ALUMNI
2015 • Issue 1

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Shared Experience
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A Letter from the President

The Alumni Association marks the 100th anniversary of its incorporation this year. I hope you all will consider attending the 69th Biennial Meeting in Phoenix in October, when we will celebrate this centennial. “Coming home” to Mayo is a long-standing tradition. In 1930, Dr. Will said the following to returning alumni:

In greeting you, our assistants of former days … my brother and I take greater pride in your coming back than in any other event connected with the Clinic.

In addition to enjoying fellowship and learning with those who share your common Mayo bonds, you will see firsthand Mayo Clinic in Arizona and learn more about programs like the Proton Beam Therapy Program, which begins seeing patients in spring 2016 (the Proton Beam Therapy Program — Rochester campus begins seeing patients this summer) and the Mayo Medical School expansion to Arizona, where the first class will begin in 2016 or 2017.

Without exception, alumni who attend the biennial meetings reconnect with colleagues they did not anticipate seeing and make new associations of personal or professional merit.

To honor our centennial in this magazine, each of the four 2015 issues will feature special content about the Alumni Association’s 100-year history. This issue covers the origins through 1940, including some remarkable correspondence between Dr. Will and early leaders of the Alumni Association, among others. I hope you enjoy these gems as much as I have.

Juan Sarmiento, M.D.
• Associate Director of Surgery
• Emory University School of Medicine
• Director, Hepatopancreatic Biliary Surgery, Emory University Hospital, Atlanta

Web-only stories

1 The Surgeons Club — Physicians who traveled to Mayo Clinic to watch the Mayo brothers perform surgery beginning in the late 1890s organized in 1906.

2 Harold Foss, M.D. — The father of the Mayo Clinic Alumni Association was the founding physician of Geisinger Medical Center and former president of the American College of Surgeons. The Mayo Alumnus profiled him in 1968 after his death.

3 Maya Babu, M.D. (NS ’17), a resident in the Department of Neurologic Surgery at Mayo Clinic in Rochester, was one of the first students to participate in a unique joint program, simultaneously earning her MBA from Harvard Business School and her medical degree from Harvard Medical School. Learn how she pursues the science of medicine, excels in the art of being a physician leader, and demonstrates the attributes the Mayo brothers espoused and modeled.
In September, more than 100 Mayo Clinic alumni plus their guests convened in Dublin, Ireland, and Edinburgh, Scotland, for the 2014 International Mayo Clinic Alumni Association Meeting. “The Mayo brothers were famous for visiting multiple locations on their travels abroad, so we celebrated their precedent with a two-city meeting in recognition of Mayo Clinic’s sesquicentennial last year,” says Michael Sarr, M.D. (GI ‘80), Division of Gastroenterologic and General Surgery, Mayo Clinic, James C. Masson Professor of Surgery and meeting co-chair.

Attendance was up by 40 percent over the highest attended meeting in recent years (Greece, 2011), and almost 54 percent of alumni were first-time attendees at an international Alumni Association meeting.
Content in the interactive, participatory meeting was broad-based and focused on differences in practice and philosophy between the United States and Europe, and developments at Mayo Clinic — especially regenerative medicine, surgical innovation and individualized medicine.

Dr. Sarr comments that the meeting not only provides CME credits but also allows physicians and other providers to interact and socialize with those in different disciplines — “productive ground for cross-fertilization and new friendships.”

“Participants felt that the educational opportunity provided by the international meeting was excellent and enhanced by the closer networking afforded with others, both international and American colleagues, who have ties to Mayo Clinic,” says Deborah Lightner, M.D. (U ’95), Department of Urology, Mayo Clinic, and meeting co-chair.

The location for the June 2016 International Mayo Clinic Alumni Association Meeting will be announced early in 2015 to allow alumni and their families to begin planning. >>
First-timers share meeting experience

The 2014 International Mayo Clinic Alumni Association Meeting was a first for more than half of the participants, including including Bhalchandra Parulkar, M.D. (GUP ’88, U ’89) and his wife, Smita Parulkar, M.D., of Worcester, Massachusetts; and Gregory Peterson, M.D. (I ’83, PMR ’86), and his wife, Lynne Schmid Peterson, M.D. (IM ’93, RHEUM ’96), of Bismarck, North Dakota.

They share their experience with Mayo Clinic Alumni.

‘Meetings like these are a perfect incubator for new friendships and connections with Mayo faculty’

“For the first time in 20 years, my wife and I were able to attend a meeting where we could both enjoy the cross-specialty presentations, enjoy the conference venue and cities, and have time for ourselves to make new friends,” says Dr. Bhalchandra Parulkar, chief of urology at Saint Vincent Hospital and assistant professor of urology at University of Massachusetts Medical Center in Worcester. Dr. Smita Parulkar is an internal medical physician who practices at Reliant Medical Group in Worcester.

“Medicine is becoming more bureaucratic, and we are losing free time for personal touch and for meeting and making new friends due to professional pressures,” he says. “Meetings like these are a perfect incubator for new friendships and connections with Mayo faculty. I met doctors from urology faculty from Mayo Clinic in Rochester and Scottsdale to improve
my network. I want to stay connected because Mayo Clinic training made me what I am today and set my career path toward a patient-centric focus. I’m a vocal ambassador for the Mayo Clinic model in our community.”

The Parulkars had twins while they trained at Mayo Clinic. Dr. Smita Parulkar had premature contractions and was hospitalized for four months. “Mayo Clinic admitted her with no consideration for cost, and looked out for her and the babies. We owe a lot to Mayo Clinic. Both our kids are in medical school at Alpert Medicine School at Brown University,” says Dr. Bhalchandra Parulkar.

‘Of special value was renewing my connection to the people and philosophy of Mayo’

“The program looked interesting, with a thoughtful balance of education and vacation, and we hadn’t visited Ireland or Scotland,” says Dr. Greg Peterson, an outpatient rehabilitation and EMG consultant at Sanford Health in Bismarck. “My wife, Lynne [also a physician at Sanford Health], and I met at Mayo and both love Mayo. We didn’t know anyone else who was going, but the meeting environment made socializing very comfortable — something I tend to avoid at meetings.

“Two former colleagues were there, unexpectedly, and I made new friends and met people I’d admired through the years. Of special value was renewing my connection to the people and philosophy of Mayo. The international meeting exceeded my expectations. It was a great opportunity to learn and connect with people I love and admire.”

Gregory Peterson, M.D., and Lynne Schmid Peterson, M.D.
Internal medicine trainees from Ireland have a unique opportunity to learn about the Mayo Model of Care through a six-month visiting resident program with the National University of Ireland, Galway (NUIG). Each January and July, two residents arrive in Rochester for the program.
The relationship between Mayo Clinic and NUIG is rooted in Timothy O’Brien, M.D. (ENDO ’93), professor of medicine and director of REMEDI (Regenerative Medicine Institute); dean of the College of Medicine, Nursing and Health Sciences, NUIG; and consultant endocrinologist at Galway University Hospitals. Dr. O’Brien, who was on staff at Mayo Clinic for six years, collaborated with former director of the Mayo Clinic internal medicine residency program Joseph Kolars, M.D. (GI ’99) (now senior associate dean for education and global initiatives at the University of Michigan Medical School), and his successor, Furman McDonald, M.D. (MMS ’97, I ’00, CMR ’01), Division of Hospital Internal Medicine at Mayo Clinic, to develop and nurture the program. Amy Oxentenko, M.D. (I ’01, CMR ’02, GI ’05), Division of Gastroenterology and Hepatology, oversees the exchange today as director of Mayo Clinic’s internal medicine residency program.

Seán Dinneen, M.D. (I ’91, ENDO ’94), head of the School of Medicine at NUIG and an endocrinologist at Galway University Hospitals, says the visiting resident exchange program positions are highly sought after.

“The cream of the crop compete for this visiting residency program,” says Dr. Dinneen, who was on staff at Mayo Clinic for five years. “Mayo has always emphasized the importance of time at the bedside, which resonates with Irish medical graduates for whom clinical skills and acumen are very important. Irish physicians who travel to Mayo are very aware of maintaining a tradition of excellence, which spurs us to achieve at the highest possible level.”

Mayo Clinic Alumni profiles several physicians who participated in the visiting resident program. >>

Irish physicians who travel to Mayo are very aware of maintaining a tradition of excellence, which spurs us to achieve at the highest possible level.”

–Seán Dinneen, M.D.
Eoin Flanagan, M.B., B.Ch.
(I ’09, N ’12, N-MS ’13, N-AI ’14, N-BN ’15)

Dr. Flanagan was a visiting resident in 2007 and returned to Mayo Clinic a year later to complete a residency in neurology. He is a fellow in behavioral neurology and will join the staff in July 2015.

“In Ireland, we focus on clinical skills, but we don’t have as many resources as are available at Mayo Clinic, including research opportunities and quality measures,” says Dr. Flanagan, who is from Dublin. “There’s great satisfaction in getting patient investigations performed quickly, which leads to more timely diagnoses. I was pleasantly surprised by the team approach at Mayo. If there’s a problem, you can page a world expert and get answers; such close collaboration ensures patients get the best care for the problem at hand. Medicine in Ireland isn’t organized as well to facilitate that teamwork.

