

**Faculty Council Meeting  
Meeting Minutes  
November 20, 2023**

Timing	Agenda Item	Presenter	Summary of discussion	Action items/Motions/ Votes
4:04-4:08PM	Welcome and Chair Announcements	Matthias Buck	The Chair called the meeting to order at 4:04PM. Dr. Buck gave a brief overview of the agenda items to be addressed at today's meeting. He reminded the members that the School of Medicine has an events calendar that can be accessed at <a href="https://case.edu/medicine/events/">https://case.edu/medicine/events/</a> . He encouraged everyone to visit the web page to see what is going on in the School of Medicine. Agenda items for the December 16 meeting must be submitted to Matthias Buck and Nicole Deming by Friday, November 24; they will be considered by the Steering Committee on Monday, December 4, for the December Faculty Council agenda.	
4:08-4:09PM	Approval of October Faculty Council Minutes	Matthias Buck	When polled there were no edits or corrections to the October 16 Faculty Council Meeting minutes. There were no objections to accepting the minutes as posted in BOX.	The October 16 Faculty Council Minutes were approved by general consensus.
4:09-4:11PM	Faculty Council Steering Committee Report	Darin Croft on behalf of Alan Levine	<p>Dr. Croft gave an overview of the agenda items addressed at the November 6 Faculty Council Steering Committee on behalf of Alan Levine, who was unavailable to attend today's meeting.</p> <p>The committee discussed the pros and cons of the SOM publishing an annual report. One emeritus appointment, submitted previously and resubmitted with additional information, was approved. Two interim chair appointments were reviewed and discussed. The committee determined that the promotion packets reviewed this month had no issues of inequity. Amy Hise provided a brief overview of the Women and Minority Faculty Committee's annual report which she will present at the November Faculty Council Meeting. The draft resolution on the importance of Family Medicine was reviewed for consideration by Faculty Council. It was decided that the resolution still required work and may appear in December.</p>	.

4:11-4:19PM	Report from University Faculty Senate/Senate Executive Committee	Elvera Baron	<p>Dr. Baron reported on two meetings; one ExCom Meeting held on November 13, and a Senate Committee Meeting held immediately prior to today's Faculty Council Meeting. During the ExCom meeting a presentation was given on the Library Advisory Committee focusing on faculty development for those faculty creating on-line content; best practices were highlighted.</p> <p>UH tenure was discussed at the November 13 meeting; the Personnel Committee presented their preliminary report and discussion took place on what salary guarantee means and how to define tenure and salary. The recommendations of the Personnel Committee, and their charge, will come back to the ExCom before the January meeting and will be shared. While Dr. Baron did not have updates, she assured the committee that work is being done in the background. The University Librarians policy on Open Access, which will affect every faculty member including clinical faculty, has completed their pilot and is now looking for policy approval. It was tabled today at the Senate Meeting to allow for time to speak with constituents.</p>	
4:19-4:41PM	Medical Student Admissions	Lina Mehta	<p>Lina Mehta, Associate Dean of Admissions, presented the Medical Student Admissions Committee's annual report to Faculty Council. She noted that the School of Medicine receives the lion's share of applications at CWRU. The entering class size for 2023 is 216 with 82% of students coming from out of state, from 86 different colleges and 32 states of residence (plus DC and Puerto Rico). Total applications to CWRU totals 8,615, 15% of the national total (50,061) of applications. Demographics show that 51% are female with an average age of 23.8. In an ethnic breakdown of self-described students, the majority are Asian (87), Black or African American (17), and Hispanic, Latino, or of Spanish Origin (20). Their cumulative GPA ranks higher than the national average. These students are not only academically talented, they virtually come to us with publications before coming to med school, have had patient-based experiences, do volunteer work and tutoring, some are varsity athletes.</p> <p>In June, the Supreme Court ruled that colleges and universities can no longer take race into consideration as a specific basis in admissions. Screeners/Interviewers must be blinded to race/ethnicity. We are taking lived experiences into consideration and have done a deep dive to determine which students, from which state, are most likely to matriculate. It was noted that we are only required to be race blind</p>	

	Medical Student Admissions (continued)		<p>during the admissions piece, and that the interview is becoming more and more important. Dr. Fletcher noted that one of the things her office is looking at are the pathway programs.</p> <p>Dean Gerson thanked Dr. Mehta for her coordination of the school's efforts and wants to encourage members of Faculty Council, their friends and colleagues, to participate in admissions interviewing when asked; it is important for every level of the school, and there is a clarity of approach here that he has not previously witnessed and appreciates that effort. Regarding the pathway program, if we have to be the recipient of information with someone who participates in someone else's program, we are all in. The Dean and Dr. Logio are trying to increase whatever financial aid we can get and are working diligently to improve that. Dr. Mehta noted that we can see ethnicity at the end of the cycle. Once the class is matriculated, they can go back and track data.</p> <p>Dean Gerson reminded Faculty Council that the diversity survey is different from the climate survey. The lowest number of respondents is coming from faculty. On November 10 the university president sent out a note to remind us of the university standards of discourse, freedom of speech, lack of harassment or pain to others. Insightful comments have been received. Ongoing we need to pay attention in our work and education spaces and behind the scenes, which could add to our general level of angst and concerns about mental health for all of us.</p>	
4:41-4:52PM	Annual Reports Matter	Matthias Buck (Amanda Brower – could not attend but provided information)	<p>Dr. Buck stated that during discussion of the strategic report, and how the SOM communicates with their stakeholders, a desire was expressed to have an annual report. Currently, we have a brief internal on-line monthly newsletter and late this summer the inaugural issue of a magazine entitled CWRU Medicine which engages a very broad group of stakeholders. However, it was not sent out to faculty or staff and a place to have it on the web has still to be identified. An annual report would be a similar document, but focus more on financial and other numbers as well as on research. It could be an opportunity to showcase the school and hospital's current collaborative research.</p>	<p>A motion was made and seconded to open discussion.</p> <p>Unanimous consent was made to move to a vote.</p> <p>A motion was made by a FC member and seconded by a FC member that Faculty Council asks the Dean's Office to work with and provide resources to Central Marketing Communications to publish an annual report on the SOM and</p>

	Annual Reports Matter (continued)			<p>which engages and recognizes Faculty and Staff in addition to the other stakeholders.</p> <p>Vote: 27 were in favor, 2 were against, and 4 abstained. The motion is approved.</p>
4:52-5:00PM	Woman and Minority Committee Annual Report	Amy Hise	<p>Dr. Hise listed the current committee members and their affiliations. Activities and topics of discussion addressed this year were quite diverse ranging from Diverse representation in the Provost's Office to childcare and eldercare challenges of our faculty. The committee met over the summer with Dean Gerson who updated them on the diversity efforts within the school.</p> <p>The COWMF had ongoing discussions with chairs who represent diverse faculty and said their input has been enlightening. As part of the discussion with the Diversity Stakeholders Series, they met with Zhenghe John Wang, past president AFA, and Jennifer Cupar, chair of the Faculty Senate's Committee on Women. The various faculty development activities being offered were discussed. They met with Mailey Lorio, interim director of the LGBT Center, to discuss the ongoing activities to support LGBT faculty and staff. COWMF meetings are open to all faculty; anyone who wished to attend the meetings should request the link from Dr. Hise.</p>	
5:00-5:24PM	Introduction to Awards Committee	Lynn Singer	<p>Dr. Singer, the chair of the committee, explained that Faculty Council initiated this committee about a year ago to increase the number of faculty nominated for awards and honors (national and international – only external). This committee is tasked with identifying new and existing opportunities for faculty at every rank, and to increase the number of faculty members at CWRU-SOM who receive honors/ awards. They are to create a nomination process to assist faculty in determining if, and when, they should apply for various honors/ awards. The committee is comprised of members from administration and from all of the affiliates.</p> <p>The committee has been meeting every other week since March. To date, they have developed a list of 100+ top awards, identified top faculty for eligibility based on Research.com, committee knowledge, Web of Science, etc. They are working on creating a databank for faculty to use in terms of applying for awards. They have created a website (<a href="https://case.edu/medicine/faculty-and-staff/faculty-awards">https://case.edu/medicine/faculty-and-staff/faculty-awards</a>)</p>	



	Introduction to Awards Committee (continued)		<p>listing awards coming up for application.</p> <p>Dr. Singer identified barriers such as lack of knowledge about individual achievements, lack of knowledge about faculty membership in professional societies (working with FA for data to be included in FIS). To be nominated you must be a member of the society. She stated that all faculty members should belong to AAAS (American Association for the Advancement of Science). Nicole Deming is going to request that faculty enter these awards and professional memberships on their faculty information survey. For many of these societies, the membership roster is not accessible unless you are a member. She stressed that it is very important that faculty members maintain memberships and leadership in the appropriate professional societies.</p> <p>The Dean noted that the most important administrative support is the faculty member's chair. He asked that each member of Faculty Council report back on the importance of this effort to their departments and discuss this topic at their department meetings and with their chair. The committee could put into place an annual process to solicit nominations from chairs.</p>	<p>A motion was made and seconded to open discussion.</p> <p>Unanimous consent was made to move to a vote.</p> <p>A motion was made and seconded that Faculty Council requests that the SOM provide the Awards Committee administrative support sufficient to develop and maintain a robust, as well as aspirational, awards and honors program.</p> <p>Vote: 32 were in favor, 0 were against, and 0 abstained. The motion is approved.</p>
5:24-5:25PM	New Business		When polled, there were no topics of new business to be addressed.	

5:25-5:26PM	Adjourn		There being no outstanding agenda items to address, a motion was made and seconded, with no objections, to adjourn the meeting. The chair adjourned the meeting at 5:26PM.	
-------------	---------	--	--	--

#### **Present**

Joshua Arbesman  
Moises Auron  
Blaine (Todd) Bafus  
Elvera L. Baron  
Eileen Borawski  
Neil Bruce  
Matthias Buck  
Adrienne Callahan  
Aleece Caron  
Mohamad Chaaban  
Patrick Collier  
Darin Croft  
Andrew Crofton

Margot Damaser  
Jonathan Emery  
Lisa Gelles  
Stan Gerson  
Ramy Ghayda  
Matthew Grabowski  
Amy Hise  
Jessie Jean-Claude  
Hung -Ying Kao  
Sadashiva Karnik  
Gaby Khoury  
Vijaya Kosaraju  
Christina Krudy

Erin Lamb  
Jennifer Li  
Lia Logio  
Janice Lyons  
Tani Malhotra  
James Martin  
William Merrick  
David Mihal  
Attila Nemeth  
Rebecca Obeng  
Anastasia Rowland-Seymour  
Alicia Santin

Hemalatha Senthilkumar  
Bryan Singelyn  
Phoebe Stewart  
Usha Stiefel  
Ben Strowbridge  
Nami Tajima  
Patricia Taylor  
Johannes von Lintig  
Mark Walker  
Robert Wetzel  
Wei Xiong  
Samina Yunus

#### **Absent**

Robert Abouassaly  
Abigail Basson  
Maura Berkelhamer  
Corinne Bazella  
Dan Cai  
Marta Couce  
Piet de Boer  
Neil Bruce  
Meelie DebRoy  
Mackenzie Deighen  
David DiLorenzo  
Corinne Falck-Ytter  
Jessica Fesler

