

The Dean's Newsletter: January 30, 2012

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[Appointment of Dr. Robert A Harrington as the Chair of the Department of Medicine](#)

I am extremely pleased to announce that Dr. Robert A. Harrington will join Stanford in July 2012 as the new Chair of the Department of Medicine. Dr. Harrington is currently Director of the Duke Clinical Research Institute (DCRI), a position he has held since 2006. He is also the Richard S. Stack MD Distinguished Professor at Duke University School of Medicine, where he is also a practicing cardiologist. Accompanying Dr. Harrington to Stanford will be his spouse Rhonda Larsen, who holds BS, PA and MHS degrees from Duke and who is Consultant for Clinical Research and Training at DCRI as well as Founder of Site Research Solutions.

The selection of Dr. Harrington as Stanford Chair of Medicine is the result of a search committee led by Dr. Steve Galli, Mary Hewitt Lovelace Professor and Chair of the Department of Pathology. The Committee began its work in the fall of 2010 and spent hundreds of hours of efforts reviewing the status and needs of the Department of Medicine as well as the ideal characteristics of the future chair. Potential candidates were determined from consultation with leaders at Stanford and across the nation. The work of the Search Committee was wonderfully facilitated and enabled by the dedicated efforts of Ms. Kendra Baldwin along with her colleagues from the Office of Institutional Planning.

I want to thank each of the members of the Search Committee for their personal and collective contributions. They are:

- **Douglas Blaney, MD, Professor, Department of Medicine and Medical Director, Stanford Cancer Center**
- **Thomas Burdon, MD, Professor, Department of Cardiothoracic Surgery**
- **Mark Davis, PhD, Professor, Department of Microbiology and Immunology and Director, Institute for Immunity, Transplantation and Infection**
- **Nancy Fischbein, MD, Professor, Department of Radiology**
- **Sabine Girod, MD, PhD, Associate Professor, Department of Surgery**
- **Richard Hoppe, MD, Professor, Department of Radiation Oncology**
- **Mark Krasnow, MD, PhD, Professor and Chair, Department of Biochemistry**
- **Lawrence Leung, MD, Professor, Department of Medicine and Chief-of-Staff, Palo Alto VA**
- **Michael Longaker, MD, Professor, Department of Surgery and Co-Director, Stanford Institute for Stem Cell Biology and Regenerative Medicine**
- **Frank Longo, MD, PhD, Professor and Chair, Department of Neurology & Neurological Sciences**
- **Bonnie Maldonado, MD, Professor, and Chief of Infectious Diseases, Department of Pediatrics**
- **William Maloney, MD, Professor and Chair, Department of Orthopaedic Surgery**
- **Daria Mochly-Rosen, PhD, Professor, Department of Chemical and Systems Biology and Senior Associate Dean for Research**
- **Hugh O'Brodvich, MD, Professor and Chair, Department of Pediatrics**
- **Renee Reijo-Pera, PhD, Professor, Department of Obstetrics and Gynecology**
- **Kathy Renschler, MD, Community Physician**
- **Laura Roberts, MD, Professor and Chair, Department of Psychiatry and Behavioral Sciences**
- **Kevin Tabb, MD, Chief Medical Officer, Stanford Hospital and Clinics (and now President and CEO of the Beth Israel-Deaconess Medical Center in Boston);**
- **Alice Whittemore, PhD, Professor, Department of Health Research and Policy**

On August 31, 2011 the Search Committee provided me with a list of finalists from a short list of eight candidates who visited Stanford from June - August 2011. I then further consulted with numerous national leaders as well as faculty and leaders in the Department of Medicine and at Stanford Medical Center and University, including the Provost, President, Trustees, Hospital CEOs, and Board of Directors among others. I also visited the home institution of finalists and discussed the candidates with institutional and national leaders. Based on a complex register of assessments, recommendations and opinions along with a convergence of skills and opportunities, I am very pleased we have been successful in convincing Dr. Harrington that he and his family will flourish at Stanford.

Dr. Harrington's breadth of knowledge, his area of research, commitment to patient care and clinical excellence, and his leadership roles at Duke and nationally make him an ideal choice for this position. The DCRI is the largest such clinical research enterprise in the world - hosting over 200 faculty and over 1100 staff and encompassing nearly every medical discipline. The annual operating budget of the DCRI is over \$150 million, 40% coming from grants and contracts. The spectrum of clinical research in the DCRI extends from Phase 1-4 clinical trials - including programs in health services research. The DCRI also hosts research fellowship training programs for both MD and PhD students and fellows. There is no question that DCRI is a unique entity and, while we have no intention or expectation of replicating such a program at Stanford, the underlying knowledge and skills are important to our unique version of "Translating Discoveries." Further, Dr. Harrington's knowledge and prominence in population science and quantitative medicine converge remarkably with Stanford's burgeoning efforts in this evolving area of medicine, science and healthcare (see

Dr. Harrington was born in Massachusetts and received a BA, *magna cum laude*, in English from the College of the Holy Cross. He then attended Dartmouth Medical School and received his MD from Tufts University School of Medicine in 1986. After training in Internal Medicine at the University of Massachusetts, where he was Chief Resident, he did a fellowship in Interventional Cardiology at Duke University Medical Center. He joined the Duke faculty as an Assistant Professor in 1995 and was promoted to Professor in 2003. He is Board Certified in Internal Medicine, Cardiovascular Disease and Interventional Cardiology and has been elected Fellow and held numerous leadership positions in the American College of Cardiology, American Heart Association and other national and international organizations. He has also served as an advisor and consultant to the NIH and FDA. Dr. Harrington was elected to the Association of American Physicians in 2011. His own research interests have focused on antithrombotic therapy for acute ischemic heart disease, the disease mechanism of acute coronary syndromes, clinical trial design and numerous other topics. Dr. Harrington is the author or co-author of over 350 scientific publications and reviews, and has served on numerous editorial boards and scientific advisory boards.

