



Photo by Sarah Pack

Sophia Sourlis, aka Baby Yoda, celebrated her match with raised arms and an energetic jump, did she.

‘Match-ical’ day for fourth-year medical students

BY BRYCE DONOVAN

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Sophia Sourlis wasn’t sure this day would ever happen.

During her first year at MUSC’s College of Medicine, the then-25-year-old found out her mother had cancer. In that moment, she admitted, things felt as though they were unraveling. But it was during that difficult time — time that forced her to step away from med school temporarily to care for her mother — that she realized she had another family in MUSC.

“They really were so great with me. They allowed me to do what I needed to do — like, there weren’t a ton of questions, you know? ‘Just do what you need to do, and we’ll figure it out,’” she said from the front steps of Charleston Music Hall. Inside, just minutes earlier,

she had gone on stage to share, with an auditorium full of her peers, where she would be doing her residency. Holding back tears, she added: “This day is super bittersweet. It’s been a long time coming.”

Though her mother is still fighting cancer — she’s a patient at Duke University Medical Center — she was able to make the trip down to watch her youngest child take one of the final steps toward becoming a doctor. But the icing on the cake, the thing that made the day all the more serendipitous, was the discovery of where the soon-to-be anesthesiologist would be doing her residency.

Duke University Medical Center.

On March 18, Sourlis was one of 151 students from the College of Medicine’s graduating class, most of whom participated in Match Day at Charleston Music

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‘I’d lean toward being vigilant but not freaking out’ about possible COVID surge

BY HELEN ADAMS

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When the leader of MUSC’s COVID-19 tracking team takes his first extended vacation since the start of the pandemic, you know case numbers are low. But now, as he recovers from jetlag following a trip to South Africa, Michael Sweat, Ph.D., has his guard up again — gently. “I’d lean toward being vigilant but not freaking out.”

That’s because there are signs another surge may lie ahead. “What’s going to happen? That’s the big question. I think the seasonality pattern has become evident. It’s been two years, and it’s been very consistent that about every six months we have a surge — one in the winter and one in the summer,” Sweat said.



Sweat

That pattern is one sign. Another: what’s happening in Europe as the Omicron sub-variant BA.2 sweeps through. “It’s a little worrying. They’re having another surge,” Sweat said.

“In the U.K., they’re at 132 cases per day per 100,000 people and going up. Germany, 264 per

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100,000 and going up. All of them are going up – France at 134, Austria at 499, Switzerland at 313. So those are really big numbers. Those are starting to get to the numbers we just saw here. Those are really big outbreaks happening.”

Sweat said BA.2 may be 80% more transmissible than the original Omicron. But is it anything to worry about? That’s unclear.

“There have been some odd findings. In Norway and the Netherlands, they had a big wave of BA.2, and it didn’t seem to correlate much with hospitalization. It looked like people got it and had mild cases,” he said.

“However, in the UK, they’re not seeing that. They’re also having a BA.2 outbreak, and they’ve seen a 35% increase in hospitalizations in the past couple of weeks. It’s not clear exactly why that would be. It probably has something to do with vaccination in the elderly.”

Sweat said the U.S. usually mirrors what happens in the U.K. “Their events tend to really predict ours more so than a lot of other European locations. So we may see a surge.”

But right now, the U.S. is in good shape. In the Charleston area, cases have dropped to less than five a day per every 100,000 people. “They’re as low as they’re probably ever going to go. These are really low numbers. It’s that way across the country, with a few exceptions.”

And Sweat said the fact that BA.2 is coming so soon after the original Omicron variant is, in a way, good news.

“People who have been infected with BA.1, the older version of Omicron, have excellent immunity against this.”

The nonprofit Institute for Health Metrics and Evaluation recently said that about 80% of the U.S. population has immunity to BA.2 either from an Omicron infection or vaccination, Sweat said. “So it’s a much smaller group of people who are really at risk as we go forward.”

That doesn’t mean people won’t get sick – just that most won’t end up in the hospital. Sweat said booster shots are an important way to prime your cellular immunity. But in South Carolina, too few people are getting them.

“Only 22% of the state population has had a booster. If I were the king of the world, I would put my eggs in that basket of strongly working on getting particularly people 65 and older up to the point of boosted. I think as these waves come forward, unboosted people would be the ones I’d be a little more cautious about.”

