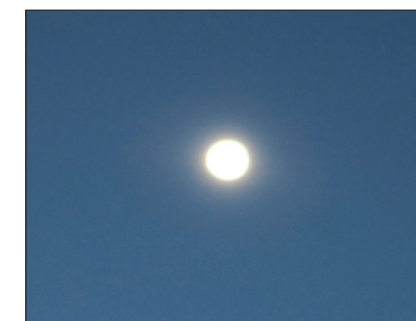




## SCHOOL DAZE

MUSC students from all six colleges and others enjoy festivities around the MUSC Urban Farm while waiting for the Aug. 21 solar eclipse. Students were excused from orientation that day to take part in the iconic event.

*Photo by Dawn Brazell*



# Colbert family honors late father at Convocation

BY CINDY ABOLE

[aboleca@musc.edu](mailto:aboleca@musc.edu)

Monday's celestial event did not eclipse Tuesday's Faculty Convocation at MUSC.

Lisa Saladin, PT, Ph.D., executive vice president for Academic Affairs and Provost, greeted a packed audience filled with faculty, staff, students and guests at the Drug Discovery Auditorium to help mark the beginning of the academic year.

A highlight for this year was the inaugural Dr. James W. Colbert Jr. Endowed Lectureship named for MUSC's first vice president for academic affairs who served

from 1969 to 1974. Dr. Colbert and two of his sons died tragically in an airplane crash in Charlotte, North Carolina, in 1974. The Colbert family was in attendance to help honor their father's legacy on campus.

"On behalf of all of MUSC's leadership, we'd like to express our sincere appreciation to all of you for your support of this lectureship in honor of your father," said Saladin. The family is also in the process of establishing an endowed chair in his name.

"While I never had the privilege of working with Dr. Colbert, everything I've heard about him and everything I've learned has truly humbled me," she continued.

"And as I seek to follow in his footsteps and

become half the visionary leader that he was, I was eager to learn about him as an individual."

Saladin introduced Layton McCurdy, M.D., dean emeritus of the College of Medicine and distinguished university professor. McCurdy was a good friend and colleague of Colbert and was invited to speak about him and his legacy.

"It's a great pleasure for me to talk about my friend, teacher and hero," said McCurdy, who recalled being named the chair of psychiatry when Dr. Colbert came to campus in 1969.

McCurdy spoke about how Dr. Colbert oversaw the Medical University during a

period of unparalleled growth. He helped lead the university and hospital through the Hospital Strike of 1969. He worked with faculty to strengthen the university's core missions of education, research and patient care and played a role in the development of AHEC.

Next, Saladin introduced the keynote speaker and inaugural Dr. James W. Colbert Jr. Endowed Lecturer Bruce "B.J." Miller, M.D., a palliative and end-of-life care physician and assistant clinical professor of medicine at the University of California, San Francisco. Following Miller's lecture was the presentation of the faculty awards.

*See FACULTY on page 11*

6

**Faculty Convocation**  
Renowned speaker shares thoughts on end-of-life issues.

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**Transformation**  
Former MUSC VP authors book on institutional history.

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Meet Stephen Schabel

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Letters of Welcome

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Board of Trustees Update

# RESEARCH GRANT HIGHLIGHTS

College of Medicine – Medicine

**Ball, Sarah**  
Provision of Drug Utilization Review Services, \$525,000, from SC DHHS (A201912450A), Jan. 1 to Dec. 31, 2019

**Lilly, Michael B.**  
An Open-label, Multicenter, Dose Escalation and Expansion Phase Ib Study to Evaluate the Safety, Pharmacokinetics, and Therapeutic Activity of Ro6958688 in Combination With Atezolizumab in Patients With Locally Advanced and/or Metastatic Cea-positive solid tumors, \$3,790,432, from INC Research, Inc. (WP29945), Jan. 23 to Jan. 22, 2022

Microbiology and Immunology  
**Jiang, Wei**  
On the Pathogenic Role of Anti-CD4 Antibody in Poor CD4+ T Cell Recovery after Antiretroviral Therapy in HIV Disease, \$981,280, from NIH/NIAID (1R01AI128864-01), May 19 to April 30, 2022

**Tomlinson, Stephen**  
Complement Inhibitors Targeted to the Ischemic Brain for the Treatment of Stroke, \$706,176, from NIH/NINDS (1R21NS097653-01A1), April 15 to March 31, 2019

**Vasu, Chenthamarakshan**  
Contribution of Gut Symbiotic Bacteria to Autoimmunity, \$411,125, from NIH/NIAID (1R21AI133798-01), June 1 to May 31, 2019

**Yu, Xuezhong**  
Separation of GVH and GVL Responses Using Alloreactive CD8 iTregs, \$1,512,504, from NIH/NHLBI (1R01HL137373-01), May 1 to Jan. 31, 2021

Neuroscience  
**Rinker, Jennifer Anne**  
Dependence-Induced Excessive Ethanol Consumption: Role of Corticostriatal Kv7 Channels, \$930,475, from NIH/NIAAA (1K01AA025110-01A1), April 1 to March 31, 2022

Psychiatry and Behavioral Sciences  
**Brady, Kathleen T.**  
Opioid Prevention and Treatment Initiative-South Carolina (OPTI-SC), \$613,731, from SC Dept. of Alcohol and Other Drug Abuse Services (TI080221/MUSC-STR-17), June 1 to April 30, 2018

**Danielson, Carla K.**  
Threat-Related Negative Valence Systems, Child Victimization, and Anxiety, \$3,334,217, from NIH/NIMH (1R01MH112209-01A1), April 3 to Jan. 31, 2022

**Prisciandaro, James J.**  
Imaging Framework for Testing GABAergic/glutamatergic Drugs in Bipolar Alcoholics, \$2,511,479, from NIH/NIAAA (1R01AA025365-01A1), May 1 to April 30, 2022

**Squeglia, Lindsay and Gray, Kevin M.**  
13/13 ABCD-USA Consortium: Research Project, \$2,706,672, from NIH/NIDA (1U01DA041093-01), July 1 to May 31, 2020

Public Health Sciences  
**Durkalski-Mauldin, Valerie Lynne**  
Network for Emergency Care Clinical Trials: Strategies to Innovate EmergENCy Care Clinical Trials Network (SIREN) – Data Coordinating Center (DCC), \$2,042,416, from NIH/NINDS (1U24NS100655-01),

July 15 to May 31, 2022  
**Ellerbe, Caitlyn Nicole**  
Antithrombotic Therapy after Cryptogenic Stroke with Cardiopathy (ARCADIA), \$473,269, from Columbia University/MUSC (1U01NS095869-01A1/2(GG012), May 1 to April 30, 2022

Regenerative Medicine and Cell Biology  
**Norris, Russell A.**  
Genetic and Molecular Determinants of Bicuspid and Calcific Aortic Valve Disease, \$750,000, from AHA (17CSA33590067), July 1 to June 30, 2020

College of Nursing  
**Smith, Gigi**  
Advanced Nursing Education Workforce (ANEW) Program, \$572,172, from HRSA (1T94HP30872-01-00), July 1 to June 30, 2019


The Catalyst’s Research Grant Highlights column showcases the MUSC research community’s grant activities.

For more information about campuswide research awards, visit the Office of Research & Sponsored Programs at <http://academicdepartments.musc.edu/research/orsp/reporting/>.

THE CATALYST

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## MEET STEPHEN



**Stephen Schabel, M.D.**

**Department and how long at MUSC**  
Radiology; 41 years and counting

**How are you changing what's possible at MUSC**  
Keeping history a part of modern education

**Family and pets**

Wife, Nancy; son, Stephen Jr. (wife, Lindsay; daughters, Emily and Margaret); daughter, Kathryn (husband, Thomas Coleman, M.D., daughter, Caroline and son, Charles); dogs, Elsa and Jetta

**Favorite topic to teach**  
Our history and language

**What are the biggest changes you've seen in your lifetime**  
Ultrasound (that's how old I am,) CT, MR, digital imaging and recording

**Your idea of a dream job**  
To be surrounded by students of all levels

**Words of advice:** Three laws of nature — God loves symmetry, God hates straight lines, and the most important X-ray (or anything else in medicine) is the old one

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## Health Care HEROES

### Honor the Heroes Among Us!

The Business Journal will honor people and organizations that have a passion for health care and a compassion for patients during an awards dinner in November.



