

Dean's Newsletter

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Dr. Larry Mathers: Loss of a Remarkable Teacher, Respected Clinician and Renowned Colleague

On Wednesday night, February 21st I learned that Dr. Larry Mathers had been found dead at his home. The news was a shock and has understandably been met with widespread grief and dismay by students, faculty, staff and friends. Dr. Mathers was a one-of-a-kind person and was loved and respected by the Stanford community, which had been his home and life for more than four decades, and beyond. ***We will be holding a Memorial Service to honor and celebrate Dr. Mathers' life and contributions on Friday, March 9th at 4 PM in the McCaw Hall at the Arrillaga Alumni Center, 326 Galvez Street, Stanford. You are all invited to attend.***

Born in San Francisco, Dr. Mathers attended Stanford as an undergraduate and received a PhD in Anatomy in 1971. Except for two years at the University of Wisconsin, he spent his entire career at Stanford. Over the course of his career, he became one of the most highly regarded and renowned teachers and educators in Stanford's history. He was instrumental in teaching human anatomy to generations of Stanford students, and he did so with dignity and excellence. Indeed, during his career Dr. Mathers received 14 major teaching awards – which must be a record, and a very well deserved one. His accomplishments as a teacher and educator were also recognized by his very recent promotion to Professor in the Teaching Line – a further affirmation of his national and international leadership as an extraordinary teacher. But his accomplishments go much further.

Despite a highly successful career in human anatomy, Dr. Mathers decided to pursue medical training as well, and he received an MD from Stanford in 1982. He then went on to train in pediatrics, neonatology and pediatric intensive care and ultimately became Board Certified in all three areas. He maintained a very active role as an attending physician and Associate Director of the Pediatric Intensive Care Unit, where he provided clinical care as well as education for residents, fellows and students. Indeed, by being actively involved in direct patient care and clinical teaching he complemented his

outstanding role as a highly regarded teacher of human anatomy to first year medical students. I also have no doubt that his compassion and sensitivity as well as clinical acumen in dealing with the sickest of children made him an even more effective teacher and educator of preclinical science – and vice versa. He truly bridged the connection between preclinical and clinical education and earned the respect and admiration of the entire Stanford community. But there is more.

Dr. Mathers was also a committed and dedicated citizen of the School, and he worked with colleagues and the Medical School Faculty Senate to help support and care for students – including those who encountered difficulties. He was always there to help – always willing to give of himself on behalf of others. But this also was only a part of Dr. Mathers.

Larry Mathers had an important life outside the classroom and hospital. He and his wife Mildred Jones-Mathers, who, sadly, died nearly three years ago, were students of Native American Culture, and they spent their vacations visiting different Native American communities. And Larry Mathers was a remarkably talented jazz pianist – and vocalist – who never missed a beat at a party or an event. In fact, even if no one was around he would not infrequently be found playing the piano in the atrium of Stanford Hospital & Clinics to the delight of anyone who had the opportunity to cross the corridors during an impromptu “concert.”

Equally important, Dr. Larry Mathers was a genuinely lovely human being who cared more about others than himself. He was always available, always giving, always reaching out. He shared a part of his life and his humanism with all who wished to receive them – and thus he benefited those whose paths he crossed in numerous sectors of our community.

Death is a part of life and while in medical communities we are more than cognizant of that simple fact, when it occurs suddenly and without warning, especially to someone we love and respect, it leaves us with feelings of great loss. That has been clearly palpable during the past several days as Dr. Mathers’ students, colleagues and friends have grappled, each in their own unique way, with the impact of this very sad news. With that in mind I want to remind you that you can explore and use the Stanford grief website at <http://grief.stanford.edu>, which provides an overview of resources available to our community. If you are interested, students may wish to attend one of the gatherings sponsored by Counseling and Psychological Services, the Deans for Religious Life, and the Residence Deans to share their feelings of loss with one another. There will be such a gathering on Thursday, March 1st in the second floor conference room at Vaden at 5:30 pm (dinner will also be available). And if you wish to share personal comments, reflections or thoughts about Dr. Mathers, we have posted a website and a guestbook that you can access at <http://mednews.stanford.edu/mathers/>.

I know we are all saddened by the loss of such a wonderful colleague and teacher. And while those feelings will linger long into the future, I also hope you will join us to

honor and celebrate Dr. Mathers on Friday, March 9th in the Arrillaga Alumni Center at 4:00 pm.