Stephen Fink  
Bahar Bassiri Gharb  
Rachael Gowen  
Alia Hdeib  
Peter K. Kaiser  
Eric W. Kaler  
Sadashiva Karnik  
Sangeeta Krishna  
Alan Levine  
Shawn Li  
David Ludlow  
Dan Ma

Mariel Manlapaz  
Raman Marwaha  
Christopher McFarland  
Daniela Mehech  
Nathan Mesko  
Gillian Michaelson  
Rocio Moran  
Dean Nakamoto  
Neal Peachey  
Cyrus Rabbani  
Deven Reddy  
Tamer Said

Alicia Santin  
Paul Shaniuk  
Mtthew Sikora  
Jacek Skowronski  
Courtney Smalley  
Jim Strainic  
Joseph Tagliaferro  
Johannes von Lintig  
Ari Wachsman  
Leon R. White  
Scott Williams  
Raed Zuhour

#### **Others Present**

Nicole Deming  
Adrianne Fletcher

Joyce Helton  
Cynthia Kubu

Lina Mehta  
Stacey O'Neill

Lila Robinson  
Lynn Singer

**Faculty Council Meeting  
Draft Meeting Minutes  
October 16, 2023**

Timing	Agenda Item	Presenter	Summary of discussion	Action items/Motions/ Votes
4:02-4:07PM	Welcome and Chair Announcements	Matthias Buck	The Chair called the meeting to order at 4:02PM. Dr. Buck reminded the members that there is only one day left to complete the Engagement Survey ( <a href="https://des.surveystar.com/case">des.surveystar.com/case</a> ) and that the LCME Survey visit dates have been confirmed for March 2 -5, 2025 ( <a href="https://case.edu/medicine/education/medical-education/liaison-committee-medical-education-lcme/lcme-overview">https://case.edu/medicine/education/medical-education/liaison-committee-medical-education-lcme/lcme-overview</a> ) . The overarching theme of this meeting is the strategic plan, of which the CAPT Report is part. Dr. Buck hopes to reduce the amount of presentation time in order to allow more discussion and ideas from the group. He provided a brief overview of the topics that would be addressed in today's meeting.	
4:07-4:08PM	Approval of September Faculty Council Minutes	Matthias Buck	When polled there were no edits or corrections to the September 18 Faculty Council Meeting minutes. No one objected to accepting the minutes as posted in BOX.	The September 18 Faculty Council Meeting Minutes were approved by general consensus.
4:08-4:10PM	Dean's Announcements	Dean Gerson	<p>The Dean announced that they had a very successful alumni weekend with the Class of '73 raising almost \$8M dollars, most of it going towards scholarship. An announcement will soon be made of a major gift providing UH and Case resources to build a facility in Uganda/ Malawi for research and education programs.</p> <p>The Dean, Lia Logio, and a small group of experts, will be discussing ways to go forward regarding UH Family Medicine. The SOM does not control nor supervise their Family Medicine residency program on main campus.</p> <p>We all appreciate that the Israeli Hamas conflict, war, terrorism and ongoing violence is hurting all of us. It has been a struggle across universities to provide leadership. We have not had the opportunity</p>	

	Dean's Announcements (continued)		for the SOM to issue a response, although we have done so with our students in various ways to make sure that we can provide support. We have had faculty on site in Israel and trauma and insecurities exist. We are supportive of our faculty, students and staff during the conflict, and the Dean will soon be making a formal statement about it.	
4:10-4:16PM	Report from University Faculty Senate/Senate Executive Committee	Elvera Baron	<p>Dr. Baron presented an overview of the Faculty Senate meetings already held and the topics discussed. She went over the commitment to shared governance, Faculty Senate structure, process, shared expectations, and the rules for reporting back to the Senate and reporting back to Faculty Council as is being done today.</p> <p>A task force (of about 20 people) was designed to address issues regarding tenure track faculty. A list of recommendations was generated and approved by unanimous consent in a final committee review to be presented at the next ExCom meeting (November 13) and then presented at the November Faculty Council meeting. She explained the composition of the ExCom and their terms, and the different topics that were addressed.</p> <p>The ad hoc Committee on Shared Governance gave their initial report to the ExCom and will give a final review and their recommendations. At the last meeting the DEI statement for Promotions and Tenure was discussed; where that particular statement is a requirement, and how many currently write it. It is still being discussed and is a work in progress.</p>	
4:16-4:19PM	Faculty Council Steering Committee Report	Alan Levine	Dr. Levine provided an overview of topics and discussion from the October 2 Faculty Council Steering Committee Meeting. The qualifications for emeritus status were reviewed. Dr. Levine asked that faculty go back to their committees and respective constituents and share that the criterion for emeritus status is meritorious service (meritorious contributions to the school and to the university). As emeritus status is conferred through the SOM, the SOM should be referred to in their CV when included with the application.	

4:19-4:37PM	Vote on Membership of the Clinical Scientist/ Department Representatives to Faculty Council ad hoc Committee on Faculty-Administration Interactions, Co-Governance and Engagement (FACE) (Statements of Interest are in BOX)	Matthias Buck	<p>FACE Nominations</p> <p>There were three applications for the three seats for basic science faculty. They assumed those seats and were approved. There were six candidates for the three clinical faculty seats. Statements of interest are in the Faculty Council BOX folder.</p> <p>Anantha Harajith, Janice Lyons, and Hemalantha Senthilkumar received the most votes and will assume the three clinical faculty seats.</p>	<p>A motion was made by a Faculty Council member and seconded by a Faculty Council member to choose three faculty members, for the clinical faculty seats, from the slate of six below.</p> <p>Votes in favor:</p> <p>Ricardo Correa – 18</p> <p><b>Anantha Harajith -- 20</b></p> <p><b>Janice Lyons-- 44</b></p> <p>Raj Rajesh -- 9</p> <p>Lisa Rauh-- 13</p> <p><b>Hemalantha Senthilkumar--31</b></p>
4:37-5:00PM	Presentation and Discussion of Strategic Plan with Focus on Faculty/Faculty Hires	Matthias Buck	<p>The strategic plan is a living document updated several times since 2021. Some numbers have changed, pages for DEI have been augmented and faculty pages added. On the research side there are eight areas of focus. Objectives vs measurable results are calculated to suggest success in these areas. Several goals for research are to increase national reputation and support top faculty.</p> <p>It was suggested that a section on departments be added (how departments maintain excellence in their areas, and faculty interact with their department chairs). We can help departments be excellent by giving them a roadmap to make their own strategic plans which would feed into this. Dean Gerson concurred and suggested it could be run through the chairs and ask them to address that. The approach taken in the strategic plan is succinct, balanced and limited in its objectives and key results, which departments can consider individually or collectively. The department chairs provided a significant input in the original and revised plan.</p>	

	Presentation and Discussion of Strategic Plan with Focus on Faculty/Faculty Hires (continued)		<p>Our various law offices in the university train our committees on how to recruit, not using race as a criterion and not tracking race in our application pool. We can register outcomes post facto. For this first read, please offer suggestions and let us, or the Dean, know those issues with which you concur. Individual members should go back to their departments, have departmental discussions, and then bring the feedback to the Dean or Vice Deans. It is important that it is seen as a living document in public space, on the website, shared with the Provost and University President. We are not aware if other schools have similar investments in their strategic plans. We need to determine how we can take advantage of the FIS (Faculty Information System) and other data systems to better understand who we are.</p> <p>The Dean stated that until March or so of this year (between 2019 and now) the university was not enthusiastic about the SOM developing an annual report outside of State-of-the-School or issuing the annual report. The last annual report for the School of Engineering, which has them all collected in one place from 2009, was also from 2019.</p> <p>The Chair again posted the link to the diversity survey; the Dean encouraged everyone to participate.</p>	
5:00-5:08PM	<p>New Graduate Course Proposals:</p> <p>ANS-MIN: Anatomical Sciences, Minor</p>	Darin Croft	<p>Several new graduate course proposals have been brought to Faculty Council for consideration.</p> <p>Dr. Croft explained that Anatomy is the only department in the university that offers cadaver-based courses, especially for those interested in hands on surgical practices. This course will take 3-5 students per year. It doesn't require developing any new course or resources. It is put together in a sequence that makes sense and adds up to 15 hours (minor).</p>	<p>A motion was made by a Faculty Council member and seconded by a Faculty Council member approve the ANS-MIN: Anatomical Sciences, Minor</p> <p>Vote: 52 were in favor, 0 were against, and 2 abstained. The motion is approved</p>

5:08-5:15PM	--APH-MS: Aerospace Physiology MS --APHV-MS: Aerospace Physiology MS (on line)	Lisa Damato Michael Decker	<p>Dr. Decker and Lisa Damato provided an overview of the two new graduate courses which will help build a master's degree in aerospace physiology.</p> <p>They explained what they expect the students to accomplish and where they would go after the program. There is a burgeoning need for aerospace physiologists. Aerospace physiology is a dynamic study of several biological sciences (effect of environment on human organisms, extreme environment and impact on an individual, etc. There is no training in the country for a master's program like this. Case is uniquely poised. We have operational experience and have experienced hyper gravity.</p>	<p>A motion was made by a Faculty Council member and seconded by a Faculty Council member to approve the APH-MS: Aerospace Physiology MS program.</p> <p>Vote: 45 were in favor, 0 were against, and 2 abstained. The motion is approved.</p> <p>A motion was made by a Faculty Council member and seconded by a Faculty Council member to approve the APHV-MS: Aerospace Physiology MS (on line) program</p> <p>Vote: 39 were in favor, 0 were against, and 6 abstained. The motion is approved.</p>
5:15-5:25PM	Annual Report from the Committee on Appointments, Promotions and Tenure (2022-2023)	Michael Dell	<p>Michael Dell co-chaired the Committee on Appointments, Promotion and Tenure (CAPT) last year with Siran Koroukian. He provided an overview of the committee's activities over the 2022-2023 academic year.</p> <p>Last year the committee reviewed 150 applications; in comparison, only 87 packets were reviewed in 2014, nearly half of this year's total. In the packets reviewed, there appeared to be a 1/3-2/3 female to male ratio. The CAPT received the applicant's materials mainly from the departments, whose quantity and quality have a high correlation with the ability of the committee to provide guidance, but not be the gatekeepers. The CAPT's mission is to maintain the high standards of our school while seeing our candidates promoted and recognized for the best work that they do.</p>	

			<p>Dr. Dell noted that most appeals are hugely successful. Packets should be well organized and complete and should not make the committee do the work for the candidate. He observed in his three years on the committee, that packets were coming to the committee much better organized allowing the committee to spend their mental energy on content</p> <p>Changes continue to be made to the process. Most recently is the use of Interfolio to upload packet documents and track the packet for completion. Hopefully, in the near future, it will be used for every single packet. The candidate uploads documents and the packet doesn't advance until everything is there.</p>	
5:25PM	Annual Report on Medical Student Admissions Committee	Christian Essman	Due to time constraints, the annual report on Medical Students Admissions will be postponed to the next Faculty Council Meeting.	Approved by general consensus.
5:25-5:42PM	New Business	Patricia Moore Richard Weinberger Kent Smith	<p>Patricia Moore, Richard Weinberger and Kent Smith have asked to bring forward to Faculty Council their concerns for the Department of Family Medicine and Community Health in a Resolution on the Importance of Family Medicine. For nearly 50 years the CWRU University Hospital Family Health residency provided the bulk of full-time faculty for Faculty Medicine. Working as part of a team is likely to be a norm for primary care. Teams need strong, well-trained leaders, and the residency trained family physician is an ideal team leader.</p> <p>They appreciate Dean Gerson's concern and they are looking forward to working with medical school leadership to determine a way forward to reinvigorate Family Medicine through the department.</p> <p>Kent Smith stated this issue is so critical because most people came here for the School of Medicine wanting the leading health services in the country. Patty Kellner noted that students follow a pregnant woman (these are patients who mostly lived in the inner city) through delivery and the first year of the baby's life. The broad training and building of relationships within the training residency serves them well throughout their career.</p>	



			Proximity to Case made Dr. Moore's practice a teaching site. She was able to model, in her practice, what students were learning in class and provide clinical correlations. Consequently, Case students were far better prepared for residency. Dr. Moore, Dr. Smith, and Dr. Weinberger hope that CWRU will consider supporting Family Medicine in training potential family physicians and providing a training site for medical students in the community. This matter will be reviewed by FCSC and may appear on the November 20 <sup>th</sup> . agenda.	
5:42PM	Adjourn		There being no outstanding agenda items to address, a motion was made and seconded, with no objections, to adjourn the meeting. The chair adjourned the meeting at 5:42PM.	