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- First Responder • Nurse • Physician
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Nomination deadline: September 8, 2017

Letter from the  
Office of the

## PRESIDENT

Dear Students,

Welcome to the 2017–2018 academic year! We look forward to having you as part of the MUSC family. As you get settled, I want to update you on some exciting new campus improvements.

- Whether you are on campus every day or only occasionally as a student enrolled in one of our nationally recognized online programs, please visit the Innovation Station, our new Apple–authorized campus store. The store, located on the first floor of the library, will be a hub for innovation and a catalyst for collaboration and integration. Our hope is that it will help bring the MUSC family together in new ways. The long-term aspiration is that it will serve as another way in which our three missions of patient care, research and education are truly integrated.

- Another exciting installation around campus is the launch of our Holy Spokes MUSC Health bike share, which launched on May 30 and aligns with our strategic goal to build healthy communities. Charleston City Council granted Gotcha Bike the authority to create the city's first large-scale, locally owned bike share. The Charleston-based company and MUSC Health have partnered to launch the service, and bike corrals are in several locations on campus for use by our MUSC family and others. So far, there have been nearly 6,000 trips, and the partnership has saved the community \$88,872 by offering free memberships. Visit [www.charlestonbikeshare.com](http://www.charlestonbikeshare.com) to learn more.

- Imagine MUSC 2020 is our enterprisewide strategy for the future. It is our road map to achieve our vision to lead health innovation for the lives we touch. We have teams across MUSC charting our course as we implement this strategy. You will see flags, banners, stories and messaging about Imagine MUSC 2020 during your time here. You can learn more at [imaginemusc.com](http://imaginemusc.com). Collective voices, including those of students, from all across our campus, helped determine our five strategic goals. They are:

- ☐ Foster Innovative Education and Learning
- ☐ Advance New Knowledge and Scientific Discoveries
- ☐ Embrace Diversity and Inclusion
- ☐ Commit to Patients and Families First
- ☐ Build Healthy Communities

As we implement these initiatives, you will notice changes in the way teaching and learning are taking place. We are planning the integration of classroom and experiential opportunities so that students from all of our colleges have greater opportunities to learn from and with one another. Our faculty and staff are committed to excellent teaching and inclusion of all of our students, whether on campus or at a distance through technology.

Again, welcome. Make time to take care of yourself and each other, and know that we have an array of outstanding people and services here to support you and ensure your success. I look forward to seeing you on campus or connecting with you virtually and am excited to see what we will accomplish together this year.

Yours in service,

David J. Cole, M.D., FACS  
MUSC President



Cole

## A letter from the SGA President

Welcome to MUSC!

Congratulations on your acceptance and choice to attend MUSC. With six colleges offering a multitude of degrees, MUSC provides a unique environment where students learn not only from classmates but also from interactions with students in other health care fields. I encourage you to engage in one of the many interprofessional offerings on campus, whether an IP elective course or involvement in an interprofessional organization. Each of us upon graduating will work as part of a health care team, and MUSC provides an excellent opportunity to begin connecting with peers in other fields.

The Student Government Association offers an abundance of opportunities to meet fellow MUSC students and get involved on campus. Our annual Back to School party occurs on Aug. 25 – follow our Facebook page, “MUSC Student Government Association,” for information on ticket sales. We will host a Student Activities and Volunteer Fair on Sept. 6 from 11:30 a.m. to 1 p.m. outside the MUSC library where organizations from across

campus and the Charleston community will provide information on interest groups and service opportunities. The SGA plans a variety of social, cultural and educational events throughout the year, most notably Winetasting at the Aquarium, private showings at local galleries and theaters and ticket vouchers for the renowned Spoleto Festival. Watch for student broadcast emails with details on upcoming events.

Enjoy your first semester at MUSC. Your time here will fly quickly.

Caroline Hendricks  
MUSC SGA President  
College of Medicine, 2018



Hendricks

## What You Need to Know About Your Mail

Researchers Are Us  
1234 Street Address Lane  
Tim Buck Too, GA 99876

Dr. Jerry Brown  
MUSC Department of Medicine  
96 Jonathan Lucas Street, CSP 614  
MSC 638  
Charleston, SC 29425

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- 29425 is the ONLY zip code the USPS recognizes for MUSC
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- Make sure your MSC is up to date in the online directory
- Marketing mail or magazines with no MSC will be recycled effective September 1, 2017
- Make sure your business cards, letterheads, email signatures and envelopes have your correct address
- If you have questions, call 792-5385

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984958064  
Example

Thanks!



# Innovators meetup connects aspiring entrepreneurs

The Innovators Meetup is a place to incubate ideas and receive motivation and support from like-minded colleagues within MUSC Health and the greater Charleston area. Information Solutions' Beju Shah, Jonathan Yantis, Megan Fink and Laura Camacho started the group in January to demystify innovation in a large academic medical health system, as well as accelerate innovation at MUSC by establishing an inclusive social support system. Through meetups and other events, people connect, share knowledge and launch ideas. The group is interdisciplinary, ambitious and fun.

## VISION

To become MUSC's innovation accelerator and have a seat at Charleston's tech table while solving some of the biggest challenges in our health care community

## MISSION

Nurture entrepreneurs from idea inception to value creation

The Innovators Meetup differs from other innovation groups on campus by focusing on the social aspect of collective intelligence,

looking for patterns for success and cheering each other on through the process. The objectives are to connect people and their work in a supportive, inclusive ecosystem; create a social space for authentic collisions; and support, coach and guide by sharing insights with peers.

"The challenge in our organization, since it's so large, is visibility and therefore collaboration," said Yantis, a network engineer and software developer. "We can't support ideas if we don't know about them," he added.

Yantis and the other meetup cofounders are breaking down the innovation silos.

Past events have led to some great discovery and insight in innovation while attendees were able to connect with other innovators within our organization and community. Partnerships are developing with stakeholders across campus and the community to serve as a testbed for



## Making IT Great

new and unique platforms. For example, students met start-up founders, researchers were introduced to business owners and MUSC employees discovered others within our organization who are working on similar ideas. This is also a space where people can come to learn about new opportunities.

The cofounders of this community-driven platform are continuously improving the events to add more value to participants, as well as dipping their toes into mentoring and advising other potential entrepreneurs. "I think we'll be successful if a new employee who has an idea knows to come to our group for networking and advice on how to get started and then takes some action to move forward in that direction," said Shah, PharmD, a clinical informatics pharmacist.

Everyone is invited to join the group at events, share insights and partner where possible. If interested,

visit <http://muscc.co/musc-innovators> for more information.

Join the conversation at the next Innovators Meetup on Thursday, Sept. 21 at 5:30 p.m. at the Innovation Station. RSVP at [innovators-meet-up@muscc.edu](mailto:innovators-meet-up@muscc.edu).

## MUWC Scholarships for 2017

MUSC Women's Club is offering scholarships to deserving MUSC students from all six colleges. More than \$17,000 in scholarships are available this year.

All full-time students in their second or subsequent years are eligible.

Deadline for submission of applications is 4 p.m., Wednesday, Sept. 6. To apply or for more information, contact Tiffany Takacs at [muwcscholarship@gmail.com](mailto:muwcscholarship@gmail.com).