“With the excellent clinical training we receive in Ireland and strong work ethic, the Irish have done well at Mayo over the years. This has led to an openness to recruiting Irish staff to stay on at Mayo. The six-month visiting resident program provided me a great opportunity to start a career at Mayo, and I was determined not to let that opportunity slip by. With some hard work and thanks to the faith put in me by the neurology leadership, I am delighted it has worked out.”

Dr. Flanagan says the Irish community in Rochester welcomes new Irish recruits, helping to make the transition to life in the United States seamless. “I was especially lucky to have two consultant neurologists at Mayo who are originally from Ireland to help guide and mentor me through my neurology training — Dr. Sean Pittock [N ’02, I-1 ’03, N-MS ’04] and Dr. Andrew McKeon [MD ’07, N-AI ’09],” he says.

Derek O’Keeffe, M.B., B.Ch., Ph.D.
(ENO ’15)

Dr. O’Keeffe completed the exchange program in 2012 and was offered a clinical fellowship in endocrinology at Mayo Clinic.

A native of Limerick, Ireland, Dr. O’Keeffe has an undergraduate degree in electronic engineering, a master’s degree in computer engineering and a Ph.D. in biomedical engineering from the University of Limerick. He completed a postdoctoral Fulbright fellowship at Harvard University.

Dr. O’Brien encouraged him to combine the study of medicine and engineering at NUIG and continue the journey at Mayo Clinic. “Mayo Clinic is a fertile place for people with imagination and an interest in clinical innovation,” says Dr. O’Keeffe.

The six-month visiting resident program provided me a great opportunity to start a career at Mayo, and I was determined not to let that opportunity slip by.”

–Eoin Flanagan, M.B., B.Ch.
During his fellowship, he has continued biomedical research and was awarded a Center for Innovation (CFI) technology grant with Mayo Clinic endocrinologist Yogish Kudva, M.B.B.S. (I ’95, ENDO ’98). “This allowed us to develop a remote-access diabetes care platform,” says Dr. O’Keeffe. “A spin-off from this research was the development of the necessary software architecture and algorithms for big data analysis from the diabetes technology.

“Mayo Clinic has a unique spirit. It is a very collegial ecosystem and, therefore, everyone enjoys working here. It seamlessly integrates patient care, education and research.”

Dr. O’Keeffe points out the importance of the Mayo-Galway resident exchange program. “Institutions grow and become stronger when they cross-pollinate,” he says.

Dr. O’Keeffe will return to Ireland in June to complete his European endocrine clinical training and will continue his research in collaboration with his Mayo Clinic colleagues.

**Alan Sugrue, M.B., B.Ch. (I ’17)**

Dr. Sugrue completed the residency exchange in 2013. During his Irish residency, he completed a master’s degree in translational clinical science and cardiology at University College London and received an Irish Cardiology Young Investigator of the Year (2013) award. He returned to Mayo Clinic in 2014 to complete an internal medicine residency and plans to pursue a cardiology fellowship.

“Mayo is a prestigious institution, and I am grateful to be here and to work with world leaders in a different culture and health care system,” he says. “While there are no doubts about Mayo’s world-class facilities, it was the people who work here, the outstanding work environment, and the ability to develop and perform research that attracted me to return.

“Coming to Mayo has given me endless opportunities to grow, learn and improve my research methods and clinical practice. I want to continue to grow and develop as a physician and researcher at Mayo Clinic and, possibly in 15 or so years, take this solid foundation back to Ireland to stimulate and encourage the next generation of young doctors.”

I want to continue to grow and develop as a physician and researcher at Mayo Clinic and, possibly in 15 or so years, take this solid foundation back to Ireland to stimulate and encourage the next generation of young doctors.”

– Alan Sugrue, M.B., B.Ch.
Technology is ready for the marketplace,” says Gregory Gores, M.D. (GI ’85), the Mr. and Mrs. Ronald F. Kinney Executive Dean for Research honoring Ronald F. Kinney, Jr., and Reuben R. Eisenberg Professor at Mayo Clinic. “In the United States, this stage is expensive and difficult to fund. We are providing the technologies, and Enterprise Ireland the funding. Together, we are advancing technology that has a high potential to make a difference in patient care and alleviate the burdens of disease.”

Development of a device to treat atrial fibrillation is already underway at NUIG. The device was developed by Samuel Asirvatham, M.D. (CV-EP ’00), a cardiac electrophysiologist at Mayo Clinic. The plan calls for NUIG to conduct the preclinical work necessary to support human clinical trials, validate the market and reimbursement model for the device, and support the exploration of the commercial potential of the technology in Ireland.

“This deal will seed as many as 10 ‘spin-out’ companies in Ireland while bringing advanced medical technologies to patients and providing a revenue stream back to Mayo Clinic to enhance its mission,” says Keith O’Neill, Ph.D., director of lifesciences commercialisation, Enterprise Ireland. “We look forward to working with Mayo Clinic to create new companies and jobs around these world-class technologies.”

National University of Ireland memorandum of understanding

In August 2014, Mayo Clinic signed a memorandum of understanding with the National University of Ireland, Galway (NUIG) to pave the way for joint clinical trials using regenerative therapies. Specifically, the Mayo Clinic Center for Regenerative Medicine and NUIG’s Regenerative Medicine Institute (REMEDI) and the Network of Excellence for Functional Biomaterials will focus on adult stem cell therapy, gene therapy, biomaterials and biomedical engineering.

The U.S. Food and Drug Administration and European Medicines Agency are attempting to streamline and facilitate introduction of new therapies on both sides of the Atlantic Ocean.

“Sharing experience through international collaborations fosters advances in this emerging field of science of medicine and facilitates more rapid introduction of therapies for patients,” says Andre Terzic, M.D., Ph.D. (CV ’92), the Michael S. and Mary Sue Shannon Family Director, Mayo Clinic Center for Regenerative Medicine and Marriott Family Professor of Cardiovascular Research.◆
The Mayo Clinic Alumni Association marks its 100th anniversary in 2015. Each of the four issues of *Mayo Clinic Alumni* magazine in 2015 will include special content about the Alumni Association, one quarter-century at a time.

This issue focuses on the early years of Mayo Clinic, when the Alumni Association was established in a time of great change in medical practice and education.
Mayo Clinic pioneers had great aspirations for the Association of Resident and Ex-Resident Physicians of the Mayo Clinic (now the Mayo Clinic Alumni Association).

In 1921 at the six-year-old Alumni Association’s annual banquet, Charles H. Mayo, M.D., shared his thoughts about the group’s benefits for members and for medicine:

Associations of this character are very useful. It means the grouping together of men who are friends, who have had the same opportunities, and the same keen incentives to stimulate them in their field of work. In meeting here every year, the stimulus and the incentive are renewed in the interchange of experiences and ideals. And each year as time ripens your judgment and increases the membership of the Association the broader, better work spreads into broader and more distant fields.

Already by that time, Mayo Clinic had more than two decades of “grouping together of men” in the exchange of experiences and ideals. Physicians flocked to Rochester from around the world to learn, watch surgical procedures and share their observations.

1890s:
Physicians began traveling to Rochester to observe the Mayo brothers perform surgery.
Chief among the pioneers and the force behind the Alumni Association was Harold Foss, M.D., founding physician of Geisinger Medical Center in Danville, Pennsylvania. A 1968 Mayo Alumnus magazine posthumous tribute to Dr. Foss — the first president of the Alumni Association — referred to him as the father of the Mayo Clinic Alumni Association and “a Doctor Will kind of man,” who patterned his professional life and that of his institution on the example of his former teacher and friend — the elder Mayo brother.

Dr. Foss, a fellow (resident) in surgery in 1915, proposed the formation of an association comprised of members of the Mayo Clinic staff and physicians who had served at least one year in Rochester and now practiced in other parts of the country.

A committee that included Dr. Foss, Egerton Crispin, M.D., Arch Logan, M.D., Robert Mussey, M.D., and Albert Miller, M.D., drafted a constitution for the Association of Resident and Ex-Resident Physicians of the Mayo Clinic. The chief purpose of the group was “to establish a closer and more definite social and scientific relationship between these individuals and the Clinic.”

1906: The International Surgeons Club was formed.

1911: Mayo Clinic began having surgical interns for yearlong or longer stints and established formal specialty training programs at the instigation of Henry Plummer, M.D.
In 1919, Dr. Foss, then practicing in Danville, said in his first presidential address:

More than seventy-five men have worked in the Mayo Clinic and have left to practice their profession in various parts of the world. It now seems fitting that these men should bind themselves together into an association. … Is it presumptuous to expect that from these students of today will come some of the great leaders of tomorrow … may not some of those who are to direct the thoughts of American medicine in the future have as their proudest boast that they had been pupils of the Mayos?