#### Present

Robert Abouassaly  
Joshua Arbesman  
Moises Auron  
Blaine (Todd) Bafus  
Elvera L. Baron  
Abigail Basson  
Maura Berkelhamer  
Matthias Buck  
Adrienne Callahan  
Aleece Caron  
Mohamad Chaaban  
Patrick Collier  
Marta Couce  
Darin Croft  
Andrew Crofton  
Margot Damaser  
Mackenzie Deighen  
David DiLorenzo  
Jonathan Emery  
Jessica Fesler  
Stephen Fink

Lisa Gelles  
Stan Gerson  
Ramy Ghayda  
Matthew Grabowski  
Alia Hdeib  
Amy Hise  
Jessie Jean-Claude  
Hung -Ying Kao  
Gaby Khoury  
Erin Lamb  
Alan Levine  
Jennifer Li  
Shawn Li  
David Ludlow  
Janice Lyons  
Dan Ma  
Tani Malhotra  
James Martin  
Raman Marwaha  
Christopher McFarland

William Merrick  
Gillian Michaelson  
David Mihal  
Dean Nakamoto  
Attila Nemeth  
Rebecca Obeng  
Anastasia Rowland-Seymour  
Tamer Said  
Hemalatha Senthilkumar  
Paul Shaniuk  
Bryan Singelyn  
Courtney Smalley  
Phoebe Stewart  
Usha Stiefel  
James (Jim) Strainic  
Ben Strowbridge  
Johannes von Lintig  
Mark Walker  
Scott Williams  
Wei Xiong

**Absent**

Corinne Bazella  
Dan Cai  
Piet de Boer  
Neil Bruce  
Meelie DebRoy  
Corinne Falck-Ytter  
Bahar Bassiri Gharb  
Rachael Gowen  
Peter K. Kaiser  
Eric W. Kaler  
Sadashiva Karnik  
Vijaya Kosaraju

Sangeeta Krishna  
Christina Krudy  
Mallika Lavakumar  
Kelly Lebak  
Lia Logio  
Dan Ma  
Mariel Manlapaz  
Daniela Mehech  
Nathan Mesko  
Rocio Moran  
Neal Peachey  
Cyrus Rabbani

Deven Reddy  
Alicia Santin  
Jacek Skowronski  
Joseph Tagliaferro  
Nami Tajima  
Patricia Taylor  
Johannes von Lintig  
Ari Wachsmann  
Robert Wetzel  
Leon R. White  
Samina Yunus

**Others Present**

Melissa Bonner  
Lisa D'Amato  
Michael Decker  
Michael Dell  
Nicole Deming

Tyffani Dent  
Christian Essman  
Joyce Helton  
Nelson Scott Howard

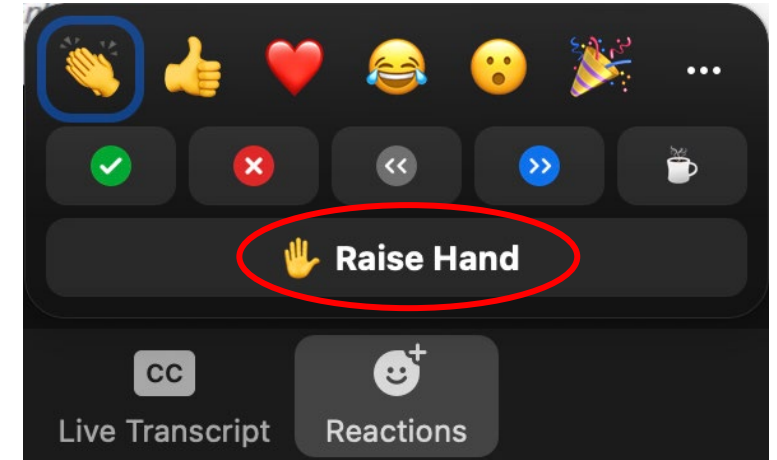
Siran Koroukian  
Patricia Moore  
Kent Smith  
Richard Weinberger

# Today's agenda

- Chair's announcements
- Approval of Oct. Minutes
- Dean's announcements (Stan Gerson), ~ 5pm
- Report from FCSC meeting (Darin Croft)
- Report from Senate/Senate Excom (Elvera Baron)
- Medical Student admissions - annual report (Lina Mehta)
- Annual reports matter (Matthias Buck and Amanda Brower)
- Women and Minority Committee – annual report (Amy Hise)
- Introduction to Awards Committee (Lynn Singer)
- New Business

# Using Zoom at Faculty Council meetings

- Raise your hand (Reactions menu)
- Wait to be acknowledged
- Lower your hand when done
- Chat function
  - Enter your name for purposes of attendance
  - Do not use for side conversations or to ask questions
  - Can be used to post hyperlinks and other information
- Votes will be conducted using the polling function
  - If you call in, you should register a voice vote



# Robert's Rules Review:

## How to make and act on a motion

1. Motion is stated (“I move that....”)

➤ Motion must be seconded for debate to proceed!

2. Motion is debated

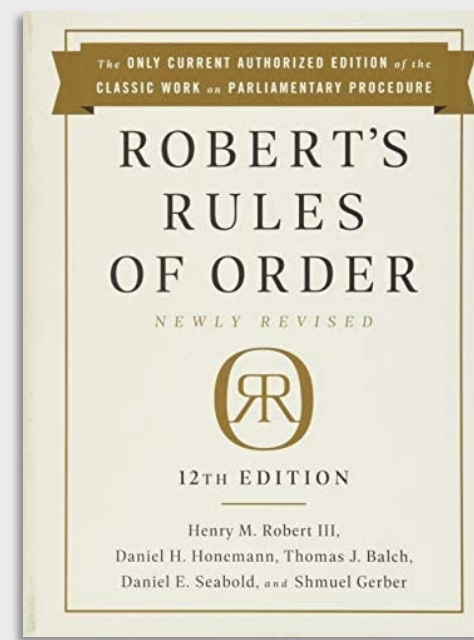
*\* Please speak only once if others have not spoken\**

3. Debate proceeds until someone moves to end it

➤ This must also be seconded!

4. Motion to end debate must be approved (by vote or consent)

5. After debate ends, a vote is taken on the motion



# SOM calendar

- Did you know the SOM has an events calendar?
- <https://case.edu/medicine/events/>
- Check it out to see what's going on in the School of Medicine
- To request that an event be added, use the “See How We Can Help” link on the same page

School of Medicine

Alumni | Faculty + Staff | Students

Search...

About ▾ Education ▾ Research ▾ Departments + Centers ▾ Events ▾ Giving ▾

HOME ▾ EVENTS

### Events

Dean's Significant Conversation Series

Juneteenth


Office of DEIE Lecture Series

The Charles L. Hoppel, MD Endowment in Mitochondrial Biology


Match Day

State of the School

Doc Opera



### Events



### NEWS

Share your news

Get a grant or award? Are you being published or planning an event? We want to hear from you!

[See How We Can Help](#)

### Event Planning

No two events are the same! Need some help with yours? The university has you covered.

[Explore University Resources](#)

### SOM EVENTS

Nov 21 [Molecular Medicine PhD Program Webinar](#)

Nov 21 [Post-baccalaureate Readiness Instruction for bioMedical Education \(PRIME\): Ask me anything](#)

Nov 25 [The Global Health & Infectious Disease \(GHID\) Research Conference](#)

[View Full Calendar](#)

# Agenda items for Nov FC meeting

- Must be submitted by Nov.24th (*this Friday*)
  - Send to Matthias Buck (mxb150@case.edu) and Nicole Deming (nmd11@case.edu)
- Will be considered by the Steering Committee on Monday, Dec 4<sup>th</sup> (3:30-5:00 pm)
  - Set this day/time aside for possible presentation (Zoom)
- Feel free to plan ahead and send requests for December!



# Veterans' Support

*The Case Western Reserve University [Division of Student Affairs](#) is compiling a list of students—undergraduate, graduate and professional—as well as faculty and staff members who are veterans of the United States military branches. This list will be used to provide veterans with information on programming and resources, and to provide opportunities for the veterans in our university community to connect.*

*One of those opportunities is a welcome program in honor of the university's first class of veterans from the [National Posse Veterans Program](#). Through this program, CWRU has welcomed veterans from each military branch of service as first-year students, but all veterans at the university are invited and encouraged to share their contact information to receive an invitation.*

*As CWRU works to expand its resources and programs to support and to honor those who have served, the input of veterans is extremely valuable. Help the university be of service to you by completing [the Veteran Interest Form](#).*



## For your Calendars

Tuesday, Nov. 28<sup>th</sup>., 1pm via zoom    President and Provost meet with the School  
State of Univ. Video posted  
Registration required in order to get zoom link  
and to send questions.

Weds, Dec. 6<sup>th</sup>., noon via zoom    Dean Gerson, State of the School Address  
in person and via zoom (registration required)

FACE ad hoc committee first meeting : Alan Levine will Chair for 1<sup>st</sup> yr., Vice Chair TBD

Fundamental Questions re. engagement and co-governance

...spring into practical action: simple things which can be improved

Pcard training/admin, cleanliness of hallways and elevators, etc...  
(not people but things)

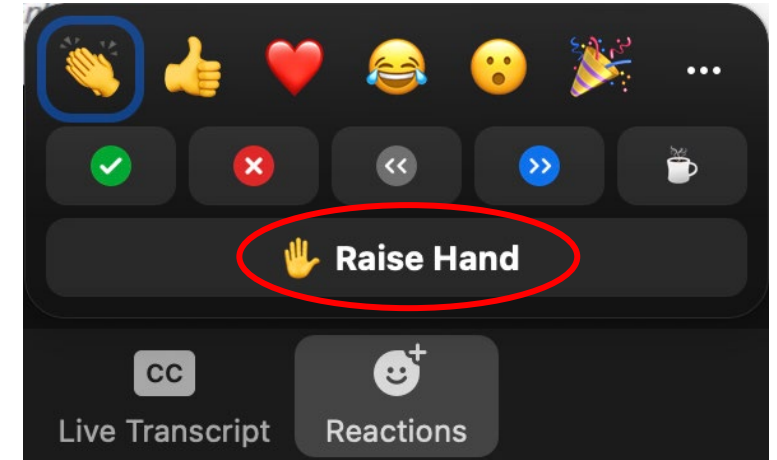
Email will go out to Faculty to solicit items: Let us know!