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9:00 a.m.—Walk Begins

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**MUSC Health**  
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*Changing What's Possible*

# Speaker's quest to redefine the way we die

BY DAWN BRAZELL

brazell@musc.edu

The topic wasn't exactly light, but no one expected it to be. After all, the keynote speaker for the inaugural Dr. James W. Colbert Jr. Endowed Lectureship for MUSC's 2017 Faculty Convocation is Bruce "B.J." Miller, M.D., a specialist in patient-centered, palliative and end-of-life care and an assistant clinical professor of medicine at the University of California, San Francisco.

It's not long into his speech when he asks, "Who hasn't suffered?"

No hands go up, and everyone knows he has.

The triple amputee was a sophomore at Princeton University when one night he and some friends thought it was a good idea to climb to the top of a commuter train. Eleven-thousand volts shot through his left arm and down his legs, and the next thing he knew, he was waking up in the burn unit of St. Barnabas Medical Center in New Jersey.

Lisa Saladin, executive vice president for academic affairs and MUSC provost, introduced Miller, recounting a story of a crucial moment in his recovery when a nurse smuggled a snowball inside his burn room – a sterile, windowless environment – even though she knew it was against regulations.

"That simple act of holding a melting snowball was for him a moment of pure rapture," she says, quoting a part of Miller's TED Talk that has received more than 6 million views. "In that moment," he said, "just being any part of this planet, in this universe, mattered more to me whether if I lived or died."

Miller went on to graduate from Princeton as an art history major and then became a doctor specializing in palliative care. He now is a nationally recognized public speaker and advocate for improving end-of-life care.

"Since we're honoring a man who's been described as a transformative figure on this campus, it seems only right that our inaugural speaker for this lectureship series be transformative in his own right," Saladin says of the lecture series honoring the late James W. Colbert's tenure as academic vice president at MUSC. "Dr. B.J. Miller is such an individual."

## ART IN HEALING

Miller's art history background revealed itself in his keynote address as he used art to illustrate many of his points. One was a painting of the first surgery that was done under anesthesia at the University of Massachusetts.

"This is when medicine and science got into bed in a new way. It was also a moment when we could separate a person from the body. In so many ways, the scientific approach to medicine has been a wonderful thing. I'm alive because of it," he says. "But there can be a fallout to this approach, and sometimes the patient can get lost in the shuffle."



Photo by Anne Thompson

**Palliative and end-of-life care specialist Dr. Bruce "B.J." Miller addressed a packed auditorium at the inaugural Dr. James W. Colbert Jr. Endowed Lectureship and Faculty Convocation.**

Palliative care is about optimizing the quality of life by anticipating, preventing and treating suffering. What's interesting about the definition is that it's specifically talking about the fulcrum of suffering, he says.

"If you think about the rest of medicine, it is focused on an organ or a disease, but this is focused on suffering. That's remarkable in many ways. This is entirely subjective. I can't put a probe in you and tell if you are suffering. You, the patient, are the one who shows the suffering. So right out of the chute, this has tweaked the power dynamic in medicine, which I really appreciate."

Miller tells the health care professionals gathered for convocation that it requires a mental shift in attitude. It's a systems issue and requires health care professionals to creatively address how to turn the focus from a disease-centered to patient-centered process.

"We made disease the source of suffering. We started objectifying humans and trying to fix them. But no matter what we do, these things are happening. We have to quit calling dying a failure. It sets up physicians to have powers we don't, and it sets up patients to think, that by being sick or dying, that's failing."

Shame becomes involved when people feel bad about things outside of their control, and sometimes options are put on the table that shouldn't be there by health care professionals. "We glide past the power of impossibility. A new negligence is offering things to patients that we know aren't going to happen. I've done that. You're sitting at the bedside, and it's

*See **SPEAKER** on page 13*



# Students gain valuable experience by volunteering

BY MIKIE HAYES

hayesmi@musc.edu

Since the 1940s, the iconic candy-cane striped pinafore meant someone approachable and caring was there to help. Just seeing the smiling face of an enthusiastic volunteer oftentimes provided an instant feeling of comfort for patients and hospital visitors making their way in an environment that is typically unfamiliar, even downright scary sometimes. To this day, that little bit of nostalgia can be a most welcome sight.

Sadly, candy striper programs are on the decline, as hospitals around the country say goodbye to the red and white stripes and opt for other types of junior volunteer programs.

Not MUSC. Not only does the candy striper program have a long and meaningful history, it continues to grow by leaps and bounds each year. One thing is for sure: For decades now, it has made a profound impact in the lives of the students who volunteered.

Such is the case for local entrepreneur Susan Pearlstine, who, at age 13 was an MUSC candy striper, visiting patients and handing out magazines. Forty-seven years later, she still has fond memories of her time wearing the unmistakable pinafore.

“What I remember most as a candy striper was the impact the medical professionals had on real people’s lives. There was a child in so

much pain in the then-burn unit, and the nurse was the kindest, most caring person I had ever seen. I can still remember this many years later,” she said.

That humble role shaped the beginnings of a special relationship with MUSC, as she has since served on two advisory boards, received an honorary degree, helped fund a healing garden at the Hollings Cancer Center in memory of her mother, and last year, she made a generous \$5 million gift to establish the Susan Pearlstine Sarcoidosis Center of Excellence.

That type of consequential relationship building continues today. While candy strippers can be seen reading to patients, delivering mail, serving coffee and doing crafts with children during their time on campus, they also get an inside look at health care and what makes a hospital tick. It’s a wonderful opportunity for them to try patient care on for size and see if it might fit into their future educational and professional plans.

Melissa Kubu, program coordinator with Volunteer Services, the department that oversees the program, calls that combination a win-win.

“Our candy strippers want to make a difference and also see if health care is a

*See VOLUNTEER on page 15*



*Photos provided*

**Volunteer Angeline Krupa thinks she’d like to be a doctor. This summer, she manned the mobile coffee cart in the main hospital and ART, offering snacks and piping hot coffee to staff, patients and family members.**

**Perry V Halushka 2017 MUSC Research Day**  
will be held  
Thursday and Friday, NOVEMBER 2-3, 2017

**Keynote Speaker: Eric James, Ph.D., November 2, 2017**  
**Poster and Oral Sessions: November 3, 2017**  
**Abstract Deadline: Friday, September 22, 2017 @ 11:59 PM**  
**No abstracts will be accepted after this date**

Links to submit an abstract as well as information about poster and oral presentations can be found by following the Research Day link on the College of Graduate Studies home page:  
<http://academicdepartments.musc.edu/grad>

MUSC Research Day 2017 is open to all students, postdocs, residents, fellows, and research specialists at MUSC and students, postdocs, residents, and fellows at other institutions who have participated this past year in programs of research at MUSC.

One abstract per presenter is allowed and team presentations are NOT allowed.  
Oral and poster formats are available.

Please direct any questions regarding MUSC Research Day 2017 to  
Dr. Steven Kubalak at: [kubalaks@musc.edu](mailto:kubalaks@musc.edu)



**2017 Session 2's very excited candy strippers on their first day as they prepare to begin three weeks of volunteering.**



# MUSC, Clemson collaborate in integrated OR suite designs

BY OLIVIA FRANZESE

franzese@musc.edu

While the practice of medicine continues to advance through information and technology, the design of the standard operating room in most hospitals has remained largely the same for decades. Two innovators aim to change that.

Scott T. Reeves, M.D., the John E. Mahaffey, M.D. endowed chair and chairman of the Department of Anesthesia and Perioperative Medicine at MUSC, and Anjali Joseph, Ph.D., the Spartanburg Regional Health System endowed chair in architecture and director of the Center for Health Facilities Design and Testing at Clemson University, are part of a joint MUSC-Clemson project titled “Realizing Improved Patient Care Through Human-Centered Design in the OR.” The goal of RIPCHD.OR is to analyze every aspect of the current OR standard and redesign it with efficiency and improved patient care in mind.