While he’s not planning another vacation any time soon, Sweat said most people who are considering traveling this summer should be OK if they mask up in N-95s on flights and take basic COVID precautions – unless a new, more dangerous mutation arrives.

“We have to keep our eye out for more variants. I think they’re probably going to continue. And the more and more transmission you get, the more likely you are to get variants.”

President’s Blog **CUT TO THE CHASE**

The emperor has no health care

By DAVID J. COLE
coledj@musc.edu

Author Hans Christian Andersen wrote many short stories – adapted parables (think “The Little Mermaid”) that often stand the test of time in terms of the messages they are meant to convey. One such story involved an emperor, his vanity and an obsession with new fancy clothes that ultimately led to his being hoodwinked into ignoring the most obvious of truths: His new clothes were not clothes at all, and he was, in fact, naked.

Today, we tend to use the expression “the emperor has no clothes” when many people believe something that is not true, and others are too often afraid to criticize or be seen as going against popular opinion. This is not an uncommon response as we try to get on with our daily lives – call it human nature. Well, respectfully, I’m going to push back against that human tendency here and say that in the state of South Carolina, “the emperor has no health care.”

Take, for instance, some recent health data from the Centers for Disease Control and Prevention, ranking infant mortality in developing countries. The United States is tied for last place out of 24 industrialized nations. From there, if we look only at

the U.S., we see that South Carolina sits in the bottom quartile, meaning we have rates of infant mortality that are beyond unacceptable. In data available through the Department of Health and Environmental Control and other sources, including research teams here at MUSC, we quickly understand that when it comes to chronic diseases, South Carolina continues to rank at the bottom of the scale. Opioid deaths are on the rise, too. These are just a few of many examples. Health care access, delivery and outcomes are far from optimal in South Carolina, as the evidence and data consistently tell us.

I don’t have to tell you that South Carolina and its citizens, myself included, are a very proud bunch. We have a lot of great things going for us all over the state, and as evidenced by our economic growth, influx of new citizens and great quality of life that’s not a surprise. But I will share with you a fact that we never discuss – health, or lack thereof, is the great equalizer. If we do not come together to address the chronic and increasing health care issues that hold us back as individuals and communities, we will never be able to reach our full potential.

In recent months I’ve been receiving feedback, questions and just to state it candidly, some concerns, from

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Spring forward into healthy habits

MUSC Health & Well-Being



By Susan L. Johnson, Ph.D., MUSC
Office of Health Promotion

With the change of season comes the impulse to clean and replace the old with the new. But spring doesn't just have to be about cleaning and reorganizing — it's also a great way to start healthy new habits and break the old. Here are tips to get a head start in your spring health.

GET MOVING

The weather is warmer and the days are longer, which makes it a perfect combination to get active outside. The American Heart Association recommends that individuals do moderate exercise for at least 150 minutes per week or 75 minutes per week of vigorous exercise.

EAT WITH THE SEASON

Take advantage of the variety of vegetables available during spring. A healthy diet includes adding vegetables and fruit every day. Vegetables like broccoli, green beans, leafy greens, zucchini, cauliflower, cabbage, carrots and tomatoes are low in calories and high in fiber, vitamins and minerals. Try to eat about three to five servings every day. Fruit is also a good source of fiber, vitamins and minerals. You should try to eat about two to three servings of fruit each day. It goes without saying that it's OK to indulge in the occasional ice cream cone. Although, frozen yogurt would be a healthier alternative.

Looking for somewhere to start? Join

the "MUSC" team for the Lowcountry Local First Eat Local Challenge and commit to shifting a percentage of your monthly spending to support local farmers, purveyors and businesses.

BOOST YOUR HYDRATION

As the heat kicks into high gear, it is harder to stay hydrated and more important to drink more water. Drink plenty of water before going outside and have plenty on hand to stay hydrated. If you aren't a fan of water, try the MUSC Urban Farm for spa water—it makes a great party beverage for the warmer days.