Of importance, Dr. Harrington is frequently described as a natural and energetic leader who is able to bring diverse groups of individuals together to achieve shared goals and objectives. He has been invited to lead important initiatives at Duke and nationally and is deeply committed to the future of academic medicine. Training future leaders and excellence in clinical care remain at the core of his mission, and he devotes part of every week to the practice of clinical cardiology - something he also intends to do at Stanford.

Bob Harrington and Rhonda Larsen have four daughters, and they have deep roots in North Carolina. While moving west to California is a major undertaking, both Rhonda and Bob are excited about the possibilities that stand before them - and we share that excitement and enthusiasm as well.

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With Appreciation and Gratitude to Dr. Linda Boxer for Her Many Contributions as Interim Chair of the Department of Medicine

I want to thank Dr. Linda Boxer, Professor of Medicine - Hematology, for her truly excellent job in serving as Interim Chair of the Department of Medicine since August of 2010. I specifically asked Dr. Boxer to take on this role because of my great admiration for her work as a physician-scientist, leader and role model. To say that this was not an assignment that she was expecting or seeking would be a gross understatement. But Dr. Boxer took on her responsibilities with incredible commitment and leadership. She quickly put into place initiatives that improved the morale of the department and education opportunities for residents and students. She dramatically improved communication and interaction among faculty, trainees and staff. She appointed the chief of the Divisions of Infectious Diseases (Dr. Upinder Singh, Associate Professor of Medicine) and Pulmonary Medicine (Dr. Mark Nicolls, Associate Professor of Medicine) along with launching a number of important faculty and leadership searches.

Dr. Boxer also created important alliances with Stanford Hospital and Clinics and played an important role in conceptualizing the planning for the addition of a primary care initiative in the Department of Medicine's portfolio. While Dr. Boxer has long been respected for her contributions as Chief of the Division of Hematology, she has won the admiration and respect of countless individuals across the medical center for her role as Interim Chair. Without question I am and will always be one of those admirers - not only for what she has accomplished but because Dr. Boxer always puts the wellbeing of trainees, faculty and staff first and foremost in her decision making. And her decisions have focused on how to make the Department of Medicine stronger and better - something she has accomplished.

I am well aware that there are many views about how searches are conducted and concluded and what the necessary and even ideal characteristics of a department chair should be - which certainly undergo

change and evolution over time. But in my discussions with countless individuals during the search for a new department chair, there is no doubt that respect and admiration for Dr. Boxer and the role she has played as Interim Chair were constant and deeply valued. Transitions are always a challenge for institutions and for individuals - but here too Dr. Boxer has put the future of the Department first and foremost and has pledged support and assistance to Dr. Harrington as the incoming Chair. For these and so many other reasons, I want to express heartfelt appreciation and ongoing respect for Dr. Linda Boxer - she is a wonderful individual and a terrific leader.

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Appointment of Dr. Eila Skinner as the Chair of the Department of Urology

I am very pleased to announce the appointment of Dr. Eila Skinner as the next Chair of the Department of Urology beginning May 1, 2012. Dr. Skinner is currently Professor of Clinical Urology at the Keck University of Southern California School of Medicine, where she has served as Vice-Chair of Urology since 2009.

A Search Committee led by Dr. Sherry Wren, Professor Surgery, recommended Dr. Skinner as a finalist for the Chair of Urology. This Committee began its work in the summer of 2010 and included:

- **Craig Albanese, MD, Professor, Department of Surgery - Pediatric Surgery**
- **Steve Alexander, MD, Professor, Department of Pediatrics - Nephrology**
- **Richard Barth, MD, Professor, Department of Radiology and Radiologist-In-Chief, Lucile Packard Children's Hospital**
- **Helen Bronte-Stewart, MD, Associate Professor, Department of Neurology & Neurological Sciences**
- **Stephan Busque, MD, Associate Professor, Department of Surgery - Transplantation**
- **Bertha Chen, MD, Professor, Department of Obstetrics and Gynecology; Glenn Chertow, MD, Professor, Department of Medicine - Nephrology**
- **Paula Hillard, MD, Professor, Department of Obstetrics and Gynecology**
- **Neeraja Kambham, MD, Associate Professor, Department of Pathology**
- **Jerry Maki, Vice President, Clinical Services, Stanford Hospital and Clinics**
- **Jim McCaughey, Chief Strategy Officer, Lucile Packard Children's Hospital.**

I also want to thank Ms. Kendra Baldwin and the Office of Institutional Planning for their important contributions to the staffing and effective work of the Committee. The Committee invited 10 individuals to campus for comprehensive interviews and ultimately included Dr. Skinner in their list of three finalists. I am very pleased that Dr. Skinner has agreed to accept this important role at Stanford University Medical Center.

