Dean’s Newsletter
January 28, 2008

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Faculty Leadership
On January 15th, we celebrated the graduation of the 2007 Faculty Fellows as they completed their year-long program sponsored by the Office of Diversity and Leadership (ODL). Over the course of the year, the fourteen junior faculty members who had been chosen as Fellows participated in discussions of the personal leadership journeys of Medical Center and University leaders that served as case studies for reflection and dialogue. They also participated in small group discussions with their assigned faculty mentor and, importantly, developed individual leadership goals they will pursue over the next year. This is the second year of this program, which is garnering rave reviews by its participants.

Since the inauguration of the ODL under the leadership of Senior Associate Dean Dr. Hannah Valantine, the School of Medicine and the Medical Center have launched a number of leadership training programs, the common goal of which is to foster the career development of faculty – and of course, to help create and develop a new generation of faculty leaders. At the January 15th event, senior faculty members who nominated each Faculty Fellow offered comments on the reasons why they chose their nominee and what
they hoped they would achieve from the program. The Faculty Fellows also reflected on what they learned from the program and how it has changed their career plans and pathways.

Several common themes emerged, a number of which are consonant with those that were enunciated by the Faculty Fellows who participated in the inaugural 2006 program. One consistent comment was how the Faculty Fellows Program made each individual feel more closely aligned to the Medical School and the University. Virtually each individual commented that they now had a better understanding of the goals and objectives of the medical school and how they could be a part of its inner workings. Equally important, many Fellows noted that because of this they now felt more bonded to Stanford and thus less likely to leave. In fact, several commented that they rejected recruitment offers because they now felt closer to Stanford and its missions.

Another theme that emerged was that individuals who initially felt somewhat daunted by the success of those they found at the helm of the institution now felt that they too could be successful over time. They observed and noted common themes for success – a sense of mission, passion, and integrity – and the ability to be flexible and take on new career directions that had not been foreseen or planned.

Importantly, the Faculty Fellows described how much they learned from each other and also how important their senior faculty mentors had been to them in building personal confidence and sharing perspectives on career and personal development. I would add to this that I am impressed at the way that traditional stereotypes are being broken in this program. Specifically, basic and clinical Faculty Fellows formed new alliances and sources of support, while Senior Mentors from both basic and clinical science were helpful to Fellows from different backgrounds and disciplines. I would like to express my appreciation to the four 2007 Senior Faculty Mentors, who played such an important role in this program. Specifically, deeply felt appreciation to:

- **Dr. Linda Boxer**, Professor Medicine and Chief of the Division of Hematology
- **Dr. Suzanne Pfeffer**, Professor of Biochemistry
- **Dr. Oscar Salvatierra**, Professor of Surgery Emeritus and Medical Student Faculty Advisor
- **Dr. Gary Steinberg**, Bernard and Ronni Lacroute-William Randolph Hearst Professor of Neurosurgery and Chair of the Department of Neurosurgery

The 2007 Faculty Fellows also expressed their and sincere appreciation and gratitude to Dr. Valantine for her tremendous leadership and commitment to this program and to each of them. They also expressed special thanks to Dr. Claudia Morgan, Associate Director, Jennifer Scanlin, Program Coordinator, and Julie Mosley, Director, Organizational Effectiveness. Thanks also go to Lydia Espinosa for her role in coordinating the details of the program and events.

I want to congratulate the 14 Faculty Fellows who completed the 2007 Program. They were:
Of note, many of these Faculty Fellows have already assumed various leadership positions and others are about to assume new ones in 2008. As I mentioned at the dinner, we frequently review the list of graduates of these programs for leadership opportunities within the Medical School and the Medical Center.

Going forward, it is important to seek ways of bringing these groups back together so that the successful networking and support that commenced during the program can be sustained and enriched in future years. Certainly we also want to make this program available to additional individuals and, in fact, the 2008 Faculty Fellows Program will commence in a few weeks. I would also hope that we can retain the diversity of the group and also to add more basic science faculty to future programs.