CHECK IN FOR A CHECKUP

You may have chalked up some symptoms and illnesses to the winter blues, but now that it is spring, it's time to get back to the doctor for your preventive well-checks. A periodic wellness exam for all ages is not just about good medical care, but it also gives you the opportunity to learn more about beneficial health habits, counseling and community support services as well as an overall view of the best ways to take care of yourself and your family for a lifetime. Your doctor will let you know how often he or she needs to test for high blood pressure, diabetes and other diseases and for cancer screenings.

BE MINDFUL OF YOUR SUN EXPOSURE

As the warmer and sunny days increase, your skin needs protection. Not only do men and women need to moisturize their skin regularly but also

protect it from the harsh rays of the sun. If you're outside, make sure to use a sunscreen with an SPF 15 or higher that protects against UVA and UVB rays. It doesn't hurt to throw on a pair of sunglasses and a hat as well.

Be sure to visit the various sunscreen dispensers on the MUSC campus to apply throughout the day as you move around campus.

CONNECT WITH YOUR COMMUNITY

Research has shown that good, strong relationships benefit your overall health and happiness. Spend the day with people that you love, schedule regular outings to enjoy the great spring weather and take the opportunity to get active and enjoy "green exercise" with your family and friends. Be sure to check out the "Adventure Out Yoga Series" for free monthly yoga classes in Charleston's most beautiful parks.

Interested in additional ways to boost your well-being this season? Participate in the MUSC employee well-being program, Imagine U, for personalized well-being challenges and resources via Microsoft Teams. If you have any questions about how to participate in Imagine U, email musc-empwell@musc.edu.

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Dietetic interns organize biggest volunteer project in program's history

BY LESLIE CANTU
cantul@musc.edu

A pair of dietetic interns at MUSC channeled their passion for kids' nutrition into a communitywide volunteer project that ended with 40,000 meals packed for children in Haiti.

"I can't believe that these two young ladies pulled this off — not that I had any doubt, but they did so much more than I expected," said Kelley Martin, a registered dietitian and director of the dietetic intern program.

Every year, 12 dietetic interns come to the Charleston campus to participate in the internship, each having completed a bachelor's degree at a college that offers nutrition science. Before they can sit for the national registered dietitian exam, however, they must complete a clinical program and gain experience in a variety of settings. Sodexo, MUSC's dining services contractor, offers the internship so the interns can gain experience in clinical settings. In addition, the interns

do rotations in community settings like the Lowcountry Food Bank, dialysis clinics and with the WIC nutrition program.

Throughout the year, the interns also complete special projects. Kylie Purifoy and Elizabeth Uliana were charged with coordinating the project associated with National Nutrition Month, which is observed each March.

This year, the Academy of Nutrition and Dietetics decided that the theme of the month should be "Celebrate a world of flavors" — a theme that resonated with Purifoy.

Purifoy already knew she wanted to do something with the group Mission of Hope, which works in Haiti and the Dominican Republic, and the theme offered the perfect opportunity.

Purifoy first encountered Mission of Hope when she was an undergraduate at Texas A&M. She had experience with a number of mission groups, but Mission of Hope was unlike any group she had worked with.



Photos Provided

Volunteers came together March 19 to scoop, measure and pack nutritious meals to be distributed in Haiti.



Kylie Purifoy and Elizabeth Uliana

"Nutrition is a pillar of their organization, which is one of the reasons I fell in love with it," she said.

The group distributes more than 100,000 meals each day to children in schools and orphanages in Haiti.

Purifoy and Uliana decided to organize a meal-packing event. They worked with Kids Against Hunger, a group that provides food to Mission of Hope. The packaged meals consist of vitamin-fortified crushed soy, dehydrated vegetables, a multivitamin powder and rice, ensuring complete nutrition in each meal. To package up these meals, groups can organize volunteers to scoop, measure and weigh the components.

Each meal costs 30 cents, which includes the cost of transportation to

Haiti. To accomplish their goal, Purifoy and Uliana needed to raise money to pay for the meals and find volunteers to do the packing.

They more than accomplished their goal — they raised \$12,000 and recruited 162 people to pack 40,000 meals.

"Those 40,000 meals will feed 200 kids for a full year of school lunches," Uliana said.