It is our hope that this Association will in time become of national importance and a power in the advancement of American medicine. Its obligations are bound to be tremendous for as loyal alumni the duty falls on us of carrying accurately into every district of the land the teachings of the Clinic from which some of the greatest developments in American medicine and surgery are coming.

This association has been formed for the loyal alumnus, the man (or woman) who appreciates the honor of having been a Mayo Clinic man, and who consecrates his life for the principal for which it stands, the man who has acquired the ideals of the Clinic, and who feels a deep sense of gratitude to those who have been his teachers, and whom he has to thank for much of the success that is to come to him in life.

1915: Harold Foss, M.D., proposed the formation of an association comprised of members of the Mayo Clinic staff and physicians who had served at least one year in Rochester and now practiced in other parts of the country. The association was incorporated with the state of Minnesota.

1915: Mayo Clinic formed a new entity, the Mayo Foundation for Medical Education and Research to facilitate the legalities necessary for the university affiliation, and donated $1.5 million to the university.

1911: University of Minnesota President George Vincent visited Mayo Clinic, learned about the postgraduate programs and pursued an association between the two institutions.

1911: John Pemberton, M.D., Donald Balfour, M.D., James Masson, M.D., Stuart Harrington, M.D., Melvin Henderson, M.D., George Vincent, M.D., Harold Foss, M.D.
MAYO BROTHERS’ HANDS-ON INVOLVEMENT IN NEW GROUP

Correspondence between Dr. Foss and William J. Mayo, M.D., as well as Dr. Will’s missives to others, convey the Mayo brothers’ hands-on involvement and keen interest in Dr. Foss’s fledgling group:

I think the organization is a splendid thing; I am very happy over it, and anything I can do at any time to promote its interests will be most cheerfully done.

Dr. Will Mayo to Dr. Foss, Feb. 22, 1917

I am very glad you so heartily endorse this movement. I feel that the organization is a most excellent thing for the Clinic, as well as the Alumni, and, it is my hope that we will rapidly develop a spirit of enthusiasm and loyalty … which will be as great, if not greater than, that of any University Alumni body in the country.

Dr. Foss to Dr. Will Mayo, Feb. 26, 1917

I want to tell you what a satisfaction your interest in the Alumni Association is to Dr. Charlie and myself and other members of the staff. We will try in the future as in the past to make it something all the boys will be proud of. I have been wondering whether it would not be a good plan to form a committee of alumni as an advisory board, to whom each year our problems could be presented for their advice. We should derive great benefit from the men who have the future so much at heart.

Dr. Will Mayo to Dr. Foss, June 1, 1922

Our president [Alumni Association president Clyde Roeder, M.D.] is ill, and unable to carry on the presidential work connected with the coming meeting, so that makes us all responsible to see that this meeting will be the best one we ever have had. Let us look up our interesting work, not the unusual or the unnatural, but the interesting and instructive work, and present it at this meeting. Always remember that to have our “old boys” come back is, to us, like having our families come home; we will be here to welcome you.

Dr. Will Mayo to members of the Association of Resident and Ex-Resident Physicians, March 15, 1933

1917: Fellows (residents) of Mayo Clinic became enrolled in the Graduate School of the University of Minnesota; the first graduate degrees were awarded to four Mayo fellows.

1917: Dr. Will spoke before the Minnesota state legislature to protest a bill to dissolve the agreement between the university and Mayo Clinic. Afterward, the legislature unanimously passed the affiliation bill.

1917: The first meetings of the alumni association were on Sept. 4 and 5, 1917. Elected officers were Harold Foss, M.D., president; Donald Balfour, M.D., vice president; William Carroll, M.D., secretary; Arthur Sanford, M.D., treasurer. Members of the Board of Governors were E. Starr Judd, M.D., William Braasch, M.D., and Otis Lamson, M.D.
ALUMNI ROLE IN DISSEMINATING MAYO MODEL OF CARE

Dr. Charlie mentioned the Alumni Association as an impetus for spreading better work into broader and more distant fields. Certainly, Dr. Foss and other early leaders of the group were influential in disseminating the Mayo Model of Care in medical institutions across the country. Alumni Association presidents Dr. Foss, Donald Guthrie, M.D., and William Estes Jr., M.D. — along with the Mayo brothers — were fellows of the American College of Surgeons. Dr. Guthrie started the Robert Packer Hospital (today, the Guthrie Robert Packer Hospital) in Sayre, Pennsylvania. Dr. Estes was appointed medical advisor to Lehigh University and chief of staff of St. Luke’s Hospital — both in Bethlehem, Pennsylvania. Another association president, Stanley Seeger, M.D., also a member of the American College of Surgeons, became chief of staff at Columbia Hospital in Milwaukee (today, Columbia St. Mary’s).

Outreach and fellowship by early Mayo staff members and trainees ensured that the organization’s reach extended beyond institutions led by its alumni. Appreciation and exchange of ideas and talent is evident in the personal and highly personable correspondence between Mayo pioneers and leaders of major medical centers:

1918: The Mayo Alumni Fund was started with a gift of $50 from Harold Foss, M.D. The fund was intended to assist projects not included in the general fund, including support of medical student clerkships and Mayo Medical School students. The Judd-Plummer Fund and Donald C. Balfour Funds were amalgamated into the Mayo Alumni Fund of the Alumni Association.
It has come to the attention of the members of the Medical Graduate Committee of the Foundation that you will be in St. Paul for the meeting of the Inter-State Post-Graduate Medical Association next month. The members of the Committee would like very much to invite you to visit … during your stay in Minnesota, and if convenient give a talk to the staff of the Clinic and fellows of the Foundation on some subject of your selection. You have many friends among the staff of the Clinic who would like very much to see you and hear of your latest ideas, and the Fellows would regard it a very unusual opportunity.

Louis Wilson, M.D., to George Crile, M.D., co-founder, Cleveland Clinic, Sept. 29, 1936

I am writing you concerning a Dr. Samuel Standard of New York, who is at present in Rochester. Dr. Standard is connected with the Surgical Service of Bellevue under Dr. Wright. Dr. Wright is considering the establishment of a Gastro-intestinal Service at Bellevue, and Dr. Standard is at Rochester to see the general routine and methods of investigation of medical and surgical co-operation in gastro-intestinal diseases. [Dr. Standard] is just the kind of a man to develop a new department, which with aids and suggestions from you he would bring to a successful issue.

A. A. Berg, M.D., chief of surgery, The Mount Sinai Hospital, New York City, to Donald Balfour, M.D., Sept. 22, 1937

I wish to write this note to express to you my very great appreciation for your wonderful kindness and helpfulness to me on my recent visit to Rochester. … We feel deeply grateful that there is such a place as the Mayo Clinic. Certainly it has been a wonderful friend to me during the past thirty-odd years.

H. R. Shands, M.D., founder, Shands Clinic (today, Baptist Health System), Jackson, Mississippi, to Dr. Balfour, Aug. 31, 1939
By the 1930s, individuals trained at Mayo Clinic were located in 48 states and 24 countries around the world. Alumni Association members’ medical degrees came from 129 universities around the world. Forty-five women were among these pioneers, including the following:

**Winifred Ashby, Ph.D.** Born 1879 in London; received Ph.D. from University of Minnesota in 1921; was at Mayo Clinic in various positions with laboratory medicine, 1917–1924, and was the first person to measure accurately the life span of erythrocytes; left to be a medical bacteriologist at St. Elizabeth’s Hospital in Washington, D.C.; did research work with the Bureau of Health in Manila, Philippines; member, American Immunological Society.

**Minnie Burdon, M.D.** Born 1878; received medical degree from the University of Oregon, 1908; practiced in Seattle, 1909–1916; was a contract surgeon for the U.S. Armed Forces at Fort Douglas, Utah, 1918–1919, assigned to rehabilitate soldiers from the front; trained at Mayo Clinic for a year before returning to Seattle to continue as a gynecologic surgeon; member, American Medical Association, Medical Women’s National Association; fellow, American College of Surgeons.
Louise Kappes, M.D. Born 1895 in Chicago; received medical degree from the University of Michigan, 1924; entered Mayo Clinic as a fellow in pediatrics, 1925; in 1927 left to practice pediatrics and be assistant medical advisor to women at Northwestern University; assistant physician at the Children’s Memorial Hospital, Chicago; fellow, American Medical Association; diplomate, National Board of Medical Examiners.

Georgine Luden, M.D., Ph.D. Born 1875 in Amsterdam; studied in England and Germany; received medical degree in Germany; came to Mayo Clinic as a visiting physician during a trip to the chief medical centers of the United States, 1912–1913; became a volunteer worker in cancer research at Mayo Clinic, 1914; remained in a variety of positions culminating in associate in cancer research in 1923; received Ph.D. at the University of Minnesota in 1920; was widely published; member, American Medical Association, American Association for Cancer Research, Medical Women’s International Association and American Association for the Advancement of Science.

1929: Annual dues of $2 were introduced to members of the Mayo Clinic Alumni Association.

