

Class of 1972



MEMORIES

In celebration of your 50-year reunion.



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Memories

148th COMMENCEMENT



*Jefferson Medical College
College of Graduate Studies
College of Allied Health Sciences
of
Thomas Jefferson University*

1824-1972

*Friday, June Ninth
Nineteen Hundred and Seventy-Two
Half Past Ten O'clock*

ber 18, 1968

1:00 p.m.

Medical College

SS OF 1972

resents

E INEMO

irical Spool

Barry Skelst

Bruce Saltzman - Ted Sunder

Glenn Hye

Karsh Meyer

Barry Skelst

Karen Nass

Joe Levinsky

Dick Bonner

Phil Hoffman

Phil DiGiacomo

CAST

Don T. Allegory

Dr. Neuberger

Hippocrates

Sir Loomer

Dr. Masters

Dr. Motraet

Dr. Leas O'Witt

Dr. Sperke

Dr. Andy

Dr. Robert "Graham Cracker"

Hatchinson

Dr. E. Otobolo

Dr. Rosamondron

Dr. DePalmp

Dr. Whinas

Dr. Cajoloby

Dr. Flops

Julia

Patient

Dr. Shea

Barry Skelst

Ted Sunder

Ed Manering

Jim Mahoney

Bruce Saltzman

Paul Dainer

Larry Schiller

Jim Behrend

Tim Wolfgang

Paul Fitzgerald

Dick Saxon

John Carlson

Allan Samstein

Med Ruxtel

Norton Kaytulu

Steve Naulty

Cheryl Marco

Anna Marie D'Aric

Steve Flynn

The Company: Rosemary Andrias, Beverly Bortan, Phil DiGiacomo, Dick Bonner, Robin Edwards, Susan Edwards, Joan Nelson, Phil Hoffman, Helen Lebowitz, JIM ROLKA, SAND



Memories



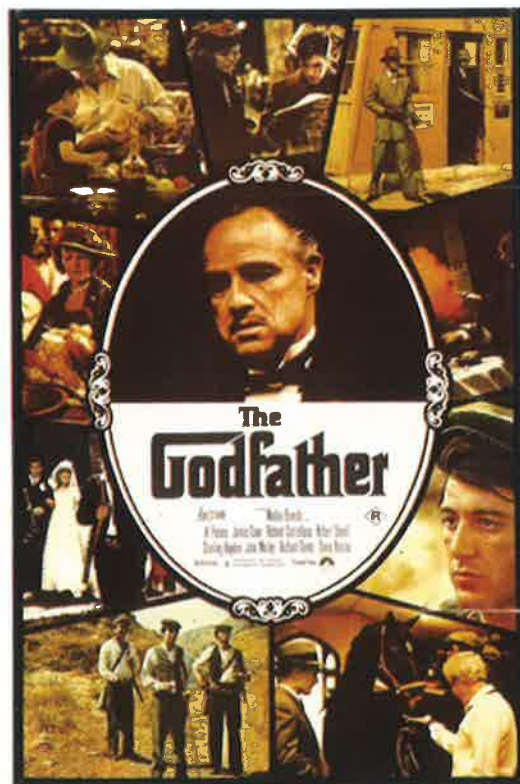
Memories



1972 in Review

Popular Films of 1972

- » "The Godfather"
- » "The Poseidon Adventure"
- » "What's Up, Doc?"
- » "Deliverance"
- » "Cabaret"
- » "Deep Throat"
- » "The Getaway"
- » "Lady Sings the Blues"
- » "Jeremiah Johnson"
- » "Last Tango in Paris"



Song Hits of 1972

- » "The First Time I Ever Saw Your Face," Roberta Flack
- » "American Pie," Don McLean
- » "Lean on Me," Bill Withers
- » "Rocket Man," Elton John
- » "I Can See Clearly Now," Johnny Nash
- » "Burning Love," Elvis Presley
- » "The Lion Sleeps Tonight," Robert John
- » "Without You," Harry Nilsson
- » "Alone Again (Naturally)," Gilbert O'Sullivan
- » "Heart of Gold," Neil Young
- » "Rockin' Robin," Michael Jackson
- » "Day Dreaming," Aretha Franklin
- » "The Way of Love," Cher
- » "I'll Take You There," The Staple Singers
- » "The Candy Man," Sammy Davis, Jr.

1972 in Review

In the News...

- » President Nixon makes unprecedented eight-day visit to China and meets with Mao Ze Dong.
- » U.S. Supreme Court rules that death penalty is unconstitutional.
- » National Institute of Mental Health and surgeon general issue report claiming exposure to violence on TV fosters aggression in children.
- » Apollo XVII, the last manned moon landing to date, returns to Earth with 250 lb. of lunar samples.
- » Five men are apprehended by police in an attempt to bug DNC headquarters in Watergate complex.
- » The Equal Rights Amendment passes the U.S. Senate on March 22.
- » The United States and Soviet Union sign the Anti-Ballistic Missile (ABM) Treaty.

Cost of Living in 1972

- » Average cost of new home: \$27,550.00
- » Average yearly income: \$11,800.00
- » Gallon of gas: \$0.55
- » Dozen eggs: \$0.52
- » Gallon of milk: \$1.20
- » First-class stamp: \$0.08
- » Loaf of bread: \$0.25



Atari founders Ted Dabney and Nolan Bushnell, with early employees Fred Marincic and Al Alcorn, pose with a "Pong" machine.

Flashback Facts

- » Time Inc. transmits HBO, the first pay cable network.
- » Women dominate the 1971 Grammy Awards, taking all four top categories.
- » Gloria Steinem's Ms magazine debuts.
- » "M*A*S*H*" premieres on CBS.
- » Atari introduces the arcade version of "Pong," the first video game.
- » The compact disk is developed by RCA.
- » Intel invented the single-chip microprocessor.
- » Doritos Nacho Cheese flavor enters the market.
- » Due to the inclusion of a leap day and two leap seconds, 1972 is the longest year in history!



Necrology

- » Samuel Ackerman, MD
- » Paul Andrulonis, MD
- » Wallace Benjamin, MD
- » Gary Berger, MD
- » Beverly Borlandoe, MD
- » John Carson, III, MD
- » Jay Castle, MD
- » Richard Doering, MD
- » Philip DuPont, Jr., MD
- » Martin Fleishman, MD
- » Stephen Fremer, MD
- » James Fticsar, MD
- » James Gardner, II, MD
- » Richard Garnet, Jr., MD
- » Gregory Gauvin, MD
- » Lawrence Howard, MD
- » Frank Hryshko, MD
- » Larry Klein, MD
- » Allan Lenetsky, MD
- » Anthony Nespoli, MD
- » Lawrence Olsen, MD
- » Howard Pfupajena, MD
- » Morton Rayfield, MD
- » Frank Redo, MD
- » Charle Rhodes, MD
- » James Roberts, MD
- » James Ryan, MD
- » George Speace, II, MD
- » Steven Strum, MD
- » James Wall, MD
- » Gerald Zabielski, MD
- » Cheryl Zaret, MD
- » Thomas Zukoski, MD



Class Biographies

Jim Behrend, MD

CONTACT INFORMATION

450 Stableridge Street
El Cajon, CA 92019

Email: aj3behrend@gmail.com



Looking back on my time at Jefferson, there were many good times despite the normal anxiety at test time. I roomed with our classmate John Carson all four years in Orlowitz. Sadly, he passed away a few years ago. One of the fun events was our freshman class play. I don't know how Barry talked me into it, but when it was done, I was glad I had played a small part in its success. Another highlight was getting to meet John Gibbon at a Surgery Club meeting our senior year. The celebratory evenings at Dr. Watson's Pub will not be forgotten.

I met my wife Pat during my surgical internship at Vanderbilt. I completed my general surgery training at Albert Einstein Medical Center in Philadelphia and then spent two years in the Army as one of the last Berry Plan doctors. I then did a Vascular Surgery fellowship under the guidance of our classmate Preston Flanigan at the University of Illinois in Chicago.

We left Chicago in 1982 and moved to the San Diego area where I worked for the next thirty years. I semi-retired for a few years; finally retiring in 2014. Since then we have spent summers in Portland, OR, where our daughter, her husband, and two of our granddaughters live. We spend the winters in San Diego. Our son lives in Ontario, CA, so we can visit his family easily when we are in California.

I enjoy fly fishing and have been tying my own flies since the start of the pandemic. I doubt I will get to the reunion and will miss the chance to see old friends.

Mary Buechler Janson, MD

CONTACT INFORMATION

Email: mpemfl@aol.com

Phone: (978) 352-2126



It is a bit hard to put 54 years into a few lines. Fifty-four because we are to write about our medical school experiences as well as subsequent medical life. Of course, I remember the first day of class and being told that a few years prior we would have been told to look to the right and then to the left and be aware that one of us would not be there at the end of the year. But we were told, there was a change of heart. If we were good enough to get into Jefferson, which was not easy, we were good enough to graduate. What a relief! I am hard working but definitely not competitive. I realized now as I did then, that I was very lucky. I had been accepted to the five-year Penn State-Jefferson program. I had not fought through four years of college trying to keep great grades, and the fact that I was a woman was also in my favor at that time. It has been a very long time since any patient asked me what it was like to be a woman doctor, as was a very standard question 50 years ago. So I am eternally grateful for being accepted into the program and into Jefferson. I have had a wonderful career and life as a result.

All in all, my undergraduate years went by quickly and I was pleased with the education I received. I will never forget the first day of anatomy—especially the smell and all of the white feet sticking out from under sheets. I didn't eat much meat for weeks. Peanut butter and jelly was my go-to food. I don't think any of us can forget Dr. Gonzalo Aponte

who died so young. I have always been grateful for how much medicine we learned studying pathology. Our clinical years were good, and I for one was very glad for the Wednesday afternoon electives. I think I learned to use the ENT mirror there and to look at fundi on an ophthalmology rotation. I found that I had a few clinical skills my fellow interns didn't have when I got to internship. I am also grateful to Dr. Joseph Gonnella who was my advisor and who aimed me into internal medicine and toward Boston City Hospital.

Mostly Jefferson was a time for real friendships. I have fond memories of multiple classmates and a few of the upperclassmen.

I did a medical internship and residency at Boston City Hospital. I think I saw every medical problem possible related to alcohol. The smell of paraldehyde pervaded the place. I became engaged and we decided to go to a medically needy area. At that time the formal programs would not place us, as we were not yet married. I remember thinking how long a two-year commitment to the Peace Corp was, but that the five-year program made it OK. This many years later, it seems so silly. In any case we found ourselves in Eastern Kentucky in the mountains in the heart of Appalachia. The nearest real medical center was a three-hour drive to Lexington. I had completed two years of internal medicine and my husband only a medical

internship, but we were the closest things to internists they had, as the only internist had moved away the previous year. We became known as great diagnosticians but it was really a medically virgin population. We had several patients walk in blatantly hypothyroid, a lot of valvular heart disease, and most of the women were having their first Pap smears ever. Of course, the locals had to teach us about black lung and parasitic disease. It was a good year, but we subsequently returned and completed our residencies and fellowships (mine was hematology-oncology).

