Telemedicine Grows

A patient lay critically ill in a rural Ohio hospital. The emergency room physician was unable to diagnose the man’s condition and therefore could not determine appropriate treatment. Time was slipping away.

Suddenly, a television monitor flickered to life, linking the hospital with Cleveland Clinic through its TeleStroke program, in which a Cleveland Clinic stroke neurologist assists in diagnosis and determining treatment.

The emergency department physician and the Cleveland Clinic neurologist quickly reached a decision to administer tPA. Once stabilized, the patient was flown by helicopter to Cleveland Clinic for advanced treatment.

“Cases such as that happen almost every week among the hospitals with which we partner through our program,” says Peter Rasmussen, MD (NS’00), the neurosurgeon who champions TeleStroke and telemedicine (sometimes called distance health) at Cleveland Clinic.

More than 200 stroke consults now are handled this way every year, he says.

Continued on page 2
And the accuracy of stroke consults has soared from 70-percent to 99 percent with TeleStroke’s audiovisual connection, Dr. Rasmussen says.

“TeleStroke, now 4 years old, has been a great success for our patients, our partners and Cleveland Clinic, as well,” he says. “It’s a triple win. The patient is getting better care; the stroke hospital is benefitting from its relationship with Cleveland Clinic; and we’re benefitting from the services we provide and a greater number of referrals.”

Such distance health practices, which also include the widely known Cleveland Clinic MyConsult program, are expected to spread in coming years to other areas of medicine, Dr. Rasmussen predicts.

“I see telemedicine at Cleveland Clinic being used for both synchronous interactions with patients, such as postoperative wound follow-ups, and for asynchronous interactions where the patient initiates the data or consultation and we answer at a later time. This would include such practices as diabetics recording their glucose numbers at home and sending them to us for analysis and follow-up.”

Those uses, and others, indicate that telemedicine will be increasingly important in the future.

Dr. Rasmussen notes that the concept fits the vision of Delos M. Cosgrove, MD, CEO and President of Cleveland Clinic, because it shifts focus from volume of care to quality of care and economy.

Managing high-risk populations with common diseases could become less costly, also, such as diabetics, patients on long-term Coumadin® therapies or those with hypertension, he says. “Anything we can do to reduce hospital stays and doctors’ office visits by handling patients’ conditions accurately – but remotely – is going to be a cost improvement.”

He notes that distance health programs also address initiatives advanced by the Medicine Institute, headed by David Longworth, MD, which recast primary care delivery for the future.

In the works are moves to introduce high-definition television into distance health programs and to develop a continuous flow of data from patients directly into their electronic medical records.

“In this way, we may be able to do some predictive modeling and get an early handle on which patients are going to become ill, or which may need doctors’ office visits or hospital treatment,” Dr. Rasmussen says. “I think we’ve only begun to tap telemedicine’s potential.”
Community Health Systems
Carol Harding
Executive Director, Strategic Partnering

As Cleveland Clinic moves to expand its national footprint and leverage its offerings, both owned and partnered relationships have become significant activities. Working with strong partners can enhance the quality of patient care, improve access to healthcare services, reduce costs and drive operational excellence, says Carol Harding, Executive Director of Strategic Partnering.

Many new strategic associations have taken place at Cleveland Clinic, including those with Community Health Systems (CHS), ProMedica, Ohio Health and others. Today, Cleveland Clinic has strategic partnerships covering 51 hospitals of up to 99 beds each, 47 hospitals housing up to 199 beds, 18 hospitals with up to 299 beds and 19 hospitals with 300 beds or more.

Ms. Harding cited CHS as one example of how large these partnered relationships can be. CHS has 135 hospitals in 29 states with 96,000 employees, including 16,000 physicians. She said the system has 700,000 annual inpatient visits, 3.1 million emergency visits and revenue of $13 billion.

There are many unique attributes in these collaborations, Ms. Harding says. Cleveland Clinic’s partners acquire an association with a world-class organization and the resources necessary to improve their own performance. Cleveland Clinic, in turn, has an opportunity to collaborate on developing solutions to challenges of a changing healthcare landscape, extend its brand, coordinate care in complex cases, access data and benchmark operational excellence.

Ms. Harding emphasizes that these relationships are not mergers but collaborations between organizations that usually start with consulting services and evolve over time.

Regional Hospitals Update
David L. Bronson, MD
President, Cleveland Clinic Community Hospitals and Family Health Centers*

To meet a dramatic rise in outpatient care at Cleveland Clinic facilities, Cleveland Clinic needs to expand, says David L. Bronson, MD, President of Cleveland Clinic Community Hospitals and Family Health Centers.

“Cleveland Clinic began rapid consolidations, in part to address population shifts away from the central city, but also to address patient trends,” Dr. Bronson says. Cleveland Clinic also led the shift toward family health centers as patients migrated to ambulatory, outpatient care facilities, he says. Hospital bed counts are down, and lengths of stay are shorter than in previous years.

Quality remains high within the expanded Cleveland Clinic health system, Dr. Bronson says, because consolidations always emphasize excellent patient care and clinical outcomes through jointly established quality standards.

As of 2012, Cleveland Clinic and its eight community hospitals together delivered 10,647 newborns, saw 113,028 total admissions, participated in 85,997 surgical cases and treated 340,345 emergency room patients.

The community hospitals and years in which they joined the Cleveland Clinic health system are:
• Marymount Hospital, 1995
• Lakewood Hospital, 1996
•Fairview General, Lutheran General, Hillcrest, Huron, Euclid and South Pointe hospitals, 1997
• Children’s Hospital for Rehabilitation, 1998
• Medina General Hospital, 2009

Medical services are not regional, but business practices such as finance, human resources, information technology, legal, marketing and media relations and purchasing, are, Dr. Bronson says. National recognition for systemwide clinical successes came quickly, with Codman Awards in 2001 for outcomes measurements and in 2003 for exceptional efforts in long-term stroke care.

Dr. Bronson says Cleveland Clinic’s principles are:
• Put patients first
• Concentrate on quality, innovation, teamwork, service compassion and integrity
• Establish a common culture that aspires to greatness
• Have one standard for quality, patient safety and patient experience
• Partner with community hospital medical staffs

He says the result is that the Cleveland Clinic health system is more efficient than ever before.

*Effective Jan. 31, Dr. Bronson is Senior Public Policy and External Affairs Advisor.
Before the Board

Cleveland Clinic Innovations
Brian Kolonick
Associate General Manager

Cleveland Clinic Innovations (CCI) seeks to move breakthrough medical discoveries to the commercial marketplace, often by forming a spinoff company. This creates new opportunities for Cleveland Clinic while also boosting the local economy.

But starting a company is complex, high-risk and resource-intensive, explains Brian Kolonick, Associate General Manager of CCI. That is why a comprehensive approach includes sophisticated deal teams, domain experts, investment funds, executives-in-residence, allied investors, seed and technology validation funds, incubation, and preclinical and prototype facilities. All are poised to create companies and commercially deploy new medical technology.

CCI also helps other healthcare systems accelerate their own medical innovation through its Healthcare Innovation Alliance. It strives to develop a national network that benefits patients through joint efforts in research, clinical investigation, technology development, and commercialization.

“We seek to develop solutions that will enhance the quality and reduce the cost of healthcare,” Mr. Kolonick says. He adds that the Alliance can work with Cleveland Clinic alumni in many ways, such as providing commercialization support for their ideas and offering expert evaluations of applicability.

In 2012, CCI was ranked among the top five most innovative companies in healthcare by Fast Company, an organization of thought leaders. CCI has produced 1,800 patent applications and 64 spin-off companies and created more than 1,100 new jobs. “Our organization – sometimes in partnership with various alliances – has rolled out an average of more than 100 marketable innovations per year,” Mr. Kolonick says. These include therapeutic and diagnostic devices, biological materials and healthcare information technology.

Kathryn Teng, MD
Director, Center for Personalized Healthcare

The Center for Personalized Healthcare, founded in 2011 under the auspices of Cleveland Clinic’s Medicine Institute, focuses on identifying unique patient characteristics that provide clinically meaningful information for predicting and preventing disease and customizing patient care. These characteristics can be molecular, genetic, environmental, behavioral, cultural or simply patient preferences.