I certainly recognize how busy our faculty are and that programs like this require extra time and effort. But I think it is safe to say that all who participated in the program felt that the sacrifices they needed to make to attend the events were completely worthwhile. I thank them for doing so – and thank all who led and supported this important program.

Faculty Job Satisfaction

Because of our interest and commitment to our faculty we elected to participate in a pilot program sponsored by the Association of American Medical College (AAMC) in partnership the Collaborative on Academic Careers in Higher Education (COACHE). Ten institutions participated in this survey, which was conducted in the summer of 2007. The response rate for Stanford faculty who received the survey was 38% (296 of 775), so definitive conclusions cannot be forthcoming. The response rate was 34.2% for male and 50% for female faculty members who received the survey. The response rate was higher
for underrepresented minorities than white faculty and was comparable for basic and clinical science faculty.

The data report we received in December 2007 compared Stanford faculty respondents to those from three “peer schools” as well as for all medical schools in the survey. Subsets of analysis of scores according to race, gender, and clinical vs. basic science faculty were also provided—in comparison to peer institutions, to all participating schools, and within Stanford.

While the data are limited by the sample size of the respondents, among other factors, the AAMC and COACHE leaders asked that the data be shared. Based on the ratings in the various categories and items, they provided items that Stanford faculty rated significantly higher than peer institutions as well as the whole group of medical schools in the survey. They also provided comparison within Stanford, but here the numbers are smaller and require more scrutiny. In the spirit of transparency and to provoke further questioning and discussion, I am listing below the items rated significantly more positive as well as more negative compared to three other peer schools. In subsequent communications we will share more of the data.

1. Stanford Faculty rated 25 items significantly higher than faculty at peer institutions:
   a. Satisfaction with:
      i. Incentive compensation, such as bonuses
      ii. Housing benefits
      iii. Tuition benefits for dependents
      iv. Spousal/partner hiring assistance
      v. Parental leave policies
      vi. Availability of childcare offered by the medical school
      vii. Quality of childcare offered by the medical school
      viii. Institutional assistance in finding offsite childcare
      ix. Communication from the Dean’s Office to faculty about the medical school
      x. The Dean’s priorities for the medical school
      xi. The pace of decision-making in the Dean’s Office
      xii. Opportunities for faculty participation in governance of one’s department
      xiii. Communication from one’s Department Chair to the faculty about the department
      xiv. The Department Chair’s priorities for the department
      xv. How well the location of one’s clinical practice functions overall
      xvi. The medical school as a place to work

   b. Agreement that:
      i. One’s work is appreciated by one’s patients
      ii. One’s work is appreciated by the Dean’s Office
iii. The workplace culture of the medical school cultivates interdisciplinary work

iv. The workplace culture of the medical school cultivates entrepreneurialism

v. The workplace culture of the medical school cultivates excellence

vi. The medical school is successful in retaining high quality faculty members.

vii. One’s department does a good job explaining its overall financial situation to the faculty

viii. One’s department does a good job explaining departmental finances to the faculty.

2. Stanford faculty rated 12 items significantly lower than faculty at peer institutions:
   a. Satisfaction with:
      i. The value the medical school places on teaching/education
      ii. The value the medical school places on community service
      iii. The value one’s department places on community service
      iv. Usefulness of feedback from one’s unit head on career performance
      v. The pace of one’s advancement at the medical school
      vi. Health benefits
      vii. Opportunities for physician input in management decisions.

   b. Agreement that:
      i. One’s work is appreciated by one’s immediate supervisor
      ii. The requirements for teaching/education are clear
      iii. The requirements of institutional service are clear
      iv. The requirements for institutional service are reasonable
      v. The criteria for promotion are consistently applied to faculty across comparable positions.