After brief stints at Pondville (a state cancer hospital in Massachusetts, now defunct) and the VA Hospital in Wilmington, DE, we ended up back in Eastern Kentucky. I was the only medical oncologist in the eastern part of the state, but it was not a medical center. We sent most people to Lexington for workups. My hospital had no CT scanner and the nearest radiation therapy was 50 miles away in Pikeville. In any case, I burned out. In 1987, we returned to Massachusetts; I cut my hours in half and doubled my salary. I was able to practice certify in emergency medicine and take the boards. We adopted two children and life settled down a bit. I worked three twelve-hour nights and my husband also went into emergency medicine, so we were able to be there for our children. Of course, someone was always working on weekends and holidays, but we managed to celebrate a few days later. I am retired now. It has been a good life and I like to think that I have helped people.

I was just an emergency department grunt, but there is a place for us too.

Anthony J. Calabrese, MD, FACG, AGAF

CONTACT INFORMATION

Email: ajcdoc@comcast.net



My first experience on the Jefferson campus was as a pre-med college junior visiting the medical school with an organized tour. The year was 1966 and I was a commuter student at St. Peter's College in Jersey City. That day is most memorable, because on that same tour, I met my wife Nancy who was a commuter student at Caldwell College in NJ.

My first experience living away from home was attending Jefferson. That first year I lived in a third-floor room on Chestnut Street with Bob McKay (the only other St. Peter's alumnus in our class). We ate our meals at the Alpha Kappa Kappa Fraternity house. We actually had a full-time chef and waitress at the house. After the first morning of freshman gloveless (!) gross anatomy dissection, the AKK lunch tradition was to serve a hamburger on a bun with no silverware. Those olfactory memories will likely never leave my limbic system! I took the train back home to Jersey most weekends until Nancy and I married in August 1970. Nancy worked in medical research at UPenn until I started my internal medicine internship at Temple. She then entered Jefferson's new two-year BA to BSN nursing program and graduated with its first class, and years later, went on to earn her certification as a Nurse Practitioner.

My fondest memory at Jefferson was our graduation day, sharing the joy and pride of my

parents (neither of whom had finished high school) at being awarded an MD cum laude.

Next was a three-year Internal Medicine program at Temple. Our first child was born when I was an intern and money was always tight. While a resident at Temple, I "moonlit" in emergency rooms and also at the Byberry Psychiatric Hospital. I came back to Jefferson for a two-year Gastroenterology fellowship working closely with Drs. Susan Gordon and D. Kowlessar. Gastroscopy and colonoscopy were in their very early stages and no real therapeutics were yet available. During my fellowship at Jeff, I also worked part time as an internist with Jefferson's newly developed HMO.

In the late 60s and early days of medical school, the draft, and Vietnam, I had signed up to eventually join the U.S. Air Force. Under the Berry Plan, active duty was deferred for several years so the Air Force would get the benefit of all that subspecialty training. Shortly after our second son was born and upon completion of my fellowship, Uncle Sam came calling. I was fortunate to get assigned to Andrews AFB and that's how we eventually settled in Maryland. In 1977, Andrews was a regional medical center and got referrals from throughout the Northeast. I served two years there with the rank of major, was chief of GI, and was actively teaching medical students from the newly established Uniformed Services Medical School. I

was the first at Andrews to attempt and successfully endoscopically remove a gastric foreign body and spared that little girl the laparotomy for which she'd been referred. While on active duty I was chosen to be the attending physician for a delegation of congressmen on a "junket" throughout the Caribbean. We visited several countries and met with their leaders. We were able to do our own mini-tour of Havana and heard the real hardships of that system from people on the street. I met with and got to shake the hand of Fidel Castro.

Annapolis was an unexpected discovery when we were looking for private practice opportunities after the service. I joined with two other GIs with just a handshake and no income guarantees, agreeing to share overhead and call while each remaining independent. We flourished and eventually merged to form Anne Arundel Gastroenterology Associates. I became president of the medical staff at the local hospital as it morphed into a thriving regional medical center. Our practice remained independent and the group grew over the years to as many as 12 gastroenterologists. We established the first ambulatory GI endoscopy center to be licensed in Maryland, built our own medical office building, and developed our own nursing, ancillary anesthesia and pathology staffs. It was a great place to practice high quality medicine with wonderful colleagues, patients, and staff.

In 2018, at age 72, I retired after 46 years as a physician having been on call far too many nights and weekends.

The Chesapeake has offered a lot of recreational opportunities and we've enjoyed cruising and fishing on the bay with my now 36 year-old, 28 ft. power boat "Therapy" (there's nothing wrong with that boat that money can't fix!). I've also fished offshore for sailfish and marlin with the Ocean City Light Tackle Club (est. 1947). We've fished off the U.S. East Coast and travelled internationally to several Caribbean, Mexican, Venezuelan, Guatemalan, Costa Rican and Panamanian fishing venues. I'm looking forward to a trip to Cabo San Lucas with the Club next year.

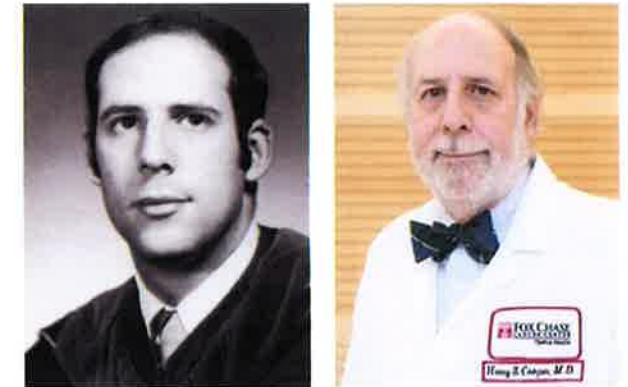
My main retirement enjoyment, however, has been music. I've been fortunate to play saxophone and clarinet with the Bayside Big Band in Maryland for many years, and when "snowbirding" in Florida on Marco Island, I'm performing with both the Naples Big Band and the Southwest Florida Big Band. There's also been a mix of Dixieland and small group jazz jams in both MD and FL with even some classical music concerts thrown in to keep things interesting.

Harry S. Cooper, MD

CONTACT INFORMATION

Email: harry.cooper@fccc.edu

Phone: (215) 728-5388



I was very fortunate to have attended Jefferson Medical College. I enjoyed my classmates and learned so much from the staff (clinicians and basic scientists). However, as a medical student I fell in love with Pathology due to my interactions with Arthur S. Patchefsky, MD (whom I have worked with for my entire professional career) and decided that I wanted to be a Pathologist.

I did my residencies at the Johns Hopkins Hospital and the Hospital of the University of Pennsylvania. It was there that I developed both a great interest in Gastrointestinal Pathology and a love for research.

After my residencies I was very fortunate to have joined the faculty of the Pathology Department of the Jefferson Medical College/Hospital. It was there I worked closely with experts in the field of Gastroenterology and allowed me to both increase my expertise in Gastrointestinal Pathology and Gastrointestinal research. I spent 13 years at Jefferson obtaining the position of tenured full Professor and director of the division of Surgical Pathology.

Subsequently I spent several years at the Hahnemann Medical University/Hospital. It was there that I did basic research and developed mouse models to study inflammatory bowel disease and to improve my expertise in gastrointestinal Pathology.

I have spent the past 28 years at the Fox Chase Cancer Center (FCCC), a National Cancer Institute-designated Comprehensive Cancer Center. Here I practiced diagnostic Pathology in all types of Neoplastic disorders and especially specializing in Gastrointestinal Neoplasia. I am the Pathologist to the National Comprehensive Cancer Network (anal, colorectal, and small intestine neoplasia).

At the FCCC we feel that the best way to treat cancer is to prevent cancer. During these 28 years I have also done research in using mouse models that we have developed to prevent colorectal neoplasia via chemoprevention or vaccination. Hopefully these can be translated to humans with a high risk for developing colorectal neoplasia.

I could not have done all the above without the help and support of my wife of 53 years, Fredi, and the opportunity to have been a graduate of the Jefferson Medical College. Dr. G. Aponte was the Chair of Pathology and taught all of us basic Pathology and he was my Chair during some of my 13 years on the faculty at Jefferson.

Paul Maclyn Dainer, MD

CONTACT INFORMATION

738 Michael's Creek
Evans, GA 30809

Email: pdainer@me.edu



My experience at Jefferson was challenging but quite rewarding. The basic science faculty delivered a quality education and maintained very high standards. I profited from joining a medical fraternity where we, as freshmen, shared our experiences and challenges over our meals and received encouragement and sage advice from sophomores and juniors. I also made lasting friendships with other classmates throughout the institution. Living at our brand new Orlowitz Hall in downtown Philadelphia gave me opportunities to see fabulous plays and musicals, enjoy concerts by the Philadelphia Orchestra and visit art museums and other cultural venues. At Jefferson, I frequently marveled at our painting of Dr. Samuel Gross ("The Gross Clinic"). My only lasting imprint at Jefferson was the founding with classmate Robert Lahita of its Raft Debate, which has survived for decades after our departure. My clinical rotations at Jefferson and affiliated hospitals gave me a broad range of experiences and well prepared me for an internship at Jefferson and residency in Internal Medicine at the Medical College of Pennsylvania.

Thereafter, I entered the Navy under the Berry Plan and enjoyed clinical experiences at Portsmouth Naval Hospital and aboard the USS Inchon, a helicopter carrier, during one of its Mediterranean cruises. I then completed a fellowship in Hematology/Oncology at the Naval Regional

Medical Center in San Diego during which time I took the opportunity to take elective rotations at the Scripps Research Institute and later the Fred Hutchinson Cancer Center, where I had an opportunity to participate in its bone marrow transplant program and attend small seminars lead by Nobel Laureate Dr. E. Donnall Thomas, and other pioneers in transplant medicine.

Following my training, I transferred to Charleston Naval Hospital where I established a general Hematology/Oncology program and participated as an attending physician in weekly clinics at the Medical University of South Carolina. While in Charleston, I met and married my wonderful wife, Monica. From there, I transferred to the National Naval Medical Center in Bethesda. My colleagues and clinic staff had the honor of sharing our service with the members of the Medical Branch from the National Cancer Institute. Every Friday morning, the famed Dr. John Minna would hold a tumor conference with our combined faculty and fellows.

Upon leaving active duty, I maintained my reserve status and attained the rank of Captain. During that time, I first served as an attending physician at University Hospital in Jacksonville, Florida under the leadership of Dr. Stefan Madajewicz, a leading clinical research investigator. Following his departure, I moved on and took a position at East Carolina University School of Medicine, where I had

the opportunity to work with several experienced basic scientists on a mouse model for lung cancer. Since 1992, I have served on the faculty of the Medical College of Georgia and assumed a position at the Veterans Affairs Medical Center, where I coordinated clinical research with a colleague. I have also coauthored several interesting case reports with colleagues and clinical fellows. Nineteen years ago, I established the Raft Debate here with yearly events, except for a season during the COVID outbreak.