The team of researchers, engineers and clinical specialists involved in this project received a four-year \$4 million research grant from the Agency for Healthcare Research and Quality in 2015 to continue research and the development of a safer, more efficient OR.

“There has been very little work examining the design of the operating room and how you incorporate standard architectural principles into it. We’re hoping we can establish a new standard on what should be considered when you build an OR,” said Reeves, co-principal investigator of the project.

Currently, the typical OR in most hospitals across the nation consists of a cramped, square white room with a patient bed in the middle of the space. Many doctors and nurses feel that ORs are outdated and restrictive, and in light of today’s state-of-the-art hospitals and cutting-edge technologies, they should be modernized.

Among other factors related to reimagining the space, Reeves and Joseph are examining

how to maximize space in the OR to improve accessibility to equipment and the patient, implementing changes like rearranging the typical placement of the patient bed and analyzing traffic flow in the room.

“The need for a better OR design in operating rooms has existed for many, many years. The standard OR does not support the needs of the patients, doctors or surgeons. It is very crowded and cluttered, and there are issues like staff getting hurt and operating room doors posing the risk of infections. There is a lot of room for improvements,” explained Joseph. “The idea is that a more comprehensive approach will help us to alleviate some of the problems we are seeing in the operating room.”

Overall, the project covers three specific areas of research designed to improve patient care and efficiency in a future OR design: unmasking of anesthesia-related alarms and communications, traffic flow and door openings and an integrated OR suite design.

The first area involves the reduction of noises and interruptions associated with alarms meant to signal anesthesiologists. A typical OR has numerous alarms that monitor the patient’s vital signs during a procedure, like heart rate and blood pressure, but the complication of multiple alarms ringing simultaneously and frequent false positives creates a very distracting OR environment, according to Reeves.

“We’re looking at different technologies for establishing changes from baseline that might help us interact quicker when things go awry. We are exploring if there is a way to use different senses for alarms, like vibrations connected to Wi-Fi technology that can vibrate our arms if a certain parameter changes with the patient,” Reeves elaborated.

Their second goal is designed to regulate movement in the OR and decrease the risk of surgical site infections to patients.

“This aspect of the project is studying the frequency of people moving in and out

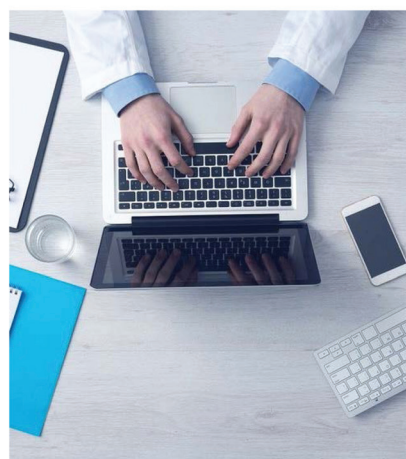


photos provided

Faculty and researchers from Health Sciences South Carolina, MUSC and Clemson University’s Center for Health Facilities Design & Testing gathered at the Clemson Design Center in Charleston to conduct a simulation after receiving a joint grant award to design an operating room of the future.



## WANT TO LEARN MORE ABOUT TELEHEALTH & OPPORTUNITIES TO BILL FOR IT?



**Please join us for a Physician and Billing Provider Lunch & Learn Sponsored by the Center for Telehealth & the MUSCP Compliance Department!**

- Presentation will include:
  - Update on Telehealth in South Carolina from Dr. McElligott
  - Best practices for documentation, billing and coding

Lunch will be provided to the first 30 attendees.

**November 8, 2017  
12:00 - 1:30 PM  
Gazes Auditorium, 125**



See **DESIGN** on page 9





**Clemson Architecture + Health students' vision for an operating room that is safe, efficient, flexible as well as patient- and staff-centered.**

*Photos provided*

## DESIGN *Continued from Page Eight*

of the OR. There's a big problem with doors opening too quickly, because it disrupts the air flow in the OR, and it's a poor practice. But, it's very common in many ORs," Joseph explained.

The third piece focuses on the development of a comprehensive plan that combines best practices related to lighting, visibility of the patient, position of the bed, size of the room and materials used.

With the project now entering its third year, Joseph, Reeves and the rest of the RIPCHD.OR team are preparing to build a full-scale mock operating room in the Clemson Design Center in the Charleston Cigar Factory to expand upon the cardboard mock design created last year. The full-scale OR will be created based on research of past literature on OR functionality; observation of best practices in updated, modernized ORs like those in the Seattle Children's Hospital; and input from nurses, doctors and anesthesiologists on how the new OR should function.

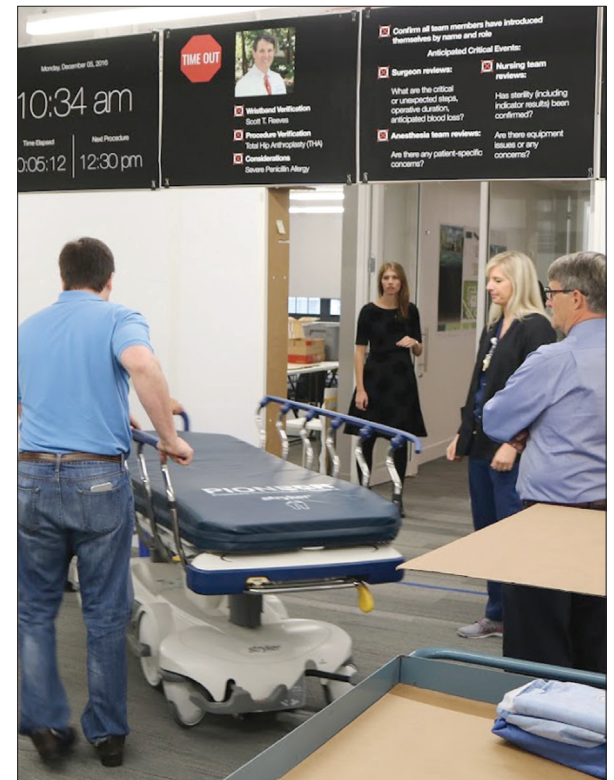
Joseph is optimistic that the results will serve as a guide for all future OR designs due to the vast scope of their research.

"We are hoping to take everything we've learned in terms of design and how it all comes together and put it in a framework that other people can use when thinking about OR design, because we've delved really deep into this topic. I think it creates a great model for other people," she said.

Reeves and Joseph agree – this groundbreaking project

would not have become a reality without the collaborative forces of two prestigious institutions teaming up to improve patient safety and care.

"It has been a really wonderful relationship between Clemson and MUSC that has made this all possible," she explained. "We have the researchers and the manpower to do



**Collaborators of this research grant gathered last spring to perform a simulation and unveil functions that would make a safer, ergonomic hospital operating room design.**

all of this, and MUSC has the leadership and know-how it takes to implement it."

Reeves added, "This innovative partnership underscores the fact that when institutions of excellence align their interests and work together to achieve a common goal, patients win."

## ***What Does Respect Mean to You?***

***"Honoring others' decisions or opinions. With respect, you are not thinking about yourself, you are thinking about people around you."***

***- Rhajon Hicks,  
Trident Technical College  
MUSC Summer Youth Employment Program***

***#RESPECT is the MUSC spotlighted value for Aug. and Sept.***





MUSC Board of  
Trustees Meeting

## UPDATE

The Medical University of South Carolina and Medical University Hospital Authority Board of Trustees held their regular scheduled meeting, receiving reports of strong financial performance in areas that included research, hospital operations and philanthropy.

Kathleen Brady, M.D., Ph.D., vice president for research, advised the board that preliminary, unaudited data for fiscal 2017 indicates MUSC again received more than \$250 million in extramural research funding. “In spite of an increasingly competitive funding climate, MUSC saw an increase in funding from the National Institutes of Health,” Brady said.

To broaden and deepen MUSC’s commitment to scientific discovery, earlier this year the Office of Clinical Research was launched. The unit is designed to develop new and expand existing partnerships to bring in more corporate clinical trials.