Dr. Skinner has roots on the Farm, having received her BA from Stanford in Human Biology, with Distinction and election to Phi Beta Kappa, in 1976. In 1983 she received her MD from the USC School of Medicine, where she graduated Alpha Omega Alpha and where she was also the recipient of the American Medical Women's Association Janet M Glasgow Award for Academic Excellence. She has achieved distinction as a teacher and educator. Among others acknowledgements for her teaching and mentorship, she received the Faculty teacher of the Year in Urology four times and the Outstanding Teacher Award at USC six times,

Dr. Skinner is an active surgeon with a national reputation for her expertise in urology and bladder cancer. Indeed, in my discussions with leaders around the country about her candidacy I heard over and over again that she was one of the very best and most highly respected urologic surgeons in the nation. She has been equally committed to the education and training of future surgeons and leaders at USC and nationally. She has served as Program Director for the Residency in Urology since 2000 and as Program Director of the USC Norris Cancer Fellowship in urologic oncology since 2009.

In addition to her role as Vice Chair of the Department of Urology, Dr. Skinner has served as the Chief of Staff of the combined medical staff of the USC University Hospital and the Norris Cancer Center. She has also served in numerous roles and committees at USC and the Norris Cancer Center.

Dr. Skinner made the decision to focus her efforts on clinical and teaching excellence during the first phase of her career. In a number of ways, she has taken the longitudinal career path now being explored by Dr. Hannah Valentine, Senior Associate Dean for Diversity and Leadership, and her colleagues to support career development of women in academic medicine. Dr. Skinner's interests in research are clinical and collaborative and are highly valued; they have focused on surgical interventions and quality of life for individuals with urologic cancer. She is the author and co-author of over sixty original articles and reviews and is a valued colleague to the scientific and medical communities at the Norris Cancer Center and USC.

Please join me in welcoming Dr. Eila Skinner to Stanford as our next Chair of the Department of Urology.

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A Few Highlights from the 2012 Strategic Planning Leadership Retreat

On January 20-21st over 110 leaders from the School of Medicine, Medical Center and University gathered for the 11th Annual Strategic Planning Leadership Retreat since I became Dean in April 2001. In the January 9, 2012 Dean's Newsletter (http://deansnewsletter.stanford.edu/archive/01_09_12.html) I recounted some of the issues, challenges and accomplishments of the past decade as a prelude to the remarkable opportunities that lie ahead.

In addition to sharing updates, setting new agendas and continuing to enhance and refine our ongoing strategic planning, one of the most valuable aspects of the annual retreat is the opportunity for our diverse leadership to share and better understand the complexity of our multifaceted goals and missions and how we (and they) can "connect some of the dots" (the theme of this year's retreat). In my opening and closing comments I reflected that each member of our community comes with her or his unique set of expertise, skills, knowledge and understanding. We each see Stanford Medicine through our own lens and not infrequently are unaware - or even unconcerned - about other features and aspects of our community. We come with some bias about what makes Stanford great - or where its challenges might lie - and often discover that some of our inherent biases benefit from broader sharing of ideas and points of view.

Whether we are students, trainees, faculty or staff members of the medical school and university, members of the medical center and hospital leadership, trustees or volunteers, we often assume that what is most important is what we, as individuals, care most deeply about. But what make us greater is when we join together in ways that make the whole greater than the sum of our parts. Of course that is a constant goal, always somewhat elusive, and, like Sisyphus, nearly always requiring renewed effort. While we have certainly made progress on a number of fronts during the past decade, new challenges constantly abound and things once accomplished need repair or replacement. Of course that is always true of institutions - and, dare I say, also of individuals. We are, after all, each stewards of the moment and our annual Strategic Leadership Retreat allows us to see where we are at the moment - and to reflect on the many tasks still to be undertaken and achieved in the future.

At the 2012 Leadership Retreat we heard updates on the planning activities we have launched in medical and graduate school education over the past 1-2 years. We also heard an update on the planning efforts underway in developing a broad initiative in population health sciences - which will clearly be a topic for future gatherings and discussions. We had the opportunity to examine our essential mission in basic research and to develop strategies with how to deal with the bioscience funding pressures that will abound in the years ahead. We critically examined how to better value the role of clinicians in our medical center community and how to preserve and enhance the future success of physician scientists. We also explored how to relate to some of our external communities - especially industry in the form of small and large biotech and big "pharma." Each of these has its champions and

advocates and nearly all could define our institution or dominate our agenda. And some fully believe that one is more important than the others in defining what makes Stanford excellent. But it is really their balance and connection that makes us who we are today - and will make us even more outstanding in the future as we better share, understand and "connect the dots."

Rather than recounting all of the presentations I will simply highlight some of the major tasks and needs that emerged from our discussions and dialogue at the 2012 Leadership Retreat. For as much as we think we have done, there always seems so much more to do - of course that is a good thing!