A detailed family health history is an important starting point in personalizing health care, says Kathryn Teng, MD, Director of the center. Among its services are introducing new technologies to enhance efficiency in clinical workflows and supporting evidence-based guidelines for clinical practice.

“Initially, a risk reference document is prepared, based upon patient-reported hereditary details, which are then compared with genetic risk,” she says. “Tests can then be conducted for various conditions. The results could be important not only to the patient, but also to his or her children, and to future generations, as well.”

For example, the risk reference document could indicate the presence of breast and ovarian cancer in a patient’s family. A genetic counselor could then be called in to follow up and suggest additional diagnostic testing, which could lead to a treatment plan.

Other personalized healthcare documents alert physicians to past test results and to future necessary testing prior to administering certain drugs. Dr. Teng said one provider called this personalized approach to medicine “incredibly useful because it engages patients in their health.”

This innovation is an implant device from Autonomic Technologies Inc. a Cleveland Clinic spinoff. Its purpose is to deliver low-level electrical stimulation to combat the debilitating effects of cluster headaches.
Relationship-centered Communications for Physicians

Edward Benzel, MD
Department Chair, Neurological Surgery

“When was the last time a doctor let his or her patient speak for three minutes without interruption?” asks Edward Benzel, MD, Chairman, Neurological Surgery. “Try it. You might be surprised at what you learn.”

His point: The importance of clear, relevant and detailed communication between doctor and patient cannot be overestimated. Doctors need to be trained in effective, relationship-centered communication, he says.

Dr. Benzel is a facilitator for a program to improve doctors’ experiences as caregivers through better communication with their patients. The program shows how to establish a genuine and caring interest between doctor and patient. This bond can be therapeutic, offer unique perspectives into patient conditions and promote an understanding that there is a shared responsibility in treatment, Dr. Benzel says.

But he emphasizes that this beneficial relationship does not require friendship, total agreement, unlimited time or practicing outside the physician’s field of expertise.

“A mastery of this program gives a physician another tool to bring to bear on effective patient treatment,” he says. “I have become a believer and an advocate. I ask all of you to explore it further.”

Many doctors find that patients better understand their diagnosis and follow care plans when their physicians convey sensitivity to and interest in a patient’s overall health picture.

That is why, during the last four years, Cleveland Clinic has emerged as a leader in the field of patient experience and clinician communication. Helping to lead the way is Adrienne R. Boissy, MD, MA (’06, N/I’07), a Cleveland Clinic neurologist who serves as the Medical Director for the Center of Excellence in Healthcare Communication (CEHC).

“For Dr. Benzel, the skills required for effective communication expand beyond the physician-patient encounter and really apply to leadership,” says Dr Boissy. “In addition, Dr. Benzel is incredibly thoughtful about what his patients need from him and models this to others...we are lucky to have him in the program.”

The program recognizes that caregivers, and particularly physicians, have ownership of their language and already have expertise in this area. Through skills practice and peer feedback, various communication strategies are discussed for different scenarios. The program has had overwhelmingly positive feedback from participants and facilitators. The program is built on the conceptual framework of the REDE model©, which stands for Relationship, Establishment, Development and Engagement.

All Cleveland Clinic staff physicians and house staff have been asked to participate in this program to enhance their communication skills. Efforts to expand the program are underway in Abu Dhabi and Weston. To date, about 1,300 doctors have taken the course, an unprecedented investment in the Cleveland Clinic staff.  ■
Scott D. Smith, MD, MPH
Chief, Eye Institute
Cleveland Clinic Abu Dhabi

From 2000 to 2008, I was a member of the medical staff at the Cole Eye Institute in Cleveland. I’m now Chief of the Eye Institute, Cleveland Clinic Abu Dhabi (CCAD), in the United Arab Emirates (UAE). I was most recently on the faculty of Columbia University in New York City, from 2008 to 2011.

It is an exciting opportunity to be part of one of the largest healthcare projects in the world, and particularly one that has the possibility of fundamentally changing the standards of healthcare in an entire region.

Although the UAE is a country with many resources, it has relied, to a large extent, on other countries to provide for the specialized care of its citizens. To take part in a major project that creates local access to world-class specialized healthcare offers a unique level of professional satisfaction.

Abu Dhabi is a fascinating place that is a melting pot of people from all over the world. It is an open and welcoming place, where people of many different cultures live and work together. It is, at once, the most modern city that I have ever lived in and a place where one can wander through back streets and feel the adventure of travel in a developing country.

I am in the process of learning, from top to bottom, what it takes to organize and operate a world-class hospital. I also have learned, from observing the practice of healthcare in the region, how dependent well-trained physicians are on the institution where they work to provide the resources they need to take good care of their patients. CCAD will be a prime example in the region of an institution creating the environment needed to provide the best possible medical care.

I find it easier to make friends here than at home. Most expats have a shared sense of openness and adventure and often feel that they are sharing a common experience with each other by living in a foreign country.

The quality of life here is great. I live on the 45th floor of a modern apartment building with an amazing view. The sky is always blue, and seven months of the year, there is fantastic weather. There’s an unbelievable range of restaurants,
from high-end haute cuisine to no-frills, authentic experiences and everything in between.

Abu Dhabi is an amazing jumping off point for travel. In two years, I’ve been to so many places, including Europe (Italy, Spain, France, and Greece), Asia (Nepal, India, Bali), and Africa. All of these places are a three-to-six-hour flight from Abu Dhabi, with minimal jet lag. It makes it easy to take advantage of long weekends to see more places during vacation time.

Maher A. Abbas, MD
Chair, Digestive Disease Institute
Cleveland Clinic Abu Dhabi

I did my colorectal surgery fellowship training at Cleveland Clinic in Florida. It was by far the most intense, but also the most informative, year of my adult life. I will forever be indebted to Cleveland Clinic and the faculty of the Florida campus for all the knowledge they gave me. In addition, the lifelong friendships that I made with the faculty in Florida, and subsequently in Ohio, have been instrumental to my continued professional growth.

Previously, I was the regional chief of colorectal surgery in the Southern California Permanente Medical Group, Chair of robotic and minimally invasive surgery at Kaiser Permanente Los Angeles Medical Center and the Director of the Permanente National Center for Excellence.

This is an exciting time for me. This is a once-in-a-lifetime opportunity to bring the best of global healthcare here and to create an everlasting legacy in the region.

It is a very different environment in Abu Dhabi than in the U.S. This is a blank slate, and the opportunities for growth are tremendous.

I joined this project not because of what it is today, but because of what it will become five and 10 years from now.

Abu Dhabi has a very professional work environment. A tremendous number of talented people surround you. It is a global setting with a multitude of different nationalities.

So far, all the work that I am engaged in is administrative. I am gradually learning about how care is currently rendered in the UAE.

Everyone at Cleveland Clinic Abu Dhabi is friendly, and it is very easy to make friends here. The people of the UAE are very kind, generous, and appreciative of joining hands with us to build Cleveland Clinic Abu Dhabi. The staff is collegial and always there to help. With my children in school, it is also very easy to connect with people outside work and to develop friendships.

The quality of life is outstanding. This time of the year, there is a lot to do outside. The city has numerous parks, beaches, and a large number of sports facilities. The UAE has a wealth of restaurants where one can find rich cuisines from around the world. It seems whatever one’s heart desires, you can find it in Abu Dhabi.

Imran Mirza, MD, FRCPC
Chief, Pathology & Laboratory Medicine Institute,
Cleveland Clinic, Abu Dhabi

After finishing my anatomic pathology and clinical pathology residency training, I did a one-year fellowship in hemopathology at Cleveland Clinic. It was one of the most formative experiences of my life. I learned from renowned leaders in the discipline, including my mentors, Dr. Andrew Fishleder, Dr. Kandice Marchant, Dr. Eric Hsi, Dr. Raymond Tubbs, and Dr. Karl Theil. As the only hemopathology fellow in the program, I had their undivided attention and focus on my training. The fellowship program was well thought-out and offered every opportunity to learn, teach and do research. I am so grateful for this first opportunity I was offered at the Cleveland Clinic.