On June 30, the hospital authority ended its fiscal year with net income slightly above budget due in part to the timing of MUSC Foundation donations, raised for the MUSC Shawn Jenkins Children’s Hospital and Pearl Tourville Women’s Pavilion. Scheduled to open in 2019, the new facility will be the most advanced hospital of its kind in the area, transforming care for mothers, children and families throughout the region. Currently, the construction project, estimated at a cost of \$385 million, is on schedule. Use this link to view a time-lapse video of the facility’s construction: <http://imagine.musckids.org/videos/>

Philanthropy continues to play an increasingly important role in MUSC’s ability to fulfill its tripartite mission. MUSC concluded its fiscal fundraising year by successfully securing \$62.1 million in new gifts and pledges. The largest single portion of the year’s contributions (\$15.7 million) was designated to the MUSC Shawn Jenkins Children’s Hospital, followed by the MUSC College of Medicine (\$11.8 million), MUSC Hollings Cancer Center (\$5.9 million), the MUSC Neuroscience Institute (\$5.8 million) and the Department of Medicine (\$5.7 million). Team member donations to the university’s Yearly Employee Support (YES) campaign grew to \$436,538, with participation increasing 14 percent over the previous year. Although MUSC is a state-assisted organization, state appropriations for the university and hospital authority are less than 3 percent of their combined annual budget.

“The many successes that we — as one MUSC — have achieved are noteworthy and should be celebrated,” said MUSC President David J. Cole, M.D., FACS. “We live our mission every day, educating compassionate, highly skilled health care professionals, engaging in groundbreaking research and discovery, and translating

our labor into life-changing care for patients and families.

“Still, it is important to place our financial success in context,” Cole said. “Publicly assisted, academic medical centers like ours are charged with delivering the same, high-quality care to every patient, regardless of their insurance status or ability to pay. That means changes in health care and in the availability of federal funding have tremendous potential to negatively affect our organization. MUSC leaders are engaging at all levels of the complex health care landscape to ensure our ability to deliver access to care for all those who need our help.”

## SPECIAL RECOGNITION

During the meeting, Donald R. Johnson II, M.D., chairman of the MUSC Board of Trustees, read a resolution in celebration of the life and contributions of E. Conyers O’Bryan, Jr., M.D., a member of the MUSC board for 41 years who passed away in May. His widow, Mrs. Jennie O’Bryan, and son, Edward C. O’Bryan III, M.D., attended the meeting and received a copy of the resolution.

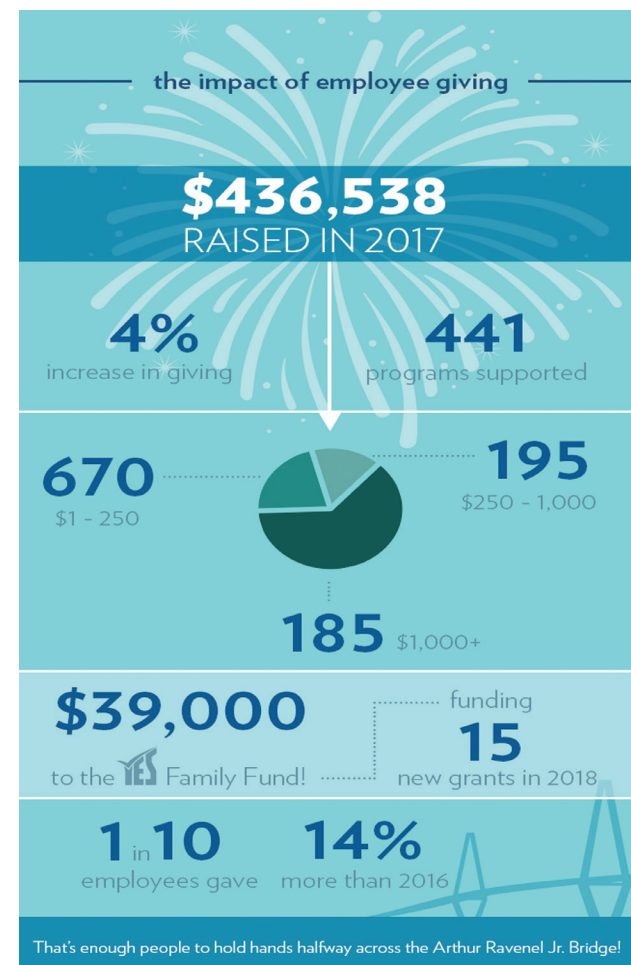
An internist and cardiology specialist in Florence, South Carolina, Dr. O’Bryan joined the MUSC board in 1976 and served as chairman from 1994 to 1998 and again from 2000 to 2002. He had served as chair of the MUSC Board’s Education Committee since December 2011. A 1960 graduate of the MUSC College of Medicine, Dr. O’Bryan brought decades of experience to his role as a trustee. At the time of his death, he held a volunteer faculty appointment in the MUSC College of Medicine departments of Cardiology and Family Medicine. Dr. O’Bryan also served as a medical officer in the U.S. Marine Corps, prior to residency at MUSC.

“The board expresses its deepest condolences to the family of Dr. O’Bryan,” said Dr. Johnson. “We gratefully acknowledge his many contributions to his community, the state of South Carolina, and to this institution where his legacy will be forever cherished.”

## OTHER NEWS

In other business, the board voted to approve:

- The appointment of MUSC trustee Barbara Johnson-Williams as chair of the board’s Education Committee. Johnson-Williams was elected to the MUSC board in 2013 as the lay representative from the 6th Congressional District. The MUSC Board chairman recommended she assume the role vacated by Dr. O’Bryan’s death.
- The appointment of Sarandeep S. Huja, DDS, Ph.D., as dean of the James B. Edwards College of Dental Medicine. He will assume his new role on Oct. 1, and



See **UPDATE** on page 15



## FACULTY *Continued from Page One*

The Medical University of South Carolina honored 15 faculty members at its annual Faculty Convocation Aug. 22 in the Drug Discovery Building auditorium. The awards were presented following the inaugural James W. Colbert Provost Lectureship delivered by B.J. Miller, M.D., assistant clinical professor of medicine at the University of California, San Francisco, a leading authority in the field of hospice care and palliative medicine.

Listed below are honorees in the categories of Developing Scholar, Peggy Schachte Research Mentor, Outstanding Clinician, Population Health and Distinguished Faculty Service. The Teaching Excellence honorees were announced in the June 2 issue of The Catalyst. The awards are sponsored by the Medical University of South Carolina Foundation.

### DEVELOPING SCHOLAR

□ Eric C. Bartee, Ph.D., assistant professor of microbiology and immunology, for his studies in the treatment of cancer, specifically using the myxoma (MYXV) virus, a rabbit virus harmless to humans, to treat multiple myeloma.

□ James J. Prisciandaro, Ph.D., assistant professor in the Department of Psychiatry and Behavioral Sciences, for his studies in the neurobiology of bipolar disorder and alcoholism using magnetic resonance spectroscopy.

### PEGGY SCHACHTE RESEARCH MENTOR

□ Lawrence Judson Chandler, Ph.D., professor of neuroscience, a prolific and highly successful researcher, for his integral role in mentoring his younger colleagues and postdoctoral students to compete for competitive grants.

□ Teresa J. Kelechi, Ph.D., the David and Margaret Clare endowed chair in the College of Nursing, has been instrumental in mentoring researchers in the College of Nursing, where the College's rank in NIH grants has climbed from 30th place to 17th place.