Although I ceased playing any musical instrument during my early medical training, I resumed playing my viola in San Diego and have since performed in numerous ensembles and orchestras, most recently the Augusta Symphony and the Aiken Civic Orchestra. In my home, Monica and I have also held nearly 40 annual musical Christmas Parties. Although COVID has paused this activity, we look forward to resurrecting it in a more limited fashion.

My yearly participation in a Georgia Cancer Center 25 mile "Paceline Ride," founded a few years ago to raise money for its research precludes my attendance at the reunion; however, I will be thinking of y'all during my journey.

Anna Marie D'Amico, MD

CONTACT INFORMATION

1100 Loyering Avenue
Apartment 1802
Wilmington, DE 19806

Email: annamd1947@gmail.com

Phone: (302) 379-9433



Let me begin with the end of my career. My greatest accomplishment was becoming the first woman to chair District III of ACOG (American College of Obstetricians and Gynecologists). And District III for you other docs is Delaware, New Jersey, Pennsylvania, and the Dominican Republic. This capped a fairly successful private practice in Wilmington, Delaware. And some other activities such as being medical director of Planned Parenthood of Delaware kept me busy.

The reason I begin at the end is I did not have a warm and fuzzy feeling about Jeff when I was there. Minor issues became irritants in those early days. And major issues were hard to forgive such as not matching at Jeff for internship!

So warm and fuzzy, no way. But then I realized in early training that I could do spinals and forceps deliveries and recognize septic emboli when senior attending were scratching their heads at this "red rash!" Then I remembered how we were told that Penn graduated researchers and Jeff graduated clinicians. I remembered the photo labs we did for Aponte during Anatomy class. I believe I learned at least 50% of medicine from that class. So when the lightbulb went off and I realized what exemplary training I had received, I appreciated those old days. It did take a bit into mature years for this to develop. But now I am grateful and pleased with Jefferson for how they made me the physician I was/am.

Personal life has also been a plus. Andy Feiring and I celebrated our 45th wedding anniversary this year. We met playing bridge. The first hand we ever played I bid him into a slam. Fortunately he made it easily and the rest was history. We both share a travel bug. I have set foot in 75 countries and Andy has done the same in all 50 states. My husband has been named inventor on 84 issued U.S. patents. I am happy to say I met my soulmate. Since neither of us can spell retirement, we've changed gears and volunteer at the senior learning center of University of Delaware. I teach yoga and Andy teaches computers to folks who don't know what a mouse is. The patience of Job is needed for that. Namaste, y'all.

I chose a photo of us taken in Australia in February of 2020. Fortunately we got that great vacation in before the world closed down.

So all in all, life is good. And I certainly have to credit Jefferson for some piece of that fulfillment.

Stuart Deglin, MD

CONTACT INFORMATION

210 Locust Street
Apartment 29B
Philadelphia, PA 19106

Email: smd789@hotmail.com



I stayed on at Jeff after graduation to do my internal medicine and most of my cardiology training. The best thing about my residency was that I met my wife, Judi, at a patient's bedside. She was doing a hospital pharmacy residency. We were engaged three months after meeting and married three months after that, and we are still in love close to 50 years later. We subsequently both did additional fellowships in Connecticut and then moved on to faculty positions at West Virginia University. Truth be told, the pharmacy school was aggressively recruiting my wife, and I think they got their buddies at the medical school to find a position for me as an add-on in order to seal the deal with Judi.

Anyhow, we both loved our time there, but we returned to Connecticut after our daughter was born in order to be closer to family. We purchased and built a house on 26 acres of my wife's family farm, and I spent a lot of the next 50 years raising chickens, growing vegetables, and other wannabe farmer stuff.

I started a private practice in Norwich, CT where I was the first cardiologist ever in that small city. A good thing about that was that I got to set up cardiology services at the local hospital my own way. A bad thing was that I was on call 24/7 for three years until I got a partner. There was no house staff and no such thing as hospitalists in those days. It was all very exciting stuff for a young

person, but I was away from my family way too much.

When my kids were teenagers they were hit and killed by a drinking driver while they were walking home from high school. Obviously everything changed for my wife and me after that. I would like to mention that in the couple of years after that I leaned on many of my Jefferson classmates for help. As we began thinking about restarting our family we got help from classmates who had experience with adoption, a classmate with expertise in fertility and IVF, and especially a very special friend from our class who had experienced her own incredible grief and was willing to use her understanding to support me. I never thanked any of you enough. You guys know who you are. I have never forgotten your kindness.

We did eventually adopt two kids who were born overseas, both now great young adults in their 20s. One is a fashion designer; the other a professional figure skater.

After the tragedy I spent about half of my time as a sort of itinerant international volunteer while I tried to find myself. I taught new doctors at a public hospital in Cambodia, was the doctor at a camp for poor kids in the Dominican Republic, and worked intermittently at clinics in remote towns in Honduras (which I continued to do until COVID interrupted things). When COVID hit I vaccinated at

the local public health clinic until the pharmacies were able to take over. In the meantime I gradually found my way back into cardiology doing inpatient procedures and consults on a part-time basis.

I retired last year and moved back to Philadelphia which is my home town. Judi and I now live in a Center City high-rise. I miss the big house and the 26 acres a little bit, but I imagine many of you will identify with my willingness to relinquish the property maintenance responsibilities. I'm glad to be within walking distance of the theaters and the orchestra and the zillion cool restaurants. I still do some tele-consults for an organization that supports remote clinics in Africa. I also became an election official here in Philly which involves a little more time and training than I had realized.

So it has been a little bit of a bumpy ride, but Judi and I are still in real good health, and we are enjoying the next phase.

Michael Eisemann, MD, FACS

CONTACT INFORMATION

6550 Fannin Street
Suite 2119
Houston, TX 77005

Phone: (713) 854-6510



Hello fellow classmates of '72!

It seems like a blink of an eye since I moved into a boarding house on Locust Street for several months awaiting the completion of the construction of Orlovitz. My girlfriend Linda and future wife, office manager, and mother were excited about my moving into this beautiful building with excellent accommodations for student housing. Living across the street from the Jefferson Medical College and Hospital was so convenient. We loved Philadelphia with its wonderful restaurants, theater, symphony and museums and parks.

The 1st year of medical school was especially memorable and moving when we recited a brief prayer thanking those who had donated their bodies for anatomical dissection. The basic science courses in embryology, histology, biochemistry and physiology seemed like a rehash of college courses. The excitement crescendoed in my second year with Dr. Aponte's pathology course and lecture series. Looking back, I don't think I attended a more thorough, clear, succinct presentation throughout three residencies and future conferences. I will miss him just as I have missed the famous painting entitled "The Gross Clinic" by Thomas Eakins which hung on the wall to the entry to the College.

I tried many rotations in medicine, radiology, and anesthesia doing the last two years but could not escape what I was trying to avoid—surgery. It didn't

seem to matter what surgical rotation I tried since each was exciting and appealing. I matched at the Yale general surgery residency still undecided which subspecialty I would pursue. Then one day I received a call from the ENT program director, Dr. George Nager, at Johns Hopkins offering me a position in the residency. I finished the four-year residency program and then accepted a faculty position at the University of Texas. This seemed like an excellent opportunity where I would be doing acoustic neuroma and stapes surgery. Well, to my surprise I found out that I was doing a lot of facial reconstruction following trauma, head and neck surgery and cosmetic surgery. The latter was not permitted at Hopkins during the ENT program. You will recall that Jefferson did not have a plastic surgery residency or department at that time.

I stayed at the University of Texas in Houston for three years as an assistant professor before finally realizing my calling—plastic surgery. I turned back the clock and applied and was accepted to the Baylor plastic surgery residency program under Dr. Melvin Spira. I was thrilled to be operating from head to toe on all parts of the body including hand, cleft lip and palate, breast aesthetic and reconstructive surgery, facelifts and eyelid surgery to name just a few. Thereafter, I took a fellowship in craniofacial surgery at the University of Toronto with the famed Dr. Ian Monro. When Dr. Monro left for a conference in Italy for a week I decided to visit

Dr. Harold Silver in Toronto whose office and operating room were in the Royal York Hotel where he did exclusively aesthetic surgery operating alone with his wife and scrub nurse using only intravenous sedation and regional blocks. The week I spent with Dr. Silver had more of an influence on my future practice than many years of residency.

Today I am a volunteer assistant professor in plastic surgery at the Baylor Medical College and the Houston Methodist Hospital where we have excellent integrated and independent plastic surgery residency programs for those who have completed general surgery, orthopedics or ENT residencies as well as those just finishing medical school. I am working full-time and enjoying it as much as it did when I first started.

I have three children, Bradley, Jérémy, and Vanessa; and five grandchildren, Samantha, Emily, Benjamin, Adelaide, and Lily. Bradley is a plastic surgeon in private practice with me for the past three years. We complement one another. My wife Linda is my office manager and has been with me from the very first day of private practice. We enjoy world travel and playing golf together. It has been truly a family affair.

Jefferson has helped to make this all this possible for which I am grateful.

Paul Fitzgerald, MD

CONTACT INFORMATION

438 Edgewood Avenue
Mill Valley, CA 94941

Email: paul@fitzgeraldmd.com



I find it hard to believe that it's been 50 years since we graduated from Jefferson!! My memories of our time there remain so very vivid. We had really dedicated professors and were the 1st class to occupy brand-new Jeff Hall, where, besides attending lectures and labs, we played squash, developed photos in the darkroom, and attended TGIF parties, where I met my future wife, a Jefferson ICU nurse, Kathryn Morgan.

My Jefferson roommates were terrific guys: first year in Nu Sigma Nu with Jim Mahoney, then 2nd year in Jefferson Village with Bill Wixted & Jim Fticsar (RIP Fitty), then with Jim Mackell & Dick Fiorelli. I regret not keeping in better touch with them.

Jefferson let us take electives at far-flung places. The summer after our 2nd year, Sue Edwards, George Speace and I traveled to Glasgow, Scotland for our first clinical rotation at The Royal Infirmary. We were given *really* personal attention. For example, the chief of medicine treated George and me to 18 holes of golf at The Royal and Ancient Golf Club of St Andrews. Such a wonderful memory!

It was during my 3rd year medicine rotation at Cooper Hospital that I came to enjoy the detective aspects of internal medicine. I applied for internal medicine internships and matched in Denver, first rooming there with Jeff classmate Bill Brubaker. I

used my 1st paycheck to pay for flight school and enjoyed flying Cessnas and Piper aircraft around Colorado. Kathryn joined me in Denver and in our free time we backpacked and skied together.

After residency, I worked full time in Denver EDs for about a year. After some travel, Kathy & I settled in Mill Valley, California, across the Golden Gate Bridge from San Francisco, where I had a fellowship in Endocrinology at the University of California San Francisco (UCSF). I gave up flying airplanes, not only because aviation fuel costs had sky-rocketed, but also because I reckoned that I'd eventually crash. I took up sailing instead.

After fellowship, I joined the medical staff at UCSF with responsibilities for attending in endocrine clinics, continuing clinical research, and providing inpatient consultations. It was then when I realized that I loved teaching and being associated with an academic institution.