Cleveland Clinic Abu Dhabi will be a premiere multidisciplinary institution offering world-class care in the region. The laboratory is central to the care that will be provided to our patients. We have had complete and unwavering support for our efforts from Dr. Marchant, Chair of Pathology and Laboratory Medicine Institute, and her team at Cleveland Clinic. Our pace is now rapid as we work toward receiving our first patient. As more caregivers join us, we are coming together to deliver on

Continued on page 8
the promise of putting “Patients First.” I am truly excited to see the day when the hospital opens.

I was born and raised in Kuwait, so it was not at all a difficult decision to relocate to the UAE and to work here. I am familiar with the Middle East, its culture and language. I was working as the Director of Molecular Pathology at the University of Alberta Hospitals, Edmonton, Canada, when I came across the opportunity to be part of the Cleveland Clinic-managed Sheikh Khalifa Medical City (SKMC) in Abu Dhabi. It was at that time I also learned about Cleveland Clinic Abu Dhabi. I reached out to Dr. Andrew Fishleder, CEO of Cleveland Clinic Abu Dhabi at that time, and he shared with me the details of this amazing project.

I took the position of Director of Molecular Pathology at SKMC in 2010. Working at SKMC allowed me to learn about the culture of medical practice in the UAE and to build a network of trusted colleagues and friends in the country. Finally, in June of 2011, I was offered the opportunity to build laboratory services at Cleveland Clinic Abu Dhabi. I finished my contract at SKMC and then joined Cleveland Clinic Abu Dhabi in July 2012. I am forever grateful for this awesome second opportunity to work with Cleveland Clinic.

The UAE is a young country (having turned 42 in December 2013) and has dynamic leadership with ambitious plans for growth. I believe that Abu Dhabi is one of the best metropolises in the world. It has a sophisticated culture, a bustling economy, and a great diversity of people and ideas. The society is very forward-looking, while being rooted in the traditions of Arab culture, which include kindness, consideration, hospitality, and respect. There couldn’t be a better place to live and work, in my opinion.

As a metropolis, Abu Dhabi offers the lifestyle of a modern, urban, highly connected environment. The government and nongovernment sectors have ambitious targets. The youthful population has the energy to keep pace with these demands and live a fast life. However, when the dusk spreads across the horizon in the evening, the city comes to life and remains vibrant until late at night as people come out to enjoy the great outdoors and the bustling cafes and restaurants.

Life’s pace also slows during the holy month of Ramadan, a time of spiritual purification and reflection, when Muslims fast for the entire day. The breaking of the fast (iftar) is done with a sumptuous meal after sundown. A number of restaurants and hotels set up their Ramadan tents at that time and offer a bounty of delectable local and international cuisines. The UAE in general and Abu Dhabi in particular offer a great number of dining options for the gastronome, and there are many we particularly enjoy. The grand Sheikh Zayed Mosque is my favorite place in Abu Dhabi. The city has fantastic shopping malls, and everything from everywhere on the planet is available.

But it is not all brick-and-mortar. Abu Dhabi has these beautiful forests of mangrove trees near the shores of the Arabian Gulf. The mangroves are protected habitats of a number of marine animals. UAE is also the nesting ground of a number of migratory birds from Russia. One can easily find solitude and peace here, either on a kayak in the mangroves or in the desert.

“The society is rooted in kindness, consideration, hospitality and respect. There couldn’t be a better place to live and work, in my opinion.”

Dr. Imran Mirza
Those interested in serving as mentors to youngsters and young adults need look no further than the staff of the Cleveland Clinic Office of Civic Education Initiatives. Let them know that you are interested in participating in any of its volunteer education programs. They will help you put your knowledge to use.

The Office of Civic Education Initiatives has formed partnerships with area schools, the business community, and fellow nonprofit organizations for the purpose of creating educational programming in the areas of STEMM+™ - Science, Technology, Engineering, Math, and Medicine, + health and wellness, the arts, innovation, financial literacy, and more.

Among its programs that are dependent upon the involvement of physicians and other health science professionals are those dealing with such health and societal issues as: asthma, bullying, diabetes, eating disorders, exercise, infectious disease, kidney health, nutrition, oral hygiene and substance abuse.

Those and other topics are addressed within the programs offered for school-aged children, such as:

Ambassadors for Learning™: This is a mentorship program connecting Cleveland Clinic employees, their relatives, physicians, retirees, or proactive members of the community with volunteer opportunities at more than 700 public and private schools throughout the region. Through the program, volunteers can tailor their roles to their professional and personal skills, providing valuable real-world learning to students throughout grades K-12, easing their transition into post-secondary education.

Mentors can choose to participate in a variety of roles, such as:

- Academic coach
- Career coach
- Motivational coach
- Life skills coach
- Sports coach
- Classroom co-teacher/curriculum facilitator
- Special needs student mentor
- E-ambassador (email mentor)
- Nutrition and wellness/fitness mentor
- Leadership mentor

Details of the Ambassadors program are available at: http://civiceducation.clevelandclinic.org/Community-Engagement/Explore-Opportunities/Ambassadors-for-Learning.aspx

‘A Humbling Life Experience’

If you are interested in volunteer work in a distant and beleaguered foreign land, consider taking your skills to the village of Akaa and its surroundings in Ghana. As a non-profit organization, volunteers of The Akaa Project seek to work with, support, and create opportunity for families in the Akaa community. Participants work alongside families in the region to alleviate poverty and promote self-reliance while simultaneously seeking to improve the health, education and financial well-being of residents in the area.

Dana Obery, a Cleveland Clinic research technologist in the Pathobiology Department, is one such volunteer. She first learned of the Akaa project while working in a Cleveland Clinic lab doing research for her senior thesis through the College of Wooster in Wooster, Ohio. Obery was working with a medical student who was soon to be off to Peru to help the under-privileged under the Peruvian Hearts program with which The Cleveland Clinic has been involved.

“The Cleveland Clinic participates with several international outreach programs and the Akaa Project is certainly one deserving of attention,” Obery says. “It is a humbling personal experience.”

For more information, go to the organization’s website: theakaaproject.org, or contact Lauren Grimanis at lgramanis@theakaaproject.org.
F. Mason Sones Jr., MD. Just mention his name to anyone familiar with medical history and you’ll get an admiring response about the world-famous Cleveland Clinic cardiologist who died in 1985 at the age of 66.

Millions of people around the globe owe their health – if not their lives – to the groundbreaking work of Dr. Sones and those who built on his legacy.

It was Dr. Sones’ creation of cine coronary arteriography that led to the first accurate pictures of the heart’s circulatory system and opened the doors to the development of both coronary artery bypass surgery and interventional cardiology.

His historic laboratory breakthrough on Oct. 30, 1958, in a Cleveland Clinic catheterization laboratory was among the most significant medical achievements of the 20th century.

Cleveland Clinic leaders still praise his work, saying it was his achievements and those of his successors that helped Cleveland Clinic achieve world-class status as a medical institution.

Yet, by all accounts, Dr. Sones’ “Eureka!” moment came about inadvertently, much as Isaac Newton’s did when a falling apple peaked his curiosity about gravity. Or, Alexander Fleming’s when he found penicillin mold upon leaving a window open in his lab. But their genius lay in their ability to recognize the significance of what occurred and to pursue its potential.

Another legendary Cleveland Clinic cardiologist, Earl K. Shirey, MD, 89, worked with Dr. Sones for decades and described him as “brilliant,” “obsessive,” “stubborn,” “single-minded,” “dedicated,” “energetic,” and “caring.”

“Time meant nothing to him,” Dr. Shirey says. “He stayed until his goal was met. It took a terrible toll on his family life. Cleveland Clinic was his life.”

Dr. Sones’ discovery went against the grain of what cardiologists believed at the time.

“In the 1950s, cardiologists were cautioned against using a catheter in the coronary arteries,” Dr. Shirey says. “The belief was that the catheter would cause a blockage, leading to fibrillation and, very possibly, death. Cardiologists across the world were left with only clinical means to make their diagnoses.”