1929: William Estes Jr., M.D. President 1927–1928

1929: Robert Sanders, M.D. President 1929–1930

1929: Egerton Crispin, M.D. President 1931–1932

1929: James Scarborough, M.D. President 1930–1931

1929: Gilbert Thomas, M.D. President 1928–1929

1929: Gilbert Thomas, M.D. President 1928–1929
CONCLUDING THE FIRST QUARTER-CENTURY

Addressing the assembled alumni at their meeting of 1930, William J. Mayo, M.D., reflected on the state of medical education and research, the growth of the clinic and the Alumni Association in his remarks.

Away back in the ’90s my brother and I talked over these educational problems. We had no thought of being able to establish what might be called a clearing house in medicine, but we did hope that it might be possible to develop a group … who could gather together medical knowledge, at least the most important facts, and pass them on to all who desired to learn. Also, we wondered whether it would not be possible to establish relationships with a group of bright, keen young men whereby they not only could learn what we knew, but could develop researches which would add to the sum total of medical knowledge. Out of this tentative plan has grown the Clinic and the Foundation. Its value lies not in what our faithful colleagues and we have done, not in the material evidences of growth, but in the things of the spirit, the desire to develop a group … who would be more highly trained than ourselves, to take care of the sick. As the Clinic has grown, it has been the desire of us all to further not only investigations in pure science, but those humane investigations which will benefit the unfortunate who have undergone the trial of sickness. ...

We have believed that the men who have been taught in the Clinic … would carry this concept of medicine to an increasing number … and by their personal influence, induce them to do likewise; that thus, indefinitely as medicine progressed, would be maintained a group of scholars, teachers … who worked not for themselves but for the people whom they served. …

I think, therefore, that you can see that the yearly return of the fellows who have worked with us and who show by their effort and their lives the same professional concept which we hold sacred, is a source of pride, of satisfaction to us such as nothing else could give.

1938: The Alumni Association established the Judd-Plummer Memorial Fund to honor E. Starr Judd, M.D., and Henry Plummer, M.D. An annual lectureship by an outstanding physician, surgeon, scientist or distinguished alumni was paid for by the fund beginning in 1941.

John Bowler, M.D. President 1933-1934

Clyde Roeder, M.D. President 1932-1933

Dan Mellen, M.D. President 1934-1935

William Finney Jr., M.D. President 1937

Stanley Seeger, M.D. President 1936
The Mayo brothers died within months of each other in 1939. The alumni meeting of 1940 was widely covered in the Post Bulletin of Rochester on Oct. 24, 1940. Multiple pages led with the title “Memory of Mayo Brothers Revered at Foundation Alumni Program” and “Impressive Ceremony Conducted.” As a memorial, the association commissioned and unveiled during the meeting the life-size portrait of the Mayo brothers, which still hangs in Balfour Hall at the Mayo Foundation House.

As the first quarter-century of the Mayo Clinic Alumni Association drew to a close, the Mayo brothers’ legacy and their challenge to “add to the sum total of medical knowledge” and “carry this concept of medicine to an increasing number” passed to the next generation of staff and alumni of Mayo Clinic.
Throughout its history, Mayo Clinic has used research to improve patient care. This new knowledge has contributed to significant improvement in health, even for those who may never seek care at Mayo Clinic. However, at a national level, many are concerned that not all people have fully benefitted from this kind of research because not all populations fully participate in research.

“In the past, we’ve used data from majority populations to create programs and treatments for minority groups,” says Carmen Radecki Breitkopf, Ph.D. (HSR ’10), associate professor of Health Services Research at Mayo Clinic in Rochester. “But the results of those efforts show us that when we design studies, we need to include the populations in the research that the research will ultimately affect, including underrepresented minorities. Mayo Clinic wants to be a leader in understanding and mitigating health disparities. The newly established Office of Health Disparities Research is reflective of that goal.”

Today, diverse populations comprise 37 percent of the U.S. population and are expected to increase to 54 percent by 2050. This projected increase in minority numbers emphasizes the need to address and eliminate health disparities now to ensure quality health care for all in the future.

A springboard for extramural funding

The Office of Health Disparities Research (OHDR) was established to provide resources to investigators as they address health disparities in their research. The OHDR works with other groups at Mayo Clinic, including the Office of Diversity and Inclusion and Office of Health Equities and Inclusion, aimed at addressing health disparities.
disparities in communities and clinical practice. The OHDR provides pilot awards and supplemental awards for Mayo Clinic investigators interested in exploring health disparities in their research. Projects must involve strategies to eliminate health disparities, and ensure that research subjects and patients reflect diverse communities.

Pilot awards aim to generate data that will allow investigators to apply for grants. The pilot award program is in its fourth year and has provided funding to 18 researchers. Both award programs have resulted in extramural grant submissions, high grant scores, funding and publications.

One of the missions of the OHDR is to build stronger science-based research involving diverse communities, including collaboration with communities of color and community-based organizations, to connect with medically underserved populations.

Sharonne Hayes, M.D. (I’86, CV’90), Division of Cardiovascular Diseases and director, Mayo Clinic Office of Diversity and Inclusion, says: “Health care disparities among minority populations should be a concern for everyone in the country. Unfortunately, the quality of medical care can still depend on your race, your gender or your ZIP code.”

Heart disease, cancer and diabetes are major causes of death among minority populations, but these groups have the lowest representation in clinical research projects aimed at preventing and treating those diseases.

Historical barriers to research participation include lack of trust, mailings that don’t reach people who move frequently, scarcity of research opportunity news in mainstream media and not having established relationships with physicians who could recommend research participation.

“We’re working hard to reach out to organizations and partners to understand and address health disparities research barriers,” says Dr. Hayes. “When the infrastructure is lacking, we’re trying to create it, piece by piece, to reach and involve these communities. This requires out-of-the-box thinking, nontraditional ways of relationship-building and long-term collaboration.”

Dr. Hayes describes an OHDR-supported project of LaPrincess Brewer, M.D. (CV’16), a fellow in the Division of Cardiovascular Diseases at Mayo Clinic in Rochester. Dr. Brewer has formed relationships with several churches in Rochester with African-American

**What is a health disparity?**

A health disparity occurs when members of one population group do not enjoy the same health status of other groups. For example, they may have a higher incidence of a certain disease. Disparities are determined and measured by three health statistics — incidence, mortality and survival rate. Health disparities are most often identified along racial and ethnic lines but also may involve biological, environmental, behavioral and socioeconomic factors.
congregations. She worked with the congregations to identify their greatest needs and is providing health education and exercise classes to change behavior.

“When people are ‘hidden’ from the traditional ways we reach them in health care and medical research, we must go to them,” says Dr. Hayes. “Their health and well-being matter because they’re part of our communities. These efforts improve everyone’s quality of life.

“Mayo’s mission is providing the best care to the right people at the right time, which includes getting better at delivering health care to different populations, including different gender, sexual orientation, disability status and age. We must also understand a community’s priorities before we engage in research with them. This is a very exciting and rewarding endeavor that will benefit many.”

Gloria Petersen, Ph.D., Purvis and Roberta Tabor Professor and co-director of the OHDR, says: “I see the Office of Health Disparities Research as an open-door, one-stop shop for health disparity researchers. This office represents the face of the research shield of Mayo Clinic, and it functions at the highest level of our organization.

“It’s very clear that there are huge gaps in access to care, survival rates, etc., among certain ethnic groups. We want to identify these issues and figure out ways to make the gaps smaller. The NIH [National Institutes of Health] has mandated to include health disparities research in all aspects of disease science. Mayo Clinic is well positioned to take advantage of what the NIH is...
offering. We’ve recruited excellent talent and have an opportunity to expand people’s thinking.”

David Warner, M.D., co-director of the OHDR, says: “Many providers have biases they may not even be aware of. We need to make sure we are providing care to people of all backgrounds and demonstrate that we care about them, their communities and their health. We want to make sure the research we do applies to the maximum number of people and represents all segments of our population.”

A look at two projects

Understanding African-Americans’ attitudes about medical research

Mayo Clinic has formed a relationship with The Links, Incorporated, a national volunteer service organization whose members are 12,000 professional African-American women. The relationship developed after a grateful Mayo patient and Links member asked Mayo Clinic to join the South Chicago chapter of The Links, Incorporated for a health education event. This led to collaboration with Links physicians and scientists to create a survey to assess barriers to research participation among African-American women.

Collaboration laid the groundwork for ongoing projects including educational outreach, critical research, and programs to prepare and encourage minorities to choose medical and health careers:

• 2013 memorandum of understanding between The Links and Mayo Clinic outlining initiatives including increasing health awareness in the African-American community and facilitating scientific research
• Educational forums by Mayo Clinic physicians for Links chapters in Chicago and Atlanta
• “You Can Make a Difference” educational video about the important role of African-Americans in medical research
• Survey of Links members with research findings presented at medical conferences and published in the Journal of Women’s Health

“Our member survey indicated the majority of participants are willing to take part in medical research, but few are being asked,” says Dr. Radecki Breitkopf. “There’s a long-standing distrust of all scientists and research studies by many in the African-American community — a reaction to unethical experiments in the last century. For decades, many African-Americans did not take part in clinical studies, limiting the data on how diseases among blacks could be better diagnosed and treated.”