For the past decades I've had a combination private/academic practice, co-authoring papers with colleagues, mostly regarding pituitary tumors and pheochromocytomas. I edited two editions of my own textbook, *Handbook of Clinical Endocrinology*, and continue to author revisions of textbook chapters. My academic clinical life took an unexpected turn around a single patient with a metastatic pheochromocytoma, an incredibly rare tumor. My colleagues and I developed a UCSF

phase 2 clinical trial for treating her with a targeted radioisotope: ¹³¹I-MIBG. I remained the protocol's PI for over 15 years and we published the results for our first 50 patients in JCO.

Kathryn & I have two adult children. Son Brent lives in Oakland, CA and is a software engineer specializing in digital payment systems. His wife Mariko is an attorney with an organization that fights for women's reproductive rights, a hot topic these days. They have two rambunctious sons, ages 10 and 7. Daughter Erin lives in Davis, CA, and is a reading resource educator and musician. Her husband Rob is a professor of wildlife biology at UC Davis. They have a sweet daughter, age 4. We're close enough to see them all fairly frequently and rented a beach house together on Big Island last December.

I continue to practice, commuting from Mill Valley to my office at UCSF. Why not retire? Well, I enjoy delusional thinking... If I keep things the same, I won't get old. I have some wonderful patients, many of whom have been seeing me for over 30 years, so practice is like seeing old friends. I still enjoy teaching UCSF medical students, who keep amazing me with their keen questions and observations. The COVID-19 pandemic prompted me to set up telemedicine visits that I could do from my home office. I've come to like telemedicine and now do a combination of in-person and virtual visits. Adapting to EMR and California-mandated e-prescribing has been another challenge, but good for me and my patients. All in all, I've really loved practicing medicine for all these years. Thank You Jefferson!!

Sorry to miss you at our 50th reunion. Have a great time!

Albert J. Fornace, Jr., MD

CONTACT INFORMATION

9008 Kirkdale Road
Bethesda, MD 20817

Email: af294@georgetown.edu



Greetings to fellow members of the Class of 1972. I'm looking forward to seeing many of you at our October 50-year reunion. I was in the Penn State-Jefferson five-year program, since I thought it would give me more time to get established in a research career. Regarding a recollection of my training at Jeff, I really didn't focus much on the clinical 'side' but rather took mostly biochemistry and research-oriented classes and projects, but in spite of that Jeff prepared me surprisingly well for my medical internship at George Washing Univ. Hospital, and I actually survived it! Later I did a pathology residency and found Dr. Aponte's pathology course at Jeff was great preparation for that, and I actually passed my anatomic pathology boards on the first try!

As far as an update on the last 50 years, I was accepted to a PHS position at the NIH after my internship. The acceptance was actually in 1972 when there still was a doctor draft, so I avoided being drafted by being a commissioned officer in the PHS. At the NIH, we referred to ourselves as the "Yellow Berets" in contrast to the Green Berets in Vietnam. At the NIH, I worked in the laboratory of Kurt Kohn on molecular pharmacology and repair of DNA damage by cancer chemotherapy agents and radiation. Following the NIH fellowship, I was accepted to a research-oriented pathology program at the Peter Bent Brigham Hospital (now called Brigham and Women's Hospital) led by Ramzi

Cotran. I also mixed this with research at the Harvard School of Public Health in a radiobiology laboratory.

Following four years in bean town, I returned to the NIH and the PHS in 1979 and stayed there until 2005 when I retired as a captain. I would include a picture of me in my PHS uniform but doubt I wore it even a dozen times. I was recruited back to Harvard School of Public Health to lead my old professor's lab, and spent about two years there until Georgetown made me a much better offer. I have been at Georgetown Univ. Medical Center for almost 16 years and the laboratory is still quite active with a lot of radiation-related studies plus, of course, 'omics' research, which is quite in vogue currently.

While in Boston for my path residency, I met my future wife in the Countway Medical School Library. We subsequently had three great kids. I told them all to go to med school, but instead they pursued PhDs and now have active careers in their respective science fields. I have included my 1972 yearbook picture and a picture from this year while skiing with my daughter Kimberly. In addition to being great ski buddy, she helps me get up when I fall which is quite helpful for a septuagenarian skier.

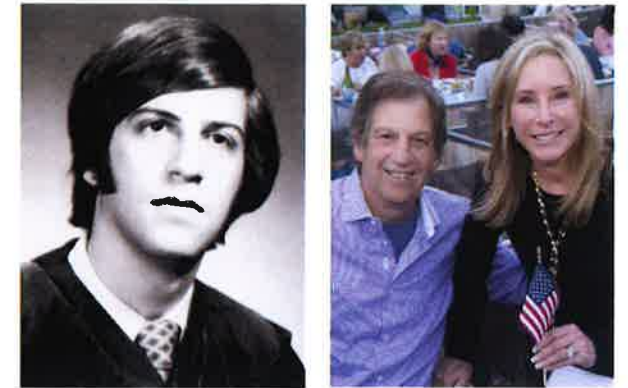
Bruce L. Gewertz, MD

CONTACT INFORMATION

9420 Lloydcrest Drive
Beverly Hills, CA 90210

Email: bruce.gewertz@cshs.org

Phone: (310) 423-5884



Although 54 years have passed, I well remember my first few weeks at Jefferson. I was one of the first to move into Orlowitz Hall which was, by any rational assessment, an active construction site. That said, the alternative was worse; living at my parents' house in suburban Havertown and taking the train in to Center City just wasn't my idea of a good time.

My initial academic adjustment was undoubtedly influenced by the fact that I was still 18 years old, a participant in the Penn State accelerated premed school program. With the exception of the other 23 youngsters, my new classmates were far more mature in every way. But, after a shaky start in my first year, life and learning at Jeff was simply great. The Class of 1972 was the first to occupy the spectacular Jeff Hall. Our "state of the art" all-purpose hangout offered lecture halls, laboratories, a perfect venue for Friday night mixers and a basketball court for passionate competition. Not to mention a study spot with world class artwork ("The Gross Clinic") and one of the first big screen TV's I had seen.

As time went on, it surely seemed we all got along and found ways to support each other in the widely distributed clinical venues. And the clinical instruction was superb. Legendary physicians such as Herb Cohn, Franz Goldstein, Paul Thomas and Bob Solit were the best role models one could ever wish for.

One example of the interest our teachers took in us remains crystal clear. I requested letters of recommendations from Chuck Feinberg among others. The letters were generally considered confidential, but Chuck Feinberg's office sent me 12 old-fashioned carbon copies of his letter. Since I solicited a letter from him, I obviously thought Chuck had a favorable opinion of me. Still, it was a risk. He wasn't exactly the most open and expressive fellow. I wasn't quite sure what I was going to read.

I was more than pleasantly surprised. He reviewed my educational background and the rigor of the accelerated medical program. He accorded me personal traits I could only wish for – maturity, dedication, honesty. Even beyond that overt perjury, he wrote something that inspired me at a critical time: "Bruce Gewertz is one of the most outstanding medical students I have met. I have no doubt he will excel in academic medicine and become a chair of a major department of surgery."

Well, I didn't see that coming. The fact that taciturn Chuck Feinberg would say that about me left me stunned. I can't pinpoint exactly how long I kept those 12 dog-eared letters but I remember seeing them 10 years later. As a consequence of the empowering effect of his endorsement of me, I have always shared the laudatory reference letters I write with our students, residents and staff. If that

practice has had one-tenth the impact Chuck's letter had on me, it is worth the effort.

Because of experiences like that, leaving Jeff for my surgery residency at Michigan was bittersweet. That said, my adjustment in Ann Arbor was remarkably smooth and quickly illustrated the head start Jeff grads had in clinical experience.

Thanks to my Jefferson foundation, my career has brought me great satisfaction personally and professionally. I have spent the last 50 years in academic medicine including 25 years at the University of Chicago (the last 14 as Chair of Surgery) and 17 years at Cedars-Sinai in Los Angeles as Surgeon-in-Chief, Chair of Surgery, Vice Dean for Academic Affairs and Vice President for Interventional Services. My research in cellular physiology in the first 25 years has morphed into more integrative work in human factors and health services. I recently celebrated my 25th anniversary with my college sweetheart Diane who I reunited with later in life.

I will always be grateful for my time at Jefferson. The friendships, the good times and the unparalleled clinical teaching provided the foundation for a rewarding life in medicine. I will always be proud of my alma mater and the achievements of my colleagues.

Stanley Goldberg, MD



As I reminisce on my time at Jefferson, I recall it as a happy, exciting, and productive episode in my life.

I began my medical school education at Rutgers, in New Brunswick, New Jersey. It was a brand new program at the time, so I only had two years available. I was fortunate to be accepted at Jeff for my third and fourth years. Before I started that fall, I had grown a really nice beard. However, I thought that Jefferson might be too conservative, and that it would not be appropriate. So of course, before starting, I shaved it off only to find that many students had facial hair and ponytails! I believe that was the only mistake that I made in coming to Jeff!

My wife and I married the summer before I transferred. She is a Philadelphia native and it was as if we were going to medical school together. Especially during those family-friendly Saturday morning anesthesia lectures with Dr. J. J. Jacoby.

My rotations at Jefferson, PGH, and Lankenau all bring back a flood of memories, too numerous to count; however, the training could not have been better. I always had an interest in surgery, even before medical school. The rich history of surgery at Jefferson embodied in Drs. Gross, Gibbon, Deaver, and many others, greatly influenced my decision to become a surgeon. Many of the surgeons practicing when I arrived, including Drs. Templeton, Goldsmith, Marx, and Schwartz,

reaffirmed that decision. It was definitely the right choice for me.

After my surgical residency at Upstate Medical Center in Syracuse, New York, and the birth of my two wonderful children, I entered the United States Air Force and was stationed in Washington, D.C. for a few years. We really enjoyed our time there. We then moved to Phoenix, Arizona, where I have been in practice for the past 42 years. During that time, I have learned so many new, interesting, and exciting ways to care for my patients. This includes laparoscopy and now robotic surgery, as well as endovascular surgery. With all of these advances, I don't believe I'm doing even 50% of what I was originally trained to do. Education is truly a lifelong endeavor. Last year, I took my surgical boards for the sixth time! I am currently a volunteer physician for the University of Arizona Medical School in the anatomy lab, as well as in the operating room and clinic. Needless to say, the students are keeping me on my toes!

I will probably retire within the next few years, and become more active in some of my other activities. They include horseback riding, shooting, model railroading, and powerlifting.

I can honestly say that my early education at Jeff was very influential, and a wonderful start to my career. I don't think I would change a thing. It makes me smile when I think about those days.