On the day he made his discovery, Dr. Sones was studying a patient with a heart valve problem. “He attempted to inject about an ounce of contrast dye, under pressure, into the man’s aorta,” Dr. Shirey says. “Somehow, the catheter slipped into the right coronary artery. Almost the whole ounce went in. Through fluoroscopy, Dr. Sones quickly recognized what had just happened.”

There are differing accounts of what occurred next. One story is that Dr. Sones yelled, “Pull that catheter out! We’re killing him.”

Dr. Sones told Dr. Shirey that he feared the man’s heart would begin fibrillating, and so he prepared for an emergency open-chest massage. But he found instead that the heart stopped beating. Dr. Sones injected medication while shouting at the patient to make a series of explosive coughs to clear the dye from some vessels. It worked. The patient’s heart started beating again, and he recovered.
“I was not in the lab at the time, but in my office,” Dr. Shirey says. “When something serious happened around the place, the call went out over the speakers: ‘Emergency. Emergency in the cath lab.’ And we all came running. I got there toward the end of things. There were other doctors in the room.”

Later, Dr. Sones called Dr. Shirey into his office. “He said, ‘You know, that experience just now scared everybody, but it’s given me an idea. I think we can successfully put smaller amounts of dye – maybe 8-to-10cc’s – directly into coronary arteries and get our first really accurate pictures of arterial blockages.’” They could then discuss with surgeons what should be done.

Dr. Shirey says that Dr. Sones approached Carlton Ernstene, MD, then head of medicine, with his idea. “Ernstene said, ‘OK, Mason, go ahead and do it when you need to, but don’t hurt anybody.’"

Sones studied video engineering, dye chemistry and optical image amplification to perfect his procedure and photograph the results. It was not until 1962, following 1,020 procedures, that he and Dr. Shirey published their findings in *Modern Concepts of Cardiovascular Disease*. They wanted the benefit of solid statistics because they expected pushback from other cardiologists. They were right.

“Oh, it was a real battle,” says Dr. Shirey. “We heard ‘Don’t go to Cleveland Clinic for a heart evaluation. They’ll kill you.’ It took years to overcome objections and apprehensions before coronary arteriography became accepted and then widely used in evaluating coronary artery disease.”

One problem was that doctors from across the world went to Cleveland Clinic to study the procedure, the high-speed photo equipment, or the dyes used. “But many lacked the necessary additional knowledge of what the artery should look like and how to separate disease from normal variation,” Dr. Shirey says. “None of them had ever witnessed the coronary circulation before. Sadly, upon returning home, the newcomers made many mistakes.”

Dr. Sones’ work continued. He had developed a specially tapered catheter to avoid wedging it in an artery. He worked with the Phillips Medical System’s engineers, who took his ideas and created devices that became standard for his diagnostic technique.

Later, in 1967, Dr. Sones’ Cleveland Clinic colleague, Rene Favaloro, MD, performed the world’s first intentional coronary bypass surgery. He was quoted as saying of Dr. Sones at the time: “He has been the most important contributor to modern cardiology. Without his work, all our efforts in myocardial revascularization would have been fruitless.”

Dr. Sones was fond of saying that clinical acumen and indirect information were no match for just 30 feet of film.

Dr. Sones’ work saved lives, advanced the practice of cardiology and helped establish Cleveland Clinic’s reputation as one of the world’s premiere heart centers.
The Cleveland Clinic Way

In his new book, *The Cleveland Clinic Way*, Delos M. “Toby” Cosgrove, MD, President and CEO of Cleveland Clinic, reveals how the organization works so well, in contrast to a dysfunctional national healthcare system. He makes the case for why Cleveland Clinic’s multidisciplinary, nonprofit, salaried group practice model of care should set the example for the nation.

The book provides lessons that leaders can apply to their own organizations and also empowers average Americans to make better-informed healthcare decisions. A positive vision of healthcare, it presents key trends that increasingly will define 21st Century medicine.

Cleveland Clinic has grown to become a $6 billion healthcare system comprising Cleveland Clinic’s main campus, nine community hospitals, 16 family health and ambulatory services, and other locations abroad. As head of Cleveland Clinic, Dr. Cosgrove is known for focusing on patient care and patient experience, exemplified by his reorganizing diverse medical departments into cohesive, patient-centric institutes.

Published by McGraw-Hill, the book was released in early January and is available in hard cover through amazon.com for $18.98.

Neurological Emergencies in Clinical Practice

*Neurological Emergencies in Clinical Practice* takes readers step-by-step, from stabilizing the patient, to identifying the cause, to proceeding through treatment. It is useful in settings including the emergency room, hospital in-patient service and the intensive care unit.

Author John A. Morren, MD, earned his medical degree at the University of the West Indies, St. Augustine, in his native Trinidad and Tobago and completed his neurology residency at Cleveland Clinic Florida in Weston, Fla., as Chief Resident. This was followed by fellowship training in Neuromuscular Medicine at Cleveland Clinic in Ohio.

Certified by the American Board of Psychiatry and Neurology, he now is a clinical associate staff neurologist at the Neuromuscular Center within Cleveland Clinic’s Neurological Institute in Ohio.

Dr. Morren is active in many advocacy, research and academic pursuits, publishing in peer-reviewed literature on a wide range of topics including stroke/vascular neurology, headache, neuromuscular disorders, movement disorders and neurocritical care. He also has contributed to book chapters in the fields of dementia and neuromuscular disorders.

This book is available in paperback and eBook versions, and it can be purchased from the publisher’s website, springer.com, or at major book retailers, including amazon.com and barnesandnoble.com.
Three alumni were honored for their contributions to Cleveland Clinic and the field of medicine during the 2013 Fall Alumni Board Awards ceremony at the historic Tudor Arms Hotel on Carnegie Avenue in Cleveland.

In presenting the Distinguished Alumnus Award to Leonard Calabrese, DO, Gary Dworkin, MD, Alumni Board President, recounted some of Dr. Calabrese’s many accomplishments. These include being a professor of medicine at Cleveland Clinic’s Lerner College of Medicine and Vice Chair of Cleveland Clinic’s Department of Rheumatic and Immunologic Diseases. He also is Director of the RJ Fasenmyer Center for Clinical Immunology and a recipient of the Philips Medal of Public Service from the Ohio University College of Osteopathic Medicine. Dr. Calabrese, who has been at Cleveland Clinic since 1980, also holds two endowed chairs, the Theodore F. Classen, DO, Chair in Osteopathic Research and Education and the R.J. Fasenmyer Chair in Clinical Immunology.

Mehdi Razavi, MD, received the Service Award, presented by Robert Hermann, MD. Dr. Razavi’s illustrious career at Cleveland Clinic began in 1963 with a special cardiology fellowship and training program. Since then, he has performed more than 25,000 cardiac catheterizations. For a decade, he managed the fellowship and educational programs from which he graduated; served as a member of the Board of Trustees and the Board of Governors; and developed multiple funds and endowments through his work with the Philanthropy Institute.

James Young, MD, received the Special Achievement Award, presented by Robert Hobbs, MD. Dr. Young is a professor of medicine, Executive Dean of Cleveland Clinic’s Lerner College of Medicine and Chairman of Cleveland Clinic’s Endocrinology and Metabolism Institute. A founder of the George M. and Linda H. Kaufman Center for Heart Failure, Dr. Young also holds the George and Linda Kaufman Chair and is a Physician Director of the Philanthropy Institute. Active in the fields of heart failure, heart transplant, and MCSD development, he has a joint appointment in Cleveland Clinic’s Multi-organ Transplant Center and the Sydell and Arnold Miller Family Heart & Vascular Institute.

Dr. Young noted that he is especially proud of his contributions to donor organ procurement programs, helping to raise the profile of the subspecialty of heart failure and cardiac transplant medicine, his collaborations with basic and clinical scientists, and his contributions to Lerner’s unique medical school curriculum.

For Alumni Specialty Director of Vascular Surgery Edwin Beven, MD, and his wife, Beverly, the evening’s venue, the Tudor Room of the Tudor Arms Hotel, brought back memories of their wedding day 53 years ago. Their wedding reception took place in the same room when Dr. Beven was a third-year resident. The couple celebrated their nuptials with some of Cleveland Clinic’s most prominent physicians, including Dr. George Crile.