As I noted above, the data were also provided according to gender, minority status, and clinical vs. basic science faculty, both within Stanford and in comparison to peer and all ten medical schools surveyed. There is considerable overlap of the issues rated both positively and negatively. While the intra-Stanford data are important, because the numbers are smaller, I am not listing them at this time. We plan further discussions of the survey and of the question of when to repeat it so that we might achieve a higher number of respondents and thus make the data more robust. That said, I am sure that some of the items rated more positively or negatively compared to three other peer schools will ring true to some of you – and perhaps not to others. But I hope this will provoke your interest, as it does mine. My goal is to do all we can to improve the environment for our faculty, students and staff – and highlighting what we do well and what we need to improve is important. The next step is to further assess the areas where we appear to be falling short of expectation and work to improve them. At this time, I am not offering opinions, conclusions or recommendations about these data beyond this
decision to share them openly and transparently. That said, I am interested in your feedback and comments.

More Scrutiny on Conflict of Interest

I have written frequently about the increasing attention being paid to conflict of interest (COI) at academic medical centers. These concerns have garnered heightened interest in light of a report issued on January 17th by the Office of the Inspector General (OIG) on the oversight provided by the National Institutes of Health (NIH) on the management of conflicts of interest at extramural institutions. According to the report, its observations were based on a review of more than 400 financial conflict of interest reports filed with the NIH by extramural research grantees during 2004-2006, few of which provided any data on the nature of the conflicts or how they were handled. Based on this the OIG recommended that NIH increase its oversight of extramural institutions to ensure compliance with federal financial COI regulations. The OIG also recommended that extramural institutions be required to provide details of the nature of the conflicts and how they were managed, reduced or eliminated. Further, the OIG recommended that the NIH institutes and centers forward all financial COI reports to a centralized office and ensure that the information is maintained in an NIH database.

The NIH reacted to the report with a statement that it did not agree that central management was appropriated or needed at this time since COI is handled by extramural institutions for its grantees. The Association of American Medical Colleges issued a statement in response to the report stating “the AAMC supports two of the three recommendations issued by the Inspector General—both of which call on the NIH to strengthen its internal administrative systems of conflict of interest oversight. The AAMC joins the NIH, however, in rejecting the third recommendation, which would require the agency to become involved in research institutions' own management of specific conflict of interest cases in a manner that is unfeasible and beyond the NIH's existing statutory authority.”

Given the increased scrutiny on COI issues during the past several years in the lay press as well as in Congressional inquiries, it seems likely that further actions will be forthcoming. We have spent considerable effort to have robust, thoughtful and responsive conflict of interest policies and procedures at Stanford and will certainly continue to be as diligent as we can be. It is imperative that each faculty member take personal responsibility to assure that disclosures are accurate and that adherence to conflict of interest issues is carefully performed. If you have any questions about conflict of interest at Stanford please review http://med.stanford.edu/coi/ including the section entitled “Tips for Avoiding Conflicts of Commitment and Interest” (http://med.stanford.edu/coi/tips.html).

Input on Genetics Search Requested

As you may know, Dr. Rick Myers, Stanford W. Ascherman, M.D., F.A.C.S.
Professor, will be stepping down as chair of the Department of Genetics to pursue new opportunities during an administrative leave that will begin this summer. I want to thank Dr. Myers for his leadership and the many significant contributions he has made to the Department and School, including important efforts in enhancing the diversity of our community. Dr. John Pringle, Professor of Genetics, has agreed to serve as the interim chair beginning this Spring and I grateful to him as well. I am confident that the department will continue to flourish while a new chair is being identified. Dr Lucy Shapiro, Ludwig Professor of Cancer Research and Director of the Beckman Center for Genetic and Molecular Medicine, is leading a search committee of distinguished faculty to identify a chair through a national search, and I am grateful to her and the committee for their efforts.