### OUTSTANDING CLINICIAN

□ Kelly S. Barth, D.O., associate professor in the Department of Psychiatry and Behavioral Sciences, has become a leading authority in pain management, and in the midst of our national opioid epidemic, has developed a highly successful clinical pilot program in



Photo by Anne Thompson

**Fifteen faculty members were honored at the Aug. 22 Convocation. They included: (front row) Jean Nappi, Kelly Barth, Katherine Morgan, Teresa J. Kelechi, Laura Kasman and Theresa Gonzales; (second row) Bradley Neville, Frederick Tecklenburg, Eric Bartee, Kenneth J. Ruggiero; (third row) Anbesaw Selassie, Jason Haney and James Prisciandaro. Not pictured: Lawrence Chandler and Patricia Coker-Bolt.**

collaboration with Gastrointestinal Surgery to improve pain management and quality of life for patients.

□ Theresa Jacqueline Sullivan Gonzales, D.M.D., associate dean of curriculum and strategic communication in the James B. Edwards College of Medicine and director of orofacial pain management, is the only chronic orofacial pain manager at the Medical University of South Carolina, taking in approximately 1,000 patients from across the Southeast who may have to wait as long as four months to see her. Dr. Gonzales enjoys a 97 percent satisfaction rate, with 92 percent willing to refer her to others.

□ Katherine A. Morgan, M.D., professor of surgery, has established an international reputation as one of the best pancreatic surgeons in the nation, if not the world, and has helped MUSC become a national leader in the surgical treatment of chronic pancreatitis, in which this institution has the second most active program in the country.

### POPULATION HEALTH

□ Kenneth J. Ruggiero, Ph.D., professor of nursing and psychiatry and co-director of the Technology Applications Center

for Healthful Lifestyles and director of the Telehealth Resilience and Recovery Program, for advancements in screening trauma patients for post-traumatic stress disorder and depression.

□ Anbesaw W. Selassie, Dr.P.H., associate professor of public health sciences, for some of the nation's most advanced studies in the underlying causes of epilepsy, ranging from genetic and environmental factors to traumatic brain and spinal cord injuries.

### DISTINGUISHED FACULTY SERVICE

□ Jean M. Nappi, Pharm.D., professor with dual appointments in the colleges of Pharmacy and Medicine, joined the faculty in 1992 and has been involved in all facets of university life, including program director for pharmacotherapy residents. She currently serves as the faculty liaison for the entire pharmacy residency program. Her clinical duties and her involvement in many national organizations have resulted in widespread recognition, including receipt of the Clinical Practice Award and the President's Award, both from the American College of Clinical Pharmacy, and the MUSC Clinical Services Recognition Award multiple times.

*See FACULTY on page 16*

# Book chronicles MUSC's growth, transformation over years

By MIKIE HAYES

hayesmi@musc.edu

Money struggles, negative headlines, compensation disputes, angry protesters, waning state budgets, even hurricanes brewing in the Atlantic. While parallels may be drawn in 2017, this spate of challenges describes an MUSC of yesteryear – the “transformative” years that date from the 1960s until the early 21st century.

“Transformation: The Struggle to Build the Medical University of South Carolina into a World-Class Academic Medical Center” is an open, firsthand account of MUSC’s steep trajectory of growth, written by Marion Woodbury, vice president for finance and administration, and subsequently both University Medical Associates’ inaugural chief executive officer and special assistant to the president.

Interestingly, it was not his intention to draw comparisons. History, he said, is just cyclical.

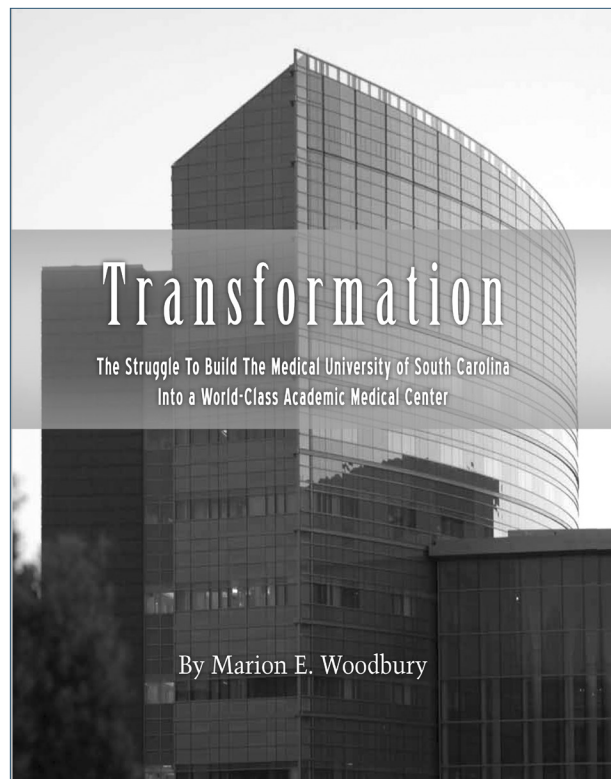
“I didn’t set out to compare the institution of yesterday to today, but it would be predictable,” Woodbury explained. “It’s the natural course of an institution like this to periodically encounter these types of things. You have to make changes to adapt to what’s going on in the universe, or you will be negatively impacted by it.”

Far from a cold, third-party recounting of dry facts unearthed in a library, Woodbury delves into history of which he was an integral part – warts and all. From the Civil Rights strike of 1969, a vice president’s life cut tragically short and the downfall of a leader to what ultimately became a tremendously bright future – and Woodbury was a central figure throughout.

Recognizing this unique breadth of knowledge and historical perspective, former interim president Marcus Newberry, M.D., and Distinguished University Professor Layton McCurdy, M.D., former dean of the College of Medicine, pressed Woodbury to write the book, he said.

But ultimately, it took some convincing and the right set of circumstances.

Woodbury left UMA in 2000 and moved to the president’s office to help get the new hospital, Ashley River Tower, financed and underway. Following his retirement from MUSC in 2004, he stayed involved with the



**Marion Woodbury dedicated his book to the thousands of employees who work hard every day to make MUSC a better institution. The book chronicles the contributions and sacrifices of many.**

Photo provided

institution and did consulting work for then-President Ray Greenberg on MUSC’s behalf in Columbia. He and his family then moved to Tryon, North Carolina.

The idea for the book continued whirling around in his mind. Still, he resisted.

When finally he sold his farm and cattle in 2014 and moved back to the Charleston area, tackling the book became his *raison d’être* – along, that is, with seeing more of his grandchildren. He believed the stories that would weave together such a rich history would appeal to many whose lives, like his, have been devoted to MUSC.

The book begins with a graduate straight out of the University of South Carolina who had just left the ranks of the IRS after two years, before beginning in early 1967 a nearly 40-year tenure at MUSC, three years into Dr. William McCord’s presidency. Once safely ensconced in his miniscule cubicle, he realized just how out of date MUSC’s systems were. He wondered if he had made a mistake. After about a week digging in, he was certain he had, he explained with a laugh.

When finances are a challenge, as they always were, he added, one tends to be right in the thick of things. It didn’t take long before he was a trusted and valued member of the inner circle of his president – a

position he enjoyed with each subsequent administration.

In depth, Woodbury intimately describes the presidencies of Drs. McCord, William Knisely, James B. Edwards and Greenberg, and his close working, and in some cases personal relationships with each of them. “I had the closest relationship with JBE of any of them,” he admitted, referring to his friend Jim Edwards, former energy secretary under President Ronald Reagan and South Carolina governor, who died in 2014.

Each leader brought special gifts to the role, he said. “Leadership here has consistently changed to meet the needs of the institution. All of them have made a different but necessary and positive contribution to the development of the Medical University into a world-class institution.

“Dr. McCord greatly expanded the programs of the Medical University. When Jim Edwards came, we needed stability, and we needed clinical development in a

*See **BOOK** on page 14*



**SPEAKER** *Continued from Page Six*

really difficult, and you want so badly to offer choices,” he says.

“It squanders people’s time. Some things just aren’t possible. Let the impossible stay impossible, and call it as such.”

That’s not to say that it’s all doom and gloom. Palliative care, which is not just for people facing death, is about improving the quality of life for patients and making that the bigger prize.