Stem Cell Research in California is Officially Seeded

Twenty-five months following the birth of Proposition 71 and the California Institute for Regenerative Medicine (CIRM), the first research “Seed Grants” were approved by the Independent Citizen’s Oversight Committee (ICOC), of which I have been a member, on Friday, February 16th. It was a historic moment that had as a hallmark the attendance of Governor Arnold Schwarzenegger, whose advance funding of \$150M made the grant awards possible. California now takes a major step forward in becoming the nation’s leader in human embryonic stem cell research. While the ICOC had originally planned to award \$25M of Seed Grants, we increased that amount to nearly \$45M based on the quality of the submissions and the need to truly move the stem cell research agenda forward. It is also remarkable that the amount of money for stem cell research from the NIH for the entire nation this past year was \$38M, and those funds were restricted to the so-called approved cell lines. Those restrictions will not exist with CIRM funds, but it is important to underscore that the research will be conducted with the highest of ethical standards and with attention to assuring that CIRM research grants are appropriately insulated from federal support within the guidelines that are available.

While we must be proud that California will now proceed forward, the results of the highly competitive review process were also quite laudatory to Stanford faculty. Indeed the review process, conducted by leading scientists from outside California, critically evaluated the 231 grant submissions from 36 California institutions. With the expanded funding, 72 grants were ultimately approved for funding, 12 of which were from Stanford faculty (totaling over \$7M). In fact, Stanford received more grants than any of the other 20 successful institutions. The excellence of the Stanford proposals is further affirmed by the fact that they were also among the most highly rated of the approved grants. A listing of the successful Stanford faculty and the focus of their proposals can be found at: <http://mednews.stanford.edu/releases/2007/february/cirm.html>.

I want to offer my congratulations to each of the individuals who were funded – at Stanford and throughout California – and also express my appreciation to those who may not have been successful on this round – but who will likely be so in future submissions. We have lots of work to do in this exciting area of research and I am so pleased that we are finally getting started.

Update on the Stanford Medical Youth Science Program (SMYSP)

At the February 16th meeting of the School’s Executive Committee, Dr. Marilyn Winkleby, Professor of Medicine and Faculty Director of the Stanford Medical Youth Science Program (SMYSP), gave an update on this program and its role in helping to address the crisis in the science and medical education pipeline among minority students. In her presentation Dr. Winkleby drew on her 20 years of experience in directing and evaluating pre-college science education programs. Judith Ned, SMYSP Executive

Director, accompanied Dr. Winkleby to this presentation. Over the years SMYSP has grown into a complementary set of university- and school-based programs, all of which focus on very low-income high school students (see <http://smysp.stanford.edu>).

Dr. Winkleby cited three critical factors contributing to the crisis in science and medical education: 1) too few ethnic minority and low-income students complete postsecondary education; 2) even fewer earn degrees in the sciences and enter medical and health professions; and 3) the problem is accentuated by the rapid increase in ethnic minority and low-income populations, who are at greatest risk of poor health. She pointed out that programs such as SMYSP's 5-week residential summer program afford opportunities for students that school-based programs cannot provide, because they tap into faculty, hospital field placements, and science resources such as anatomy practicums that are not available at other school sites. These experiences are often those that most excite students about science and health careers.

Dr. Winkleby concluded her presentation with the impressive evaluation results from SMYSP. Since 1988, 428 students have completed SMYSP and 96% have been followed for up to 19 years. Ninety-nine percent have been accepted to college. Of those admitted to college or not currently in college, 82% have completed a 4-year college education, with the majority majoring in the biological and physical sciences (58%). Equally impressive, fifty percent of 4-year college graduates are attending or have completed medical or graduate school. Moreover, many of the 4-year college graduates (44%) are becoming or have become health professionals. These are remarkable results, and they attest to the dedication of Dr. Winkelby and all those who work to make the program a successful – and inspiring – experience for the participants.

Dr. Winkleby and the members of the Executive Committee discussed the importance of SMYSP as well as the other pre-college science pipeline programs in the SOM, such as those in immunology, genetics, and cancer biology. They expressed their goal of making Stanford a leader in pre-college science education programs and their hope that efforts will be made through the Stanford Challenge to secure the resources necessary to make this goal a reality. I certainly share their goal – and their hope.

Dr. Rob Jackler Takes on Additional Role as Associate Dean for Continuing Medical Education

During the past several years we have made considerable advances in a number of our medical and graduate student education programs. Going forward I am eager to better align undergraduate medical education with the graduate training that occurs during residency and fellowship. In addition, I believe we have considerable opportunity in continuing medical education (CME).