Dr. Dworkin, Alumni Board President, remembered his holiday parties that also were held in the Tudor Room. In its heyday, the Tudor Arms, listed on the National Register of Historic Places, was the tallest and most prestigious building on University Circle, noted for featuring performances by famous entertainers including comedian Bob Hope and bandleader Tommy Dorsey.
GIFT PLANNING WITH LIFE INSURANCE: A VERSATILE TOOL

Because life insurance is versatile, it is an excellent asset to use in achieving your charitable goals. Life insurance provides protection against potential economic loss in the event of death or disability and can serve as a source of supplemental income during retirement. Additionally, life insurance can provide liquidity for paying state and federal estate costs. However, many people may be unaware that a life insurance policy also is an excellent charitable gift that can be made at a very low cost.

Life insurance can be used in a variety of ways in making a meaningful gift. The easiest is to name the charitable organization as beneficiary of the policy. Simply by completing a Change of Beneficiary form with the insurance provider, you can direct a gift to an organization that you support while retaining ownership of the policy. Although the policy’s face value is included in the gross estate, the estate will be entitled to an offsetting charitable estate-tax deduction because of the gift.

If the original reasons for establishing the life insurance policy no longer are a concern, assigning the policy to charity while retaining ownership of it may be a good option. This would create an immediate income tax deduction for the fair-market value of the policy or the cost of the policy, whichever is less. Additional charitable income tax deductions are available for remaining premium payments as they are made on the policy. Finally, by assigning the policy to the charity, the policy proceeds are removed from the gross estate, which could generate state tax savings.

Another option is to establish a new policy and transfer ownership to the charity. Such a gift can be made by paying the policy in full with a one-time premium payment or by continuing to make gifts to the charity to cover the cost of the premium payments. As with an existing policy, a charitable deduction is available for the premium payment(s) as they are made.

Choosing to give a life insurance policy is a wise investment in the future. It may allow you to make a more substantial gift than you otherwise could because you can pay in installments. Additionally, proceeds are promptly paid to the charity without the time-consuming process of probate.
Historic Gift Made to Cleveland Clinic Florida

Pauline Braathen, a longtime supporter and patient of Cleveland Clinic Florida, has made a $30 million gift, the largest in the organization’s 25 years. Her gift will fund construction of a five-story, 143,000-square-foot building on the Weston campus, to be named the Egil and Pauline Braathen Facility, which will house the expanded Pauline Braathen Neurological Center and Cleveland Clinic Florida’s Cancer Center.

“Since her first visit to Cleveland Clinic Florida in 2001, Mrs. Braathen has become one of our most ardent and generous supporters,” said Bernardo Fernandez Jr., MD, President of Cleveland Clinic Florida. The facility will include leading-edge technology that will help advance healthcare for patients in South Florida, he said.

Mrs. Braathen’s gift is the culmination of many years of philanthropic support and will help keep Cleveland Clinic Florida’s neuroscience program in the forefront, Dr. Fernandez said. She previously established a multimillion-dollar fund supporting Cleveland Clinic Florida’s Neurology Program and created the Pauline M. Braathen Endowed Chair in Neurology. The chair is held by Neurology Department Chair Nestor Galvez-Jimenez, MD.

“I have traveled the world and seen many medical institutions, but the quality of the clinicians and the depth of care that I have seen and experienced at Cleveland Clinic Florida are unrivaled,” Mrs. Braathen said. “Dr. Galvez-Jimenez, in particular, has provided me with outstanding care and support. He is knowledgeable, compassionate and, undoubtedly, one of the best in his field.”

Born in London, Mrs. Braathen was a fashion model and buyer and subsequently developed her own fashion business. Her husband, Egil Braathen, who died in 2009, was one of Norway’s wealthiest businessmen, owning and developing property throughout Norway and other parts of the world, including the United States. Today, Mrs. Braathen is a resident of the private apartment ship “The World,” traveling around the globe, but always returning to Cleveland Clinic Florida for her medical care.

“Through this donation, I want to celebrate my husband and his successes,” Mrs. Braathen said. “It is my hope that this will improve many lives for years to come.”
Cleveland Clinic has joined The CORE Institute, OrthoCarolina and Rothman Institute in creating a first-of-its-kind, clinically integrated Orthopaedic PHO (physician hospital organization). Operating as the National Orthopaedic & Spine Alliance, LLC (NOSA), the PHO will improve delivery of orthopaedic and spine care across the nation and establish industry benchmarks for quality and value. NOSA expected to begin seeing patients on Jan. 1.

Two additional organizations, OrthoIndy and OrthoCalifornia Inc., have signed a letter of intent to participate. Additional members who comply with strict clinical protocols and criteria also may be invited to apply to join. Through the new network, led by its physician members, the focus will be:

- Improving quality and consistency of care
- Reducing costs and increasing efficiencies
- Providing greater access to expertise, data and experience

The nationwide network brings the best practices of these leading orthopaedic and spine programs together to benefit:

- Patients, who will have access to a network of top-tier programs that are geographically dispersed across the country
- Employers, who will be able to provide consistent quality of care for employees conveniently located throughout the U.S. and align with a network of physicians focused on high-quality care and cost control
- Participating providers, who will establish quality standards and ensure quality improvement and benchmarks through data sharing, in an area that currently has few quality benchmarks

Joseph Iannotti, MD, PhD, Chair of the Orthopaedic and Rheumatologic Institute, was named President of the NOSA board. Michael McMillan, Executive Director of Market and Network Services, and Wael Barsoum, MD, (ORS’00) Chairman of Surgical Operations and Vice Chairman of the Department of Orthopaedic Surgery, also will serve on the board.

Cleveland Clinic Innovations has created a spin-off company, Shield Biotech, to develop a preventive breast cancer vaccine based on groundbreaking research from the lab of immunologist Vincent Tuohy, PhD, Lerner Research Institute. The research, originally published in 2010, showed that a single vaccination could prevent breast tumors from occurring in mice genetically bred to develop breast cancer and also inhibited the growth of existing tumors. Shield Biotech will complete preclinical development and seek permission from the FDA to test the vaccine as an investigational new drug in proof-of-concept, first-in-human clinical trials. The trials are expected to start within two years and will take about three years to complete. Dr. Tuohy will be Shield Biotech’s Chief Science Officer. Thomas Graham, MD, Chief Innovation Officer, says the vaccine has the potential to stop more lethal forms of breast cancer and inhibit the recurrence of cancer in some women after they have recovered from their initial disease. The vaccine could give women a safe, effective and relatively benign alternative to invasive prophylactic mastectomy. G. Thomas Budd, MD (IM’80, H/O’82) Taussig Cancer Institute, will be on the company’s scientific advisory board charged with design and execution of the clinical trial protocol.

The new Cleveland Clinic Innovation Accelerator, funded by a $10.2 million grant from the National Heart, Lung, and Blood Institute of the National Institutes of Health, will be directed by Paul E. DiCorleto, PhD, Chair, Lerner Research Institute. The center, which includes Cleveland Clinic Lerner College of Medicine, Case Western Reserve University, Cincinnati Children’s Hospital, The Ohio State University and the University of Cincinnati, is one of only three such centers in the nation. The goal of the program is to expedite commercialization of technologies to improve diagnosis, treatment, management and prevention of heart, lung and blood diseases, and sleep disorders. The Innovation Accelerator will provide funding for feasibility studies; regulatory, legal and business development expertise; and entrepreneurial training and mentorship. Dr. DiCorleto says the formation of the National Centers for Accelerated Innovations will help ensure that the research discoveries with the most potential to affect public health will make it out of the laboratory and into the hands of healthcare providers. Lerner Research Institute staff members D. Geoffrey Vince, PhD, and Stanley Hazen, MD, PhD; and Mark Low, Cleveland Clinic’s Global Cardiovascular Innovation Center, also will participate in the Innovation Accelerator. Having one of three national centers based in Cleveland will attract innovators and bring new jobs to Ohio.
A $1 million gift from the Timken Foundation of Canton, Ohio, has helped establish a new ophthalmic surgical education lab in Cleveland Clinic's Cole Eye Institute. The 600-square-foot Louise Timken Microsurgical Education Lab, located on the first floor of the Cole Eye Institute, serves as the centerpiece of the ophthalmology residency education program. Opened July 1, 2013, the lab provides intraocular surgical experience for residents through leading-edge surgical stations that imitate operating room experiences, as well as through the use of an ophthalmic surgical simulator. The lab also gives first-year residents a full-year curriculum. The center is named after a family trailblazer, Louise Timken, who was a pioneer in aviation and is known as the first woman in the country to fly and own a jet aircraft. She developed macular degeneration later in life.