# Today's agenda

- Chair's announcements
- Approval of Oct. Minutes
- Dean's announcements (Stan Gerson), ~ 5pm
- Report from FCSC meeting (Darin Croft)
- Report from Senate/Senate Excom (Elvera Baron)
- Medical Student admissions - annual report (Lina Mehta)
- Annual reports matter (Matthias Buck and Amanda Brower)
- Women and Minority Committee – annual report (Amy Hise)
- Introduction to Awards Committee (Lynn Singer)
- New Business

# Using Zoom at Faculty Council meetings

- Raise your hand (Reactions menu)
- Wait to be acknowledged
- Lower your hand when done
- Chat function
  - Enter your name for purposes of attendance
  - Do not use for side conversations or to ask questions
  - Can be used to post hyperlinks and other information
- Votes will be conducted using the polling function
  - If you call in, you should register a voice vote



# Agenda items for DEC FC meeting

- Must be submitted by Nov.24th (*this Friday*)
  - Send to Matthias Buck (mxb150@case.edu) and Nicole Deming (nmd11@case.edu)
- Will be considered by the Steering Committee on Monday, Dec 4<sup>th</sup> (3:30-5:00 pm)
  - Set this day/time aside for possible presentation (Zoom)
- Feel free to plan ahead and send requests for December!

Text from Piet de Boer, Chair of SOM Bylaws Committee

Below is a document with proposed bylaws changes that were voted on and approved by the bylaws committee on 9/14/23 and 10/12/23, and that we now submit for consideration by the Faculty Council.

The proposed changes reflect the fact that since ~ 10 years ago the Faculty Senate bylaws (By-law VII, Item b5) mandates that the SOM senator on the University Senate's executive committee shall be an ex officio member of the SOM Faculty Council. Evidently, this mandate never percolated through into our Bylaws and this needs to be corrected.

Faculty Council also needs to decide whether this ex officio member shall be a voting or non-voting member. Reasonable arguments can be made for either case: none of the other ex officio members of Faculty Council have voting privileges, but then none of these other ex officio members were elected by the full SOM faculty to their position. Unless stipulated otherwise in the bylaws, ex officio members have voting privileges by default according to Robert's Rules of Order. So, in official terms, Faculty Council will need to discuss this issue and vote on whether to withdraw voting privileges from this member or not.

In the attached document, we present two proposed updated variants of article 3.2 (Membership of the Faculty Council). In one, the SOM senator on the University Senate's executive committee shall have voting privileges on Faculty Council. In the other they shall not. In both versions, some existing language has been deleted as it is no longer needed nor desirable because FC membership shall always include at least one SOM senator.

In the two attached variants, deleted/changed text (relative to the current bylaws text) is in red, and new text in blue. This is followed with rationales in italics, including indications of who initiated the proposed change and the date we voted to approve it. Line numbers refer to the 'old' current text.

We suggest to first present both variants to FC as an introduction to the issue and an invitation for discussion followed by a vote on whether this member shall have voting privileges or not. We can then focus on the relevant variant of article 3.2 and discuss and vote on whether the specific proposed text will be adopted or not.

Variant A: SOM ExCom representative voting on SOM FC:

### 3.2: Membership of the Faculty Council

a. Voting Members. Voting members of the Faculty Council shall include one representative of each academic department (all references hereafter to academic departments include the Division of General Medicine Sciences (DGMS), which has departmental status; see Article 4.7). These representatives shall be referred to as department representatives. An exception to the apportionment of one voting representative to each academic department is made for the Louis Stokes Cleveland VA Medical Center (VAMC; see Article 3.3d, below), where academic departments have not been established (as defined in the Faculty Handbook, Chapter 2, Article VII, Sec. B). Other voting members shall include two representatives from the special faculty whose titles are modified by the adjective adjunct or clinical, one representative from each affiliated institution, ~~and~~ 10 representatives of the regular faculty elected at large, and the elected senator representing the school of medicine on the executive committee of the university's Faculty Senate. All these representatives shall be members of the faculty.

b. Non-voting Members. Non-voting members of the Faculty Council shall be the president of the university, ~~a vice-president of the university responsible for medical school activities~~, the dean of the School of Medicine, the ~~associate~~ vice dean for medical education of the School of Medicine, the chair of the Committee on Medical Education, and student members who shall include not more than two undergraduate medical students, one M.D.-Ph.D. student, and one Ph.D. graduate student. The student members shall be chosen by their respective groups. To facilitate communication between Standing Committees and the Faculty Council, if no member of a Standing Committee of the Faculty of Medicine is a voting member of the Faculty Council, the Faculty Council Chair may appoint one of the Standing Committee's elected members to serve as a non-voting *ad hoc* member, in accordance with each committee's charge. ~~If a representative to the university Faculty Senate is not included in the Faculty Council as a voting member, the Faculty Council Chair shall appoint one of the School of Medicine senators to be an ad hoc member of the Faculty Council.~~ The Faculty Council Chair may invite other persons to attend designated meetings. Faculty Council meetings shall be open to the faculty. Faculty members may at any time request hearings before Faculty Council, but a request by a faculty member for a hearing before the Faculty Council must be made to the chair prior to the meeting of the Faculty Council.

*Rationales:*

Lines 10-12 (BC initiated, BC-approved: 9/14/23):

*The Faculty Senate bylaws (By-law VII, Item b5) mandates that the SOM senator on the University Senate's executive committee shall be an ex officio member of the SOM Faculty Council.*

*The proposed text includes this individual as a voting member in 3.2a.*

*Note that none of the other ex officio members have voting privileges but also that, unlike the Senator, none of these other ex officio members were democratically elected by the full SOM faculty to the position granting them ex officio status.*

Line 14 (BC initiated, BC-approved: 9/14/23):

*The existing language is redundant as the dean is in fact the 'vice-president of the university responsible for medical school activities'.*

Line 15 (BC initiated, BC-approved: ?/23):

*The position 'associate dean for medical education' has become 'vice dean for medical education'.*

Lines 22-24 (BC initiated, BC-approved: 9/14/23):

*The existing language is no longer needed/relevant as Faculty Council now always includes at least one SOM Senator as a member (voting or non-voting).*



Variant B: SOM ExCom representative non-voting on SOM FC:

### 3.2: Membership of the Faculty Council

a. Voting Members. Voting members of the Faculty Council shall include one representative of each academic department (all references hereafter to academic departments include the Division of General Medicine Sciences (DGMS), which has departmental status; see Article 4.7). These representatives shall be referred to as department representatives. An exception to the apportionment of one voting representative to each academic department is made for the Louis Stokes Cleveland VA Medical Center (VAMC; see Article 3.3d, below), where academic departments have not been established (as defined in the Faculty Handbook, Chapter 2, Article VII, Sec. B). Other voting members shall include two representatives from the special faculty whose titles are modified by the adjective adjunct or clinical, one representative from each affiliated institution, and 10 representatives of the regular faculty elected at large. All these representatives shall be members of the faculty.

b. Non-voting Members. Non-voting members of the Faculty Council shall be the president of the university, ~~a vice-president of the university responsible for medical school activities~~, the dean of the School of Medicine, the ~~associate~~ vice dean for medical education of the School of Medicine, ~~the senator representing the school of medicine on the executive committee of the university's Faculty Senate~~, the chair of the Committee on Medical Education, and student members who shall include not more than two undergraduate medical students, one M.D.-Ph.D. student, and one Ph.D. graduate student. The student members shall be chosen by their respective groups. To facilitate communication between Standing Committees and the Faculty Council, if no member of a Standing Committee of the Faculty of Medicine is a voting member of the Faculty Council, the Faculty Council Chair may appoint one of the Standing Committee's elected members to serve as a non-voting *ad hoc* member, in accordance with each committee's charge. ~~If a representative to the university Faculty Senate is not included in the Faculty Council as a voting member, the Faculty Council Chair shall appoint one of the School of Medicine senators to be an ad hoc member of the Faculty Council.~~ The Faculty Council Chair may invite other persons to attend designated meetings. Faculty Council meetings shall be open to the faculty. Faculty members may at any time request hearings before Faculty Council, but a request by a faculty member for a hearing before the Faculty Council must be made to the chair prior to the meeting of the Faculty Council.

*Rationales:*

Line 13 (BC initiated, BC-approved: 9/14/23):

*The existing language is redundant as the dean is in fact the 'vice-president of the university responsible for medical school activities'.*

Line 14 (BC initiated, BC-approved: ?/23):

*The position 'associate dean for medical education' has become 'vice dean for medical education'.*

Lines 14-15 (BC initiated, BC-approved: 9/14/23):

*The Faculty Senate bylaws (By-law VII, Item b5) mandates that the SOM senator on the University Senate's executive committee shall be an ex officio member of the SOM Faculty Council.*

*The proposed text includes this individual as a non-voting member in 3.2b.*

*Note that none of the other ex officio members have voting privileges but also that, unlike the Senator, none of these other ex officio members were democratically elected by the full SOM faculty to the position granting them ex officio status.*

Lines 22-24 (BC initiated, BC-approved: 9/14/23):

*The existing language is no longer needed/relevant as Faculty Council now always includes at least one SOM Senator as a member (voting or non-voting).*

Points of deliberation for FC:

1) Article 3.2a:

Faculty Council voting members include 'two representatives from the special faculty whose titles are modified by the adjective adjunct or clinical'.

See also article 3.3e:

' Special Faculty representatives: The nomination and Elections Committee (see Article 3:6b) shall nominate at least four members of the special faculty whose titles are modified by the adjective adjunct or clinical as candidates for representative to the Faculty Council. Two of these nominees shall be elected by the special faculty whose titles are modified by the adjective adjunct or clinical. The remaining nominees will serve as alternates in the order of votes received.'

See also article 3.6b:

'In addition, the Nomination and Elections Committee shall nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council,.....'

However, these members are not listed on the Faculty Council Roster of the last couple of years, at least. Have no candidates for these memberships been identified? Have such members ever been specifically elected to FC? Does FC wish to keep these members? If so, how to ensure such members will be elected?

2) The current student membership of faculty council consists of 2 (undergraduate) medical students, 1 MSTP student and 1 Ph.D. graduate student. There are roughly 880, 50, and 410 of such students at the SOM, respectively.

M.S. graduate and non-medical undergraduate students at the SOM have grown similarly numerous (~950 and ~360, respectively) but are not represented. Should they be? Would this be useful and feasible?