To address our current status and future challenges in CME I appointed a committee chaired by Dr. Jonathan Berek, Professor and Chair of the Department of Obstetrics and Gynecology, that included representatives from the school as well as Stanford Hospital & Clinics and the Lucile Packard Children's Hospital. The committee

highlighted the highly dispersed and sometimes poorly coordinated CME efforts that exist across the medical center and offered a number of recommendations to better define, align and develop CME programs that are more commensurate with our status as a leading research-intensive school of medicine and medical center. This means establishing a much greater degree of central coordination while also being cognizant of the need for hospital and departmental program development. The services offered by the School's CME office must be value-added and must meet multifaceted needs that range from education and public relations to marketing and compliance. They must also bring value to – and be valued by – the Stanford “brand.”

I am pleased to announce that, based on this assessment, I asked Dr. Robert Jackler, Professor and Chair of the Department of Otolaryngology/Head and Neck Surgery, to become the Associate Dean for Continuing Medical Education, and he has agreed. We envision that for the immediate future this will require about a 15% effort, and we are both confident that this will not interfere with the excellent work he is currently performing as department chair. Dr. Jackler has already begun formulating the early stages of a strategic plan for CME and is considering a number of new initiatives, such as web based learning, simulation based learning and ways of linking the integration of CME with quality improvement – all of which are aligned to our current missions and goals. He will also be seeking better alignment with the Accreditation Council on Continuing Medical Education and greater collaboration between the school and hospital efforts in order to improve our local, regional and national presence in continuing medical education. While it is clear that we have work to do, I am confident that with Dr. Jackler's leadership and his collaboration with the principal stakeholders throughout the medical center, we will make considerable progress in the years ahead.

Medical School Faculty Center Votes on Major By-Law Revisions

On Wednesday, February 21st the Medical School Faculty Senate unanimously approved a major revision of its By-Laws based on a year-long effort that included the establishment last summer of a committee led by Drs. Ron Ariagno, Professor of Pediatrics and Oscar Salvatierra, Professor Emeritus of Surgery, who worked in close collaboration with Senate Chair Dr. Sherry Wren and the Committee of Five.

The major reason for the By-Laws revision was their lack of compliance with expectations of the LCME (Liaison Committee on Medical Education) that the line of authority for medical education be more clearly vested in the Dean of the School of Medicine. As it turns out, the By-Laws had not undergone a major revision for 40 years, since not long after the medical school moved to the Stanford campus. Much has changed in the interim, and a major goal of the By-Laws revisions was to make them more consonant with current practice.

The dominant spirit of the proposed By-Laws is captured in the revised Preamble, which now reads: *The faculty of the Stanford University School of Medicine does establish a Faculty Senate according to these Bylaws, and subject to the provisions of the*

Articles of Organization of the Academic Council of Stanford University and to the authority of the Stanford University Board of Trustees. The Senate shall represent and serve as a voice for the faculty in the School of Medicine. The Senate shall also provide a forum for discussion and communication and shall collaborate with and advise the Dean on matters related to the Senate's responsibilities and on other matters related to the well-being and future of the School of Medicine as well as its faculty and students as desired by the Dean and/or the faculty. The Senate will report to and be accountable to the faculty and will carry out its responsibilities in collaboration with the Dean of the School of Medicine and the academic leadership of the School.

With the approval of the Faculty Senate in hand, the School's Executive Committee will next review the By-Laws for approval. Once that is accomplished they will be sent out to each faculty member for review and approval. If passed, they then go to the President and Board of Trustees for final approval. This rather arduous process is required by the current By-Laws. While faculty will be engaged in this process more formally in the next couple of months, if you wish to review the Faculty Senate proceedings in the interim, they are posted at: <http://med.stanford.edu/senate/>.

Update on Trip Reduction Issues

The Provost has again contacted the Schools to request our attention to trip reduction issues. He said, in part: *"It is critically important for both the university and the surrounding communities that we continue to do everything we can to live within the commute traffic limitations of the GUP....every administrative unit and school must give this effort priority attention and approach this challenge each year with a strong commitment. In addition to using the many successful alternative transportation programs we have in place, as many employees as possible should be encouraged to make the following changes, when appropriate:*

- *Commute to Stanford by public transit, vanpool, carpool, bike, or foot;*
- *Alter work schedules (shift schedules so employees commute out of the peak periods); or*
- *Telecommute*

Alternative workweek schedules need to be adopted in accordance with certain legally prescribed procedures. Departments should consult with Human Resources for assistance in adopting such schedules and for guidance on telecommuting arrangements. See http://adminguide/22_4.pdf (section 6) for more information.