Key leadership changes to strengthen One Cleveland Clinic were announced by Cleveland Clinic Health System Leadership, effective Sept. 1, 2013. The following appointments, including four alumni/staff, support the system's strategy to provide value as an integrated health system:

- A newly formed Clinical Enterprise Management team will lend a broader, systemwide approach to decision-making related to costs, resources, quality, best practices, staffing levels and a variety of other issues affected by healthcare reform.
- Several key leaders have been identified to serve on the CEM team chaired by Joe Hahn, MD, Chief of Staff. Clinical Enterprise Management (CEM) team members are:
  - Robert Wyllie, MD, Associate Chief of Staff, Clinical Integration Operations and Chief Medical Operations Officer, System Wide Medical Operations
  - James I. (Jim) Merlino, MD (CRS'05), Associate Chief of Staff, Chief Experience Officer
  - David L. Longworth, MD, Associate Chief of Staff, Clinical Integration Development; Chair, Medicine Institute
  - Edmund S. (Ed) Sabanegh, MD (U/INF'94) Associate Chief of Staff, Cost Repositioning; Chair, Department of Urology
  - Michael Henderson, MD, Chief Quality Officer
  - Ann Huston, Chief Strategy Officer
  - Kelly Hancock, RN, MSN, Chief Nursing Officer
  - David Bronson, MD, President of Regional Hospitals and Family Health Centers
  - Brian Donley, MD, Chief of Regional Hospital Medical

Continued on page 18
Several additional changes took place in the community hospitals:

- Donald Malone, MD, Professor and Chairman of the Department of Psychiatry and Psychology, is now President of Lutheran Hospital.
- Brian Harte, MD, President of South Pointe Hospital, is now President of Hillcrest Hospital. Cleveland Clinic leadership thanked Jeff Leimgruber, most recently President of Hillcrest and before that, President of Fairview Hospital, who left Cleveland Clinic.
- Bob Juhasz, DO, former Medical Director at the Willoughby Hills Family Health Center and Associate Dean for the Ohio University Heritage College of Osteopathic Medicine, Northern Ohio Extension Campus at South Pointe Hospital, is now President of South Pointe.
- Jan Murphy, President of Fairview Hospital, is now Chief Operating Officer of Sheikh Kalifa Medical City (SKMC) in Abu Dhabi, United Arab Emirates.
- Neil Smith, DO, Vice President of Medical Affairs at Fairview Hospital, is now President of Fairview Hospital.
- Steve Jones, MD, Chief of Surgical Operations at Fairview Hospital, also serves as Chief of Regional Hospital Surgical Operations.
- Cynthia L. (Cindy) Deyling, MD (IM ’87), now oversees family health center operations, with an enhanced role in program integration with the community hospitals.

Cleveland Clinic Richard E. Jacobs Health Center in Avon, Ohio, which opened its doors in late 2011, will be expanded to include an inpatient hospital. Plans for expansion have been under consideration since the opening. The design for the new facility will be unlike traditional inpatient hospitals, to accommodate the way care will be delivered in the future. Planning is underway and more details will be provided as they become available.
10′s

Betty Ky Hamilton, MD (H/O’13), of Cleveland Clinic’s Taussig Cancer Institute, was among 21 individuals selected to participate in the American Society of Hematology’s 11th Annual Clinical Research Training Institute (CRTL). This education and mentorship program offers a broad education about clinical research methods, research collaboration, statistical analysis, and managing the demands of family and career. The society’s goal is to produce a group of researchers armed with ideas for clinical hematology research and the tools and access to resources that will help make their ideas a reality.

Daniel J. Cantillon, MD (CARD’09, CARD/E’11), electrophysiologist in the Robert and Suzanne Tomsich Department of Cardiovascular Medicine at Cleveland Clinic, has been named Medical Director of the Central Monitoring Unit. Dr. Cantillon graduated from Georgetown University School of Medicine and completed his residency at New York Presbyterian Hospital before coming to Cleveland Clinic for fellowship training. He was appointed to the staff in 2011.

00′s

Mark A. Hardy, MD (Surgical Podiatry, 00′), completed his residency in pediatric surgery at Cleveland Clinic in 2000. He now serves as Program Director for the Cleveland Clinic’s Podiatric Residency Training Program, from which he graduated. He is the Chief of Foot and Ankle Surgery at the Ohio Permanente Medical Group and the Director of the Northern Ohio Foot and Ankle Foundation. He recently was elected to the Executive Committee for the Asia-Pacific Society for Foot and Ankle Surgery.

Basem B. Abdelmalak, MD (AN’00, CCM’01), Director, Cleveland Clinic Center for Sedation and Out of Operating Room (Remote) Anesthesia Services and Director of Cleveland Clinic’s Anesthesia for Bronchoscopic Surgery within the Anesthesiology Institute, is now the President-elect of the Ohio Society of Anesthesiologists. He was elected to the position at the organization’s annual meeting in September 2013. The OSA has more than 1,500 members. Of note among his early career leadership roles is service as Cleveland Clinic’s House Staff President (’99-’00) and also as a member of the Alumni Association Board of Directors.

Bennie H. Jeng, MD (IM’99, Opth’02), in August moved from the University of California San Francisco (UCSF) to assume the position of Chair, Department of Ophthalmology and Visual Sciences, at the University of Maryland. He spent five years at the Cole Eye Institute (2003-2008), then returned to UCSF where he completed his cornea and external diseases fellowship. While there, he was Co-Director of the UCSF Cornea Service, Chief of the Department of Ophthalmology at San Francisco General Hospital, and Director of the Francis I. Proctor/UCSF Cornea Fellowship program. He, his wife, and three children reside in Clarksville, Maryland. He would love to hear from old friends and colleagues at: bjeng@som.umd.edu.

Navneet S. Majhail, MD, MS (IM’04), joined Cleveland Clinic’s Taussig Cancer Institute as of Aug. 29. Dr. Majhail obtained a master’s degree in clinical research from the University of Minnesota, Minneapolis, in 2006 and completed a three-year fellowship in hematology/oncology there in 2007. Prior to joining Cleveland Clinic, he was Medical Director, Health Services Research, at the National Marrow Donor Program and Assistant Scientific Director.

Haffizulla Continued from page 1

scholarship and academia and striving to improve synergy among healthcare and professional organizations.

Dr. Haffizulla works on many levels with the AMWA, including as Chair and founder of AMWA’s Preventive Services Task Force and Executive Chair of the fundraising committee. She also is the new on-camera show host, anchor and medical correspondent for the nationwide health program “Mission Critical Health.”

She teaches honors organic chemistry to pre-med seniors at American Heritage School and is an affiliate clinical assistant professor of biomedical science at the Charles E. Schmidt College of Medicine at Florida Atlantic University. She also is a voluntary assistant professor of medicine at the University of Miami.

Dr. Haffizulla is a nationally recognized speaker and expert on work/life balance. She published a book, Harmony of the Spheres: Career, Family and Community, in 2011. She also founded and runs a work/life balance site called BusyMomMD.com. She authored several articles for parenting and professional communities and is currently writing her second book.

In 2008, Dr. Haffizulla founded and opened her own concierge practice, an internal medicine hybrid. She fuses traditional clinical practice with technology, offering patients a blend of office visits, house calls and telemedicine. More about her innovative practice can be found on her website: www.HousecallsMD.us.