Moving ahead, the collaboration will examine ways to inform African-American women about the benefits of medical research to community health, the ethics and risks of research participation, and the need for healthy research volunteers as well as those with conditions being studied.

“Links members are educated opinion leaders in their communities,” says Dr. Radecki Breitkopf. “We are seeking to understand their points of view about medical research and increase their knowledge about it and,

I see the Office of Health Disparities Research as an open-door, one-stop shop for health disparity researchers.” –Gloria Petersen, Ph.D.
thereby, enlist their help in learning how to better reach their communities at large, especially through women.

“The more African-Americans, both women and men, who participate in medical research, the better informed their physicians will be in treating a wide range of conditions. Instead of extrapolating findings from other populations, we’ll have more confidence in diagnostic and treatment recommendations.”

**NIH grant propels research**

Dr. Radecki Breitkopf and the Links’ Central Area Health and Human Services chair, Karen Patricia Williams, Ph.D., associate professor of obstetrics, gynecology and reproductive biology at Michigan State University, are co-principal investigators on a newly awarded NIH R21 exploratory/developmental research grant.

The two-year grant will develop and test an educational Web-based program about types of research, including clinical trials, biobanks and studies using medical records. It also will address ethical protections for human subjects participating in research. “We’ll begin with focus groups to help us design the educational modules. Then Links chapters will evaluate them,” says Dr. Radecki Breitkopf. “As we progress, Links chapters will decide if they want to use the program with their communities. In this way, Links members will be ambassadors to reach larger audiences.”

The duo will gauge success, in part, by whether Links members sign up for ResearchMatch, a registry that links people with research studies and researchers with potential participants. “In the survey study we completed, 81 Links members registered on ResearchMatch,” says Dr. Radecki Breitkopf. “We’re aiming toward a culture change in which we can regain the trust of this minority population which historically hasn’t been fairly treated in research. We want them to understand that by participating, they can make outcomes more relevant to their communities.

“It’s rare to get a grant funded on the first try, and our application was ranked in the 1st percentile. Health disparities research is a high priority for the NIH, and they have expressed a desire to support studies that help address this problem. Needless to say, we’re excited about the potential to develop a Web-based tool to share information about research participation with Links members and their communities. And I’m grateful to the Office of Health Disparities Research for funding all of the work that ultimately led to the NIH grant award. Research costs money, and the OHDR funding truly made the NIH grant application possible by providing resources to collect preliminary data.”

Drs. Hayes and Radecki Breitkopf echo a lesson learned in working with vulnerable populations and

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**African-American women and health disparities**

According to the Centers for Disease Control and Prevention, African-American women:

- Are more likely to die of breast cancer than other women
- Have cancers that grow faster and are harder to treat and are less likely to get prompt follow-up care when their mammogram shows something that is not normal
- Are less likely than white women to survive five years after a breast cancer diagnosis
- Are at least 50 percent more likely to die of heart disease or stroke prematurely than white women

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Karen Patricia Williams, Ph.D.
minorities. “You have to show up and be present,” says Dr. Radecki Breitkopf. “You can’t sit in your office and email because it’s more efficient. You have to shake the hands of your potential partners and look them in the eyes. Having a physical presence is important.”

Learning about Native American men’s specialty care follow-up practices

Jon Tilburt, M.D., has been learning from and interacting with Native American communities on topics related to PSA testing and men’s health.

“I grew up in the Midwest but was mostly uninformed about health care issues in Native American communities,” says Dr. Tilburt. “When I came to Mayo Clinic in 2007, I was introduced to people working with Native American communities and thought it would be an interesting research area. A CDC (Centers for Disease Control and Prevention) grant opportunity arose, and I began to develop relationships.”

Dr. Tilburt’s CDC grant project studied follow-up patterns in Native American men who have had elevated PSA test results. As many as half of the men had no documented follow-up care for six to 12 months.

“For specialty care, they have to go off of the reservation to non-Native American providers,” says Dr. Tilburt. “There is great variation in how respected patients feel in that environment. Or they must travel great distances from rural areas to see specialists and, therefore, delay care. We want to partner with the tribal health directors to identify what is changeable, including gaps in the care process, and lack of communication and coordination among primary care and specialty providers.

“The approval processes for research in tribal communities is a huge learning curve, and we’ve had to adjust our expectations and time frames accordingly.”

Through an NIH grant, Dr. Tilburt is developing tools to help men of different ethnic backgrounds make better decisions about prostate cancer.

“Men in minority communities are not always provided with the information they want and need to make choices about prostate cancer care,” says Dr. Tilburt. “Decision aids, including a tablet-based tool and a website, can be used before and during clinical conversations to inform patients about disease severity, treatment options and quality-of-life implications.”

Dr. Tilburt, whose research was funded in part by the OHDR, says, “The Office of Health Disparities Research is a place for like-minded people who want to explore culturally competent care. I’ve learned so much, and the degree of generosity afforded to me has been an unexpected honor.”

We want to partner with the tribal health directors to identify what is changeable, including gaps in the care process, and lack of communication and coordination among primary care and specialty providers.” —Jon Tilburt, M.D.
Mayowood, home to three generations of the Mayo family, is being restored. This multiyear project will ensure that Mayowood continues to be a historical resource and inviting facility for Mayo Clinic and public events.

A collaboration among Mayo Clinic, the History Center of Olmsted County, Friends of Mayowood and Rochester Master Gardeners commenced in 2012. Initiatives include:

• Structural support
• Stucco repair
• Door, window and patio restoration
• Addition with elevator for handicap accessibility
• Handicap-accessible restroom renovation
• Driveway replacement
• Handicap parking addition
• Electrical system renovation
• Painting
• Landscaping over 10 acres
• Large-capacity septic system installation
• Conservation of family heirlooms
Much of the first floor work is complete. Next steps will address the kitchen, second-floor bedroom level, upper-level ballroom and rooftop observatory.

“Restoration is vital in order to make sure that future generations continue to see and understand the importance of Mayo’s unique heritage,” says Chuck Potter, manager of Mayo’s historic properties. “We learn so much about Mayo’s founders and their pastimes and interests from their homes.”

**The beginnings**

In 1900, Charles H. Mayo, M.D. (Dr. Charlie), and his wife, Edith Graham Mayo, purchased property southwest of Rochester where their home, Mayowood, was built. They spent $60,000 for construction of what became a 38-room, 23,000-square-foot home on a 3,000-acre rural estate. The home is filled with art and artifacts from the family’s worldwide travels.

Mayowood was occupied by the family in 1911 and quickly became a center for hospitality for visiting physicians and distinguished visitors to Rochester.

Subsequent remodeling adapted the home to meet the family’s evolving needs when Dr. Charlie and Edith’s son, Charles W. Mayo, M.D. (Chuck) (S ’31), and his wife, Alice, took occupancy in 1939 and, then, when Dr. Chuck and Alice’s grown son, Charles H. Mayo II, M.D. (S ’64), and his wife, Carrie, and their young children moved into the house.

In 1965, Dr. Chuck and Alice Mayo donated Mayowood and 10 acres of surrounding land with various outbuildings to the History Center of Olmsted County, making Mayowood available for public tours. Under the current collaboration, the History Center serves as steward of the home’s furnishings, and Mayo Clinic manages the grounds and physical structure. >>
About Mayowood

- The home is nestled on a wooded hillside overlooking a lake that was made when Dr. Charlie had the Zumbro River dammed to generate electricity for Mayowood.
- The library features wall panels adapted from the doors of Rochester’s Central School (site of the Mayo Building), which the Mayo brothers attended.
- Dr. Charlie used outdated glass X-ray plates from Mayo Clinic in the greenhouse.
- Mayowood visitors included Helen Keller, presidents Franklin Roosevelt and Dwight Eisenhower, vice president Adlai Stevenson, the king and queen of Nepal, the queen mother of Egypt, King Saud of Saudi Arabia and Emperor Haile Selassie of Ethiopia.
- Mayowood included several farms, including a dairy that helped provide pasteurized milk for Rochester.
- A Historic Properties Advisory Council at Mayo Clinic is developing guidelines for the use of Mayowood. Per the agreement with the History Center of Olmsted County, the home is available for public tours 140 days a year and for public events 10 days a year.
Mayo’s historic properties

In addition to Mayowood, Mayo Clinic manages other residences that are associated with early leaders. These properties are reserved for institutional use:

- **Mayo Foundation House**: Former home of William J. Mayo, M.D., and his wife, Hattie Damon Mayo, which they donated to Mayo Foundation in 1938 as a meeting place “for the good of mankind.”

- **Foundation House Cottages**: Originally built for married members of the Mayo family household staff.

- **Damon House**: Dr. Will and Hattie Mayo’s retirement home.

- **Walters House**: On the same block as Foundation House, Damon House and the Cottages; former home of Dr. Will and Hattie Mayo’s youngest daughter, Phoebe, and her husband, Henry Waltman Walters, M.D. (I ’21, S ’27); the Walters donated their home to Mayo Foundation.