- **Transforming Medical Education - led by Drs. Charles Prober, Clarence Braddock, Henry Lowe, Laura Roberts and Abraham Verghese**
 - **Continue to enhance Stanford's commitment to the education and training of future physician scientists, scholars and leaders with refinement of the programs in Scholarly Concentrations, Med Scholars, MD-PhD and other joint degree programs. This remains a cornerstone of Stanford's medical education. To complement and expand the curriculum to address dominant issues in modern healthcare and new learning technologies Dr. Prober's team will undertake initiatives focusing on, among other issues:**
 - **Competency based, patient-centered learning strategies as well as other new learning strategies and pathways**
 - **Knowledge access, collaboration and learning technologies**
 - **Leadership, professionalism, and humanism, with attention to self-care and mental health**
 - **The need to collaborate more closely with PhD education programs on multiple different levels**
 - **The need to better address medical education across the continuum - from high school to medical and graduate school, residency and graduate medical education, fellowship and continuing medical education**
 - **Over the next year, exploring a reshaping of the basic science curriculum to be less lecture-based and more discussion and problem-oriented through the use of technology and new learning and teaching tools. Efforts to transform the conventional specialty based clinical clerkship rotations to longitudinal clinical learning experiences in diverse settings throughout undergraduate medical education.**
- **Transforming Graduate Education - led by Dr. Dan Herschlag**
 - **An update on a proposed major transformation in graduate education was presented by Dr. Dan Herschlag based on the work of a number of faculty groups. The proposed reforms would impact significantly Year 1 of PhD education, with significant changes in subsequent years as well. The overarching goals are to educate graduate students to think like scientists and train them to become leaders and innovators as well as to assure that all students pursue their "career of choice" and that "no graduate student is left behind." Among the proposed innovations are:**
 - **The expansion of "boot camps" for entering PhD students prior to the actual commencement of the first quarter**
 - **A comprehensive orientation for entering graduate students co-led by faculty and students**
 - **Development of both core courses in home departments as well as a common interdisciplinary program called the "biosciences kernel."**
 - **The core and kernel programs would be complemented by mini-course electives as well as career development and opportunity roundtables with faculty and alumni**
 - **A goal is to have all students start her or his thesis research by April of the first year and complete their qualifying exam by the end of the first year.**
 - **An additional goal is to shorten the time to degree to 5 years. This would be aided by annual goal setting discussions, organized programs and a progression of skills and career workshops, and the addition of a second mentor for each student who would be focused on**

career development *per se*. Students would have opportunities to learn about career options from alumni helping each student to pursue her or his "career of choice."

- It is understood that graduate education is expensive and that changes in the curriculum along the lines being explored are costly. This will require institutional investments as well as major efforts to raise philanthropic support for graduate student fellowships.
- The need to better integrate postdoctoral training into the overall education experience - as teachers and learners - was also underscored.

- **Sustaining and Enhancing Excellence in the Basic Sciences** - panel with Drs. Jim Spudich, Jennifer Raymond, Denise Monach, Merritt Maduck, Ricardo Dolmetsch, Jim Ferrell
 - It is widely recognized that Stanford's basic science faculty and research programs are among the very best in the nation. By virtually every metric and measure of success (scientific impact, innovation, major awards and honors) Stanford faculty are at the very top. At the same time, every medical school and university is bracing for the reductions in federal support for research that seem inevitable and the impact they will have on research opportunities and creativity as well as on the level of stress experienced by faculty.
 - The common theme throughout the discussions on basic science research was the need to raise funds to help support both junior and senior faculty in the form of faculty scholar awards and professorships. A key feature of this funding would be to help supplement salary support in order to further optimize the use of grants and, even more importantly, to have a source of unrestricted funds that could be used for innovation and pilot projects.
 - Importantly, there was considerable discussion about ways that funds for research might be creatively developed and even shared among basic and clinical research faculty - ranging from micro-loans to seed and innovation funds.

- **Population Health Sciences at Stanford** - panel discussion members included Drs. Julie Parsonnet, Atul Butte, Mark Cullen, Arnie Milstein, Marilyn Winkleby, Doug Owens and Steve Goodman
 - As noted in other communications, the last several years have witnessed several important convergences. One is the range of existing and new talent in the broad discipline of population health science (PHS) at Stanford, ranging from epidemiology to clinical and bioinformatics to outcomes based and health delivery research at the local, community and global levels. Another is the broad and deep set of opportunities and intersections in PHS that exist across the medical school, medical center and university.

The further convergence of PHS with early disease detection and diagnostic tools arising from genomics and proteomics as part of "prediction medicine," coupled with imaging and detection devices as well as informatics and statistics, offer the prospect of major transformations in health preservation and disease management. That there is now the likelihood for new funding in these areas from the federal government as well as from foundations, gifts and other sources makes this area of research very exciting. Importantly, there was considerable enthusiasm at the Retreat about how Stanford can further develop a university and medical center - wide PHS initiative that would partner with our local and even global communities to create new models for promoting health, predicting risk for disease, detecting it early and delivering care in novel and new ways and settings.

The consensus at the Retreat was that we are well positioned to take a lead in this important area of science and medicine - and the question is how we need to organize ourselves to make Stanford uniquely successful. Given the level of support for this initiative that we heard expressed, we will now move forward to operationalize the recommendations that were made by the task force on PHS that has been moving this agenda forward over the past year. It is a very exciting initiative - which can be truly transformative.