Looking back at the event, Purifoy and Uliana are amazed that so many people volunteered their time. A couple of weeks before the packing event on March 19, they had only a few dozen volunteers. Purifoy and Uliana went into overdrive to spread the word about the event, talking about it in small groups at their churches, posting on local Facebook groups and including the event in newsletters on the MUSC campus.

"I think we were all really blown away by the way people stepped up," Uliana said. "It was cool to see that come together."

The pair had expected the packing event to take about two and a half hours, but many hands made light work — everything was packed up in less than two hours.

With their intern year quickly wrapping up, the two are looking to their next steps. Both would like to work in pediatric dietetics.

Meanwhile, Martin said the intern group has never before completed such a large project. Next year's group, she warned, will have large shoes to fill.



Volunteers receive instructions and learn about Mission of Hope's work.

MEET BRUCE



Bruce Crookes, M.D., FACS

Department; Years at MUSC *Surgery – General and Trauma Surgery and Surgical Critical Care; 12 years*

How are you changing what's possible at MUSC

We are working hard to expand our acute care surgical robotic surgery program, as well as supporting our Burn Program.

Family and pets *Wife, Karin (23 years); sons, Tommy, 21, Tyler, 20, William, 18; daughter, Kylie, 16; and dogs, Sullivan and Griffen*

Who inspired you to go into medicine

My mother and father. My father is a very "hands on" engineer, who inspired me to solve problems with both my mind and my hands. My mother is very spiritual and taught me compassion and sensitivity.

Favorite spring activity *It's lacrosse season! All of my sons play lacrosse and I love going to their games.*

Something about your patients that inspires you *Trauma patients are unique — they're faced with an unplanned tragedy (no one plans to get injured). I'm always inspired by their resilience.*



Employee – Nichole Wandrey, MUSC OurDay Change Champion

Transplant, Nephrology and Hepatology, ICCE operations manager

What is the hardest part about a change like this?

The hardest part about this type of large-scale change is effectively communicating downstream to all end-users, considering each end-user's needs through design and providing appropriate training.

Change Champions are here to spread the good news, aid in helping end-users to see this change as a positive opportunity for MUSC and provide assistance for end-users within their scope. I agreed to become a Change Champion mostly because I want to be as aware as possible of any changes coming down the pipeline so I can effectively communicate those changes to others.

For more information or questions about OurDay, visit <https://horseshoe.musc.edu/everyone/ourday> or email ourdayquestions@musc.edu.

Editor's note: OurDay Change Champions are part of a group of 50+ MUSC employees from across the enterprise who have volunteered to advocate for the new platform and share information with their teams.

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Community health research program offering insight about genetic health risk expands across state

Staff Report

A newly announced expansion allows for more eligible individuals to participate in the community health research program In Our DNA SC. It's offered by MUSC, in collaboration with Helix, a leading population genomics company. The program provides genetic results for three health conditions:

- A hereditary form of very high cholesterol called familial hypercholesterolemia that can cause heart disease relatively early in life.
- Hereditary breast and ovarian cancer.
- Lynch syndrome, the most common cause of hereditary colorectal cancer.

Genomics is the study of all of your genes, including how they interact with each other and your environment. Organizers want to make sure the people who sign up for testing through In Our DNA SC reflect the state's population, which is more than 25% African American.

Marvella Ford, Ph.D., a professor in the College of Medicine and associate director of population sciences and cancer disparities at MUSC Hollings Cancer Center, called the announcement tremendous.

"We have an opportunity now to provide access to genetic testing through In Our DNA SC, to everyone here in the state of South Carolina. We want to make sure that this opportunity is seen and embraced by racially, ethnically and socioeconomically diverse communities. We don't want anyone to be left out of this wonderful opportunity."

Ford said Hollings is already trying to reach more people through its mobile health unit, which travels to rural areas to give mammograms and Pap smears, and its new community health van, which offers vaccines to prevent HPV-related cancers.

In Our DNA SC provides genetic results for three health conditions:

- ❑ A hereditary form of very high cholesterol called familial hypercholesterolemia that can cause heart disease relatively early in life.
- ❑ Hereditary breast and ovarian cancer.
- ❑ Lynch syndrome, the most common cause of hereditary colorectal cancer.

In Our DNA SC is an important addition to those efforts. The program, introduced last September, was initially available as a pilot to existing patients in select locations, resulting in an enrollment of 1,800 people. As of last week, it is now open to enroll 100,000 people.