- **Wilson House**: Former residence of Louis Wilson, M.D., and his wife, Maud Mellish Wilson; on a bluff in northwest Rochester, currently the location of Assisi Heights, motherhouse of the Sisters of Saint Francis. ◆
Mentor helps protégé find the language of confidence

"I read music before I read any language," says Valerie Lemaine, M.D., (S ’10), who grew up in a French-speaking family in Canada and studied music in college. She abandoned music as a career option when she developed tendinitis in her elbow and wrist.

“I express myself with confidence when my fingers touch piano keys,” says Dr. Lemaine. “Surgery is similar — a manual way to accomplish things. And plastic surgery is an artistic surgical specialty.”

The ease with which she communicates musically doesn’t always translate to self-assurance outside of the operating room.

“I tend to be very matter of fact and introduce myself simply as a plastic surgeon of four years,” says Dr. Lemaine, Division of Plastic Surgery at Mayo Clinic in Rochester. “I’m aware that I have accomplished some notable things in my medical career. I often lack the self-assurance to tell people about them.” Indeed, Dr. Lemaine was voted among the 2014 Best Doctors by Minnesota Monthly magazine.

Dr. Lemaine has found a confidence mentor in Patricia Simmons, M.D. (PD ’80, PDE ’82), who recently retired as chair of the Division of Pediatric and Adolescent Gynecology at Mayo Clinic in Rochester. “Dr. Simmons champions others naturally, especially women,” says Dr. Lemaine. “She talks to others about me, which helps me note my value. If she believes you have potential, she helps you succeed and becomes your biggest fan.”

The two physicians have discovered a common interest in the arts. Dr. Lemaine has played piano since she was 4. She soars with confidence when she’s playing one of the Three Concert Studies (Liszt) or the Piano Concerto for the Left Hand (Ravel). She feels similar confidence in the operating room, when she’s reconstructing a breast for an adolescent patient with a congenital disorder. At a gathering at Dr. Simmons’ home, Dr. Lemaine discovered that her mentor had a grand piano, and Dr. Simmons discovered that her protégé is an accomplished pianist. When Dr. Simmons retired and sold her home, she contacted Dr. Lemaine to see if she was interested in the piano.

“I have a music room that had been empty for two years, waiting for a piano, so the timing was perfect,” says Dr. Lemaine. “I think about her every time I play.

“A really good mentor, I think, has had their success, feels fulfilled and wants to help others succeed. Dr. Simmons probably isn’t even aware of how much she teaches me just by being around her and watching her interact with others.”

Dr. Simmons probably isn’t even aware of how much she teaches me just by being around her and watching her interact with others.” –Valerie Lemaine, M.D.
Mayo Graduate School is all about advancing the science. The school began independently conferring master’s and Ph.D. degrees in 1989. Previously, degrees were granted through an affiliation with the University of Minnesota. Mayo Graduate School marked its 25th anniversary of training future leaders in biomedical research and education with an annual symposium featuring student research presentations and, for the first time, a day of invited speakers. Among them was 2013 Nobel Laureate Randy Schekman, Ph.D., professor of molecular and cell biology at the University of California, Berkeley, and select Mayo Graduate School alumni.

“There are two objects of medical education: To heal the sick, and to advance the science.” — Charles H. Mayo, M.D.

“Our world needs many more Ph.D. scientists, but these scientists don’t all have to be professors,” says Jim Maher III, Ph.D. (BIOC ‘95), dean, Mayo Graduate School, and professor of biochemistry and molecular biology, Mayo Clinic College of Medicine. “We chose alumni speakers, therefore, to demonstrate the successful leadership of prior graduates in a variety of careers.

“Randy Schekman was an ideal and inspiring guest because his work illustrates the key principle of history that the insights and breakthroughs that propel medicine most often come from curious scientists studying problems seemingly unrelated to human disease.”
Alumni speakers

Atta Behfar, M.D., Ph.D.
(MMS ’06, MPET ’06, I ’09, CI ’11, CV ’13)
- Mayo Clinic: Senior Associate Consultant, Division of Cardiovascular Diseases, Department of Internal Medicine; Assistant Professor of Medicine, Mayo Clinic College of Medicine; research focus on cardiovascular regeneration and novel therapies to prevent and cure chronic heart conditions
- Fellowship: Cardiology, Mayo School of Graduate Medical Education
- Residency: Internal Medicine, Mayo School of Graduate Medical Education
- Graduate: M.D.-Ph.D., Molecular Pharmacology and Experimental Therapeutics, Mayo Graduate School
- Undergraduate: Marquette University (Milwaukee)

“The project that has defined my life started in Mayo Graduate School. Their main mission was to help me succeed in my long-term goals. Mayo provided me with extraordinary support and allowed me to imagine and work with industry partners in Europe, leading to Mayo's initial journey in cardiac regeneration.”

Kim Butts Pauly, Ph.D.
(BPHY ’93, R-D ’94)
- Stanford University School of Medicine: Professor of Radiology; Co-director, Radiological Sciences Laboratory; Director, Center for Biomedical Imaging; research focus on magnetic resonance-guided focused ultrasound and magnetic resonance/ultrasound-based neuromodulation
- Postdoctoral Fellowship: Stanford University (Stanford, California)
- Graduate: Ph.D., Biomedical Engineering, Mayo Graduate School
- Undergraduate: Duke University (Durham, North Carolina)

“As a graduate student at Mayo, I learned the importance of having an outstanding adviser and forming good partnerships. It’s important to learn all you can about a specific research topic, observe the people around you and notice how they manage people and multiple projects, and spend time getting to know people and learning about their research. When you leave Mayo Clinic, you’ll have a C.V., experiences, references and the start of a network. These people will be important throughout your career.”

Eduardo Davila, Ph.D.
(IMM ’02, RHEU ’03, S ’05)
- University of Maryland School of Medicine: Associate Professor of Microbiology and Immunology; Tumor Immunology and Immunotherapy Program Leader, Greenebaum Cancer Center; research focus on developing novel T cell-based cancer therapies
- Postdoctoral Fellowship: University of Louisiana (Lafayette)
- Graduate: Ph.D., Immunology, Mayo Graduate School
- Undergraduate: New Mexico State University (Las Cruces)

“I consider my roots to be at Mayo. I was encouraged to flourish. At Mayo Graduate School, I was reminded that graduate student discoveries and insights influence how research is translated worldwide.”

Randy Schekman, Ph.D.
“Our world needs many more Ph.D. scientists, but these scientists don’t all have to be professors.”

– Jim Maher III, Ph.D.

Noah Gray, Ph.D.
(NSCI ’03, BIOC ’03)
• Nature: Senior Neuroscience Editor
• Postdoctoral Training: Cold Spring Harbor Laboratory (New York), Howard Hughes Medical Institute Janelia Research Campus (Ashburn, Virginia)
• Graduate: Ph.D., Molecular Neuroscience, Mayo Graduate School
• Undergraduate: University of Notre Dame (Notre Dame, Indiana)

“Mayo Graduate School is a special place. It provides you with support to pursue your scientific interest. Mayo is always there for you. You don’t have to teach, and you can focus and do science.”

James Hagstrom, Ph.D.
(MBIO ’90)
• Mirus Bio, LLC: President
• Mirus Bio Corporation: Founder, a world leader in nonviral nucleic acid delivery
• Postdoctoral Fellowship:
  • University of Wisconsin–Madison
  • Postdoctoral Fellowship: University of California–San Diego
  • Graduate: Ph.D., Molecular Biology, Mayo Graduate School
  • Undergraduate: University of Wisconsin–Eau Claire

“Attending Mayo Graduate School was a key decision point in my life. My thesis adviser, Eric Wieben, Ph.D. [BIOC ’83], gave me a copy of the textbook Genes II and told me to study it cover to cover. Studying androgen-related genes became my passion.”

James Patton, Ph.D.
(BIOC ’88, MBIO ’88)
• Vanderbilt University (Nashville, Tennessee): Stevenson Professor of Biological Sciences; Professor of Biochemistry; Director, Interdisciplinary Graduate Program; lab focus on the role of micro RNAs during early development and retina regeneration
• Postdoctoral Fellowship: Harvard Medical School (Boston)
• Graduate: Ph.D., Biochemistry and Molecular Biology, Mayo Graduate School
• Undergraduate: University of St. Thomas (St. Paul, Minnesota)

“I was a technician in a research lab at Saint Marys Hospital and knew nothing about science. My interest was sparked, and I enrolled in the Biochemistry and Molecular Biology Program at Mayo Graduate School. It was the most fun time of my life — I got to do science but didn’t have to raise funds.”