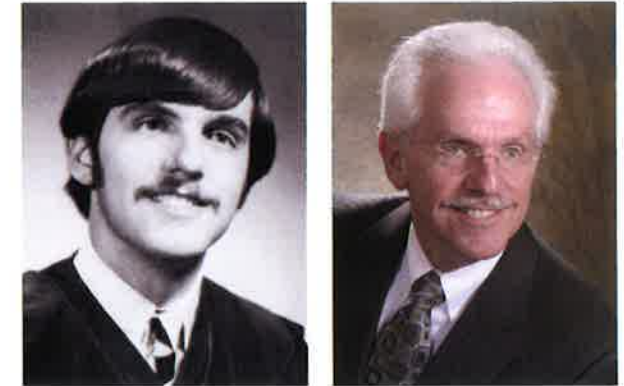
James T. Hay, MD

CONTACT INFORMATION

14202 Recuerdo Drive
Del Mar, CA 92014

Email: jthay1946@gmail.com

Phone: (858) 395-3353



I regret that I will be unable to join you, my friends, in large part because I'm still recovering from a long problem with back and leg pains necessitating the use of a walker. But I'm happy to say that I retired from the family practice I started in 1978 in mid-2020, just in time to have all travel plans disrupted first by Covid and then by my back troubles. Tricia (yes, second spouse, 40 years now) and I love watching the sunsets here in San Diego and attending Olde Globe and San Diego Symphony plays and concerts. I'm proud to say my daughter continues practicing and teaching genetics at U. Mass in Worcester and is a Jeff grad, too. My son, Todd, born at Jeff, is a tech guru earning more than his dad ever did in Medicine I'm sure, now living in Memphis. And four grandkids between them to boot, pretty much all grown up.

I have so many wonderful memories of our time in central Philly and with you all. Anatomy lab with our four-person teams, developing great friends along the way: Joan Haltman-Shapiro (terrible that we lost Marc at such a young age), Craig Haytmanek, and Phil Hoffman, the very tall guy who was the only one who fainted among the four of us as we learned to draw blood, and Larry Olsen, who along with our marvelous teacher, "Gonzalo E. Aponte" (and you have to say it that way and with emphasis!) created such a wonderful image of their homeland and hometown, Ponce, Puerto Rico, that Tricia and I had to stay there at least a little while when we

visited. The "Raft Debate," remember that, how the anus was more valuable than the hand because it can distinguish liquid from gas from solid! The memories flow on: Barry Skeist, the author and director of our wonderfully satirical class skits; AKK parties; the Family Practice Society, subversive almost, helped by my old GP, Frank Kelton, whose partner, Paul Brucker, thanks in part to the club I like to think, became Chair of Community and Family Medicine and eventually President of Jefferson. I was so proud of him. Great friends like Bill and Fran Thomas, Mort Rayfield. If I haven't mentioned you, it's because I'm sure our class reps don't wish tomes to be written.

I really miss the steak sandwiches—just not the same out here. The Phillies, but then the Padres can sometimes be a lot of fun, too. I don't miss the weather—carrying my daughter down to her kindergarten on second from Orlowitz, all the while leaning into the sleet and wind so we didn't get blown over, yeah that's a memory, too.

So I wish I could be with you all and I hope you have a wonderful reunion—see you at the 60th?

Philip C. Hoffman, MD

CONTACT INFORMATION

1211 S Prairie Avenue
Apartment 1501
Chicago, IL 60605

Email: philphoff@gmail.com

Phone: (773) 315-3056



I was a member of the Penn State-Jefferson accelerated program, and was able to achieve my goal of becoming a doctor much faster than many of my classmates. Because I did not have the typical four-year college experience, my time at Jefferson was like I imagine college would have been like—exciting new courses, lots of different subjects and rotations, and without any pressured sense that I needed to finish so I could complete my training, find a job, start a family, etc. Accordingly, I really loved medical school, and look back upon it as an exciting time of learning new things. When I look back upon residency, I certainly valued the excellent training and experience I got, and the colleagues I bonded with, but I don't look upon it as a particularly upbeat time in my life, as I do when thinking about my time at Jefferson.

Most of us will recall that in 1972, all male physicians were drafted, irrespective of their birthdate in the lottery. Many of us exercised the option to apply for a deferment to allow us to complete our residency, and then enter the services as whatever specialist we were. I applied for a Public Health Service deferment, and got my first choice of the CDC in Atlanta. By the time I finished my internal medicine residency at Penn, though, the draft had ended, but I opted nonetheless to keep my commitment to the CDC since it sounded like an interesting opportunity, and I had already saved a few years in my training.

Accordingly, I spent two years as an Epidemic Intelligence Service Officer in CDC's Hospital Infections Branch, which afforded me the chance to investigate outbreaks of infections in hospitals throughout the country, and to get a taste of public health in general. As a CDC alum, I'm distressed at some of the bad press it's been taking with the pandemic, but have a very high opinion of the agency as a government agency that really works well.

After CDC, I went to the University of Chicago for a hematology/oncology fellowship, and then joined the faculty at U Chicago, where I have spent my entire career. I am primarily a clinician-educator, focused on breast cancer, lung cancer and some "benign hematology." I do a lot of teaching, both didactic in the medical school, and when rounding on service in the hospital with the residents. As a teacher, I'm something of a throwback, rarely using PowerPoint in my talks. I credit the basic science professors at Jefferson as role models for this. I keep the lights on, use the blackboard to pace me, and depend on the non-verbal feedback I get from the students as to whether I'm getting my points across. The approach must work, because I've won a good number of teaching awards over the years, including a specially-created "Courage in the Face of Technology" award.

Early in my tenure as a faculty member, I met a new resident who came from New York, Dr. Halina Brukner. Fortunately, I was never her direct supervisor, so I felt comfortable asking her out, and we eventually married in 1983. She practiced academic primary care internal medicine for many years, and also played a major role in medical education at U Chicago, first as Associate Dean for Medical School Education, and eventually Dean for Medical Education, until her retirement last year. Last year, I reduced my professional time as well, and gave up my outpatient practice. I now do several stints on inpatient and consult services, a weekly bone marrow procedure clinic with the fellows, and continued teaching activities in the medical school and housestaff programs. This has been a very salutary adjustment—enough medicine to keep me busy, but much less of the paperwork requirements.

We have two children, neither of whom went into the family business: our daughter is a protocol coordinator for one of the large NCI-funded cancer clinical trials consortia, and our son is a senior data scientist for a Medicare Advantage Plan. He is also the father of our two grandchildren, ages 3 and 0.75. To quote one of my patients, "Grandchildren are the interest on your principal." Halina and I agree.

While current medical practice entails many hassles, arguments with insurance carriers, and irritating prior authorizations, I have absolutely never regretted my decision to practice medicine—how many of us are afforded the privilege of learning how the body works, learning how things can go wrong, learning ways to address those problems, and having the license to do so? I credit much of this feeling of the gift of a career in medicine to my time and role models at Jefferson.

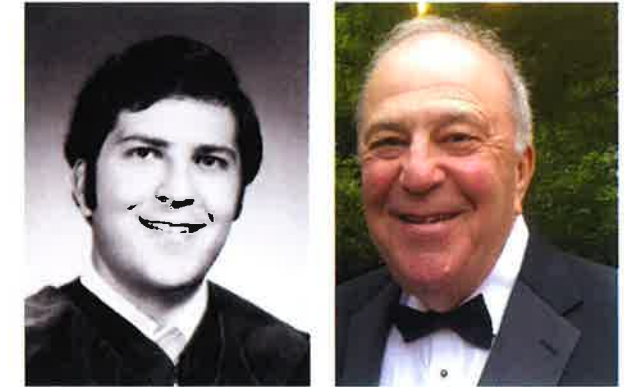
Ronald Kabler, MD

CONTACT INFORMATION

3908 Outlook Court
Jupiter, FL 33477

Email: ronkabler@yahoo.com

Phone: (610) 324-9328



I have always been thankful for the four years spent at Jefferson Medical College where I was able to develop a foundation on which to build for a lifetime in the medical profession. We were fortunate to be the first class to occupy Jefferson's new campus expansion in Jeff Hall, Orlowitz, and Scott Library.

After graduation, I had a surgical internship at Temple followed by a transitional year in general surgery at Lankenau Hospital. A three-year urology residency at Henry Ford Hospital completed my pathway to Board Certification.

In 1977, I joined the Department of Urology at the Geisinger Medical Center, a tertiary care facility in central Pennsylvania. I had the advantage of practicing medicine in a state-of-the-art hospital and developed a subspecialty practice in male infertility as part of the reproductive team. The opportunity to train residents and lecture third-year Jefferson students during their six-week surgical subspecialty rotation was a bonus. The students were especially interested in the history of the note service at Jefferson, and I had the chance to keep up on the changes occurring at our school.

In 1998 I met and married my wife, Brenda, a big city girl practicing as a school psychologist, who didn't see remaining in a small rural town in our future. In 2000, I relocated and joined one of my former residents in a urology group in Pottstown

and Phoenixville, where I continued in full-time practice until December 2014, followed by part-time office work and infertility consultations until mid-2018.

Since retiring we have moved our primary residence to Jupiter, Florida, one mile from the ocean, in a gated community with three golf courses and modern tennis and fitness facilities. I wish I could say that my golf game was better, but the time spent with friends on the course is always enjoyable. As one may expect, many members of the community are in need of urologic care, and my advice is often sought out regardless of the surroundings.

Brenda and I share five children and eight grandchildren and enjoy entertaining them and numerous friends in our new home. We would always enjoy seeing former classmates who are in the southeast Florida area.

Myles K. Krieger, MD, FACS

CONTACT INFORMATION

10130 Sweet Bay Street
Plantation, FL 33324

Email: myleskriegermd@gmail.com

Phone: (954) 558-2595



Dr. Ramsey instructed us to respect the human body, and Dr. Aponte drilled us to create a thorough differential and then proper diagnosis. Thinking and caring about the whole patient is within all my classmates at Jeff, and we became excellent and compassionate diagnosticians.

I was fortunate to have had several world-class mentors who saw something special in me and afforded me opportunities I had never dreamed of. For example, early on I was scrubbed in to the first massive facial reconstruction by Dr. Paul Tessier at the encouragement of Dr. Peter Randall, chairman of the University of Pennsylvania Department of Plastic Surgery. I have been blessed to pass forward my experience and gifts throughout my career including my service as otolaryngology mentor in Project Hope in Jamaica.

While at Jefferson, my father Benson, Jefferson Class of '45, and I created for my uncle Arthur, Jefferson Class of '36, the world's first speaking tracheostomy tube for a patient on a respirator. He had ALS.

I went on to a career in Otolaryngology, Head and Neck Surgery, and Facial Plastic Surgery for many decades in Hollywood, Florida where I was chairman of my department and member of the executive committee of the hospital system for much of that time.

Following retirement and becoming single again, I learned transformational training to become a life coach to help others who like myself faced unexpected challenges. This was the perfect sequitur after having a close relationship with so many of my patients, colleagues, and staff. I also started teaching in a local medical school two courses, one on The Art of Medicine and the other on How to Think in Medicine.

Coaching and mentoring has been extraordinarily fulfilling as has my co-development of a holistic clinic in Boca Raton where a psychotherapist, pain management physician, and integrative medicine physician serve patients with the use of medical cannabis and ketamine assisted psychotherapy among other avenues.

I had led national conferences on the United Nations and China and also on the Soviet Union when I was at Penn, and now I'm on the executive committee of NoLabels.Org which created the Problem Solvers Caucus in Congress for bipartisan solutions rather than stalemate.