The School of Medicine is seeking an accomplished scientist in the fields of genetics, genomics, or both, with the creative vision to lead and shape the future of a distinguished and innovative Department of Genetics. The opportunities for interdisciplinary research and education across the university and the prospect for translating discoveries to our hospital partners – a hallmark of Stanford – makes this an exciting leadership position. The Search Committee welcomes your input. If you have suggestions of individuals who you think should be considered for this important position, please share them with Dr. Shapiro by February 15th. As you know, Stanford University is an equal opportunity employer and is committed to increasing the diversity of its faculty. It welcomes nominations of, and applications from, women and members of minority groups, as well as others who would bring additional dimensions to the university's research, teaching and clinical missions.

**STRIDE Anonymous Biospecimen Locator**

Dr. Henry Lowe, Senior Associate Dean for Information Resources and Technology, asked me to share the following message with you:

One of the objectives of the School's Center for Clinical Informatics' STRIDE project is the creation of a system that will provide access to information on biospecimens stored in banks across the School. The STRIDE Anonymous Biospecimen Locator allows Stanford researchers to search for suitable samples without having to know, or expose, any protected patient-specific information. Having determined if suitable specimens exist in one of the constituent biospecimens banks, a researcher can use a Web-based request form to obtain additional information from the appropriate bank operator(s).

The first biospecimen bank now searchable using this system is the Stanford Cancer Center Pathology Core Tissue Bank, which is housed in the STRIDE database. The Cancer Center Pathology Core Tissue Bank, Directed by Jonathan Pollack MD, PhD, consists of almost 8000 frozen tissue samples from over 5,000 distinct patients. New tissue samples are added daily. Additional biospecimen banks are being added to STRIDE for searching by the system.
The STRIDE Anonymous Biospecimen Locator searches for tissues matching user-entered criteria, such as Organ Site, Pathological Diagnosis, Cancer Type, Patient Gender, Age at Biopsy/Autopsy, Minimum Tissue Amount, Tissue Source and Consent Type. A successful search returns only the number of specimens found - no patient data is disclosed. If a search finds matching tissue you can generate a Web-based request to the Cancer Center Pathology Core Tissue Bank. For additional information on this, or other components of the STRIDE Project, visit the STRIDE Web site or send email to scciinfo@med.stanford.edu

To access the STRIDE Anonymous Biospecimen Locator system go to <http://clinicalinformatics.stanford.edu/STRIDE/bsl-ats.html>

Storage of Laboratory Samples

The catastrophes that followed Hurricane Katrina and the floods that impacted medical schools in Houston several years ago have prompted us to consider ways of assuring the safety of one of our most important resources – the faculty samples and data accrued by our research faculty. Accordingly, the School of Medicine is working to implement recommendations made by consultants last year to improve efficiency and reduce risks inherent in our current on site laboratory sample storage procedures. The imperatives for addressing this issue include:

- Risk to samples (disaster, electrical failure, equipment failure, mislabeling, loss)
- Environment (the huge carbon footprint caused by our current system)
- Cost (very high utilities costs)
- Space

The recommendations we will be implementing over the next 12 months include:

1. **Preferred vendor for freezers, freezer maintenance, and emergency repair/response:** Stanford’s purchasing department and SOM staff will be interviewing and surveying faculty and lab managers for their preferences before choosing one or two preferred vendors from whom SOM will purchase freezers in the future. This will ensure the best price for quality new freezers and establish a standard that will allow for easier maintenance. Advantages include energy efficiency, better maintenance and emergency response, smaller freezer space requirements, and lower costs to both school and PIs.

2. **A red-tag program** will be established for trading in aging freezers for new models to reduce the average age of freezers.

3. **Freezer back-up program:** approximately six freezers held empty and ready to store important samples in case of breakdowns, power outages or other emergencies.
4. **Out-of-state long-term storage:** We will choose a vendor for the safe storage of long term, highly important or redundant samples.

5. **Midterm storage:** We will implement central freezers within buildings and/or “freezer farms” on or near campus to store samples used less frequently.