■ **Physician Career Development and Opportunities - Panel discussion led by Drs. Christy Sandborg, Ann Weinacker, Nancy Morioka-Douglas, Jeff Dunn and Andy Shelton.**

- **On the surface it seems strange to have a focused discussion on how to better support and value clinical medicine and clinical practitioners at Stanford. But that in fact is the case. In part this stems from Stanford Medical School's history - but it is also very much part of an institutional culture that places an understandable premium on research excellence but which has had a seeming lesser value for outstanding clinical medicine as a discipline. Certainly that is untenable - and unless changed would compromise Stanford's ultimate success as an academic medical center. While it is acknowledged that progress has been made in the past several years in valuing physicians as doctors (and clinician-educators) it is also true that much work remains to be done to achieve the needed balance of perceived excellence.**
 - **Part of the challenge is organizational (e.g., the fact that Clinician Educators are recognized as faculty in the medical school but not by the university) but attitude and culture are even bigger issues. Some panel presenters pointed out how some divisions and departments have set a tone that values clinical medicine and clinician educators by the department chair and senior faculty whereas others are less supportive or even dismissive. The culture of the department has a major impact on satisfaction and the sense of value and respect that is experienced by those practicing clinical medicine as their primary responsibility.**
 - **Over the past several years we have made major strides in enhancing the value and support for clinician educators - by competitive compensation, benefits (including housing benefits) and career development. But still many clinician educators express the feeling that they are less valued and respected than those in other faculty lines. That is clearly not acceptable.**
 - **While we have had task forces addressing the role of clinicians in the past -we clearly still have work to do to overcome barriers, whether cultural or organizational. Addressing this will be a major priority over the next year. This will require both a top down set of expectations as well as bottoms up shift in culture and value.**
- **Physician-Scientist Career Development and Opportunities - Panel discussion led by Drs. Upinder Singh, Calvin Kuo, Joyce Liao, Ron Dalman and Melinda Telli**

Despite the stresses and challenges of funding and support, the general consensus of the panel was that the value and success of physician-scientists are alive and well at Stanford. There are excellent role models in medical and surgical specialties of faculty conducting basic research, clinical and translational research, and population health sciences research.

At the same time it was widely acknowledged that sustaining a career as a successful physician-scientist requires institutional support, mentoring, career flexibility and team participation. Collaboration between faculty in departments with those in institutes and centers provides unique opportunities. As with basic research, discretionary funding for innovation and faculty support are enormously important and are high priorities for the future.

Ironically, many physician scientists feel that they are less valued and appreciated for the clinical work (as compared to their research) but for a different reason than clinician educators. The assumption is that those doing part-time clinical care are simply less knowledgeable and effective in clinical medicine. Obviously this is a generalization, but it does underscore the importance of how assumptions and even stereotyping can impact perceived value. Clearly this too needs to be addressed.

Physician-scientists have many different career configurations and pathways, and flexibility and balance - for the long run - are important. Career paths and balance are highly variegated among surgical and medical disciplines and by the type of research or clinical care that is being conducted. But as with each of the other faculty roles, support from institutional leaders and financial and programmatic support are critical. Figuring out how to develop these resources going forward is the

major unmet challenge - especially since it is clear that physician-scientists (along with the success of basic scientists and clinician-educators) are essential to our future - individually and collectively.

- **Innovation in Academia and Industry - Panel discussion led by Drs. Tom Okarma, Mark Tessier-Lavigne and Mike Rosenblatt.**

This panel differed from the others in that the members were all invited guests. They each have had exceptional careers in both industry and academia, and they each had different perspective based on their experiences, which ranged from small to large biotech to big pharma. Each of the presentations offered an important viewpoint, and each underscored the opportunities that come from effective academic-industry partnership. It was also clear that there is no ideal model of interaction and that the unique features of each institution have a major impact on the nature of the interaction. To be effective such interactions need to be true and respected partnerships - not one-way relationships. It was also clear that a number of the programs being developed at Stanford - most notably SPARK and Biodesign - are unique and that enhancing them could provide even more effective academic industry collaborations for the future.

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Art Exhibition at the Li Ka Shing Center for Learning and Knowledge

On Tuesday January 24th the Stanford School of Medicine's Art Committee sponsored the Inauguration of the Art Exhibit for the Li Ka Shing Center for Learning and Knowledge. Dr. Paul Berg, Robert W. and Vivian K. Cahill Professor of Cancer Research, Emeritus, hosted a lovely event introducing the three artists, whose work will be displayed over the next six months. In doing so Dr. Berg also expressed thanks and appreciation to Mrs. Helen Bing, who donated much of the framed artwork and posters that currently adorn the LKSC. Working with Maggie Saunders, Niraj Dangoria and Mahmut Keskekci, the LKSC now has a more "lived in" feel - which is wonderful. But moving forward, the Art Committee has organized this exhibition of original works, which will personalize the LKSC even further and begin a journey in which the contributions of faculty, students, staff and friends will add depth and breadth to our wonderful Li Ka Shing Center for Learning and Knowledge. The Art Committee is also hoping to find support for a major installation by the New York artist Ms. Alyson Shotz, which would bring the LKSC Conference Center to a level of exceptional distinction.