The testing involves saliva samples. There's no charge to participants, and individuals and their doctor will receive a copy of the results. So will researchers trying to answer questions about how DNA affects health, but they won't know the results belong to a specific participant to protect privacy.

MUSC President David Cole, M.D., a cancer surgeon who spoke at the news conference announcing In Our DNA SC's expansion, has seen how empowering genetic information can be for patients. "Embracing precision or personalized medicine is a necessary paradigm shift. It's going to be required to help define new pathways in terms of prevention and care delivery."

MUSC Health CEO Patrick Cawley, M.D., agreed. "I'm excited about this program that will advance the science of

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Photo by Sarah Pack

Dr. Marvella Ford speaks at the news conference announcing the expansion of In Our DNA SC.

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NURSING EXCELLENCE PRAISED WITH CERTIFIED NURSES WEEK AT MUSC HEALTH



Certified nurse Derek Fisher, center, ART 7West, Charleston Division, joins Gina Snell, left, and Dr. Patti Hart, chief nursing officer, MUSC Health Charleston at the March 18 event. Fisher was joined by certified nurses from throughout the hospital system. In honor of Certified Nurses Day (March 19), certified nurses and nursing teams from 10 Integrated Centers of Clinical Excellence areas were also recognized at the Daisy Garden event. Nursing certification recognizes the clinical knowledge, experience and clinical judgement of nurses within nursing specialties.



Photos by Cindy Abole



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MATCH *Continued from Page One*

Hall. Match Day, which occurs on the same day at medical schools all across the country, marks the end of a months-long process that pairs graduating medical students with hospitals for their residencies. The students rank their top choices, and the hospitals do the same. The students didn't find out their matches until March 18 at noon.

Because of COVID, the past few Match Days have been a bit different. Last year, it was held outside with no family members present. The year before was even less ceremonious: an email from the National Resident Matching Program (NMRP) at noon. But this year, the entire class was back, face-to-face at a familiar venue, opening envelopes – with contents way heavier than a scale could ever measure – together.

Every year students choose a theme. This year's was "Space: The next frontier." And when it came to embracing it, everybody brought their A-games. There were the three Buzz Lightyears, of course; pretty sure there was a Jabba the Hutt somewhere at

one point; one super cute spheroid "Star Wars" droid, BB-8; three Star Trek captains; more NASA logos than you'd see at a shuttle launch; and not to be outdone, Department of Family Medicine Chair Terrence E. Steyer, M.D., sporting a jetpack costume, complete with "flames" shooting out of the bottom.

Raymond N. DuBois, M.D., Ph.D., dean of the College of Medicine, kicked things off with a little wisdom from his years of experience in medicine.

"I want to give you all three pieces of advice," he said. "Be confident in your training ... recognize that there's still a lot you don't know ... and most importantly, respect your patients."

One by one, students came up on stage – accompanied by music of their choice, as well as photos of them projected onto a giant screen – and announced where they would be spending the next three to seven years of their lives.

There was Talior Martin, who matched with Carolinas Medical Center in Charlotte, North Carolina, for pediatrics. She had a message for her mother: "It's been me and you. It's us until the end."



Photo by Sarah Pack
James Ngoyi, left, and Amber Roberts cross the stage after both announced their matches for internal medicine. At right, Rocket Man Dr. Terrence Steyer looks on.

There was Echo Buffalo, who in addition to having the coolest name ever, matched with the University of Virginia School of Medicine for family medicine. The South Carolina native, who identifies as Native American and Black, had even more riding on the line with her match: In addition to UVA being her

first choice, it was also where her fiance is doing his residency. "After a year apart, we're finally back together," she said.

And rounding things out, with some simple, yet- spot-on, perspective, was class president Will Harris, who will

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Photo by Sarah Pack

Dr. James Lu, left, CEO and co-founder of Helix, talks with Dr. David Cole, president of MUSC.

"We're very focused on enabling large-scale genomics programs with leading health systems across the country who are dedicated to making genomics part of standard of care so that all patients across their health system can access the very best in precision medicine and make sure that all patients can have equal access."