6. **Inventory systems to identify and track samples:** an inventory system will be chosen and implemented over time for long- and mid-term samples. Inventory systems reduce the risk of loss, and save energy through regular purging of unnecessary samples. They also allow shared storage facilities and the ability for the PI to track exact sample location.

The first step in moving forward with these programs is to gather information from PIs and lab managers in order to choose the best possible preferred vendors and products. Please encourage your PIs to attend the interview sessions currently being scheduled, and to answer the survey that will be coming out in the next few weeks.

**Update on the Department of Anesthesia**

At the January 18th Executive Committee meeting, Dr. Ron Pearl, Chair of Anesthesia provided an update on the activities of the department. He provided the following summary of his presentation.

The Anesthesia department at Stanford has expanded over the past decade in response to the ongoing expansion of surgical services. Since 2000, anesthesia billings have doubled and now exceed $80 million per year. Anesthesia hours have increased by 50% to 60,000 hours annually, and clinical FTEs have increased to 75 between Stanford and the VA. Overall, anesthesia is the third largest clinical department (after medicine and pediatrics) in the medical school. The highly complex surgical procedures performed at Stanford have required progressive sub-specialization within the anesthesia department. Pediatric anesthesia is the fastest growing subspecialty in the department, accounting for almost one-third of the clinical activity. In addition to providing anesthesia services in the operating room, the department has an active pain management program (including co-management with psychiatry of the only multidisciplinary inpatient service in the western United States). The department participates at the attending, fellow, and resident levels in all four adult critical care services (medical-surgical ICU, cardiothoracic ICU, surgery-trauma ICU, and VA ICU), and provides medical acupuncture for adults and children.

Anesthesia has been active in all aspects of education, from undergraduate through fellowship training. The 66 residents are chosen from the best applicants in the country. Juli Barr is the director for the required critical care fellowship for the medical students, Audrey Shafer is the co-director for the Biomedical Ethics and Medical Humanities Scholarly Concentration and the new Translating...
Discoveries series, and David Gaba and Steve Howard have established the role of medical simulation for both education and research in anesthesia and medicine. The department offers 11 undergraduate and medical school courses and 16 medical school clerkships. This year one out of every 8 graduating Stanford medical students is applying to anesthesia residency programs. Stanford is currently the only institution west of Texas that offers all four ACGME-approved anesthesia fellowships (cardiac, pediatric, pain, and critical care).

The department has been actively expanding its research programs, with a doubling in NIH funding over the past five years. The research is highly collaborative, involving almost all the basic science and clinical departments in the medical school, as well as departments in the university and beyond. Major areas of research include mechanisms of anesthesia, pain, neuroscience, cardiopulmonary physiology, clinical pharmacology, and clinical outcomes. In general, each research area spans the spectrum from basic laboratory research to experimental human studies to clinical trials. The department consistently ranks among the top three in the country in academic productivity in all of the anesthesia subspecialties.

I want to thank Dr. Pearl for his leadership and the faculty for their many accomplishments.

Planning for the Centennial – Preview of Coming Attractions

As many of you know, 2008 marks the Centennial of the establishment of the Stanford University School of Medicine. The Medical School was established through the acquisition of San Francisco’s Cooper Medical College by Stanford University, on January 31, 1908. Moreover, Cooper Medical College itself had been founded fifty years prior, in 1858, by Dr. Elias Cooper and was the first medical college in the West. Also of note, in 1959, some fifty years after the School became part of Stanford University, the School moved from San Francisco to Palo Alto. So the School of Medicine has a long and rich history punctuated by these significant, transforming events.