She lives in South Florida with her husband, Jason Haffizulla, MD, and their four children. •
Gabriel Wagner, MD (IM’09), a second-year fellow. His research focuses on neutralizing antibodies in HIV infection; specifically, finding virologic correlates of broad and potent neutralizing antibodies in superinfection and acute infection, with the ultimate goal of a rational vaccine design. He also is an author of a recent article in the Journal of Infectious Diseases: “Using Ultradeep Pyrosequencing to Study HIV-1 Coreceptor Usage in Primary and Dual Infection.” Dr. Wagner is from Lima, Peru, and moved to Cleveland at the age of 11. He earned his bachelor’s degree in biology, biochemistry and French from Case Western Reserve University in Cleveland and then earned his medical degree at the University of Toledo College of Medicine, followed by his internal medicine residency training at Cleveland Clinic. In his spare time, he loves playing guitar, hiking, hanging out with friends and family, and watching independent films. He would like to take up surfing and snowboarding as well. He can be reached at: gawagner@ucsd.edu.

Vasanth Stalin, MD (S/ALB’09), has taken up a new position as an assistant professor of surgery with the Central Michigan University College of Medicine, training general surgery residents and teaching medical students. Additionally, he is the Director of Bariatric Surgery at St. Mary’s of Michigan Hospital, which is one of the teaching hospitals for Central Michigan University. Dr. Stalin practices with Midwestern Surgical Associates, PC., a group of eight board-certified surgeons, including Cleveland Clinic Florida alumnus Wael Solh, MD (CRS/F’04) in Saginaw and Bay City, Mich.

Dr. Jimmy Chua Receives Top Award From Medical Chapter

Jimmy Dy Chua, MD (ID’97), is the recipient of this year’s Laureate Award of the Washington State Chapter of the American College of Physicians (ACP). The award, the chapter’s highest honor, goes to an individual who has shown a commitment to excellence in medical care, education and service to the community.

Dr. Chua was born in Manila, Philippines, in 1958, the youngest of nine children. He earned his medical degree in 1983 from the University of Santo Tomas in Manila, completed post-graduate training in family medicine and worked in Manila for several years. Among his accomplishments in the Philippines was establishing a private practice at St. Luke’s Medical Center in Manila, where he managed a clinical laboratory. He also worked as a health coordinator, traveling to rural and urban areas to train volunteer health workers. He formed an HIV task force and designed a rehabilitation program for disabled children with the support of the Asian Pacific Christian Mission. In 1994, he and his family moved to the United States, where Dr. Chua completed an internal medicine residency at Marshfield Clinic in Wisconsin. He then went on to a fellowship in infectious disease and clinical microbiology at Cleveland Clinic. He also has written numerous medical articles. In 2004, Dr. Chua became a fellow of the American College of Physicians, and in 2005, he was named the “Most Outstanding Internist for the State of Washington” by the Washington ACP Chapter. Currently, Dr. Chua practices ID at the Kennewick General Hospital, Kadlec Regional Medical Center and Lourdes Medical Center. He also is a faculty member of the Pacific Northwest University Health Science Medical School.

Ravi P Kiran, MBBS, MS, FRCS (Eng), FRCS (Glas), FACS, Msc EBM (Oxford), (CRS’07), has been named Chief and Program Director of the Division of Colorectal Surgery at New York Presbyterian/Columbia University Medical Center. Dr. Kiran, a renowned surgeon-scientist with expertise in inflammatory bowel disease, colorectal cancer, and other complicated colorectal conditions, joins New York Presbyterian/Columbia from Cleveland Clinic, where he was a staff surgeon and head of the research section in the Department of Colorectal Surgery and Director of its Rupert B. Turnbull Jr. School of Enterostomal Therapy.

Gabriel Wagner, MD (IM’09), completed his fellowship in infectious disease at the University of California, San Diego (UCSD), where he now is a second-year fellow. His research focuses on neutralizing antibodies in HIV infection; specifically, finding
Mark Eisenberg, MD, (Interventional Cardiology ’95) MPH, FACC, FAHA, received the Jewish General Hospital (Montreal, Quebec) Award for Excellence in Clinical Research for his work in cardiology and cardiovascular epidemiology. The award recognizes researchers whose insights and initiatives in clinical research have resulted in unique and significant contributions to patient treatment and care. Dr. Eisenberg also was elected to fellowship in the Canadian Academy of Health Sciences and inducted at the academy’s annual general meeting in Ottawa, Canada. Academy membership, considered one of the highest honors in the Canadian health sciences community, is based on demonstrated leadership, creativity, distinctive competencies and commitment to advancing academic health sciences.

Dr. Benny R. Upchurch, MD (IM 96’), has returned to The Ohio State University Medical Center in the Department of Internal Medicine, Division of Gastroenterology, Hepatology and Nutrition. He was at Creighton University Medical Center in Omaha, Neb., where he served as the Chief of the Gastroenterology Division. “It is exciting to be working for my very first mentor in GI, Dr. Darwin Conwell, who was recruited from Harvard to the GI Chairman position at OSUMC. It’s also nice to be back with family and friends in Ohio.” His new email is Bennie.Upchurch@osumc.edu

James R. Otworth, DO (AN’96), joined Cleveland Clinic in General Anesthesiology Oct. 7. Previously, he was with the University of Mississippi Medical Center in Jackson, Miss.

The College of American Pathologists (CAP) has awarded Katharine A. Downes, MD, FCAP (ACLPTH 99’), of Shaker Heights, Ohio, the CAP Lifetime Achievement Award. The award recognizes members who have made a broad and positive impact on patient care. Dr. Downes was recognized for her significant contributions to the field of transfusion medicine.

Walter A. Tan, MD, MS, FACC, FSVM (IM’94, CARD’97, CARDIN’99), a specialist in structural heart repair and advanced devices, has transferred to the structural heart program at WakeMed Health and Hospitals as a Wake specialty physician in cardiovascular/advanced devices in Raleigh, N.C. As of November 2013, he leads a new practice at WakeMed, Wake Specialty Physicians – Cardiovascular. A board-certified cardiologist, Dr. Tan will provide consultations for elderly and high-risk patients who have myocardial, valve or vascular problems. Dr. Tan completed his residency and fellowship at Cleveland Clinic.

Claudio Focchi, MD (GE’80), of Cleveland Clinic’s Department of Pathobiology in the Lerner Research Institute, received the International Herbert Falk Award for outstanding contributions to gastroenterology, including advances in diagnosis, therapy and prevention.

Richard Becker, MD (H/O 86’), professor of medicine at Duke University School of Medicine, has been appointed head of the newly renamed Division of Cardiovascular Health and Disease in the University of Cincinnati College of Medicine’s Department of Internal Medicine. Dr. Becker also will serve as Director of the University of Cincinnati (UC) Cardiovascular Institute (UCCVI). Additionally, he will hold the Mabel Stearns Stonehill Chair of Cardiology, pending approval by the UC Board of Trustees.

In addition to his administrative responsibilities, Dr. Becker will lead all cardiovascular services throughout the UC Health system and collaborate with colleagues at Cincinnati Children’s Hospital Medical Center and the Cincinnati Department of Veterans Affairs Medical Center.

Dr. Becker is a 1982 graduate of the UC College of Medicine, where he also earned his bachelor’s and master’s degrees. Following medical school,
In Memoriam

Martin C. McHenry, MD, MS, who died recently, became Chairman of Cleveland Clinic’s Department of Infectious Disease in 1972. The department flourished under his guidance and soon was recognized for both clinical medicine and education. Dr. McHenry combined excellence at the bedside with compassionate care, outstanding teaching and active clinical research. He was the first recipient of the Bruce Hubbard Stewart Award for humanism in the practice of medicine. Many employees may remember a humorous poster with an important message that hung outside a Cleveland Clinic café. It featured a picture of Dr. McHenry, dressed as Uncle Sam, with the words: “I want YOU to wash your hands.”

During Dr. McHenry’s chairmanship, his department grew to include five physicians who conducted clinical trials and outcomes research in many areas, such as new antimicrobials, heart and bloodstream infections, and osteomyelitis. Dr. McHenry stepped down in 1991. We will have more information soon on how Cleveland Clinic plans to honor Dr. McHenry’s life.