*I am also asking departments to pay attention to **event scheduling**. If your group sponsors or hosts large events on campus (conferences, seminars, lectures, concerts, large meetings, or other activities), please try to schedule them so that attendees arrive and depart during non-peak commute periods. With the very large number of university activities taking place on campus, controlling event attendee arrival and departure times could have a dramatic impact on our trip counts."*

There are several intertwined issues regarding the General Use Permit, parking, and the move off campus that are timely in this regard. First, commitments that have made to alternative means of commuting should still be in place. That includes individual commitments made last fall in Phase II of the trip reduction program, as well as departmental commitments made in Phase I, which asked employees to adjust their hours to avoid commuting during peak hours.

Second, this might be a good time to consider giving up your parking sticker and using alternative forms of commuting full time. As you may have heard, the Connective Elements project in the School of Medicine will require the closing of the large south parking lot that extends from the Clark Building to MSOB. This means that parking spaces will be far more difficult to come by, and biking or public transportation will be relatively more convenient. By giving up your parking sticker, you can be refunded for the months remaining in the year, in addition to joining the Commute Club and thereby accessing all of its benefits and becoming eligible for Clean Air Cash.

Third, it is extremely important that events held at the School of Medicine do not add to the burden of traffic during peak hours. Therefore, please be sure to schedule any events in such a way that individuals are not required to drive onto or off of campus during peak hours.

Finally, now that spring is around the corner, this is an excellent time to consider, once again, biking to work. There are numerous advantages to that and other alternative commuting methods: exercise, stress reduction, being good to the environment! There are many resources that can help you consider and make alternative commuting methods; for a start, try <http://www.511.org/>. And please do not forget to complete the on-line Parking & Transportation Survey that was emailed to everyone last week; it takes only a minute to complete. Thanks to everyone for your efforts to reduce the number of peak hour trips you make to campus.

Thanks and Farewell to Dr. Ted Sectish

On Tuesday evening, February 20th pediatric residents and faculty gathered in the Arrillaga Center to offer their appreciation to Dr. Ted Sectish, who is leaving Stanford to become the Program Director for Graduate Medical Education at the Children's Hospital, Boston as well as the director of the Future of Pediatric Education for the Federation of Pediatric Organizations. Dr. Sectish has been the Program Director at the Lucile Packard Children's Hospital since 1993. During that time he has done an outstanding job in helping to recruit outstanding trainees and in developing a wonderful and highly supportive environment for resident education. He has also played an important role in many of the School's education initiatives and was instrumental in the process of revising the New Medical Student Education Curriculum that went into effect in 2003. Dr. Sectish is widely viewed an outstanding teacher – as evidenced by numerous teaching awards at Stanford – as well as a compassionate and exceptionally knowledgeable pediatrician. He is a caring person and is much admired by the pediatric housestaff and faculty – and he

will certainly be missed. I want to add my thanks and appreciation to Dr. Sectish for his many accomplishments at Stanford – and wish him well in Boston.

Awards and Honors

- **Dr. Scott L. Delp**, Professor of Bioengineering, Mechanical Engineering and, by courtesy, of Orthopaedic Surgery, was appointed the Charles Lee Powell Foundation Professor of Engineering. Congratulations Dr. Delp.
- **Dr. Michael T. Longaker**, Deane P. and Louise Mitchell Professor, Director of Children's Surgical Research, Deputy Director of Stanford's Institute for Stem Cell Biology and Regenerative Medicine and Director, Program in Regenerative Medicine, Stanford University, Department of Surgery, Division of Plastic and Reconstructive Surgery, has just been elected 69th President of the Society of University Surgeons. Congratulations, Dr. Longaker.
- **Dr. Alison L. Marsden**, Post Doctoral Scholar in Pediatrics, has been awarded the Burroughs Wellcome Fund's Career Award at the Scientific Interface, for the scientific excellence and innovation of her research proposal and the potential to establish an independent research career at the interface between biology and the quantitative, physical, and theoretical disciplines. Congratulations, Dr. Marsden.
- **Dr. Doug Owens**, Professor of Medicine and, by courtesy of Health Research and Policy, has been awarded the prestigious Under Secretary's Award for Health Sciences Research, for his two decades of distinctive research in health outcomes and health care policy. Please join me in congratulating Dr. Owens for this special honor and recognition.
- Two students have been awarded the prestigious 2007 Paul and Daisy Soros Fellowship, created to support graduate study of New Americans:
 - **Amit Kaushal**, graduate student in Biomedical Informatics, is pursuing an MD/PhD at Stanford.
 - **Keyan Salari**, graduate student in Genetics, is pursuing an MD/PhD at Stanford.

Appointments and Promotions

- **Olivia R. Martinez** has been promoted to Professor (Research) of Surgery, effective 3/01/07.