During the Centennial Celebration we will take many opportunities to look back over the past 100 years and forward to the next 100. We will mark the occasion in small and large ways, both virtual and actual. Starting in mid-February, look for our Centennial website, a series of Medical Center Report stories, and commentary in these pages that will highlight significant events, people and perspectives of our past as well as emerging trends for our future. Banners hung around the School will be a visual reminder, and we will make available a Centennial logo that you will be able to add to your stationery and/or email signature. Selected annual lectures will be highlighted as Centennial lectures. In April, our Alumni Weekend will have a Centennial theme and, also in April, we will have a School-wide celebration to which everyone will be invited. These festive occasions will include an event related, hopefully, to the groundbreaking for the new Learning and Knowledge Center and will thus point definitively and strikingly to the future. We will conclude our celebration at this year’s Commencement in mid-June.
The Centennial offers us a great chance to reflect on our past as we continue to plan for our future. I hope you will join me in celebrating the first century of excellence of the Stanford University School of Medicine.

A Medical Mystery in 11 Sentences

Dr. Audrey Shafer, Professor of Anesthesia, asked me to announce an interesting challenge. Dona Tversky, SMS IV, is the director of a contest for an 11 sentence medical mystery. They have let me know that Joshua Spanogle, MD ’07 has started an 11 sentence medical mystery and challenges the Stanford community to finish it. The story begins:

"Nothing in his months of planning--the selection of which carrier for which drug, the choice of who and how and when--had prepared him for this much screaming."

The next ten sentences are up to you. Submit your sentence to dtversky@stanford. While the first sentence is apparently due today (another challenge) additional ones will be called for each week. Weekly winners will receive a $20 gift certificate to the Stanford Bookstore. The story will come to its exciting conclusion on April 3 at the annual Stanford Writers Forum where the 11th sentence will be revealed and the writer will receive a $50 gift certificate. According to Dona Tversky, the competition is open to students, alumni, faculty, staff, housestaff as well as volunteers and family members with an affiliation to the School of Medicine or Stanford or Packard Hospitals. However, no more than one entry per week per participant is permitted. You can email your sentence to dtversky@stanford.edu and if you are interested in reading the story as it unfolds you http://bioethics.stanford.edu/arts/

You are also invited to the Stanford Writers Forum that will be held on April 3rd at 5 pm in the Clark Center Auditorium. In addition to the “conclusion” of the 11-sentence medical mystery, the Writers Forum will feature:

Blake Charlton reading science fiction from “Spellwright”
Sarah Bein reading poetry from “33 Hats for Julia”
David Kearns reading from his novel “Standard of Care”

For additional information go to: http://bioethics.stanford.edu/arts/

The Association for the Accreditation of Human Research Protection Programs (AAHRPP) is coming to Stanford

In March 2006 the Stanford HRPP - our Human Research Protection Program – received full accreditation from AAHRPP. This "gold seal" accreditation signifies our commitment to the most comprehensive protections for research participants and the highest quality research.
As part of the triennial accreditation cycle, AAHRPP will be visiting our campus this Fall. We will be calling on our human subject research community for the same support and involvement that contributed to our full accreditation. Education and information pertaining to our HRPP is provided by the Research Compliance Office – look for these continuing opportunities throughout the year.

Questions about the Stanford HRPP? Visit the Human Subjects Research website or contact the HRPP Education Specialist (phone: 650-724-7141).

Remembering and Honoring Dr. Arthur Kornberg

On Friday, January 25th the School of Medicine held a Tribute in the Dinkelspiel Auditorium to Dr. Arthur Kornberg, who died on October 26 2007. As amply noted in the stories surrounding his life and death, Arthur Kornberg was a towering figure – among the most distinguished scientists and leaders of the 20th Century and our time. A passionate and extraordinary scientist whose love for seeking knowledge lasted throughout his life and to the very time of his death at 89 years of age, he was a revered and respected teacher, mentor and colleague. Not only did he found the Department of Biochemistry at Stanford in 1959, but, in addition, he and his colleagues literally shaped the future of the School of Medicine and the University through the recruitment of extraordinary faculty and the training and development of future leaders. He was internationally renowned for his leadership and advocacy for science and especially the interrelations between chemistry and biology – and for his passion for the essential importance of enzymes. He was an educator for the scientific community as well as the public – and even published, at the end of 2007, a book of stories for children. He was also a beloved father, spouse and grandfather who included in his “extended family” many friends, students and colleagues.