I have always had a strong interest in my Jewish identity and in fact co-founded a Jewish coffeehouse on Rittenhouse Square while I was a student at Jeff. I also served on the Board of Trustees at age 22 of the largest synagogue in Philadelphia. I spent a summer after my freshman year at Jeff at Hadassah Medical Center in

Jerusalem, and now I serve on the Board of Regents of the Hebrew University in Jerusalem. I have also created a research project at the multidisciplinary Safra Brain Sciences Center at the Hebrew University in Jerusalem on brain processing. I'm also the chairman of the American Friends of Hebrew University for the southeast United States. I've been a strong supporter of AIPAC, and I lobby in Congress for a strong Israel/US relationship.

I spend my summers in Aspen where I am in the Society Fellows of the Aspen Institute, and we now have made Miami a global city of the Aspen Institute. As part of the Aspen Ideas Festival every year, we now have a climate conference in Miami Beach which next will be in March 2023.

A proud moment of mine with respect to Jeff occurred when my nephew graduated a few years ago from Jefferson and his father who was a professor of Cardiac Surgery at Jeff placed the Doctor of Medicine hood on him, and then my father and I stood together and re-took the Hippocratic Oath along with my nephew, brother-in-law, the graduating class, and the other MDs present.

Jefferson has afforded my remarkable classmates and myself the roots of an exceptional medical training, and for this I am so grateful! Thank you!

Helen Leibowitz, MD

CONTACT INFORMATION

2114 Spruce Street
Philadelphia, PA 19103

Email: halhoyer@gmail.com

Phone: (215) 816-0900



Graduating Jefferson convinced me that I should practice primary care medicine. I spent two years in an Internal Medicine residency before switching to Radiology (Residency at Pennsylvania Hospital), a decision I never regretted, practicing Diagnostic Radiology for over 40 years until I retired in December 2018.

In November 1973, I married Paul Hoyer (Class of 1976) at Jefferson Hall (beneath the Gross Clinic). We have three lovely daughters and six grandchildren, with a seventh due this November.

I remained in Philadelphia, living in the Rittenhouse Square neighborhood for the last 40 plus years, and am looking forward to seeing many of my classmates at our 50th reunion.

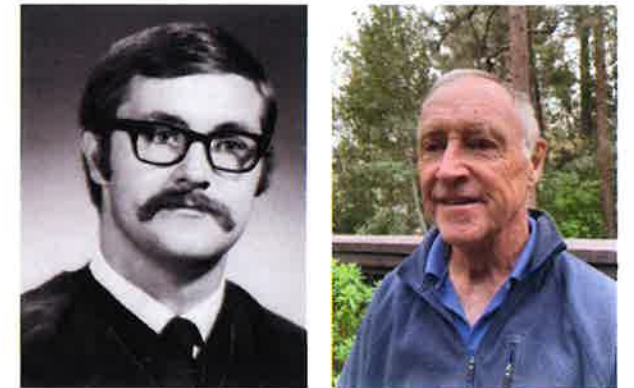
James W. Mahoney, MD

CONTACT INFORMATION

1617 NW Albany Avenue
Bend, OR 97703

Email: jmahoney@bendcable.com

Phone: (541) 350-9137



Greetings to classmates, faculty and staff. Thank you for the opportunity to reminisce about four years at Jeff and the 50 years after.

Ours was the first class in Jefferson Hall. My strongest memory of the early days in anatomy lab is being served tuna fish sandwiches for lunch at Nu Sigma Nu, and having to pick them up and eat them with our recently formaldehyde-soaked hands. This was the beginning of a lifetime of living with things non-medical people would find intolerable.

In pre-clinical years I remember most study sessions at Nu Sigma Nu, sitting with Bernie Grumet, Ted Sunder, Paul Fitzgerald, Charlie Lewkowicz (Charlie Leukocyte), Dick Brennan, Frank Hrysko, "Tricky" Dick Fiorelli, all of us trying to come up with facts that no one else in the room knew. It actually was a pretty good study technique. I can still remember which bacteria's colonies are dissolved by bile, and thus will never be found in the gall bladder. Can you?

At the end of second year, a few of us eschewed vacation and took a surgical elective at Chestnut Hill Hospital, under Dr. McLaughlin. Bill McCoy, myself, and "no-touch" Barry Skeist spent six-weeks (or was it twelve?) living at the hospital and acting like interns. I still cringe at my attempt to start an IV (first time, and a 14 G. Intracath no less!) on an actual physician who had been admitted. After two

failures without local anesthetic, he asked me, very politely, to have someone else start his IV.

Other great experiences were learning how to reduce a rectal prolapse, several times a day (poor guy!), pouring Dakin's solution directly into the chest cavity of a young MVA victim in what passed for an ICU in those early days, and hearing an attending berate a woman who had induced her own abortion, but perforated her uterus and lost the red rubber catheter into her abdomen (an experience which informed my attitude towards that subject to this day).

I married Denise Baumann at the end of that summer and we are still together, after 52 years! (Brave, tolerant girl!) We welcomed our daughter, Annie a year later, while living in Orlovitz. With a contraband cat, as well.

Clinical years are a blur. I almost dropped a birthing baby at PGH (saved by the resident!). Did my first (and only) bone marrow aspiration while on Hematology elective with a Dr. Blood as my resident. Seriously, that was his name?! Peds at Lankenau, Neonatology at Jeff, Psych somewhere in the country where everyone smoked (Coatsville?). Interestingly, I never took Anesthesiology, which is where I ended up. We matched to the U. of Oregon in Portland. Rotating internship was the worst year of my life. I remember thinking how cool it was to have been up all night

and the next day, taking care of patients. That didn't last long!

But I was rescued by the wonderful Dr. Norman Bergman who recruited me into his Anesthesia program, and after I had spent an additional year as a registrar in Auckland, N.Z., invited me to be a junior faculty. Which I did for 2 years until private practice in Bend, OR. Then a sleepy little ski town, now on everyone's list of best places to (fill in the blank) in the outdoors. I practiced there until 2007, spent 9 years on the hospital board, helped get the state seatbelt law passed, helped bring a Planned Parenthood clinic into town (much to the dismay of our bishop) and miraculously never had any medical disasters find their way into court!

Anesthesia has been called one of the "lifestyle" specialties. I guess that's true, if your lifestyle includes nights, weekends, holidays and the wonderful aromas of vomit, blood, alcohol and gasoline, all emanating from the same patient. But I enjoyed it, especially OB anesthesia, where for a brief moment in the life of a patient, you are the most important person in the Universe.

The most rewarding part of my career was the final 15 years or so, when I got the travel bug and did a bunch of overseas medical missions, to Africa, Asia, Central and South America. Cleft lips, burns, female incontinence, hand surgeries—and a chance to visit really exotic places like Burma, Nigeria, Bolivia, Guatemala, Viet Nam (which I missed way back when). I was in Puno, Peru for 9/11. That was an experience!

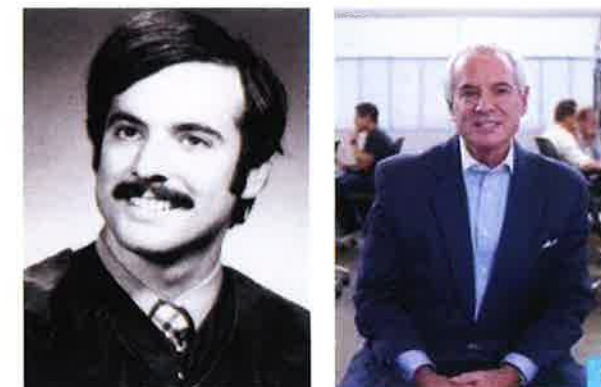
So it has been a very satisfying life, professionally and otherwise. I am very grateful for the education I received at Jeff Med, and to my fellow classmates, faculty and staff, all of whom contributed to the life I have enjoyed. And now I have far more past than future, but I hope that future includes a visit to Jefferson, Nu Sigma Nu, and the friends I made there.

Arlen Meyers, MD

CONTACT INFORMATION

Email: arlen.meyers@ucdenver.edu

Phone: (303) 548-0654



I can remember opening my medical school acceptance letter. I was, of course, excited to go down a lifelong career pathway, but also, felt joy at knowing that I was accepted into a tribe of international doctors that would welcome me anywhere in the world, who spoke a common language and had a common culture and ethos. A sense of community and belonging is important to mental health.

During the pandemic, many of us became more isolated than before. Community, which these authors define as a group of individuals who share a mutual concern for one another's welfare, has proven challenging to cultivate, especially for those working virtually. To learn more, they conducted a survey with the Conference for Women in which they asked nearly 1,500 participants about their sense of community at work before and since the pandemic and found it has declined 37%. When people had a sense of community at work, they found that they were 58% more likely to thrive at work, 55% more engaged, and 66% more likely to stay with their organization. They experienced significantly less stress and were far more likely to thrive outside of work, too.

People can create community in many ways, and preferences may differ depending on their backgrounds and interests. The authors present several ways companies have successfully built a

sense of community at work that leaders can consider emulating at their own organizations.

Research has shown that when employees feel that they belong to a team or organization, they will not only tend to perform better, but also experience higher levels of engagement and well-being. But our feeling of belonging at work has become challenged over the past year as we've shifted away from in-person interactions and found ourselves relying on video calls and screen activities to stay connected.

Patrick Hanlon, in his book "Primal Branding," defines a brand as something people feel something about. He goes on to state that believing is belonging. When you are able to create brands, like the medical profession (that people believe in), you also create groups of people who feel that they belong.

"Primal Branding" is about delivering the primal code. Unlike the four elements of the code in DNA, though, there are seven: the creation story, the creed, the icons, the rituals, pagans, the sacred words and the leader. Researchers have lumped tribes into five stages.

The reality is something else. Unfortunately, in many ways, the medical tribe has become fractious and unaccepting. The results are burnout,

depression, suicide, disenchantment and fragmentation of power.

Examples include:

1. Medical education and training that some have described as abusive
2. Turf wars
3. Jealousy, greed and resentment for those who want to upset the apple cart, potentially threatening the cash cow and status quo
4. Marginalizing disruptive doctors
5. Subconscious or implicit bias against colleagues based on race, gender or other factors.
6. Hostility between MD and non-MD "providers"
7. Pushback against scope of practice creep
8. Specialists v generalists
9. Grunts v physician executives and administrators
10. Conflicts in inter-professional relations and care teams.
11. Racism. Is your doctor a racist?
12. Gender pay gaps

There are many reasons why doctors don't play nice with others.

Plus, all doctors have multiple affiliations and are more engaged with some than others. For example, they have varying levels of engagement with their employer, their specialty association or their local, regional or national medical association. Most tend to go where they are treated best and drop or ignore the others. Mentors, sponsors, coaches and colleagues help with burnout.

Many of us recall with fondness, particularly those who have served in the military, those times we shared with "foxhole buddies," e.g. residency training, project teams, shock and trauma units and circumstances, like following mass killings or natural disasters, when the community comes together. Even the doctor's lounge is a thing of the past because the real estate is "too valuable" and doughnuts and coffee costs too much.