From Piet de Boer, Chair of SOM Bylaws Committee

The proposed changes were initiated by Faculty Council (FC) on 6/12/23 with a request to the bylaws committee (BC) to 'generate a section of the bylaws specify that the NEC will make efforts to ensure that at least two "basic science" department and at least two "clinical" department faculty member serve on the faculty senate.'

The next page of this document highlights some relevant parts of the University constitution/handbook and of the SOM bylaws, which are pertinent to the requested language as they limit the ability of the SOM/NEC to affect the SOM senator pool composition. Page 3 shows the current bylaws text of part of article 3.6b. Partially redundant text that we separately propose to improve is highlighted. This is followed by our proposed text, which includes a statement as requested by FC, as well as text to eliminate the redundancy highlighted on page 23 This is followed by a 'clean' copy of the proposed text with only new text in blue, and rationales for the proposed changes.

6/12/23 request by Faculty Council (FC):

Be it resolved that the FC of CWRU-SOM requests that the Bylaws Committee generate a section of the bylaws specify that the NEC will make efforts to ensure that at least two "basic science" department and at least two "clinical" department faculty member serve on the faculty senate.

Constitution/Handbook:

#### ARTICLE V. THE FACULTY SENATE

Sec. F. Apportionment, Election, Term of Office, and Vacancies

Par. 1. APPORTIONMENT. Pursuant to Article V, Section C, each constituent faculty of fewer than seventy voting members of the University Faculty shall elect three voting members of the Faculty Senate, each constituent faculty of at least 70 but fewer than 150 shall elect five and each constituent faculty of 150 or greater shall elect ten.

Par. 2. ELECTION. Each elected faculty member of the Faculty Senate shall be elected by majority vote of the constituent faculty represented, but no one such member shall represent more than one electorate.

SOM bylaws:

#### ARTICLE 3: THE FACULTY COUNCIL

3.6: Committees of the Faculty Council, b. Nomination and Elections Committee.

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee.

Interpretation by bylaws committee:

Given a) The constitutional prescription in article V, F, 2 that 'each elected faculty member of the Faculty Senate shall be elected by majority vote of all voting members of the SOM faculty', and b) The SOM bylaws prescription in article 3.6b above, leaves the SOM/NEC with limited 'legal' means to affect the composition of the SOM senator pool.

In addition, though perhaps unlikely, there may simply not be enough willing senator candidates of a particular flavor for the NEC to recruit each and every year.

In drafting new proposed bylaws text, therefore, the bylaws committee wished to express the request on the SOM senator pool composition by Faculty Council while recognizing the limited means the NEC has to affect this composition. The NEC still can adopt several strategies to influence the senator pool composition, but these are best described in some detail in the NEC charge document, which is due a significant update anyway (current version is from 1995!).

Current bylaws text:

### 3.6: Committees of the Faculty Council

In addition, the Nomination and Elections Committee shall nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled. The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of candidates to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a ranked choice voting system.

**Commented [PdB1]:** Partially redundant with sentence below

**Commented [PdB2]:** Partially redundant with sentence above.  
Also, this prescription would not prevent a Senator who is also a member of a standing committee to seek a second position on another standing committee, which is not logical.

Proposed by BC (new text in blue, deleted text in red):

### 3.6: Committees of the Faculty Council

In addition, the Nomination and Elections Committee shall nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled. The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall

also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. Accordingly, the Nomination and Elections Committee shall strive to have at least two of the ten SOM senator positions filled by faculty members with a primary appointment in a basic science department, and at least two of the ten by those with a primary appointment in a clinical department. However, a ~~nominee~~ candidate for the Senate or for a standing committee may not be put on the ballot if in winning the election they would ~~serve on more than two~~ occupy more than two combined memberships of the Senate and standing committees of ~~either~~ the Faculty of Medicine or ~~of~~ Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. ~~Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council.~~ Exceptions may be made only if the Nominations and Elections Committee is unable to recruit ~~a sufficient number of~~ enough candidates to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a ranked choice voting system.

Proposed by BC (clean copy, new text in blue):

### 3.6: Committees of the Faculty Council

In addition, the Nomination and Elections Committee shall nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled. The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. Accordingly, the Nomination and Elections Committee shall strive to have at least two of the ten SOM senator positions filled by faculty members with a primary appointment in a basic science department, and at least two of the ten by those with a primary appointment in a clinical department. However, a candidate for the Senate or for a standing committee may not be put on the ballot if in winning the election they would occupy more than two combined memberships of the Senate and standing committees of either the Faculty of Medicine or of Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the

Faculty Council or of the dean is not included in this count. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit **enough** candidates to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a ranked choice voting system.

*Rationales:*

*Line numbers refer to the 'clean' copy.*

Lines 11-14 (FC initiated, BC-approved: 11/14/23):

*New language requested by Faculty Council on 6/12/23. Placement of this new sentence ties in with the NEC striving to produce a diverse slate of nominees, considering representation of basic science and clinical departments, amongst others, in the preceding sentence.*

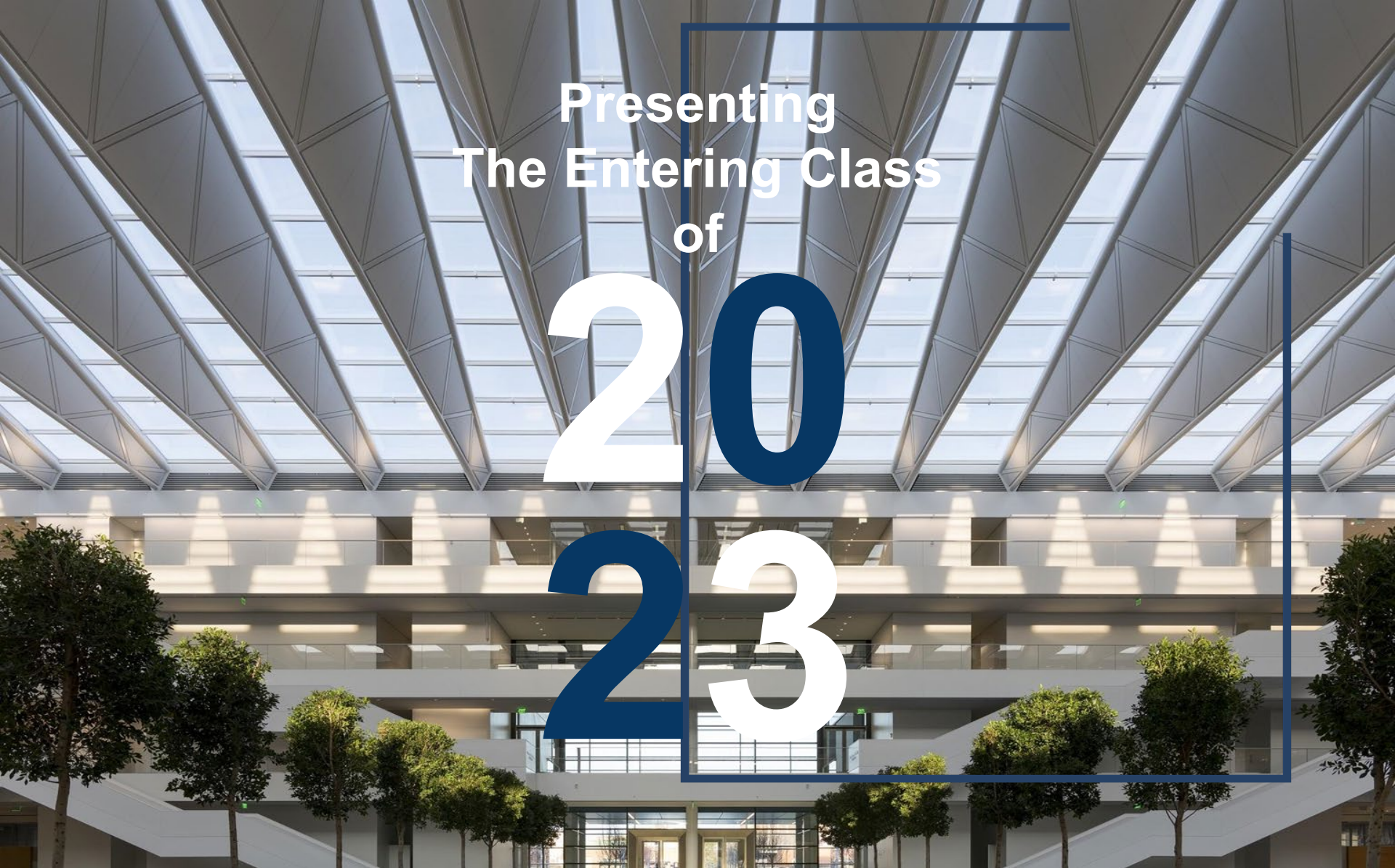
Lines 14-17 (BC initiated, BC-approved: 11/14/23):

*Consolidates two repetitive sentences in a more comprehensive and logical one, and improves text flow.*

Line 19 (BC initiated, BC-approved: 11/14/23):

*Simpler and shorter language.*





Presenting  
The Entering Class  
of

20  
23

Dr. Lina Mehta  
*Associate Dean for Admissions*

# Application Statistics

***Total Applications Nationally: 50,061 (-5%)***

***Total Applications to CWRU: 8,615(+6%, 15% of US apps)***

***2023 Entering Class Size: 216***

## ***University Program***

- Applications: 7,345
- Interviews: 797
- Matriculants: 172

## ***CCLCM***

- Applications: 1,690
- Interviews: 205
- Matriculants: 32

## ***MSTP***

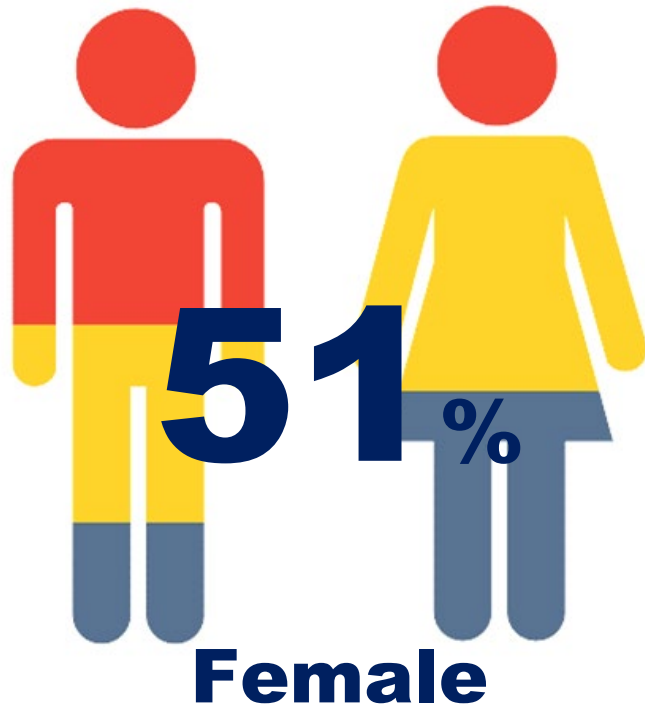
- Applications: 440
- Interviews: 103
- Matriculants: 12