Dr. Berg introduced the three artists whose work can now be seen on the first and second floors of the LKSC as part of the Inaugural Art Exhibition. They include:

- ***Dr. Tom Merigan***, the George and Lucy Becker Professor of Medicine, Emeritus. Dr. Merigan began his interest in wildlife photography in earnest when he retired from his numerous leadership positions in infectious disease, diagnostic virology and AIDS research. He has put the same energy and creativity into his artistic pursuits as he did in science and medicine and has traveled to many parts of the world to "capture the essence of things living in the wild." Some of his extraordinary photography is on display on the first floor of the LKSC. An extension of his work can also be found at <http://www.pbase.com/merigan/profile>.
- ***Dr. Ralph Greco*** is currently the Johnson and Johnson Distinguished Professor of Surgery. He became interested in sculpture in the 1980s while living in Princeton, New Jersey, where he learned the techniques of stone carving. He has since created a wide array of abstract and occasional figurative sculptures, six of which are on exhibition on the second floor of the LKSC.
- ***Dr. Joseph P. Kriss*** was professor of medicine and radiology at Stanford School of Medicine beginning in 1948, and he served as the chief of the Division of Nuclear Medicine from 1958-1989. His distinguished career in medicine was complemented by his equally remarkable accomplishments as an artist - with works ranging from sculpture, oil paintings, miniatures and pioneering experimentation with digital art. Although Dr. Kriss died in 1989 his work lives on in many collections and galleries in the Bay Area and well beyond. His son Mark and daughter-in-law Jane

attended the event, and some of Dr. Kriss' oil paintings are shown on the second floor of the LKSC.

We are indebted to the Art Committee for their work in planning for art and exhibits throughout the medical school. *Dr. Greco*, noted above as one of the artists, is also the chair of the Committee - which includes School of Medicine faculty and students, including Drs. Paul Berg, Audrey Shafer, Peter Koltai, Daria Mochly-Rosen; Lauren Chircus (Graduate Student), Atalie Carina Thompson (SMS 4), Sabrina Buell (Stanford Alumna), Jon Pierucci and Niraj Dangoria. Hilarie Faberman from the Cantor Center is also a committee member and Traudi Sedelmeyr, Maggie Saunders and Chris Shay provide staff support as needed.

I hope you enjoy these wonderful exhibits. Thanks to all!

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2011 Faculty Fellows Graduation

On January 12, 2012, the Office of Diversity and Leadership hosted a graduation ceremony for the 2011 Faculty Fellows (see: <http://med.stanford.edu/diversity/leaders/fellows.html>). Dr. Hannah Valentine, Senior Associate Dean for Diversity and Leadership, presided over the ceremony, which recognized the accomplishments of the thirteen mid-career faculty who participated in the program over the past year. The success of this program, now in its seventh year, is a tribute to the vision and dedication of Dr. Valentine along with important contributions from: Dr. Julie Moseley, Director of Organizational Effectiveness; Ms. Jennifer Scanlin, Program Manager; and Lydia Espinosa, Program Coordinator. Special thanks must also go to the 2011 Faculty Mentors: Dr. Phil Lavori, Professor and Chair of the Department of Health Research and Policy; Dr. Christy Sandborg, Professor of Pediatrics and Chief of Staff at the Lucile Packard Children's Hospital; and Dr. David Stevenson, Professor of Pediatrics, Vice Dean and Senior Associate Dean for Academic Affairs.

The 2011 Faculty Fellows are:

- ***Annelise Baron***, Associate Professor of Bioengineering
- ***Mathew Bogyo***, Associate Professor of Pathology
- ***James Brooks***, Associate Professor of Urology
- ***A. Dimitri Colevas***, Associate Professor of Medicine
- ***Tina Cowan***, Associate Professor of Pathology
- ***David Fiorentino***, Associate Professor of Dermatology
- ***Miriam Goodman***, Associate Professor of Molecular and Cellular Physiology
- ***Steven Lindley***, Assistant Professor of Psychiatry and Behavioral Sciences
- ***William Robinson***, Associate Professor of Medicine (Rheumatology)
- ***Jane Tan***, Associate Professor of Medicine (Nephrology)
- ***Ewen Wang***, Assistant Professor of Surgery (Emergency Medicine)
- ***David Weill***, Professor of Medicine (Pulmonary and Critical Care Medicine)
- ***Wei Zhou***, Associate Professor of Surgery (Vascular Surgery)

Please join me in congratulating the 2011 Faculty Fellow graduates. If you are interested in more information about this program or to apply to be a Fellow, please contact Jennifer Scanlin at jscanlin@stanford.edu.

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Announcement: The Rathmann Family Foundation E4C Medical Education Fellowship in Patient-Centered Care

The Stanford School of Medicine Office of Medical Education is pleased to issue a call for applications to the *Rathmann Family Foundation Educators-4-CARE (E4C) Medical Education Fellowship in Patient-Centered Care*. This program will provide the part-time salary support for a Stanford faculty, fellow, or chief resident to pursue further study and activities focused on the promotion of patient-centered care in medical education. Areas of focus may include instructional design, curriculum development, or evaluation. Alternatively individuals may have topical areas of focus, such as clinical skills, compassion and humanism, or professionalism.