James Lu, M.D., Ph.D.

allows us to modify the dose for that patient, or maybe even avoid the medication entirely. It can also help solve diagnostic dilemmas.

There's nothing more frustrating to a patient or a family than not knowing what is happening."

James Lu, M.D., Ph.D., CEO and co-founder of Helix, said MUSC is in good company. "We're very focused on enabling large-scale genomics programs with leading health systems across the country who are dedicated to making genomics part of standard of care so that all patients across their health system can access the very best in precision medicine and make sure that all patients can have equal access."

Other institutions working with Helix include the Mayo Clinic, HealthPartners in Minnesota and Renown Health in Nevada. "These are very much likeminded institutions that are thinking about genomics as part of standard of care. And MUSC is obviously a leader in bringing that to all patients," Lu said.



Cawley



Photo by Sarah Pack

Hundreds of students, family and friends gathered for the annual celebration of medical students and their residency matches.

MATCH *Continued from Page Eight*

be practicing neurology at NewYork-Presbyterian/Weill Cornell Medical Center. "We all get to be doctors now," he said. "And that's really cool."

Of the specialties in which students will be pursuing their training, categorical internal medicine led the way with the highest number of students at 25 (16.6% of the graduating class). Other popular specialties included pediatrics (12%), family medicine (11.3%), obstetrics and gynecology (7.3%), anesthesiology (6.6%) and psychiatry (6.6%). A total of 41 (27.3%) students will remain in South Carolina to complete their residency training, with 30 of them staying right here at MUSC.

Just a sampling of some of the places where MUSC's students matched includes: Johns Hopkins, Mass General, Yale, Columbia, UPenn, Duke, UVA, Georgetown, Cornell, UCSF, UCLA and University of Texas Southwestern Medical Center.

As everyone mingled outside the venue afterward, Bryce Kunkle, aka David Bowie from his "Space Oddity" phase, snapped a photo with his family. A real-life musician in his own right, he will be practicing internal medicine at Georgetown University Medical Center later this year. During his four years at MUSC, Kunkle was known for singing and playing the

guitar at school parties as well as local bars.

"I cannot wait to get there," he said as he casually waved to a passing stormtrooper. "Georgetown was my No. 1 choice, so I'm really excited."

As for Sourlis, the anesthesiologist-in-training going to Duke, it still hasn't fully sunk in that she will get to work in the same hospital where her mother is receiving care.

"Right now, this is so surreal," she said. "I worked so hard for this. And to get to share today, the future, with my family? I can't find the right words to express how I'm feeling — but it's really good."

MUSC sponsored blood drives for April at MUSC locations

To all employees and students: The Charleston area is still in the midst of a blood supply crisis. All blood types are needed. Everyone is encouraged to donate blood.

❑ MUSC Horseshoe — 10 a.m. to 3 p.m., Wednesday, April 20, 171 Ashley Avenue.

❑ MUSC Health East Cooper — 10 a.m. to 2 p.m., Thursday, April 21, 1600 Midtown Ave., Mount Pleasant

Register to set up an appointment at <https://tinyurl.com/mrxkhktu>.

DNA *Continued from Page Six*

medicine and present new options for patients in South Carolina — options like proactive preventive care plans that a patient can monitor for early symptoms and maybe even intervene early," he said.

"It offers options like determining ahead of time medications that a patient may be genetically sensitive to. And that

Celebrating MUSC Health physicians on National Doctors' Day



MUSC Children's Health's Dr. Elizabeth Mack, right, is a clinical care specialist at the MUSC Shawn Jenkins Children's Hospital.

National Doctors' Day, March 30, is a chance to celebrate physicians for their commitment and hard work. Throughout the pandemic physicians have been invaluable members of the health care team. The following are some of the comments sent to MUSC Health physicians from grateful patients across the state.



Photos by Sarah Pack
MUSC Health-Charleston's Dr. Bruce Crookes, center, reviews a patient's images with STICU and Adult ED doctors.

Dr. Virgilio George: "You are an awesome surgeon. Thanks for all you do."

—Charles Mason
MUSC Health—Charleston

Dr. Lisa Mims: "Can't thank you enough for the wonderful care you and your team gave Andrea in 2021. We will be forever grateful."