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY

# Demographics



**Age Range: 21-44**



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY

Asian	Alone	77	Other		Alone	6
	In Combination	10			In Combination	3
	Alone or in Combination	87				
Black or African American	Alone	11			Alone or in Combination	9
	In Combination	6				
	Alone or in Combination	17	White	Alone		73
Hispanic, Latino, or of Spanish Origin	Alone	13		In Combination		18
				Alone or in Combination		91
	In Combination	7				
	Alone or in Combination	20	Unknown			10
American Indian or Alaska Native	Alone	1	Data includes duplicate information in each category			
	In Combination	1				
	Alone or in Combination	2				

<b>Unduplicated Total Matriculants</b>	<b>216</b>
--	------------

# Demographics

**LGBTQ: 27**

**First Generation College: 19**

**Rural Areas of US: 11**

**Military Service: 1**

**Nontrad (> or = 25 yrs old): 43**

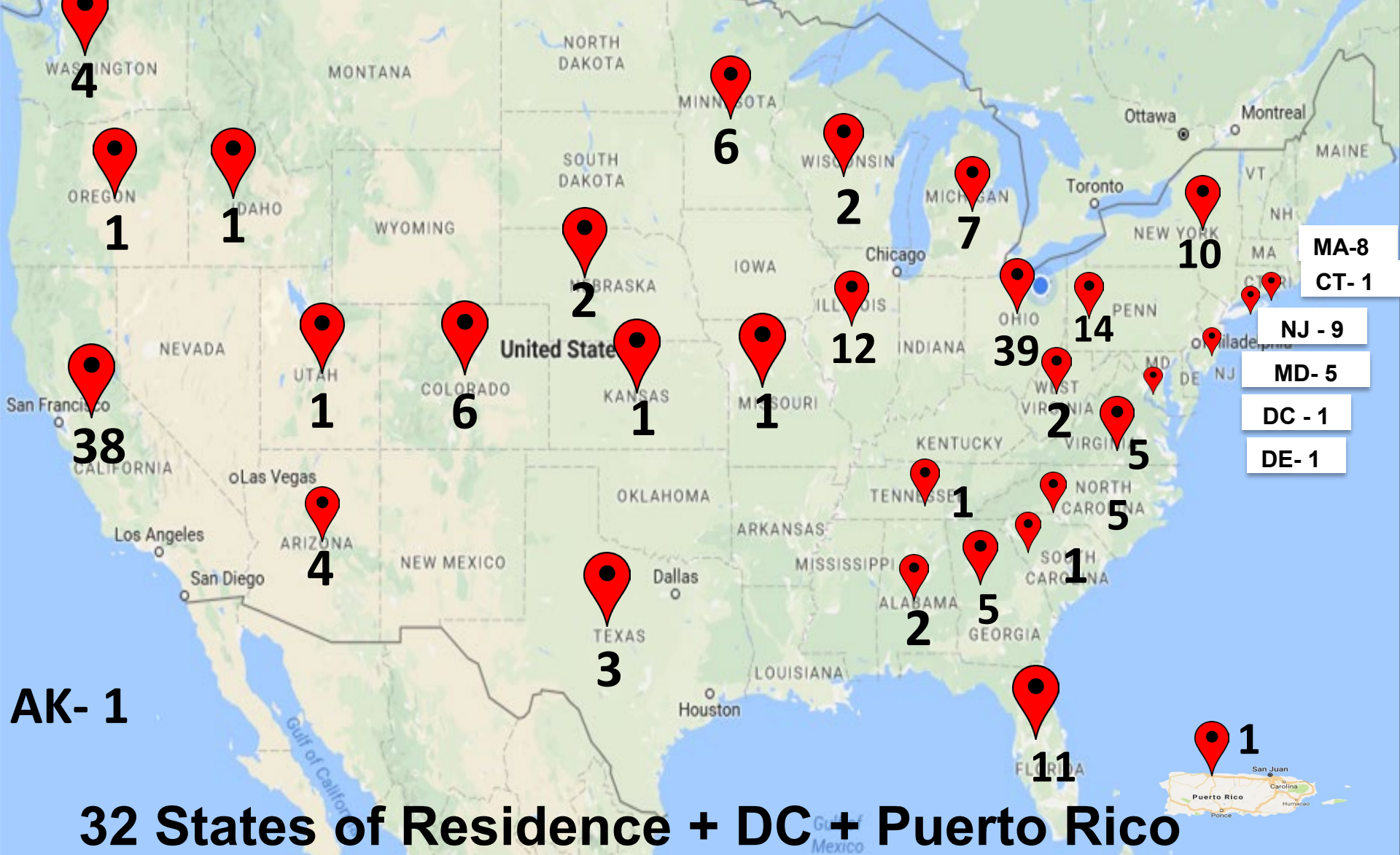
**Graduated from college more than 1 year ago: 180**



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY





## 32 States of Residence + DC + Puerto Rico

5 Countries: Canada, India, China, Indonesia, and Serbia

18% In-state 82% Out-of-state

# 86 Different Colleges & Universities



**27**



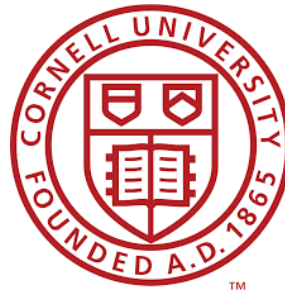
**17**



**13**



**10**



**8**



**8**



THE OHIO STATE  
UNIVERSITY

**7**



**6**



EMORY  
UNIVERSITY

**5**



**5**



**5**

# Complete List of Schools

American University- 1
Auburn University- 1
Barnard College- 1
Brigham Young University- 2
Brown University- 1
California State University San Bernardino- 1
Carleton College- 1
Carnegie Mellon University- 1
Case Western Reserve University- 27
Central Michigan University- 1
Chapman University- 1
Clemson University- 1
Colby College- 1
Colgate University- 2
Colorado State University- 2
Columbia University- 3
Cornell University- 8
Dartmouth College- 3
Davidson College- 1
Duke University- 5
Earlham College- 1
Emory University- 5
Florida Institute of Technology Melbourne-1
George Washington University- 1
Georgetown University- 1
Georgia Institute of Technology- 2
Hamilton College- 1
John Carroll University- 1
Johns Hopkins University- 17
Loyola University Chicago- 1
Massachusetts Institute of Technology- 1
McGill University- 1

Miami University- 1
Northeastern University- 2
Northwestern University- 1
Occidental College- 1
Penn State University- 1
Pepperdine University- 1
Princeton University- 2
Rice University- 2
Rockhurst University- 1
Rutgers University- 1
Southern Methodist University- 1
St. Olaf College- 1
Stanford University- 1
Tennessee Technological University- 1
The Ohio State University- 7
The University of Alabama- 1
The University of Alberta- 1
University of California- Berkeley- 6
University of California- Irvine- 1
UCLA- 10
University of Cal., San Diego- 1
University of Charleston- 1
University of Cincinnati- 1
University of Colorado-Boulder- 1
University of Connecticut- 1
University of Florida- 5
University of Idaho- 1
University of Illinois at Chicago- 4
University of IL-Urbana Champaign- 1
University Maryland- 1
University of Miami- 1
University of Michigan- 13

University of Minnesota Twin Cities- 1
University of North Carolina Chapel Hill- 1
University of Notre Dame- 5
University of Oregon- 1
University of Pennsylvania- 4
University of Pittsburgh- 3
University of Southern California- 2
University of Toledo- 1
University of Virginia- 1
University of Washington- 1
University of Wisconsin- Madison- 4
University of Vanderbilt University- 3
Villanova University- 1
Virginia Military Institute- 1
Wake Forest University- 1
Washington and Lee University- 1
Washington University in St. Louis- 8
Wellesley College- 1
Wesleyan University- 2
West Virginia University- 1
Williams College- 2
Yale University- 1



# Majors and Graduate Degrees

## Undergraduate Degrees

Animal Science, Anthropology, Biochemistry, Bioengineering, Biological Engineering, Biology, Biomedical Engineering, Biomedical Science, Biomolecular Science Biophysics, Business Administration, Cell and Molecular Biology, Cellular Biology, Chemical Biology, Chemical Engineering, Chemistry, Classics, Cognitive Science, Cognitive Studies, Comparative Literature, Computational and Systems Biology, Computer Science, Dance, Economics, Engineering, English, Environmental Biology, Environmental Science, Environmental Studies, Evolutionary Anthropology, Evolutionary Biology, Film Studies; Finance, Food Science, Genetics and Genomics, Exercise Science, Health and Society; Health Sciences, Health Systems and Population Health, Healthcare Management and Policy, Hispanic Literatures and Cultures, Human Health, Human Physiology, Integrated Health Studies, Interdisciplinary Studies, Literature, Materials Science, Mathematics, Medical Sciences Medicine, Science, and the Humanities, Molecular and Cellular Biology, Molecular Environmental Biology, Molecular, Cell, and Developmental Biology, Movement Science, Music, Psychobiology, Natural Sciences, Neurobiology, Neuroscience, Neuroscience and Behavior, Petroleum Engineering, Philosophy, Psychological and Brain Sciences, Physics, Psychology, Public Health, Sociology, Spanish, Statistics, Toxicology, Science, Technology and Society, Social Policy Analysis, Sports Medicine, Behavioral Biology

## Graduate Degrees - 30

Engineering  
Chemical Engineering  
Biomedical Engineering  
Medical Physiology  
Healthcare Management  
Chemistry  
Accounting  
MBA  
MPH in Epidemiology  
Bioethics  
MPH  
Nursing (Nurse Practitioner)  
Liberal Studies  
Biostatistics  
Physiology  
Population and Family Health  
Molecular Microbiology &  
Immunology  
Population Health Sciences  
Law  
Education  
Anatomy  
Materials Science



**2**

**Chemistry,  
Biomedical  
Engineering**

**45**

**Double Majors**

**2**

**Triple Majors**

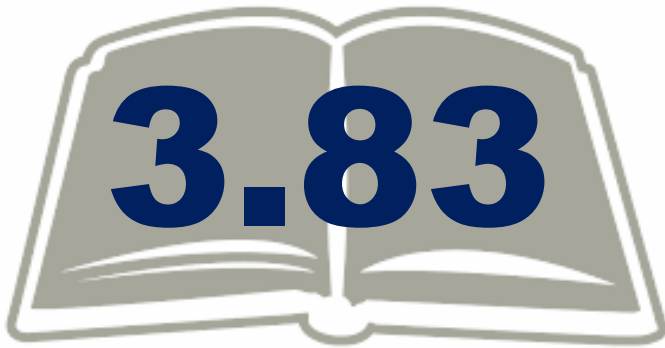
**JD**



**1**



# Academic Credentials



**Average Cumulative GPA**

## ***Cumulative GPA***

**Range: 2.87-4.0**

**Median: 3.88**

**Mode: 4.0**

*National Avg. Matriculating Student Cumulative GPA (2022): 3.74  
(SD = .25)*

---

## ***Science GPA***

**Range: 2.43-4.00**

**Median: 3.86**

**Mode: 4.0**

*National Avg. Matriculating Student Science GPA (2022):  
3.67  
(SD = .31)*



**Average Science GPA**



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY

# Academic Credentials

## MCAT

n= 198

Average: 518 (95%)

Median: 518 (95%)

Mode: 517 Range: 505-527

National Matric. Student Avg. 2022 = 511.9 (80-83%)  
(SD = 6.6)



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY

# Work/Extracurricular/Academic Activities



**198**

Research Experiences



**21**

Artistic Endeavors

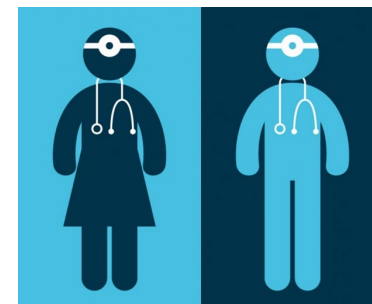


**137**

Volunteer Medical Experiences

**120**

Paid Medical Experiences



**148**

Physician Shadowing,  
Clinical Observation



**54**

Publications



**96**

Teaching/Tutoring/T  
A



**94**

Leadership Experiences



**11**

Intercollegiate Athletics

**145**

Other Volunteer  
Experiences



SCHOOL OF MEDICINE

CASE WESTERN RESERVE  
UNIVERSITY



# CWRU **Medicine**

INAUGURAL  
ISSUE

SUMMER 2023

180

YEARS OF  
MEDICINE

Students  
share their  
experiences  
at CWRU

Innovation  
at the  
Midtown  
Collaboration  
Center

## SHAPING OUR COMMUNITY

Dynamic partnerships help us improve  
health and advance medicine





CASE WESTERN RESERVE  
UNIVERSITY



# Leading for 180 years

Since 1843, Case Western Reserve University School of Medicine has been at the forefront of medical education and discovery.