“Maybe we can make space for the ways in which we can make life more wonderful. You know that feeling that your day can be turned around just by the way a stranger gives you a smile or holds a door open or whatever it may be. These little moments where you get to feel life is pretty amazing just by being connected to complete strangers. I just want to name that so we don’t artificially lower our sights.”

Personally, and in his practice as a palliative care physician, he has been amazed by the therapeutic power of the senses to relieve suffering in patients. Anesthesia — in health care — is critical, but so are aesthetics. “The body is a sack of sensors that helps me move around the planet — to feel things, smell things, hear things. There’s an immediacy to the senses that is so powerful. It has so much to do with how I enjoy my life.”

He says he’s calling on health care to make that connection. “It’s a return to an older brand of medicine before we were overly seduced by the miracles of medicine.”

Showing a slide of Florence Nightingale, Miller summarizes points from her 1859 treatise on nursing that sets the tone for how to care for a patient, covering everything from flowers to floor wax. Such sentiments in today’s modern health care environment can be brushed away.

“But when do you feel super alive? For me it comes in that moment of feeling the sun on my skin or a breeze. It’s the wacky miracle of being alive on this planet. If we can bottle that and give to our patients, it’s a way to keep going and to stay attached to our world.”

**MAKING PEACE WITH THE END OF LIFE**

Health care teams are better equipped to handle the acute cases, intervening and working to solve the problem. But chronic conditions are becoming more the bread and butter of health care as the population ages, he says. He shows a California study about what patients want at the end of life. Factors that scored high were having loved ones



Photo by Anne Thompson

**University of California, San Francisco’s Dr. B.J. Miller used art to illustrate many of his points at the Dr. James W. Colbert Jr. Lectureship.**

present and relieving the family’s financial burden.

When a person is having to adjust to a new health condition or disability or even face the end of life, there can be moments of great reward. “Once you get past the grief of it and the trauma of it, you begin to reconcile the new reality of what you’ve got. It’s a beautiful, creative process. We interrupt that too often.”

Miller says there is much health care professionals can learn from their patients and a rich interaction that can happen as crises are faced together. Patients often feel like a burden. “One of the sweetest things you can do for your patients is to learn something from them. This is not a one-way street.”

For many, there can be a crisis of meaning at the end of life. “They are trying to make meaning of their situation. You are going to be roped into people’s narratives, and what you say and do can really matter. How we do things really do matter,” he says, pointing out that bedside manner isn’t just a nicety.

“I also want to put in a plug for meaninglessness. There’s something really powerful about just not knowing. There’s an absurdity in there and a grace, and there’s a moment of pleasure and joy in that, too,” he says. “It’s important to make room for the mystery. I don’t care if you are Albert Einstein, there are things you don’t know.”

Sometimes space just needs to be made for a patient to sit before the mystery of it in communion with others, he says.

“Some of the most powerful moments

I’ve had clinically are when I’ve said, ‘I don’t know, but let’s find out together’ or ‘I don’t know, but I’m not going to run away. I’ll be here.’ Those are some of the most potent moments. The most magical moment can be just not abandoning someone.”

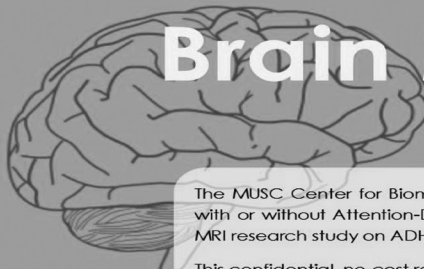
To reorient health care and reimagine medical practice, a good goal is to focus on healing instead of just curing, which would make health care providers relevant to 100 percent of the population, 100 percent of the time, he says.

“If we took our goal as healing, not curing, maybe we’d find ourselves further relevant. And maybe we’d find ourselves a better job description. And more to the point, curing is an externally-driven thing, but healing, being whole and being right with yourself, is largely an internally-driven process. It’s not ours to impart. But as a physician, I can accompany people who are healing themselves.

The other important mental shift is to see dying as a normal part of the living process and to proactively find ways to bring joy to that last season in life. “We are ‘the dying’ — all of us. Sometimes I hear us say ‘the dying,’ which says ‘I’m not that.’ We need to watch ourselves. We are all dying. We don’t need to artificially separate ourselves.”

For many people, the end of life can even be a welcome moment, he says.

“Death is what gives our time meaning. Death is not the enemy. We’re going to lose that war. What makes anything precious is that it ends.”




## Brain MRI Study on ADHD

The MUSC Center for Biomedical Imaging is seeking males (ages 14 - 18) with or without Attention-Deficit/Hyperactivity Disorder (ADHD) for a brain MRI research study on ADHD.

This confidential, no-cost research study involves a phone screen, a clinical assessment visit & a MRI scan visit. If qualified, compensation is provided.

**For More Info:** call/text **BRAIN** 843-640-5382  
email [ADHDbrainMUSC@gmail.com](mailto:ADHDbrainMUSC@gmail.com)



**MUSC**  
MEDICAL UNIVERSITY  
OF SOUTH CAROLINA

IRB Number: Pro00043719  
Date Approved 7/15/2016

BOOK *Continued from Page Twelve*

big way. He was able to fulfill that. He was followed by Ray Greenberg, and research became a very high priority. He accomplished that. He brought us name recognition in the area of research. Dave Cole is a well-rounded individual who is highly qualified in the clinical area as well as the research area and is totally committed to the full development of both. All the presidents have felt a strong commitment to the teaching program and the development of the best graduates we could possibly have.”

While he retired before Cole’s presidency began, he follows him closely and mentions him in the book. In the 90s, their offices were side by side on the 4th floor of the Clinical Science Building.

“I knew him and always had great respect for him. When Dave came to work at the institution, I was housed in the surgery department – he occupied the office next to me. We spoke often and discussed what was happening at the time. Today, the Medical University is in very good hands. There are lots of challenges, but there are always lots of big challenges for a president of a medical university – no matter who he or she is. It’s just the nature of the beast.”

**PERSONAL LEGACY**

When Woodbury points to his own legacy at MUSC, there are two particular areas that are a source of pride he won’t soon forget. Among them are the physical facilities that are still important today – buildings like Ashley River Tower and Rutledge Tower where he was involved from conception through completion.

“In my opinion,” he explained, “it’s not possible to have a first-class, widely recognized, high-quality institution without very good, high-quality facilities. A lot of people object to higher education facilities being as nice as they are – but that’s what attracts students, faculty, physicians, patients, and attention to the institution. A commitment to excellence involves physical space. You can’t have an excellent program and have inadequate, crowded, unattractive spaces.”

He also points to the time when he stumbled upon the concept of disproportionate share – a valuable discovery that resulted in billions of dollars to the institution. The year was 1990, and MUSC had just endured deep state budget cuts and was struggling for money.

“I had gone to some national meetings,”



**Marion Woodbury, author of a soon-to-be released book about the growth of MUSC, reviews contracts in his UMA office. Woodbury served as MUSC’s vice president of finance and administration as well as the first CEO of UMA and then special assistant to former MUSC President Dr. Ray Greenberg.**

he said, “and caught wind that there was a new program to help hospitals that served a disproportionate share of uninsured and indigent patients.”

He made some calls and finally ended up with the right person at The U.S. Department of Health and Human Services. The representative provided confirmation that the program existed, as well as details to how to access it. To Woodbury, it sounded too good to be true. So he tested it. He transferred \$1 million to the state Medicaid Fund and within a week he received \$4 million back. The next week he sent \$2 million and soon received \$8 million in return. Twenty-seven years later, the program continues, although prospects for its continuation, according to Woodbury, are apparently in question.

“While it may not continue much longer, MUSC has benefitted to the tune of \$1.3 billion net,” he said proudly.