The program will provide funding for protected time for one year to participate in a core curriculum in medical education theory, methods and research, to participate in ongoing curriculum development in undergraduate or graduate medical education in the area of patient-centered care, and development and to conduct a scholarly project in medical education related to patient-centered care. The fellow will participate in the Educators-4-C.A.R.E. (E4C) program, serving as a mentored preceptor with selected E4C faculty in educational activities that are part of the E4C program.

The program will provide \$50,000 in salary support for one year, plus up to \$5,000 in project support for the fellow's project.

Interested individuals should submit the application (which may be found at the E4C website, <http://med.stanford.edu/e4c/rathmann.html>, at the bottom of the page), CV, and cover letter by Wednesday, February 15th to:

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Director, Stanford Center for Medical Education Research and Innovation
Office of Medical Education
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About Educators-4-C.A.R.E

The Educators-4-C.A.R.E. program, launched in 2008, formally recognizes the critical importance of mentors and clinical teachers by providing tangible support to a cadre of skilled and dedicated teachers of the practice of medicine. As the name implies, the Educators-4-CARE program prepares students to internalize core values of the profession - Compassion, Advocacy, Responsibility, and Empathy - from the beginning and throughout medical school. Fifteen program faculty are supported for time to serve as teachers and mentors for a small number of students (~6) from each medical school class. After intense faculty development in principles and practice of patient-centered care, the E4C faculty formally teach bedside clinical skills to preclinical students as part of the *Practice of Medicine* course. In addition to these regular sessions, E4C faculty meet with their students from all years on a bimonthly basis, in the *Doctoring with C.A.R.E.* sessions. These interludes allow for important near-peer interactions, mentoring, and revisiting important and cross-cutting issues in medical practice, with a major focus on patient-centered care.

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2012 School of Medicine Faculty Fellows Program

The Office of Diversity and Leadership received a large number of nominations for outstanding candidates for the 2012 Faculty Fellows program. Continuing with the original goals of the program, the review committee selected a class of junior faculty who will participate in this year long program. This year's program began with a welcome reception on January 24th. We are delighted to announce the selection of the 2012 Faculty Fellows: Drs. Valerie Baker (Obstetrics & Gynecology), Lorinda Chung (Medicine), Michael Haberecht (Psychiatry & Behavioral Sciences), Brian Hargreaves (Radiology),

Charles Hill (Anesthesia), Jinah Kim (Pathology), Nishita Kothary (Radiology), Marco Lee (Neurosurgery), Marc Melcher (Surgery), Kari Nadeau (Pediatrics), John Oghalai (Otolaryngology), Suma Ramzan (Anesthesia), Kim Rhoads (Surgery), Juergen Willmann (Radiology), Cynthia Wong (Pediatrics) and Paul Zei (Medicine).

The Faculty Fellows program brings faculty members together for monthly meetings featuring invited leaders who serve as role models by sharing their leadership journeys, describing their leadership styles and addressing specific challenges they have faced in their careers. In addition, small mentoring groups led by senior faculty mentors Drs. David Stevenson, Phil Lavori and Krisa Van Meurs meet monthly to reflect on the presentations Fellows also engage in a structured development planning process aimed at identifying opportunities for growth and development. Candidates are nominated by their department chairs and other supervisors and are selected on the basis of their leadership potential and demonstrated commitment to diversity. A review committee consisting of Drs. Hannah Valentine, Julie Moseley, Garry Gold, Preetha Basaviah, and Robert Dodd selected this years participants.

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ACE/Sloan Foundation Medical School Faculty Flexibility Survey

Stanford is participating in a national awards competition sponsored by The Alfred P. Sloan Foundation-- *The Sloan Awards for Faculty Career Flexibility*. Five medical colleges will each receive \$250,000 to enhance faculty career flexibility at their institutions, while two will receive \$25,000 awards recognizing their achievements for unique, innovative, and promising practices in career flexibility for their full-time faculty. I am writing to ask for your support in completing the survey on which we will be evaluated for this award; a response rate of at least 50% is needed for an institution to be considered.

If we achieve a response rate of 50%, the judges will consider YOUR responses on the Faculty Questionnaire regarding YOUR own experiences about the policies that exist at Stanford for faculty career flexibility. These policies are summarized in the document sent you in 2009, and again (updated) just before the holiday break, and a laminated copy via ID mail this week. This one-page summary contains information on tenure clock extension; parental and childcare leave; family and medical leave; childcare/eldercare assistance including our emergency backup program; consulting days; paid sabbaticals; family travel grants for conferences; part time options; and reduced teaching and clinical responsibilities. All of these are available to you as a member of the Stanford faculty.

On January 23rd, 2012 you received an email from ACE | Division of Leadership and Lifelong Learning asking you to take "The Faculty Questionnaire for Stanford Medical Faculty" which is available online, and should take approximately 20 minutes to complete. *Once completing this survey, you will be eligible to receive an Amazon gift card, and the opportunity to enter a raffle for zip car usage.*

PLEASE HELP US BE COMPETITIVE FOR THIS AWARD WHICH WILL PROVIDE MORE RESOURCES TO INCREASE OUR EFFORTS TO ENHANCE WORK-LIFE INTEGRATION FOR FACULTY.

Thank you for your assistance in this important effort.