Ranked as one of the top-25 medical schools in the country and both the #1 medical school and largest biomedical research institution in Ohio, Case Western Reserve is renowned for its innovative curriculum, translational research successes, and commitment to the community.

As we celebrate 180 years of serving Northeast Ohio and the world, philanthropic support of the Catalytic Fund—the School of Medicine Annual Fund—continues to have immediate and lasting impacts on the field of medicine that would be unattainable without the generosity of alumni and friends.

Empower tomorrow's healthcare leaders by supporting the Catalytic Fund.

Give today at [case.edu/medicine/giving](https://case.edu/medicine/giving).

## Table of contents



### A center for connection / p. 18

At the heart of Cleveland's Health-Tech Corridor—stretching from the city's downtown business district to University Circle's academic, cultural and healthcare hub—you'll soon find a hotbed of economic development and medical innovation. The 95,000-square-foot [MidTown Collaboration Center](#), located at East 66th Street and Euclid Avenue, will be home to offices of project leaders the Cleveland Foundation and JumpStart Inc., as well as research and programming for partners such as Case Western Reserve University, University Hospitals and Cleveland Institute of Art. The site will illustrate the value of advancing leading-edge research, investing in the historic Hough community, and bridging the city's two centers to create a more connected Cleveland.

07

From Match Day to rankings, see what's new at CWRU

30

Get an inside look at the experiences of six students

42

Explore breakthrough research taking place in our labs

50

Find homecoming news, awards and classmate updates

54

Read about the trailblazing career of Julie Gerberding



CASE WESTERN RESERVE  
UNIVERSITY  
School of Medicine

10900 Euclid Ave.  
Cleveland, OH 44106-7017  
[medweb@case.edu](mailto:medweb@case.edu)

#### Writers/Editors

Amanda Brower  
Anthony Fossaceca  
Lauren Marchaza  
Emily Mayock  
Mark Oprea

Daniel Robison  
Carey Skinner Moss

#### Designers

Liz Brown  
Cindy Young

#### School of Medicine Leadership

**Stanton L. Gerson, MD**  
Dean and Senior Vice President for Medical Affairs

**Paul Bristol**  
Vice Dean, Finance and Administration

**Michael Dolsak**  
Vice President, Health Sciences Development

**Cynthia Kubu, PhD**  
Vice Dean, Faculty

**Lia Logio, MD**  
Vice Dean, Medical Education

**Grace McComsey, MD**  
Vice Dean, Clinical and Translational Science

**Marvin Nieman, PhD**  
Vice Dean, Graduate Education

**William Schiemann, PhD**  
Vice Dean, Research

**Gary Schwartz, MD**  
Vice Dean, Oncology

**Lindsey Whitting**  
Vice Dean, Development and Alumni Relations

This publication was created by Case Western Reserve University, 10900 Euclid Ave., Cleveland, OH 44106-7017. Telephone 216.368.4440. Printed by Lake Erie Graphics. Nonprofit postage paid in Cleveland, Ohio, and additional mailing offices. ©2023 Case Western Reserve University. All rights reserved.



# Checking in

## A Q&A with Dean Stan Gerson

**W**hen Stan Gerson became Case Western Reserve University School of Medicine's interim dean in July 2020, the U.S. was tackling dual crises: the COVID-19 pandemic and a reckoning with systemic racism after the murder of George Floyd.

In the months that followed, Gerson helped the school navigate myriad challenges—from remote learning to local health inequities—that ultimately strengthened the school's educational offerings and commitment to diversity, equity and inclusion.

Gerson, a nationally renowned physician and cancer researcher who led the Case Comprehensive Cancer Center for nearly 20 years, officially became dean of the School of Medicine and the university's senior vice president for medical affairs in October 2021.

For the inaugural issue of *CWRU Medicine*, we sat down with him to learn more about the state of the school and his vision for the future.

**CWRU MEDICINE:** The School of Medicine is celebrating its 180th anniversary this year and, throughout its history, has been a leader in innovative education and groundbreaking discoveries. What priorities have been identified for the school as it moves into its next chapter?

**DEAN GERSON:** Working with our school's leadership team, we created a five-year strategic plan—the school's roadmap—which is rooted in our commitment to diversity, equity and inclusive excellence. We identified three broad interdisciplinary priorities that bring together the depth of expertise of our faculty across our five campuses: artificial intelligence (AI) and machine learning in medicine, therapeutic discovery and development, and population and community health.

**CWRU MEDICINE:** David Margolius recently took the helm as director for the Cleveland's Department of Public Health. During a lecture at

the School of Medicine, "Racism as a Public Health Crisis—Envisioning the Future," he shared a stark picture of the current state of health of the people in the city of Cleveland. What do you see as the medical school's role within the community in changing the trajectory of health disparities?

**DEAN GERSON:** Our clinical faculty members at the School of Medicine provide more than 75% of the healthcare for those living in Northeast Ohio. As Dr. Margolius illustrated in his talk, those living within the same zip code as our university have a life expectancy of 65.4, versus just a few miles away in Shaker Heights, where the life expectancy is 88. This data should give us all pause.

One of the top three priorities at the School of Medicine is a population community health initiative to improve "whole-person health." Partnering with the Cleveland Foundation, we are investing in what will be the Midtown Collaboration Center in the Hough neighborhood, where we will be moving



PHOTO BY NICHOLAS MCLAUGHLIN

our urban and public health education programs, nutrition kitchen, and health screening and community education programs—allowing us to be embedded as part of the community. (Learn more on p. 26.)

With this broad movement on the part of our physicians, educators and researchers, we can link our expertise in medicine to benefit the community. It also provides a unique way to work with faculty across the university who are also working to improve health outcomes through policy and other outreach efforts. And by working in partnership with Dr. Margolius, who has the vision we need right now to address health inequities that can no longer be ignored, there is an opportunity to transform the health of our community.

**CWRU MEDICINE:** You also mentioned therapeutic discovery and development as a key priority—how does the school plan to enhance its work in this area?

**DEAN GERSON:** We now have a Center for Therapeutic Discovery and Development, and I'm very excited about the opportunities there. Current initiatives are taking full advantage of our expertise in small molecules to advance new therapies for cancer and other inflammatory diseases. And we are working toward developing genetic engineering products so a single patient can benefit from customized treatment. Our cell therapy programs are one of the top in the country. Add in nanotherapeutics, imaging therapeutics and early phase clinical trials, and when you put these together, and we have outstanding capabilities.

Our goal is to move our scientific research into early-phase, FDA-reviewed clinical trials here in Cleveland by building a clinical therapy production facility. To take on these exciting initiatives, we will also build biotechnology commercial ventures, partner across our healthcare facilities, join forces in clinical trials with hospitals and community partners and build a local workforce that sustains our efforts.

Recognizing the potential of AI as the next frontier in medicine, we are investing in AI research that would lead to developing imaging diagnostics, speeding drug discovery and creating tools to predict adverse health effects in communities. And, even more importantly, we will leverage the expertise of our bioethicists to reduce bias in healthcare, which has plagued underserved populations right here in Cleveland.

There are so many opportunities ahead for CWRU School of Medicine—and I'm honored to lead the school at this dynamic, promising and exciting time.



# News

Honors, events, updates and accomplishments from across CWRU's medical school



## A SHOW OF SUPPORT

The strings plucked and trumpets blared. Voices broke into chorus. The audience erupted into cheers and applause.

It was yet another successful evening of fun and fundraising in mid-December as more than 200 student and faculty volunteers from Case Western Reserve University School of Medicine and its Cleveland Clinic Lerner College of Medicine took to the John Hay High School stage (and orchestra pit) for the 38th annual Doc Opera.

This year's student-written, -directed, -choreographed and -performed musical parody revue, *Stitch Perfect*, featured songs such as "When I'm an M1" (to the tune of Kelly Clarkson's "Since U Been Gone"), "Residency Baby" (a play on "Industry Baby" by Lil Nas X) and "Hypoxic" (channeling Britney Spears' "Toxic"). Plus, faculty members joined in for tunes such as "EMR Killed the Paper Chart" (The Buggles' "Video Killed the Radio Star").

The end result: impressive performances, countless laughs and approximately \$15,000 raised for the Student-Run Health Clinic, through which medical, nursing, dental and social work students from Case Western Reserve provide free care to the Cleveland community.



PHOTO BY DAN MILNER

## IT'S A MATCH

When Class of 2023 students tore open their envelopes to discover their post-graduation residency placements in March, they learned they matched with top-ranked hospitals throughout the U.S.

Speaking to the crowd gathered at the Health Education Campus of CWRU and Cleveland Clinic, Dean **Stan Gerson, MD**, reminded students that their adaptability, which they've shown while learning during the COVID-19 pandemic, will be their strength as physicians. "As the next generation of healthcare leaders," he said, "you have witnessed a moment in time when science and medicine needed to solve a healthcare need. And it will not be the last."

Out of more than 200 students who matched, 25% will continue serving the Cleveland community through residencies at Cleveland Clinic, MetroHealth Medical Center and University Hospitals, while nearly 30% will remain in Ohio. Top residency choices included anesthesiology, radiology, internal medicine, emergency medicine and general surgery, with 38% of the class entering primary care specialties.

### Among their 84 destinations

- Brigham & Women's Hospital
- Brown University/Rhode Island Hospital
- Cleveland Clinic
- Columbia University
- Duke University Medical Center
- Emory University Medical Center
- Johns Hopkins Hospital
- Massachusetts General Hospital
- Mayo Clinic
- MetroHealth Medical Center
- Stanford Health Care
- UCLA
- University Hospitals
- University of Pennsylvania
- Yale-New Haven Hospital

## CANCER CENTER WELCOMES NEW LEADER

A Columbia University oncologist renowned for his translational research, mentoring and leadership became director of the Case Comprehensive Cancer Center (Case CCC) this spring.

