The Laboratory, which is run by Dr. Marlene Rabinovitch, the Dwight and Vera Dunlieve Professor of Pediatrics, is part of the Wall Center. This was named two years ago in honor of the grandmother of a pediatric patient with pulmonary hypertension who was treated at the Lucile Packard Children's Hospital. The mission of the Wall Center is to heighten awareness about pulmonary vascular disease, to serve as a resource center, to provide education to students and postgraduate trainees, to offer clinical care and to conduct research that improves the understanding and treatment of these disorders. Dr. Rabinovitch is the Director or Research for the Wall Center and Drs. Jeff Feinstein and Ramona Doyle serve respectively as the Director and Co-Directors of the Center.

Announcements

- ***Dr. Ron Levy***, Robert K. and Helen K. Summy Professor and Chief of the Division of Oncology in the Department of Medicine, will be featured in a special celebration honoring his accomplishments (see also below) in cancer research in a featured broadcast on the Discovery Health Channel on July 8th.
- ***Dr. David Gaba***, Professor of Anesthesia, has been named to a new position as the Associate Dean for Immersive and Simulation-Based Learning, effective July 1st. In this role he will have the responsibility of defining how the School should use immersive and simulation-based technologies to support our clinical, research and educational missions. This will include coordinating the extant programs at the VA Hospital, Department of Surgery, Department of Pediatrics, and SUMMIT that are already contributing to these important efforts and especially working with them on how they will relate to our new learning and knowledge center. This position will be under the aegis of Information Resources and Technology.
- Stanford University students will be joining more than 100 other peer colleges and universities for a 24-hour Dance Marathon to raise money to support the

activities of the Elizabeth Glaser Pediatric AIDS Foundation and especially the important work being performed to reduce the transmission of HIV in developing nations. If you are interested in making a contribution to this cause (or participating in the Dance Marathon) contact Vinesh.Patel@Stanford.edu.

Awards and Honors

- **Dr. Matt Scott** has been named the recipient of the 2004 Edwin G. Conklin Medal in Developmental Biology in recognition of his outstanding research as well as mentoring. Dr. Scott will deliver the Conklin Lecture and receive his award at the Society of Developmental Biology Meeting in July. Congratulations to Matt!
- **Dr. Ron Levy**, the Robert K. and Helen K. Summy Professor and Chief of the Division of Oncology in the Department of Medicine, was the recipient of this year's JE Wallace Sterling Lifetime Alumni Achievement Award in recognition of his groundbreaking work in cancer immunotherapy and cancer vaccines. He received the award at the Alumni Dinner on Friday, May 10th, with special acknowledgments and accolades from his long-time colleagues Saul Rosenberg and Karl Blume. Congratulations to Ron.

Appointments and Promotions

- **Amar Das** was appointed to Assistant Professor of Medicine (Medical Informatics) and of Psychiatry and Behavioral Sciences, effective 5/1/2004 to 4/30/2007.