—George Roth
MUSC Health—Charleston

"Dr. Robert Quattlebaum helped my teenage daughter when she was in a really difficult time in her life. He has a patient and kind way of talking to his patients, explains things in such a great way, and gives them a lot of hope. My daughter felt this was the first doctor that really listened to her and took her mental health seriously. He did not judge or speak in a patronizing manner, he was supportive and helpful."

—Anonymous Patient
MUSC Health—Charleston

Dr. Ben Clyburn: "Thank you Ben for taking care of the medical care needs of all of our family for over 20 years! You have always provided excellent care! You have been a great doctor and friend."

—Dave Neff
MUSC Health—Charleston

"Dr. Kathy Bolus is what everyone should have in a primary care doctor. She is knowledgeable, interested in me and my quest and always provides great care and recommendations and follow through. She's the best!"

—Nancy Falleroni Mullen
MUSC Health—Charleston

Dr. Walter Brzezinski: "You have taken care of me since 1989 and you feel like family to me. I feel so relieved when I see you because I know you will help me feel better and you always do! Thank you for being the most wonderful doctor I have ever had. You are an amazing physician. Couldn't do life without you!"

—Ellyn
MUSC Health—Charleston

Dr. Gerald Bauknight: "Thank you for your constant professionalism and expertise in your field. When you stop and teach it is always appreciated. You are well respected by the staff and you are appreciated."

—Patty Oliverio, R.N.
MUSC Health—Midlands

"Dr. Tallulah Holmstrom, Thank you for your dedication to MUSC Health patients and care team members. We appreciate all you do!"

—Anonymous
MUSC Health—Midlands

Dr. Akinwale Olatosi: "Many thanks for your guidance, your leadership, and the care you provide. You are a GEM!"

—Stacy Collier
MUSC Health—Midlands

Dr. Antoine Finianos: "I was very nervous about meeting you. The minute you walked into the room, I was completely at ease. I have never dealt with a physician who put the time in to research my history like you did. We are so lucky to have you in Florence."

—Sally Pales
MUSC Health—Florence

Dr. Bradley Russell: "Thank you, Dr. Russell, for taking such good care of my mom in the ER last fall. Your fast diagnosis enabled her to begin taking the prescribed medication quickly, and she made a complete recovery. She now considers you to be her favorite doctor and calls you her grandson!"

—Pam Gaddt
MUSC Health—Florence

Dr. Kenneth Burns: "There are not enough words for me to express my extreme respect for Dr. Burns. I have had an opportunity to work with Dr. Burns and his dedication and commitment to his patient is outstanding. He understands that the relationship between the doctor and patient is so important. I am grateful to have experienced firsthand his method and faithfulness to the medical profession."

—Claudia aka Maria
MUSC Health—Florence

Dr. Cecilia Aguilar: "What a gifted physician you are! Thanks for working so hard to keep the residents of Chester, S.C. healthy and stitched up."

—Beth Johnson
MUSC Health—Florence

"I am so grateful to my physician, Dr. Douglas Tiedt, for his expertise but mostly for his willingness to listen and to explain in understandable terms. He treated me with the utmost respect and I felt safe in his care. He was 'right on' with his diagnosis."

—Sandy Keith
MUSC Health—Lancaster

CHASE *Continued from Page Two*

external stakeholders about MUSC's strategic moves related to the subject of partnership and our physical presence around the state. Typically, they want to know why MUSC is "trying to take over the world," or why we don't just "stay where you belong in the Lowcountry."

I struggle with this feedback for three reasons: One, their statements don't account for our statewide mission and charge from the legislature — we are the Medical University of South Carolina, not the Medical University of Charleston. Two, they operate under the false premise that unbridled competition, rather than partnership, is the only path forward. And three, they assume that all is well with health care across the state of South Carolina, and, therefore, any change to the status quo could only be detrimental, and statewide approaches to longstanding issues aren't needed. That last reason, in my mind, is the equivalent to the emperor wearing no clothes.

For MUSC, more of the same is not acceptable. We're innovators, collaborators and fellow humans, yes, but ultimately, we've also been charged with taking on this hard, and at times, seemingly insurmountable set of health problems that plague us — yet we are willing to accept this challenge. But to be clear, MUSC cannot solve these many issues alone; we require partnership, community and a willingness for individuals and entities to look beyond their own backyards. The key to moving the earlier stats in a positive direction and maintaining them in a place that we can all be proud of requires different thinking.