Kurt Ellinghaus Pfister, MD (OTO’56), died May 4, 2013. He was a noted otolaryngologist in Mexico City, where he practiced until his last days at age 87. He is survived by a son, Roberto.

William Vincent Martinez, MD (S’57), 90, of Austin, Texas, formerly of Edison, N.J., died July 27, 2013. Born in Philadelphia on March 2, 1923, Dr. Martinez lived in Edison for 23 years before moving to Albuquerque, N.M., and most recently Austin. After serving in World War II, he graduated from Jefferson Medical College in 1952 and worked as a cardiac surgeon before spending the last 23 years of his career as Medical Director of New Jersey Manufacturing Insurance Co., retiring in 1986. He is survived by his wife of 55 years, Marilyn (nee Heft); five sons, William V. Jr., MD, of Avon, Conn., James of Annapolis, David of Austin, TX, Paul of Haines City, Fla., and Keith of Ocean Twp., N.J.; two daughters, Marilyn Martinez of Albuquerque, N.M., and Susan Kelly of Edison, N.J.; and 22 grandchildren.

Roy Kenneth Greenberg, MD, 49, died Dec. 7, 2013, at his home on Lake Erie near Cleveland. Born in Ithaca, N.Y., to Iris and Donald Greenberg, Roy obtained his Bachelor’s degree at Cornell University and his medical degree from the University of Cincinnati. He trained in general and vascular surgery at the University of Rochester Medical Center, where he met his wife, alumnae Alicia A. Fanning, MD (Flexible Surgical Endoscopy Fellowship ’02). They both joined the faculty at Cleveland Clinic after completion of their training. Dr. Greenberg’s penchant for innovations and research helped to shape the current treatment of complex aortic disease. His contributions also were instrumental in ushering in the era of endovascular therapy. His interest in teaching and mentoring contributed to the academic growth and development of many alumni and colleagues. His work saved the lives of many around the world. He has been recognized with numerous awards and the Society for Vascular Surgery established an annual lecture on innovation in his honor. He also was honored with the Cleveland Clinic Sones Innovation Award in 2013. He held nearly 100 patents on endovascular therapy developed from his research. He was a frequent traveler and enjoyed the opportunity to explore many different cultures. He also is survived by sons Zachary and Lucas, his younger brother and sister, Eric and Jane, and his parents. A memorial service was held on Jan. 11, 2014, at the InterContinental Hotel on the Cleveland Clinic campus. Please consider a contribution to the Dr. Roy Greenberg Memorial Fund for Innovation and International Scholarship, Sydell and Arnold Miller Family Heart & Vascular Institute. Gifts can be sent to Cleveland Clinic Foundation, PO Box 931517, Cleveland OH 44193-1655, or made online at clevelandclinic.org/giving.

William A. Hawk, MD, (GS 51’), died on Dec. 24, 2013, at the age of 91 in the Bentley Care Center in Naples, Fla. He and his wife, Moira, were married for 63 years. Dr. Hawk was born in Sayre, Pa., the only child of Dr. George and Helen Hawk. He graduated from the Hill School in Pottstown, Pa., Yale University, and the University of Pennsylvania medical school. Earlier in his career, he completed residencies in surgery and pathology at Cleveland Clinic and was on the medical staff from 1956 through 1987. He also served on the Board of Governors. Dr. Hawk served on the Florida task force in establishing the Fort Lauderdale practice and was the first CEO of Cleveland Clinic Florida. He was a fellow of the American College of Pathologists, as well as emeritus clinical professor of the Case Western University School of Medicine. Dr. Hawk served in the Navy during the Korean War and was medical officer on a troop transport ship. He is survived by his wife, daughters Margaret (Thomas) Smith and Moira (Raymond) Tully, five grandchildren and six great-grandchildren. In lieu of flowers, donations may be made to the Cleveland Clinic Foundation, 9500 Euclid Ave, Cleveland, Ohio, 44195, Avow Hospice, 1095 Whippoorwill Lane, Naples, Fla., 34105-3847, or to a charity of your choice.

Please Keep in Contact

Cleveland Clinic Alumni Relations would like to stay on top of significant changes in your life. Have you moved? Taken a teaching position? Received an academic promotion or professional recognition? Decided to retire? Have an interesting hobby or avocation you’d like to share?

Your former Cleveland Clinic colleagues are interested in hearing your news. Please drop us a line at at Cleveland Clinic Alumni Relations/DV1, 9500 Euclid Avenue, Cleveland, OH 44195 or e-mail alumni@ccf.org.
Viola Startzman: 
Pioneering Spirit, Accomplished Life

Viola Startzman (Robertson), MD, often called “Dr. Vi,” died Aug. 28 in Wooster at age 99. She was a pioneer in the medical field whose accomplishments included many firsts.

Dr. Startzman was the first female clinician on the full-time professional staff of Cleveland Clinic and the first female pediatrician in Wooster, Ohio. She was the first woman to have a free clinic named after her in her hometown. And she may have been the earliest long-distance commuter working at Cleveland Clinic, driving more than 120 miles roundtrip daily from Wooster to work at East 93d and Euclid in Cleveland in the 1950s before there were freeways.

She has been called “hero,” “role model,” “citizen of the year” and “hall of famer,” but the title she enjoyed most was “doctor.” And the achievements of which she was most proud were working tirelessly to attract young women to medical careers and laboring passionately to aid the disadvantaged.

Dr. Startzman was educated at the College of Wooster, earning her bachelor’s degree followed by a master’s in science at Western Reserve University. She began her career in Cleveland as a city bacteriologist and then, at 28, she was accepted into medical school. She graduated from Western Reserve University Medical School with her MD in 1945, when such an achievement was unusual for a woman. She served residencies at Rainbow Babies and Children’s Hospital and City Hospital, now MetroHealth.

Dr. Startzman went on to become the first staff member Robert Mercer, MD, hired after establishing the Department of Pediatrics at Cleveland Clinic in 1951. She was on staff from 1952 to 1956, while also working at several well-baby clinics in the area.

“It was very fulfilling,” she was quoted as saying in a 2007 Alumni Connection story. Dr. Startzman then took a position closer to home as Medical Director and later Director of Student Services at the College of Wooster, where she developed programs that became models for colleges across the country. “It was a 24-hour-a-day job,” she said. “I was there in the 60s and 70s, doing a great deal of counseling on drugs, alcohol and sex.”

In 1954, she married James E. Robertson, MD (IM’55), who came to Cleveland Clinic from Wooster to train for a year. Dr. Robertson then returned to Wooster, where he had established a practice and also had four boys to raise. Dr. Startzman followed in 1956, helping her husband raise his sons, who ranged in age from 4 to 12.

In 1979, Dr. Startzman retired from The College of Wooster, but not from medicine. She and her husband relocated to New Hampshire for several years, where she helped found and staff a hospice program before returning to Wooster.

In 1992, she chaired a committee to investigate establishing a free clinic in Wooster. The clinic, which opened in 1995, was renamed the Viola Startzman Free Clinic in 2000.

Dr. Startzman was profoundly interested in helping underprivileged people and made frequent, monthlong medical missions to Egypt – the last of which occurred when she was 82. She also helped disadvantaged people closer to home.

She was admired not only by those whom she helped, but also by many who held political office. When Gov. Ted Strickland visited Wooster in 2007, he made a stop at the Viola Startzman Free Clinic, where he described its founder as “a local hero.” She was named citizen of the Year by the Wooster Daily Record in 2001 and was inducted into the Ohio Women’s Hall of Fame in 2002.

Dr. Startzman retired from medicine in 1979, but she remained active in the community, helping to create a church-based child care center and continuing to support a medical clinic overseas.

The doctor also served for many years on the Cleveland Clinic Board of Trustees.

She is survived by her stepsons, Dean E., James F., David L. and M. Scott Robertson.

Memorial contributions in lieu of flowers may be made to the following organizations: Viola Startzman Free Clinic, 1874 Cleveland Road, Wooster, OH, 44691; Hospice & Palliative Care of Greater Wayne County, 2525 Back Orrville Road, Wooster, OH, 44691; or Planned Parenthood, 334 E. Milltown Road, Wooster, OH, 44691.