In many places, doctors have lost their sense of community and attachment to the tribe. The dark underbelly of medicine has damaged the brand.

While peer-support programs serve a vital role, they tend to only address the tip of the iceberg of the distress and disconnection experienced by many physicians. Going beyond peer-support programs, it is important to create processes for intentional professional connection, so no one delivers care alone.

Doctors have lost their sense of belonging. They don't need a therapist. They need an anthropologist.

Cheryl Marco Naulty, MD

CONTACT INFORMATION

9112 Hunting Horn Lane
Potomac, MD 20854

Email: cherylmd@verizon.net

Phone: (301) 279-2737



Looking back at my years at Jefferson, I now appreciate how unique an experience those years were. I think fondly of the cadaver (whom we named Griselda) we were privileged to dissect. I remember spending hours studying the pathology photographs posted by Dr. Aponte, because he always included details from those captions on the final exam. The clinical rotations were a wonderful combination of academic learning as well as practical experiences in both the university and community hospitals. I was inspired to choose pediatrics by a rotation with a private practice pediatrician at Lankenau Hospital. I am also very proud to have been one of very few women in medicine at that time. We have certainly come a long way since the 70s.

All my professional career has been in the Washington, DC area. I came here because my husband at the time, Steve Naulty (also Class of 1972), was in the Navy and his assignment was at the National Naval Medical Center, Bethesda. I did my Pediatric Residency and Neonatology Fellowship at the Children's Hospital National Medical Center and spent 10 additional years on the staff. It was exciting to be a neonatologist back then as it was a subspecialty in its infancy (excuse the pun). I especially loved managing the Long-term Follow-up Clinic, which allowed me to see and appreciate the outcomes of our labors in the NICU. Some of the families continued to communicate

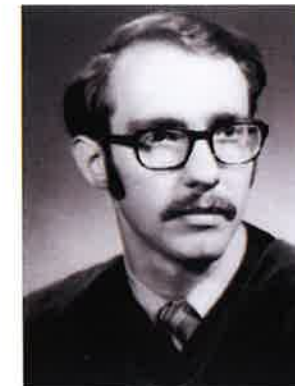
with me over the years, to include photographs of their children as they grew up. I had one of the biggest thrills of my life when, at a neighborhood event, I met by chance one of these children, who was now 35 years old and a high school principal.

In 1986 I left Children's Hospital and began a career working for the Army Medical Department at Walter Reed Army Medical Center as a civilian. I continued to function as a clinical neonatologist alongside the military staff, established a follow-up clinic for the military dependent children, and ran the Neonatal Fellowship Program for the Uniformed Services University for three years. My primary role was to oversee the Exceptional Family Member Program for the North Atlantic Regional Medical Command. This was a program designed to identify special medical and, for children, special educational needs of dependents to assist in coordination of overseas assignments. In this role I became involved in establishing early intervention programs for children in DOD Dependent Schools, developing monitoring tools to assess compliance with regulations, and working at the DA and DOD level to write policy for the Military Health System (MHS).

My final project prior to retirement was as the Principle Investigator on a multimillion dollar grant to explore the availability and accessibility of palliative care services for children with life threatening illnesses in the MHS.

I have been retired for 15 years. Steve and I parted ways in 1979, and I am now married for 33 years to Walter Hill. Together we have four children and 10 grandchildren. I play tennis regularly, still play the piano, and have become an avid photographer. We love to travel, visit with our families in Virginia, New Jersey and New Orleans and spend time at second home on the Chesapeake Bay. Overall life has been very good to me, and I continue to try to give back in many ways.

Jim Redka, MD, ABFP



Wow, has it been fifty years already? I recall being challenged by one of our professors in those first few days of Jefferson with a comment that we would always be learning and that what we would learn there would be a mixture of truths as well as what we would later dismiss as incomplete or just plain wrong. Well, that has indeed been my experience. Medicine is a fascinatingly wonderful career.

Here are some of my memories of Jefferson:

Meeting three classmates over our cadaver during our first week in the brand new dissection room. How are we to find those pesky nerves and tendons in the midst of decaying flesh of a relatively young lady?

Studying and studying and studying in the student lounges or library.

Trying to understand all those physiology and biochemistry pathways in a manner that would not be just rote memory.

My first OB delivery of a 46 year-old primigravida followed by a second one from a young Latina who dug open my wrist – this was a special freshman experience.

Our first real patients in the third year who had the audacity to have real problems that did not distill

into multiple choice or true – false questions. Would I be able to be a real doctor someday?

Learning from the upper classmen or residents. Yes, there were some attendings eager to help but thankfully resident staff were ever so much more patient.

How I got asked, "Sonny, which is the best cut of meat?" when shopping at the Acme. White lab coats mean different things to different folks.

Hauling my laundry to the ninth street laundry and getting all of it done in three loads. [I think the fee was in the 25-50-cent range per load]

Walking up Chestnut St. to see if any of the pedestrians would actually smile at a medical student who was tired of studying.

Other longer walks up Ben Franklin Parkway to the art museum. Monet, Manet, Renoir – all appreciated as a study diversion.

Having a job as an EKG tech – with a single channel machine with a requirement that I cut out and mount the study by hand.

Learning that one really can live on Mrs. Paul's fish sticks, frozen peas, and roast chicken night after night.

Learning that "SOB" was not a slur added to the chart.

Being on OB rotation at a private catholic hospital without permission to actually examine female patients.

Riding the high speed line to its end in New Jersey as a diversion—a time out of the city.

Tutoring elementary students in West Philadelphia as part of a project to change me from a book-smart “nerd” into a real human who cared for people. A senior student’s pastor-husband coaxed me into a life change toward being a people doctor.

Enjoying the respect as well as the meals that we got at the community hospitals we served.

Singing in Bob Sataloff’s chorus. Learning to sing in a group is a skill that I continue to enjoy.

I recall a group of us wanting to improve the curriculum, so that we would learn basic science as well as pathophysiology by organ system. Our ideas were heard—not totally adopted, but heard. I now understand that positive change does occur through perseverance as well as excellent argument. Those experiences also laid the foundation to help me become a force for change in my medical community.

Our years at Jefferson were in 1968-1972. These were the years of racial unrest and riots; divisions about the Vietnam War; campus unrest; the first “Earth Day.” “We want to change the world” indeed. Today, our culture confronts some of the same flaws. We doctors do have opportunity to lead – and yet, lead in ways that express our humility and humanity.

I look forward to connecting with my classmates and learning more of where we have still the opportunity to be a force for better medical care for our communities.

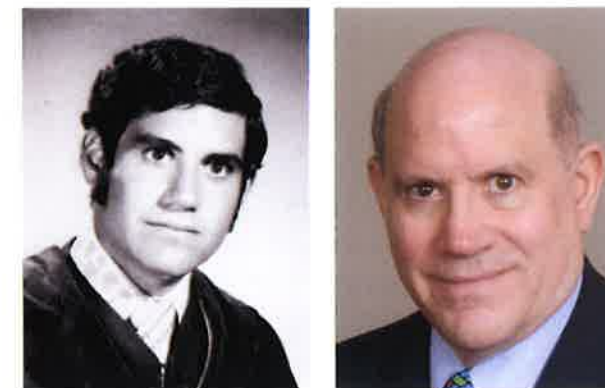
Lawrence R. Schiller, MD

CONTACT INFORMATION

7701 Mullrany Drive
Dallas, TX 75248

Email: lrsmd@aol.com

Phone: (214) 532-1926



I consider myself to be a lucky person. I used to think that you made your own luck, but over the last 50 years I've learned that you never make your own luck; we achieve whatever we achieve because of the support of others—family, teachers, colleagues, and friends.

I was lucky to be born into a family that valued education and supported my decision to become a doctor. I was lucky to go to Central High School, the academic high school for boys in the Philadelphia school district, which encouraged scholastic excellence. I was very lucky to be accepted into the Penn State—Jefferson five-year program, which accelerated my progress into the profession.

In a very real way, Jefferson set the pattern and provided an incubator for my career. It was all serendipity and unplanned. In our second year Dr. Aponte, our pathology professor, insisted that we all write a “research” paper (library research, not lab research). I decided to investigate why cancers metastasize, an important clinical question. I dutifully marched off to the library with a stack of 3 X 5 cards to search the literature—in those days presented in the Index Medicus, a telephone book-sized compendium of all the citations published in the preceding month. There were plenty of articles on “carcinoma,” and after a couple days I had over 200 citations to chase down in the stacks.

I soon realized that I had bitten off more than I could chew. I was flummoxed. Right after “carcinoma” in the Index Medicus was “carcinoid,” with only a handful of articles. One of these caught my eye; it described the similarities between carcinoid syndrome and dumping syndrome—both involved flushing of the skin, diarrhea, and abdominal cramps, and both seemed to be due to chemicals secreted into the blood from the upper gut. There were only about 30 relevant citations—it was doable! This turned out to be the preamble for my research career in the physiology of gastrointestinal hormones.

Jefferson also provided a stellar faculty, many of whom were role models. Dr. Kowlessar, the head of gastroenterology, and Dr. Stephen Levine, a gastroenterologist at Cooper Hospital in Camden were standouts for me. Dr. Kowlessar was probably the smartest physician that I ever met: he was able to quote citations down to the page number from memory. Dr. Levine had one of the early, primitive endoscopes that he would bring in when we admitted a gastrointestinal bleeder. There were not any endoscopic treatments available then, but you could identify the source of the bleeding for the surgeon. Interacting with these role models was another lucky accident that had a big impact on my career.

After my time at Jefferson, I went to Temple University Hospital as an internal medicine intern, resident, and chief resident. During that time, I had the greatest stroke of luck in my life when I met my wife, Ann. This too was due to other people. 100 years ago, my mom had a best friend, Sophie. They lived a few blocks apart in North Philadelphia and were in and out of each other's homes. My mom even was at Sophie's brother's bris (ritual circumcision). Years later, that little boy had a family, and when his daughter came back to Philadelphia after finishing her studies at Boston University and Harvard, mom and Sophie introduced us. We got married a year later.

My next bit of luck was due to Uncle Sam. I "won" the Berry Plan lottery and had a deferral through residency training. By then the Vietnam War had run down, and I was assigned to go to Europe. I ended up in Mons, Belgium, at Supreme Headquarters Allied Powers in Europe, the main NATO base. The US Army had a 20-bed hospital that was remarkably well-staffed with specialists for PR purposes: I was one of two internists on a 16-person medical staff. We were within four hours of Paris, Brussels, Antwerp, and Amsterdam, and were able to travel through France, the Netherlands, Germany, Austria, Switzerland, and Italy. The whole staff (except for two physicians left behind) traveled together to Greece for a week, even though Ann and the OB's wife were pregnant. (The OB brought a bag of tools "just in case".) My daughter was born back in Belgium a couple of months later.