This starts with a systematic, strategic approach to partnership and presence across the state — acknowledging the basic truth that best care is local as a cornerstone of what we seek to do. We need to enable and strengthen access to high-quality care as close to home as possible. Why? Because enabling other providers and systems increases the quality and access of available health care while enabling the right care to actually happen at the right place and time. Because we know that being a catalyst for transformative and translational research around the state spurs necessary



Artwork illustrating children's author Hans Christian Andersen's short story, "The Emperor Has No Clothes."

progress. Because we know that there are not enough training and educational opportunities in our state — a fact that has only become more evident by all things COVID.

So, where are we beginning to have impact?

Our work and leadership via the South Carolina Telehealth Alliance and the South Carolina Stroke System of Care are excellent examples to date. Today, you can present at any hospital emergency room anywhere across the state, and that ER physician and care team will have access to a stroke expert at one of five comprehensive stroke centers in South Carolina, which includes MUSC. This saves time and brain, leading to much better and different outcomes for thousands of South Carolinians. Further, as a National Center for Telehealth Excellence (one of only two nationwide), we're connecting with smaller, rural, underserved and community health centers and hospitals so that we can deliver on the best care is closest to home concept for patients, yet ensure better outcomes and support for our health care colleagues across the state.

Another example involves the growth in clinical rotations for students across multiple MUSC colleges as a result of our acquisitions in the Florence and Lancaster regions of the state. We're also working on graduate medical education (GME) consortiums with health care affiliates and colleagues to keep more physicians training and then, ultimately, staying to practice in South Carolina.

And, briefly, I'm particularly excited about how we are growing our community and underserved populations outreach, from our work with Healthy Me — Healthy SC to our leadership and crucial lessons learned during our statewide rollout of COVID-19 testing and vaccination.

Here are some more facts to consider:

- ❑ MUSC serves a critical role for South Carolina as the only health system able to provide the highest level of specialized, complex care and expertise, meaning we have the broadest range of specialties in South Carolina, with more than 15 offered exclusively at MUSC. Because of the focus on specialized care, MUSC sees patients from every county in South Carolina and every state in the nation.
- ❑ MUSC provides more than 50% of the state's GME, making the institution the largest GME provider in South Carolina, with a total of 850+ positions across 77 specialties. Approximately 75% of physicians who complete medical school/GME in South Carolina remain in the state to practice.

- ❑ MUSC is the only health care system

in the state that has a \$328 million translational and basic science research enterprise capable of defining state-of-the-art care.

- ❑ MUSC has developed productive health care system partners or clinical affiliates in all 46 counties in South Carolina because providers, hospitals and health systems across the state are looking for partnerships that deliver the highest-quality, comprehensive care closest to their patients' homes.

- ❑ Partnering to increase clinical- and outcomes-research capabilities elevates the level of care available and the quality of care provided in the local communities.

- ❑ Approximately 11% of South Carolinians requiring hospitalization (57,938 people) leave South Carolina for care. By partnering locally, we accomplish what is most appropriate, which is providing health care in South Carolina for South Carolinians.

- ❑ Rural hospitals in South Carolina are under significant financial pressure, with some facing closure, worsening the challenge of health care access/ disparities. MUSC is investing and innovating in numerous smaller and rural South Carolina hospitals through partnership or presence, providing underrepresented minority and rural populations with better access to the highest level of patient care.

Given who we are — our mission, our momentum, the fact that we are blessed with so many talented providers, researchers, faculty, staff and students who work daily to make a meaningful difference in people's lives — contrasted with the current state of health affairs in our South Carolina, my response to those who have concerns is "if not MUSC, then who?"

MUSC Global Health Week set for April 11-15

MUSC will host Global Health Week from April 11-15. Leading experts from the WHO, Philippines Department of Health, American University of Beirut, Physicians for Human Rights and MUSC faculty will serve on a series of global health panels.

Don't miss a celebration of cultures around the world with the International Bazaar for cultural performances (Greenway), music and food. Registration is required for panel sessions. Visit <https://web.musc.edu/about/global-health>.

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