Mayo Clinic Alumni
Liewei Wang, M.D., Ph.D.  
(MPET ’03, PHARM ’03, MPET ’06)  
• Mayo Clinic: Associate Director, Pharmacogenomics Program, Center for Individualized Medicine; Co-PI, Mayo-NIH Pharmacogenetics Research Network; Professor of Pharmacology, Mayo Clinic College of Medicine; research focus on use of high throughput genomic technology joined with cell-based model systems and clinical translational studies to understand mechanisms of variation in drug response  
• Postdoctoral Research Fellowship: Mayo School of Graduate Medical Education  
• Graduate school: Ph. D., Molecular Pharmacology and Experimental Therapeutics, Mayo Graduate School  
• Residency: Hua Dong Hospital, Shanghai  
• Medical School: Fudan University, Shanghai  

“My research training at Mayo Graduate School taught me that collaborative teams have great value in science. Learning to lead teams and learning to communicate across scientific disciplines were two of the most important lessons from my training.”

The Mayo Graduate School annual symposium includes student research presentations.

About Mayo Graduate School

Training programs
1. Biochemistry and molecular biology  
2. Biomedical engineering and physiology  
3. Clinical and translational science  
4. Immunology  
5. Molecular pharmacology and experimental therapeutics  
6. Neurobiology of disease  
7. Virology and gene therapy

Students
• At Mayo Clinic in Rochester, Arizona and Florida  
• 175 in Ph.D. programs  
• 52 in M.D.-Ph.D. programs (Mayo Clinic Medical Scientist Program offered in collaboration with Mayo Medical School)  
• 94 master’s level students

Faculty
• More than 230 faculty members who serve as thesis mentors

mayo.edu/mgs
I remember feeling that everyone at Mayo (and in Rochester) was extraordinarily friendly. The clinic was bright, cheerful, amazingly well organized and efficient. The student-faculty dinner we had with Dean Pruitt [Raymond Pruitt, M.D. (I ‘43), founding dean of Mayo Medical School] at his home on our first day of medical school emphasized to me how committed the institution was to education and patient care.

How does Mayo Clinic influence your practice?
The role model offered by Mayo Clinic consultants has deeply affected the way I interact with my patients and colleagues. I feel their influence every day when I make rounds.

How do you contribute to the Mayo Clinic Alumni Association?
I bring my 25 years of experience as a congenital heart surgeon in a major metropolitan area. I have helped organize the 10- and 25-year reunions of my Mayo Medical School class and keep in close contact with many of my classmates.

Why did you decide to pursue medicine?
My father was an eye surgeon who went to medical school at the University of Minnesota and did his ophthalmology residency at Mayo Clinic. I spent time as a high school student making rounds with him at the hospital and observing operations. His influence clearly piqued my interest in medicine and is the primary reason I decided to pursue medicine.

I remember my father’s frequent visits back to Mayo Clinic for continuing medical education, the monthly arrival of Mayo Clinic Proceedings and my father’s firm conviction that Mayo Clinic was the best medical center in the world. I applied to Mayo Medical School and was thrilled to be accepted.

What was your initial impression of Mayo Clinic?
My initial impressions are vivid.
classmates. This is the network that continues to feed patients back to Mayo Clinic when we encounter difficult or unusual circumstances in our own practices or when consulted by families and friends about medical issues.

What do you do in your spare time?
I spend time with my wife, Julia, and our four children. We ski in the winter and hike in the summer in the beautiful mountain town of Telluride, Colorado. We also travel to Nantucket, Massachusetts, and the Virgin Islands for summer and winter sailing.

What would people be surprised to know about you?
I was just named president-elect of the Congenital Heart Surgeons’ Society. I have edited five books. I am a Porsche enthusiast, and I am still trying to achieve proficiency in golf.

Randall Krug II  
(NBD ’16)  
Board Member, Executive Committee (MGS student representative)  
• Graduate: Ph.D. candidate, Mayo Graduate School

Participating in the Mayo Innovation Scholars Program ultimately steered me toward Mayo Graduate School.” –Randall Krug II

• Undergraduate: Augsburg College, Minneapolis  
• Native of: Champlin, Minnesota

Why did you decide to pursue research?
At a Tri-Beta National Biennial Convention as an undergraduate student, I stayed up past 4 a.m. talking about science with a graduate student even though we both had to present our research very early that morning. During that discussion, I realized my passion for science and knew that I would continue exploring it as a graduate student. Initially, I was a premedical student. My participation in research helped me realize my interest in neuroscience research. That fostered an interest in applying research to develop insights to treat disease. I was impressed by Mayo’s pioneering biomedical research. The neurobiology of disease track at Mayo Graduate School aligned perfectly with my interests.

What was your initial impression of Mayo Clinic?
When I was young, a member of my family was a patient at Mayo Clinic. While in the waiting room, my father struck up a conversation with a patient who had traveled from Africa for treatment. My father asked why he had come so far, and the patient replied, “That is simple: because Mayo Clinic is the best.”

That reply captured my first impression of Mayo Clinic and is an impression that remains unchanged.

How does Mayo Clinic influence your research?
Mayo Clinic has fostered a highly collaborative research environment with state-of-the-art equipment and a diverse group of biomedical research experts. Combined with the education and professional development opportunities made possible through Mayo Graduate School, this has provided an unparalleled setting to learn and perform cutting-edge neuroscience research.

What do you do in your spare time?
I am an avid fly angler and really enjoy that Mayo Clinic is conveniently located next to one of the largest collections of spring creeks in the world.

What would people be surprised to know about you?
I was home-schooled beginning at age 8 so that I could progress through coursework at my own pace. This allowed me to start as a full-time college student when I was 14 and provided me with the flexibility to explore different interests during my undergraduate education. Participating in the Mayo Innovation Scholars Program ultimately steered me toward Mayo Graduate School.
Marcia Sparling, M.D.  
(I ‘87, RHEU ‘89)

Board Member
• Rheumatologist and Medical Director of Operations and Information Technology, The Vancouver Clinic, Inc., Vancouver, Washington  
• Fellowship: Rheumatology, Mayo School of Graduate Medical Education; Rheumatology, University of British Columbia, Vancouver, British Columbia, Canada  
• Residency: Internal Medicine, Mayo School of Graduate Medical Education  
• Medical School: University of Calgary, Alberta, Canada  
• Undergraduate: University of California, Berkeley  
• Native of: Edmonton, Alberta, Canada

Why did you decide to pursue medicine?
My undergraduate degree is in systems theory, and I did research and worked in forest genetics. I wanted to do work that was meaningful and allowed me the ability to effect change. I’m from a generation where girls didn’t think that much about medical school. It took me longer to realize it was a possibility.

I enjoyed working with the rheumatologists when I was an internal medicine fellow. They were smart and creative and needed to know about many areas of medicine. It was a time of breakthroughs in immunology, and we expected substantial changes to occur during a practice lifetime, which turned out to be true.

What was your initial impression of Mayo Clinic?
I love that Mayo understands that success in medicine involves strong operational delivery systems and processes. That’s due in part to people like Dr. Henry Plummer. Mayo has always paid attention to the process of practice, like charting systems and tracking tools, and has built systems to make it easier for people to do a good job of practicing medicine.

How does Mayo Clinic influence your practice?
Over time, I’ve learned to value and appreciate Mayo’s original foundation — doing what’s best for the patient. I didn’t think that was exceptional during my training because I assumed everyone believed that. Now I know that’s not true. Mayo had that perspective before it was cool to be patient focused. I admire that about the Mayo system. I also admire that they have been creative enough to adapt their model as health care has evolved, without losing their core principles.

Mayo exposed me to fabulous clinicians who were wonderful with patients and experts in their fields. It was a real apprenticeship because I worked closely with faculty. I learned the heart of physician-patient engagement — how to talk to patients, take a history, how to think clearly, and how to give patients good and bad news. My training at Mayo Clinic set the bar high and made me a better doctor.

I was attracted to a multispecialty practice because of my experience at Mayo Clinic — a great model of coordinated care for patients.

How do you contribute to the Mayo Clinic Alumni Association?
It’s helpful to have clinicians who are part of community-based practices and have a sense of what it’s like outside of big academic centers or teaching facilities. In our communities, we’re actively involved in trying to innovate patient care to make it better.

What would people be surprised to know about you?
We have a 40-acre property with a large collection of rare trees that we planted. With my forestry background, I can run a chainsaw and tractor. Before medical school, I spent a summer working as a plumber. I spent a year during college living in Norway and speak Norwegian although I’m pretty rusty now.◆

““

My training at Mayo Clinic set the bar high and made me a better doctor.” —Marcia Sparling, M.D.
Mayo Clinic’s sesquicentennial events wound down in October with a unique panel discussion — “The CEOs of Mayo Clinic: 50 Years of Change and Continuity” — involving the leaders who have represented Mayo Clinic during the last half-century of innovation.

**National CEOs included:**
5. John Noseworthy, M.D. (N ’90), 2009–present

**Rochester CEOs included:**

The CEOs discussed topics including mentoring, interactions with the Sisters of Saint Francis, Franciscan influences, change, teamwork, the creation of the Gonda Building and philanthropic support.

Former Rochester CEO Hugh Smith, M.D. (PHYS ’71, CV ’73), 1999–2005, was unable to attend. Former Mayo Clinic CEO L. Emmerson Ward, M.D. (I ’50), 1964–1975, was unable to attend due to illness. Dr. Ward died on Oct. 17.