Our next stop was Dallas. I came to UT Southwestern for a Gastroenterology Fellowship, expecting to stay for two years and then to return to Philadelphia. 44 years later, we are still here. Being in Dallas proved to be lucky, too. My son was born in Texas during my fellowship. I had the opportunity to work with Drs. John Fordtran, Charlie Richardson, Walter Peterson, and Mark Feldman, giants of 20th century gastroenterology, on the physiology of acid secretion and gastrin release in humans, pharmacologic inhibition of acid secretion with histamine-2-receptor antagonists and then proton pump inhibitors, understanding the

mechanisms of intestinal mineral and electrolyte transport and chronic diarrhea, and developing colonic lavage solutions for colon preparation. During this time, I was busy with teaching, lectures, and consulting work for pharmaceutical companies.

After five years at the VA Hospital, I moved to Baylor University Medical Center in Dallas, a big private hospital with an academic bent, to continue research studies with Dr. Fordtran. During this time, I developed an interest in gastrointestinal motility disorders, and had a boutique solo private practice. I was asked to be the Program Director for the Gastroenterology Fellowship, a position that I held for 25 years. I also worked on our hospital's Institutional Review Board for Human Subject Protection, becoming Chair, a job that I continue to do. I continue to teach and write. Recently, I have been helping with curriculum design at our affiliated medical school, Texas A&M School of Medicine.

In the mid-1990s, I was one of 40 gastroenterologists in North Texas who formed a "group practice without walls," Digestive Health Associates of Texas. We grew to be the largest private gastroenterology practice in the United States before my retirement from clinical practice six years ago. This proved to be another lucky event.

Along the way, I was active in organized medicine: board member and then president of both the Texas Society for Gastroenterology and Endoscopy, and the American College of Gastroenterology. During my time with the ACG, I was able to help to develop a new journal, ACG Case Reports Journal, start a visiting professor program, establish a quality program, and boost research grants. I was involved with the World Gastroenterology Organization's Train-the-Trainer program to bring scientific pedagogy to the teaching of gastroenterology. Along the way, I have met and befriended remarkable physicians from around the world—another lucky consequence.

In addition to my part-time jobs at the hospital, I am a full-time grandpop for my two grandchildren in Austin. That's the best job of all!

I would have expected none of this 50 years ago while walking across the stage at the Academy of Music at graduation. And it was all due to luck.

Barton L. Schneyer, MD, FCCP

CONTACT INFORMATION

9 Ottawa Lane
Newton, NJ 07860

Email: bschneyer@gmail.com

Phone: (631) 767-2255



I will always be grateful to the faculty at Jefferson for molding me into a clinician who has and continues to practice pulmonary, critical care, and now sleep medicine and aesthetic medicine. After my medical internship at Jefferson I went to Montefiore Hospital in the Bronx for my residency in Internal Medicine, then two years in the Air Force where I was Chief of Medicine one week after completing my residency (no other internists at Loring Air Force Base), and then returned to Montefiore for my Pulmonary Fellowship. In 1979, I started a 30-year career in private practice in Smithtown, NY, a north shore Long Island town. I eventually was chief of the pulmonary/critical care division.

In 2009, I stopped practicing in NY and started an office-based pulmonary and sleep medicine practice in Southport, North Carolina, which I continue to be involved with at present. I also practice aesthetic medicine in Sparta, New Jersey where I currently live.

I am married to a wonderful woman, Gina, and we have four children between us. My one granddaughter, Aaliyah, is accompanying Gina and me for the 50th reunion, and who knows, maybe a future Jeffersonian?

My very best to all of my classmates, and I look very much forward to our reunion.

Richard Schwartz, MD

CONTACT INFORMATION

13 Wright Farm
Concord, MA 01742

Email: richardschwartz@comcast.net

Phone: (978) 807-5340



Hard to believe that 54 years ago Dr. Hausberger was reminding us to "keep ze bodies moist"; and in what seems to be too short a time our careers have largely passed as we face our 50th reunion. I was still single as a freshman and spent a great deal of time with my cadaver-mates, all with last names beginning with SCH: Schwartz, Schaffzin, Schneyer and a 17 year-old "Penn Stater," Larry Schiller. Larry has had a stellar career in GI, including past president of the ACG, and continues to do great work as our class agent.

I got married the following June to my wife of 53 years, Meryl Kennison Schwartz. She put us through the next three years with her \$7500 income. Scholarships and loans mitigated my debt. Meryl particularly hit it off with Phil Hoffman, who we see from time to time, as he has two young grandchildren in Boston and I have a brother in Chicago were Phil lives.

One indelible memory from my sophomore surgery rotation at Cooper Hospital in Camden, NJ, involved taking care of the patient arrested by the police who eventually died leading to several days of rioting. For several days thereafter, my eyes stung on arriving at the hospital as a result of lingering tear gas.

I fondly remember getting my diploma at the Academy of Music with my parents in the audience beaming with pride and Brahm's "Academic Festival

Overture" ringing to its conclusion. Those were great years and fondly remembered compared to the crucible of internship and its 100-hour weeks that followed.

I can thank Jefferson, particularly Drs. Bralow and Kowlessar for getting me interested in gastroenterology, my eventual chosen specialty. After training in Chicago and Hartford Meryl and I returned to the Boston area to be near our families. We have been blessed with two daughters and three grandchildren, who we see almost every weekend. I still work part time at Emerson Hospital in Concord, MA, on a few nights and weekends. My younger daughter, a primary care internist, calls with GI questions and referred patients to me when I was still in office practice.

Unfortunately, a flare up in my battle with spinal stenosis and my wife's MS will prevent us from making it to the reunion. I look forward to reading everyone's memory book entries.

So I wish everyone a wonderful time at the reunion and check out the restaurant scene which has improved immensely since our med school days, when one of the top restaurants for food quality was a little Mandarin restaurant where people sat on benches and known only as the "Pepsi" by the sign over its front door.

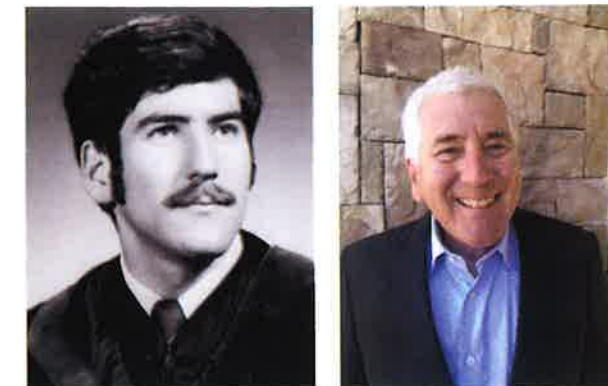
Robert A. Shiroff, MD, FACC

CONTACT INFORMATION

52 Contra Costa Place
Henderson, NV 89052

Email: rshiroff@me.com

Phone: (702) 885-6227



After graduating from Jefferson, I did an internal medicine residency, cardiology fellowship, and clinical pharmacology fellowship at Hershey Medical Center.

I practiced Cardiology in Las Vegas, Nevada, for 30 years before retiring from clinical practice. I am now Medical Director of Compumed, Inc.

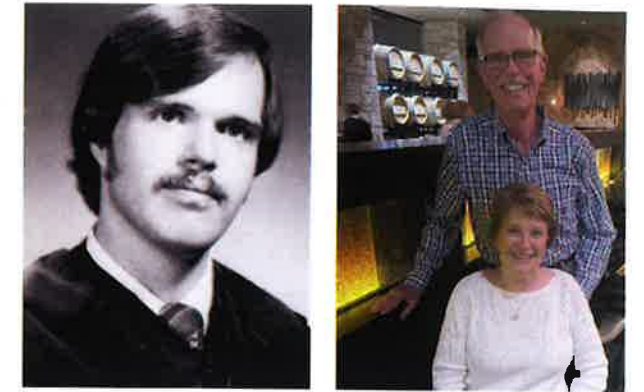
I have five children and 11 grandchildren. My oldest son is also a graduate of Jefferson Medical College, Class of 2002.

Theodore (Ted) Sunder, MD

CONTACT INFORMATION

2500 Gobble Drive
Springfield, IL 62711

Email: braindoc946@aol.com



When I think back to my days at Jefferson, I recall a young man from the Pittsburgh suburbs and a small Pennsylvania college arriving for a professional education in a big city. A bit intimidated, but a feeling soon put to rest. I recall academic rigors and demands for intellectual and analytic honesty in an atmosphere of support and personal interest. I recall hard work punctuated by esprit of my classmates and relaxation at Nu Sigma Nu and the Locust Bar. I recall a broad range of experiences that brought me to my early choice for Pediatric Neurology, which I have continually embraced. I recall dedicated and demanding faculty who provided examples that motivated me throughout my clinical and academic career.

As my senior year drew to a close, I applied for the Berry Program, as did many of my fellow graduates. I was accepted into the U.S. Navy for training in Pediatric Neurology. After graduation I entered Pediatric residency at the Children's Hospital of D.C. and then onto Child Neurology training at Duke University. Upon completion I began my active duty career as a Lieutenant.

In 1977 I was stationed at the Naval Hospital on the Marine Corps base at Camp Pendleton, doing both general pediatrics and neurology. I also served as a consultant to the Naval Regional Medical Center in San Diego. In 1979 I transferred to the National Naval Medical Center in Bethesda, MD, and to the

Uniformed Services University of Health Sciences. There I did clinical care, teaching and held a variety of administrative positions, advancing to the rank of Capt. and Assistant Chief of Neurology and Residency Training Director. I additionally pursued my new passion sailing with the Navy Sailing Club on the Chesapeake Bay.

In 1985 I entered the Active Reserves and became Commanding Officer of a unit of university-based physicians and nurses. After a brief stint in private practice, I joined the faculty at the East Carolina University School of Medicine as section chief. In my reserve time, I provided support to the Naval Hospital at Marine Base Camp Le Jeune and was recalled there for 11 months during the Gulf War.

In 1994 I came to the Southern Illinois University School of Medicine in Springfield as Professor of Neurology, Pediatrics and Psychiatry. I did clinical and academic work as well as serving as Clinical Director of Developmental Disabilities Services through a contract with the state of Illinois and as medical director for a residential school for children with autism.

In 2007 I retired from the Navy after 23 years of service. I retired from the State of Illinois in 2013. At this point I did some part-time clinical work as well as advocacy and support for children with developmental disabilities. After 2017 I shifted away

from medicine and have been feeding my long interest in history through volunteering at the Lincoln Home NHS and the Abraham Lincoln Library and Museum. I also support the local Food Bank and Habitat for Humanity. My current passion is cycling and I am active in the local cycling club and serve on the Springfield Bicycle Advisory Council. I might also be found sailing and sailboat racing.

I live with Judy, my lovely wife of 40 years; she is my engine and my navigator. I can get nothing done without her. We have two older children, both Tar Heels. My daughter is a forensic psychologist, working in a Federal prison back in North Carolina. My son lives in Springfield and requires some independent living and vocational support. I am proud of both of them.

I am sorry that I must miss the reunion in person, but know that I am there with you in spirit. If any of you come to Springfield to visit with Mr. Lincoln or travel along Route 66, please do not hesitate to give me a ring.



Office of Alumni Relations

Pinizzotto-Ammon Alumni Center

1020 Locust Street, Suite 210

Philadelphia, PA 19107

(215) 955-7750 | alumni.jefferson.edu