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Awards and Honors

- ***Dr. Beverly Mitchell***, the George E. Becker Professor of Medicine and Director of the Stanford Cancer Institute, is the 2011 Albion Walter Hewlett Award winner. Dr. Mitchell has had an incredibly distinguished career in academic medicine and has had major impact on Stanford since she joined the University in 2005. She was selected for this enormously distinguished award by a panel of renowned prior Hewlett Award recipients. This prestigious award is presented by the Department of Medicine, and Dr. Mitchell is its 23rd recipient since it was initiated in 1983. Please join me in

Appointments and Promotions

- Daniel Becker has been promoted to Adjunct Clinical Professor of Psychiatry and Behavioral Sciences, effective 12/01/2011
- Paul D. Blumenthal has been reappointed to Professor of Obstetrics and Gynecology at the Stanford University Medical Center, effective 1/01/2012
Profile: http://med.stanford.edu/profiles/Paul_Blumenthal/
- Bryan D. Bohman has been promoted to Clinical Associate Professor of Anesthesia, effective 2/1/2012
Profile: http://med.stanford.edu/profiles/Bryan_Bohman/
- Julie A. Collier has been promoted to Clinical Assistant Professor of Anesthesia, and by courtesy of Pediatrics, effective 2/1/2012
Profile: http://med.stanford.edu/profiles/Julie_Collier/
- Elizabeth A. Desmond has been promoted to Clinical Assistant Professor (Affiliated) of Orthopaedic Surgery, effective 3/1/2012
- Barbara M. Egbert has been reappointed to Clinical Professor (Affiliated) of Pathology, effective 9/1/2011
- Ruth M. Fanning has been reappointed to Clinical Assistant Professor of Anesthesia, effective 12/1/2011
Profile: http://med.stanford.edu/profiles/Ruth_Fanning/
- Nathan D. Hart has been promoted to Clinical Assistant Professor (Affiliated) of Orthopaedic Surgery, effective 3/1/2012
- Peter C. Heublein has been appointed to Clinical Associate Professor (Affiliated) of Neurology and Neurological Sciences, effective 3/1/2012
- Michael Jeng has been reappointed to Associate Professor of Pediatrics at the Lucile Salter Packard Children's Hospital, effective 1/01/2012
Profile: http://med.stanford.edu/profiles/Michael_Jeng/
- Peter E. Kane has been reappointed to Clinical Professor of Radiology, effective 1/1/2012
Profile: http://med.stanford.edu/profiles/Peter_Kane/
- Syed Aftab Karim has been promoted to Clinical Assistant Professor of Neurosurgery, effective 2/1/2012
Profile: http://stanfordhospital.org/profiles/Syed_Karim
- Joseph J. Kim has been reappointed to Clinical Assistant Professor of Pediatrics, effective 11/1/2011
Profile: http://med.stanford.edu/profiles/Joseph_Kim/
- Jeffrey E. Krygier has been promoted to Clinical Assistant Professor (Affiliated) of Orthopaedic Surgery, effective 5/1/2012
- Leland E. Lim has been appointed to Clinical Assistant Professor (Affiliated) of Neurology and Neurological Sciences, effective 2/1/2012
- Margaret Neff has been appointed to Clinical Associate Professor of Medicine, effective 1/23/2012
Profile: http://med.stanford.edu/profiles/Margaret_Neff/
- Lily Nguyen has been reappointed to Clinical Assistant Professor (Affiliated) of Obstetrics and Gynecology, effective 9/1/2011
- Linda B. Nguyen has been reappointed to Clinical Assistant Professor of Medicine, effective 9/1/2011
Profile: http://med.stanford.edu/profiles/Linda_Nguyen
- Ming-Gui Pan appointed to Clinical Assistant Professor (Affiliated) of Medicine, effective 9/1/2011

- **Nhat Minh Pham has been reappointed to Clinical Assistant Professor (Affiliated) of Medicine, effective 11/1/2011**
- **Miguel A. Sanchez reappointed to Clinical Associate Professor (Affiliated) of Medicine, effective 9/1/2010**
- **Minal Vasanawala has been promoted to Clinical Assistant Professor (Affiliated) of Radiology, effective 4/1/2012**
- **Dana L. Weintraub has been reappointed to Clinical Assistant Professor of Pediatrics, effective 11/1/2011**
Profile: http://med.stanford.edu/profiles/Dana_Weintraub/
- **Jennifer Reikes Willert has been appointed to Clinical Associate Professor of Pediatrics, effective 4/1/2012**
- **Denise Rettenmaier has been promoted to Adjunct Clinical Assistant Professor of Medicine, effective 3/01/2012**
- **Ann Weinacker has been promoted to Professor of Medicine at the Stanford University Medical Center, effective 1/01/2012**
Profile: https://med.stanford.edu/profiles/Ann_Weinacker/
- **Richard Wittman has been promoted to Clinical Assistant Professor of Medicine, effective 4/1/2012**
Profile: https://med.stanford.edu/profiles/Richard_Wittman/

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A downloadable Microsoft Word version of the newsletter is available. If clicking on this following link does not initiate a download, right-click (Windows) or click-and-hold (Mac), then use the command most similar to "Download Link To Disk" or "Save This Link As" and save the Word file to your disk.

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