Dr. Noseworthy, Mayo Clinic president and CEO, recalled that his predecessor, Dr. Ward, provided him with valuable advice: “Your job is to make sure you never lose sight of the Mayo Clinic values. The patients have to have the quality. If you don’t have quality, you don’t have Mayo Clinic.”

**CAO panel**
An additional panel comprised of past Mayo Clinic chief administrative officers and Rochester administrative leaders included:
- Robert Fleming, 1982–1993
- Sharon Dunemann, 1998–2002 (Rochester)
- Jeff Korsmo, 2002–2009 (Rochester)
- Shirley Weis, 2007–2013
- Jeff Bolton, 2013–present ♦
The Mayo Clinic Alumni Association celebrates its 100th anniversary during its 69th Biennial Meeting in Arizona later this year. The Mayo Clinic Alumni Association Board and conference co-chairs Dawn Marie Davis, M.D. (PD ’03, DERM ’06), and Richard Zimmerman, M.D. (NS ’90), invite you to join them in Arizona to celebrate a century of shared ideals and experience.

THURSDAY, OCT. 15, 2015
• 6–7:30 p.m. Welcome reception
  Hosted by Department of Development–Alumni Philanthropy Program
  Westin Kierland Resort and Spa

FRIDAY, OCT. 16, 2015
• 8 a.m.–3 p.m. Scientific Program
  Juanita Kious Waugh Auditorium, Mayo Clinic Education Center
• 6–11:30 p.m. President’s Gala
  6–6:45 p.m. Reception
  6:45 p.m. Dinner and program; dancing to follow
  – Awarding of Humanitarian and Professional Achievement Awards
  – Installation of incoming Alumni Association President, Susheela Bala, M.D. (PAIM ’87)
  Westin Kierland Resort and Spa

SATURDAY, OCT. 17, 2015
• Specialty programs and social activities
  Mayo Clinic facilities and Westin Kierland Resort and Spa

Sampling of speakers for Friday’s program
• David Ahlquist, M.D. (MMS ’77, I ’80, GI ’83), Gastroenterology and Hepatology, Mayo Clinic Rochester, Judd Plummer Lecturer
• Michael Crow, President, Arizona State University
• Wyatt Decker, M.D. (MMS ’90, I ’93), CEO, Mayo Clinic Arizona
• E. Rolland Dickson, M.D. (I ’64), Doctors Mayo Society Lifetime Achievement Lecturer
• Gianrico Farrugia, M.D. (I ’91, GI ’94), CEO, Mayo Clinic Florida
• Kenneth Nollet, M.D., Ph.D. (MMS ’93, BIOC ’93), Fukushima Medical University, Fukushima, Japan
• Veronique Roger, M.D. (CV ’88), Director, Center for the Science of Health Care Delivery, Mayo Clinic Rochester
• Steven Rose, M.D. (MMS ’81, I ’82, ANES ’84), Dean, Mayo School of Graduate Medical Education, Mayo Clinic Rochester
• Guillermo Ruiz-Argüelles, M.D. (HEM ’83), Clinica Ruiz, Pueblo, Mexico
• A. Keith Stewart, M.B., Ch.B. (HEMO ’05), Medical Director, Mayo Clinic Center for Individualized Medicine

Conference hotel: Westin Kierland Resort and Spa, 6902 East Greenway Parkway, Scottsdale, Arizona, 85254

Online registration and additional details
alumniassociation.mayo.edu/events
Featured physician and scientist positions at Mayo Clinic locations nationwide

Periodically Mayo Clinic Alumni magazine will feature physician and scientist positions available at Mayo Clinic nationwide. For complete descriptions and a list of other available opportunities, visit: physicians.mayo-clinic-jobs.com/

Mayo Clinic in Rochester

Statistical Genetics or Genetic Epidemiology
The Department of Health Sciences Research in conjunction with the Genetic Epidemiology and Risk Assessment Program in the Mayo Clinic Comprehensive Cancer Center is seeking applications for a faculty position in statistical genetics or genetic epidemiology with a focus in cancer.

CONTACT: Jennifer Schilbe, 507-266-6214 or schilbe.jennifer@mayo.edu.

Mayo Clinic Health System

Geriatrician – SW Wisconsin Region
The Department of Geriatric Medicine in La Crosse is seeking a second geriatrician to join a well-established geriatrician to assist in providing expanded primary care services to patients/residents at area nursing homes.

CONTACT: Rhonda Smith, 800-269-1986 or smith.rhonda@mayo.edu.

Family Medicine Residency Program Director – Eau Claire, Wisconsin
A Family Medicine Residency Program sponsored by Mayo School of Graduate Medical Education and located at Mayo Clinic Health System in Eau Claire is seeking a program director to lead the development and implementation of a new 15-resident program.

CONTACT: Cyndi Edwards, 800-573-2580 or edwards.cyndi@mayo.edu.

Orthopedic Surgery – NW Wisconsin Region
Mayo Clinic Health System – Red Cedar in Menomonie is seeking a board-certified/board-eligible general orthopedic surgeon to join two other orthopedists.

CONTACT: Cyndi Edwards, 800-573-2580 or edwards.cyndi@mayo.edu.

Emergency Medicine – SE Minnesota Region
The Department of Emergency Medicine at Mayo Clinic in Rochester is developing a new Community Division to oversee integration with Mayo Clinic Health System ED sites. We are seeking to hire emergency physicians to join the Albert Lea and Austin Emergency Medicine departments.

CONTACT: Graham Frie, 507-379-2018 or frie.graham@mayo.edu.

OB/Gynecology – SW Minnesota Region
Mayo Clinic Health System is seeking a full-time board-certified/board-eligible OB/gynecology physician to join our regional practice in New Prague and Fairmont.

CONTACT: Jeannie Green, green.jeannie@mayo.edu.

Mayo Clinic in Arizona

Neurology – Cerebrovascular Disease / Stroke
The Department of Neurology is seeking board-certified/board-eligible neurologists in vascular neurology to provide stroke and telestroke services.

CONTACT: Katherine Harris, 480-342-3525 or harris.katherine@mayo.edu.

Mayo Clinic in Florida

Oncologist – Thoracic
The Division of Hematology/Oncology is seeking an assistant/associate professor-level medical oncologist with expertise in thoracic cancer.

CONTACT: Lavinta Pennington, 904-953-1557 or pennington.lavinta@mayo.edu.
Alumni. Everywhere.

In 1919, Harold Foss, M.D., first president of the Mayo Clinic Alumni Association said, “This Association will in time become of national importance and a power in the advancement of American medicine.”

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Keep your colleagues and mentors informed by claiming and maintaining your alumni profile online.

alumniassociation.mayo.edu

Dawn Davis, M.D., is new medical director of Alumni Relations

Dawn Davis, M.D. (PD ’03, DERM ’06), is the new medical director of Mayo Clinic Alumni Relations. Dr. Davis succeeds Patricia Simmons, M.D. (PD ’80, PDE ’82), who retired in December.

Dr. Davis, departments of Dermatology and Pediatrics at Mayo Clinic in Rochester, also is medical director of the Referring Physician Office.

Obituaries

James Aten, Ph.D. (SPPA ’68), died Nov. 9, 2014.


Martin Kazdan, M.D. (OPH ’59), died Nov. 12, 2014.


Roy Ritts Jr., M.D. (M ’68), died Nov. 7, 2014.

Donald Rhoads, M.D. (I ’60), died Jan. 27, 2015.


Complete obituaries and the Update section, with alumni and staff news, are available on the Mayo Clinic Alumni Association website, alumniassociation.mayo.edu/people/
Mayo Clinic Alumni magazine is published quarterly and mailed free of charge to physicians, scientists and medical educators who studied and/or trained at Mayo Clinic, and to Mayo consulting staff. The magazine reports on Mayo Clinic alumni, staff and students, and informs readers about newsworthy activities throughout Mayo Clinic.

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Mayo Clinic is committed to creating and sustaining an environment that respects and supports diversity in staff and patient populations.

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Physician Referral
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Florida 800-634-1417
Rochester 800-533-1564
mayoclinic.org/medicalprofs/

Patient Transportation
Mayo Clinic MedAir,
Mayo One
800-237-6822
mayomedicaltransport.com
The anticipation is almost over: four and a half years after the project was announced, the Mayo Clinic Proton Beam Therapy Program – Rochester campus will begin treating patients this summer in the new Richard O. Jacobson Building.

The Mayo Clinic Proton Beam Therapy Program – Arizona campus is on schedule to begin treating patients in the spring of 2016. In Arizona, proton beam therapy and radiation oncology will share space in the new four-story building that will consolidate the Cancer Center practice.

“We are elated to be just months away from treating our first patients with proton beam therapy,” says Robert Foote, M.D. (RADO ’88), chair, Radiation Oncology, and proton beam medical director, Mayo Clinic in Rochester. “Our vision of inspiring hope by curing cancer and contributing to health and well-being by causing fewer side effects and complications will soon be a reality.”