At the ceremony commemorating Arthur Kornberg, colleagues, students, and members of his family described the impact of his work and life as each recounted the breadth and depth of his remarkable life and extraordinary contributions. Dr. Herb Tabor, an early colleague of Dr. Kornberg and Chief of the Pharmacology Section in the Laboratory of Biochemistry and Genetics at NIH reflected on “The Early Years of the Enzyme Section of the National Institutes of Health,” where Dr. Kornberg’s scientific career had its early foundation. This was followed by a reflection on the “Years at St. Louis and Stanford” by Dr. Paul Berg, Cahill Professor Emeritus, a colleague of more than five decades and by a commentary on “Three Decades of DNA Synthesis” by Dr. Bob Lehman, Hume Professor Emeritus, another of the original faculty members of the Department of Biochemistry.

Two of Dr. Kornberg’s distinguished students reflected on their experiences as graduate students: Dr. Randy Schekman, Professor of Molecular and Cell Biology at the University of California at Berkeley commented on his work in the 1970s and Dr. Tania Baker, EC Whitehead Professor of Biology at MIT, spoke about her experiences in the Kornberg lab in the 1980s. Dr. Mark Krasnow, current chair of Biochemistry, reflected on the Department of Biochemistry and the roles and transitions that occurred during Dr. Kornberg’s nearly 50 years as a department member. This was followed by comments by
another long-time colleague and friend, Dr. Charlie Yanofsky, Morris Herzstein Professor of Biology and Molecular Biology, Emeritus on “Reflections from the Stanford University Community” and by Dr. Lucy Shapiro, Ludwig Professor of Developmental Biology and Director of the Beckman Center who offered both “Reflections from the Stanford University School of Medicine” along with a video interview of Dr. Kornberg in which he offered his reflections on the importance of chemistry in the study of life.

Finally, Dr. Kornberg’s three sons each offered remarkable testimonials and tributes to their father: Dr. Roger Kornberg spoke about his father’s passion for science and discovery and its influence on him and generations of scientists; Ken Kornberg, a renowned architect, collaborated with his daughter Sophie to put together a moving video portrait of Dr. Kornberg’s life as scientist as well as a spouse, father and grandfather; and Tom Kornberg, a cellist as well as a scientist, joined with three colleagues to conclude the program with a moving playing of the Adagio of the Schumann piano quartet.

As I – and, I am sure, all who attended the celebration - reflected on the various commentaries, tributes and reflections that were offered during the ceremony I felt deeply proud to have known Dr. Kornberg, even if just for a limited time. I always thought of him as the towering figure he truly was – but thanks to the depth of these reflections I realized that he was truly bigger in life than I had imagined. He is certainly missed, but his contributions and impact will go on for many generations to come.

Celebrating Dr. David Hogness

On Thursday evening, January 24th faculty from the Departments of Biochemistry and Developmental Biology joined with me to honor David Hogness, Rudy J and Dauphine Donohue Munzer Professor of Developmental Biology and Biochemistry, Emeritus, for receiving the 2007 Japan Society International Prize for Biology. Dr. Hogness has been a member of the Stanford community since 1959 (he was part of the group that helped found the Department of Biochemistry at Stanford when the School relocated to Palo Alto). During the past several decades Dr Hogness’ contributions have proved seminal and critical and have helped define the fields of genomics and developmental biology. He and his students and colleagues (several of whom offered comments at the dinner) developed the techniques for genomic analysis, defined the TATA box, which is important in regulating gene expression, discovered that gene sequences include both exons and introns, and identified genes important in morphogenesis by developing the methods for “positional cloning” or “chromosome walking,” among many other seminal discoveries. His work paved the way for functional genomics and developmental biology as we know it today. It was clear from the testimonials provided by his faculty colleagues and students that he is deeply revered and respected as an outstanding scientists, teacher and mentor.