His love for MUSC comes through in his book. Woodbury considers himself a lifelong supporter of MUSC and is committed to its continued excellence. He repeatedly expresses his confidence in the organization he feels is positioned to be a major national leader in health care.

“You see,” he explained, “this institution has been very good to me. I came here as a young man at 24 years of age and spent my whole career here, except for a very short time period with the federal government. I came from a

ones along the way that I learned a lot from,” he said laughing. I can’t imagine having a more exciting, interesting career than I had.”

Woodbury’s book will be released on September 1 and carried on campus in the Matthews Bookstore. Soon, he hopes, it will also be offered through Amazon. He priced it at \$20 so employees would be able to purchase it. That’s important to him. He dedicated the book “to the thousands of employees who work hard every day to make MUSC a better institution.” And to him, those aren’t just words.

“I hope people will enjoy it and develop a sense that things don’t just happen and understand that what’s here came as a result of major contributions and sacrifices by a lot of people. There are still a lot of employees who remember these times and have a lot of interest. They remember these times – the difficult times as well as the good times.”

very humble background, humble beginnings, and I was taken in to an institution like this and had the privilege of meeting a lot of very intelligent people. I also met some strange



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MUSC Parking Management

## UPDATE *Continued from Page Ten*

and will also have an academic appointment as professor in the college. Dr. Huja has an impressive record of academic achievement, plus demonstrated leadership success and collaborative team-building skills.

□ Pursuit of the Occupational Therapy Doctorate (OTD) in the MUSC College of Health Professions. The doctoral program will replace the current MUSC Master of Science in Occupational Therapy Program (MSOT) and will be the only OTD program available in the state. Occupational Therapy continues to be among the fastest-growing professions, expected to increase by 27

percent between 2014 to 2024.

□ Moving forward with the due diligence process for the sale of Harborview Office Tower at 19 Hagood Avenue. The sale of the building, as well as selected other campus buildings, is part of the MUSC Master Facilities Plan.

□ An estimated \$7 million in repairs to the Basic Science Building exterior as a result of water damage caused by hurricanes Joaquin (2015) and Matthew (2016).

The MUSC/MUHA Board of Trustees serves as separate bodies to govern the university and hospital, holding two days of committee and board meetings six times a year.

## VOLUNTEER *Continued from Page Seven*

field they can see themselves in. They work hard in a variety of areas and make a huge impact on the lives of our patients and families. Working as a candy striper at MUSC is a really fulfilling experience for the teens. They enjoy connecting with patients and the feeling they've done something special in the lives of those who need it."

This summer, students ages 14 through 18 participated in one of two three-week sessions. A total of 30 donned the red and white stripes, three of which were males. Collectively, they logged more than 5,000 volunteer hours.

Kubu added that this year, for the first time, the program allowed volunteers to be placed in the Children's Hospital. She called that addition monumental – and it has already had an impact. A number of students in the 2017 program, which just came to a close, have expressed an interest in pursuing health care careers.

Becoming a pediatric oncologist fascinates 17-year-old Palmetto Scholars Academy student Alexandra Larocque. She and the others volunteer because they enjoy the work, she said. "I have had a lot of fun here candy striping. I'd volunteered in the atrium before, and I love being able to go around making people's days by serving them coffee."

At only 15, West Ashley High School student Timur Salem knows exactly what his future holds. With great confidence, he said, "I want to go to the College of Charleston, and after that I want to go into the medical field. I eventually want to be a pharmacist."

Fifteen-year-old Annika Kernen, a student at Ashley Hall, loved her time with the patients at the Children's Hospital and hopes to pursue a career in the medical field.

"I worked with the activity cart," she said, "and it was really cool. We went to all the waiting rooms, and it was really wonderful to interact with the kids and play games with them. It was really great to see them smile and make them happier. I know I want to go into medicine."



*Photo provided*

**Timur Salem, who wants to be a pharmacist, works with Central Supply and stocks and organizes inventory.**

Angeline Krupa knows that's also the field for her. "I worked on the coffee cart for the main hospital and the ART building. We served coffee to the staff, patient families, and patients. I enjoyed getting to know all the employees. I know I want to go into medicine and possibly become an M.D.," the 15-year-old Academic Magnet High School student said.

These possible career choices in no way surprise Kelly Hedges, program manager for Volunteer Services. "We get such an incredible pool of applicants," she said.

There was a time not so long ago, she added, where anyone who applied to be a candy striper was able to volunteer. With the increase in applicants, the process has become more competitive.

"Now, they have to have two letters of recommendation and there is a GPA requirement. They also have to successfully complete a group interview with behavioral questions."

Much like an employee, once selected, the students go through orientation and full training that includes the 1996 federal Health Insurance Portability and Accountability Act (HIPAA), compliance, safety, risk management, child life and Occupational Safety and Health Administration (OSHA), Kubu said. "After that, they go through training specific to the area they are going to be serving."

And whether they work with the Get Well Network, medical records, activity carts or at an information desk, the areas are determined by Hedges and Kubu, based on the students' interests and interviews.

"We want the students' personalities and skills to shine," said Kubu. "So if we know they want to be a pediatrician, we try to place them as best as we can."

Many candy stripers love the experience so much, they return year after year. And when it's all said and done, Hedges said, they become like family.

"We'll have some that start with us as freshmen, and then we will get invited to their high school graduations, because they stay with us the whole time."

# SECOND QUARTER DENTAL STAFF



**James B. Edwards College of Dental Medicine Interim Dean Dr. Patricia Blanton, center, recognizes Lisa Fowler, left, (clinical) and Sara Thigpen (non-clinical) as recipients of the Dental Medicine's Staff Recognition Awards for second quarter of 2017. CDM staff honored the recipients Aug. 1 at the college's staff meeting, where Dr. Blanton delivered a speech and lunch was served.**

*Photo provided*

## FACULTY *Continued from Page Eleven*

Dr. Nappi's academic efforts have resulted in her being named Professor of the Year and Preceptor of the Year at MUSC and receiving the Education Award from the American College of Clinical Pharmacy in 2006. She also received the Robert K. Chalmers Distinguished Pharmacy Educator Award from the American Association of Colleges of Pharmacy in 2012. This is the highest honor for an educator in her field.

□ Bradley W. Neville, D.D.S., Distinguished University Professor in the James B. Edwards College of Dental Medicine, is the senior author of the textbook Oral and Maxillofacial Pathology, first published in 1995 and now in its fourth edition. Often called "the Neville book," it is used by 57 of the 66 American dental schools and by foreign dental schools as well. His renown is such that he has presided over the most prestigious North American organizations of his profession: the American Academy of Oral and Maxillofacial Pathology and his specialty board, the American Board of Oral and Maxillofacial Pathology. Dr. Neville has received numerous honors, including

induction into the Omicron Kappa Upsilon National Honorary Dental Society; Fellowship of the Pierre Fauchard Academy; Outstanding Alumnus Award from the West Virginia University School of Dentistry; and this year, the Distinguished Dental Alumnus Award from Emory University.

□ Frederick W. Tecklenburg, M.D., associate professor, former medical director of the Pediatric Intensive Care Unit, could be called the Father of Pediatric Intensive Care, as he was instrumental in its establishment when the Children's Hospital opened in 1987. For many years he was the only physician on staff to care for children with emergency or critical care needs, sometimes remaining at the bedside for days without leaving the hospital. He was also a driving force behind the establishment of Meducare and served as its first pediatric medical director. He also played a vital role in establishing the Child Abuse Pediatric Division. Dr. Andrew Atz, professor and chairman of pediatrics, says this of Dr. Tecklenburg: "Each hospital has faculty who are the 'souls' of the entity. Dr. Tecklenburg is such a person."



## The President's Values in Action Award

Honoring five employees each year who help fulfill MUSC's vision statement, Leading Health Innovation for the Lives We Touch, by demonstrating the five MUSC values:

- Compassion
- Respect
- Innovation
- Collaboration
- Integrity



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