Awards and Honors
• **Dr. John Boothroyd**, Professor of Microbiology and Immunology, has been awarded the Leuckart Medal by the German Society of Parasitology for his contributions to the field of parasitology. This is the society’s most prestigious award, and it will be presented during the Society’s annual meeting on March 5-7 in Hamburg, Germany. Congratulations to Dr. Boothroyd.

• **Dr. Paul Yock**, the Martha Meier Weiland Professor in the School of Medicine and Professor of Bioengineering, will be recipient of the American College of Cardiology Foundation’s Distinguished Scientist Award “for his development of intravascular ultrasound (IVUS) imaging and his other innovative contributions to vascular devices as well as cardiovascular education”. Congratulations to Dr. Yock!

• **Dr. James Chang, Professor** and Chief of Plastic and Reconstructive Surgery, has been appointed Research Director for the American Society for Surgery of the Hand (ASSH). His responsibilities are to provide grants & mentorship to young investigators, to partner with the National Institutes of Health for new funding opportunities, and to develop prospective multi-center trials for clinical outcomes related to hand and upper extremity problems.

• **Dr. Henry Lowe and the Web & Systems Engineering team led by Michael Halaas** have been chosen by the AAMC to receive an Award of Excellence in the Electronic Communications for its Web Redesign. Among the comments that were cited in this award are:
  - “I have seen the future and it is the redesigned Stanford School of Medicine website”
  - “Any of our colleagues who want to see how the web can be used to its best advantage should visit med.stanford.edu”
I confess some bias – this is a great achievement and special thanks to Michael Halaas, Henry Lowe and the IRT team. Please visit [http://med.stanford.edu/](http://med.stanford.edu/).

• **Ruthann Richter** and **Tracie White** have received writing awards from the AAMC for articles that appeared in *Stanford Medicine*. Ms Richter received the Award of Excellence for her article, "Fog of War", about traumatic brain injuries, which was featured in the special issue on war and medicine. Ms White received the Award of Distinction for her article, "Silent Inferno" about the heat related deaths in the San Joachim Valley. Tracie’s article was featured in the special issue on the impact of global climate change on health.

• **Dr David Fetterman**, Director of Evaluation in the Office of Medical Education has been selected the recipient of the Outstanding Higher Education Professional Award for 2008. Congratulations to Dr. Fetterman.

• The Edward Mallinckrodt Jr. Foundation recently awarded funding to **Dr. Gill Bejerano** for his study of specific loss of genomic regulatory regions:
implications on human health and human evolution. Congratulations to Dr. Bejerano!

- **Mary Ayers** (IRT Education Technology) was honored today at the “Community Treasures” Recognition Brown Bag Lunch hosted by the University. Since 2004, Mary has led relay teams in fundraisers for cancer research. Congratulations Mary!

Appointments and Promotions

- **C. Andrew Bonham**, has been reappointed to Associate Professor of Surgery (Transplant Surgery) at the Stanford University Medical Center, effective 2/01/08.

- **Craig Comiter**, has been appointed to Associate Professor of Urology at the Stanford University Medical Center, effective 1/01/08.

- **Christopher H. Contag** has been reappointed to Associate Professor of Pediatrics (Neonatology) and of Microbiology & Immunology, effective 2/01/08.

- **Catherine Curtin** has been appointed to Assistant Professor of Surgery (Plastic and Reconstructive Surgery) at the Stanford University Medical Center and the Lucile Salter Packard Children’s Hospital, effective 1/01/08.

- **Jennifer Raymond** has been promoted to Associate Professor of Neurobiology, effective 1/01/08.

- **Debra L. Safer** has been reappointed to Assistant Professor of Psychiatry and Behavioral Sciences at the Stanford University Medical Center, effective 5/01/08.

- **Norman Silverman** has been reappointed to Professor of Pediatrics (Cardiology) at the Lucile Salter Packard Children’s Hospital, effective 1/01/08.