**Gary Schwartz, MD**, chief of the Hematology and Oncology Division at Columbia University Irving Medical Center and deputy director of its Herbert Irving Comprehensive Cancer Center, succeeds Case Western Reserve University School of Medicine Dean **Stan Gerson, MD**, who led the center since 2004.

"I am honored and excited to have this opportunity to lead the Case CCC," Schwartz said. "I am also humbled to follow in the footsteps of Stan Gerson. My vision is to now lead the Case CCC with advances in cancer medicine, with the ultimate goal of curing this disease."

Launched in 1983, the Case Comprehensive Cancer Center is an institutional consortium that

today includes Case Western Reserve University, University Hospitals and Cleveland Clinic. It oversees all cancer research conducted across the institutions, as well as the care of more than 65% of Northeast Ohioans being treated for cancer.

Schwartz has spent more than three decades pursuing novel approaches to treat and cure sarcomas—tumors that begin in bone and tissue—as well as melanoma (more commonly known as skin cancer). He directed Columbia's Minority/Underserved Site NCI Community Oncology Research Program, as well as several other funded grant programs involving clinical trials of treatments for sarcoma. In addition, he led two federally supported training programs for more junior investigators pursuing cancer-related research.

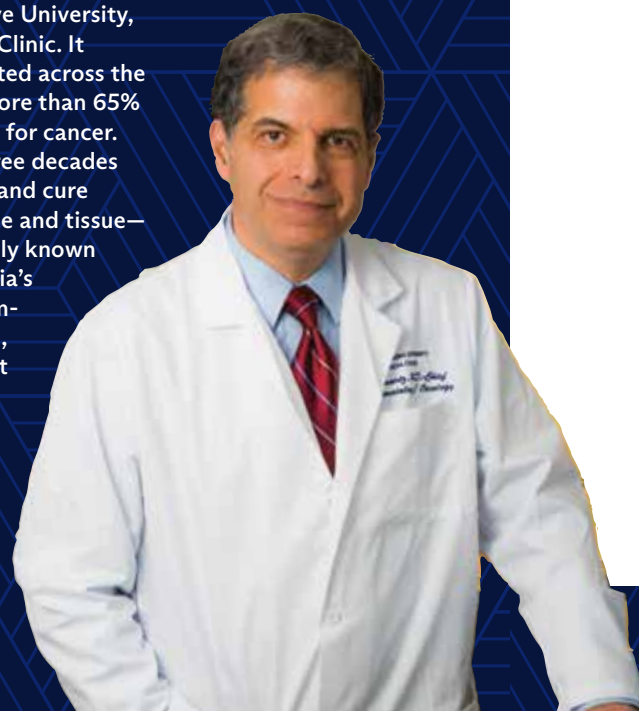






PHOTO BY NICHOLAS MCLAUGHLIN

## LEARNING BEYOND THE CLASSROOM

At medical schools nationwide in 2022–23, applications grew by 14% among Black or African American students and 7.3% among Hispanic, Latino or Spanish students compared to 2020–21. Sustaining this advancement is critical to the Student National Medical Association (SNMA), the oldest and largest student-run organization for underrepresented minority medical students.

Last fall, CWRU hosted SNMA’s Regional Medical Education Conference—two days of networking, professional development and educational opportunities for medical, college and high school students. The conference included topics such as Black experiences in specialty areas, preparing for residencies, applying to med school or even, for high schoolers, choosing the right college and finding mentors.

“As a medical school in a predominantly Black city, it was extremely important to us to include younger Black students in this opportunity to learn from and speak with a conference full of Black physicians and medical students,” said **Andrea Arline**, a rising third-year medical student in the University Program who, as political action liaison for CWRU’s SNMA chapter and the region, helped organize the event.

This focus on engaging young minority students continued three weeks later, when CWRU School of Medicine and University Hospitals hosted Cleveland’s inaugural Black Men in White Coats Youth Summit, a two-day event aimed to inspire pre-teens and teens to consider careers in healthcare. Following a screening of the documentary *Black Men in White Coats*, **Monica Yepes-Rios, MD**, assistant dean for diversity, equity and inclusion for students, moderated a panel discussion with faculty, alumni and local physicians.

**CONNECTING HEALTH AND THE HUMANITIES**

In March, CWRU School of Medicine’s Department of Bioethics and Cleveland Clinic Lerner College of Medicine’s Program in Medical Humanities hosted the Health Humanities Consortium’s first in-person conference since 2019.

Presenters (including more than two dozen CWRU medical, graduate and undergraduate students) highlighted how increased calls for collective action to address structural problems can collide with the traditionally individualistic focus of healthcare, and how people and social structures shape each other.

“Gathering a large group of such folks together is inspiring and invigorating, providing both new ideas and models and the reassurance that you are in good company,” said **Erin Lamb, PhD**, the Carl F. Asseff, MD, MBA, JD, Designated Professor in Medical Humanities at CWRU and the consortium’s co-president and event co-organizer.



## CWRU faculty named among top inventors in the country

Two School of Medicine professors, **Sanford “Sandy” Markowitz, MD, PhD**, and **Dustin Tyler, PhD (GRS ’99, biomedical engineering)**, were inducted as fellows of the National Academy of Inventors in June to recognize their overall career impact on their fields and society.

Markowitz, a Distinguished University Professor and the Ingalls Professor of Cancer Genetics, was part of the team that sequenced the first complete cancer coding genome. His groundbreaking medical research also has transformed human understanding of the genetics of gastrointestinal cancers. In addition, he helped create the first commercial DNA-based stool test for colon cancer.

Tyler is the Kent H. Smith II Professor of Biomedical Engineering and a global pioneer in neural engineering—improving lives by making prosthetics feel more like a part of the body by restoring the sense of touch to amputees.

Markowitz and Tyler join more than 25 others affiliated with Case Western Reserve who have been elected as fellows or senior members by the NAI in the last decade. Last summer, three members of the Case

Western Reserve University School of Medicine faculty—**Susann Brady-Kalnay, PhD**, the Sally S. Morley Designated Professor in Brain Tumor Research; **Paul Tesar, PhD (CWR ’03)**, the Dr. Donald and Ruth Weber Goodman Professor of Innovative Therapeutics; and **Satish Viswanath, PhD**, assistant professor of biomedical engineering—were inducted as senior members.

Six more School of Medicine faculty were elected in February—among eight new senior members from across Case Western Reserve: **Drew Adams, PhD**, the Thomas F. Peterson Jr. Professor of Cancer and Energy Research; **Mark Chance, PhD**, the Charles W. and Iona A. Mathias Professor of Cancer Research; **Margot Damaser, PhD**, professor of biomedical engineering at Cleveland Clinic Lerner College of Medicine; **William Grissom, PhD**, visiting professor of biomedical engineering; **Kevin Kilgore, PhD (GRS ’87, ’91, biomedical engineering)**, professor of orthopedics and physical medicine and rehabilitation; and **Dan Ma, PhD (GRS ’15, biomedical engineering)**, assistant professor of biomedical engineering.





The 2023 entering class of first-year MD students outside Severance Music Center (PHOTO BY DAN MILNER)

# Bright starts

Across multiple programs, hundreds of students earn their white coats

**A**mong the most defining moments in a health science student's career is the white coat ceremony—the day on which they don their new jacket and cross into the world of clinical care or biomedical research.

At Case Western Reserve University School of Medicine, two such milestones have taken place this year, marking the beginning of healthcare careers for hundreds of MD, MD/PhD and Master of Science in Physician Assistant (PA) Studies students.

**“We are grateful to practice the art of healing.”**

—MD class oath of professionalism

(And there are still more to come in the months ahead, as PhD and Master of Science in Anesthesia students take part in their ceremonies.)

In May, 40 PA students earned their jackets, ready to embark on a 27-month educational and clinical journey that centers on experiential learning in the community, pre-clinical clerkships, medical writing across the curriculum, asynchronous learning, clinical simulations, and case-based learning and clinical correlations.



First-year MD students (PHOTO BY DAN MILNER)



2023 first-year physician assistant students in Samson Pavilion (COURTESY)

Less than two months later, 216 new students from the School of Medicine's MD university track, Cleveland Clinic Lerner College of Medicine and the Medical Scientist Training Program attended the annual White Coat Ceremony at Severance Music Center.

Dean **Stan Gerson, MD**, presided over the ceremony with **Lia Logio, MD**, vice dean for education, and **Harry “Bud” Isaacson, MD**, executive dean of Cleveland Clinic Lerner College of Medicine, and reflected on what students can anticipate during their time at Case Western Reserve over the next several years. In addition, **Stephanie Teal, MD**, the Arthur H. Bill Professor of Obstetrics and Gynecology at CWRU School of Medicine and chair of the obstetrics and gynecology department at University Hospitals, reflected on the power and privilege of the white coat as the keynote speaker.

The MD and MD/PhD students crafted, then recited, their own oath of professionalism that focused on confidentiality, respect, empathy, accountability, leadership and innovation—sentiments echoed by Dean Gerson in his remarks.

“Like you, we—and the many pioneers in the field of medicine before you—realize that the status quo is unacceptable,” Gerson said. “We strive for a healthier planet and a healthier population, here in Cleveland and across the globe. And you will help us attain that goal.”





PHOTOS BY ANNIE O'NEILL

# Next steps

Members of the Class of 2023 prepare to put their diplomas to work

As they waited to cross the Severance Music Center stage to receive their diplomas in May, Case Western Reserve University School of Medicine Dean **Stan Gerson, MD**, had simple guiding advice for the 210 Doctor of Medicine students:

**“You are ready.”**



From the curriculum they mastered in classrooms to the discoveries they made in labs and to the conversations, diagnoses and treatment plans they developed at bedsides, these students were more than prepared to tackle the next steps in their careers, Gerson said.

These newest alumni were 168 students from the school's four-year University Program, 12 from the eight- to nine-year MD/PhD program, 27 through the five-year Cleveland Clinic Lerner College of Medicine and three dentists who earned MDs to become medical surgeons. In addition, the School of Medicine also celebrated 47 students of the Master of Science in Anesthesia program, 28 PhD candidates, and 255 master's-level students.

Graduates from all programs join an esteemed alumni network of dedicated, remarkable graduates across the school's 180-year history—and they're poised for their own success, Gerson noted.

“Your unwavering commitment, passion and hard work have brought you to this momentous milestone,” he said, “and we are proud of what you have achieved.”



## How we rank

#21  
university in the world for number of U.S. utility patents▲

Case Western Reserve University School of Medicine has seen impressive growth over the past year across myriad areas—from enrollment to hiring to research funding. Here's a quick look at a few key statistics from last year.

#22  
in National Institutes of Health funding among all U.S. medical schools\*

#7  
Department of Biomedical Engineering\*

#16  
worldwide for biomedical and health sciences■

#14  
Department of Biochemistry\*

#17  
Department of Physiology\*

#14  
among private medical schools\*

#13  
Department of Pathology\*

#1  
Department of Physical Medicine & Rehabilitation at MetroHealth Medical Center and Case Western Reserve University\*

■ Leiden World Ranking

▲ National Academy of Inventors, Intellectual Property Owners Association

\* Blue Ridge Institute for Medical Research

## Our school in numbers

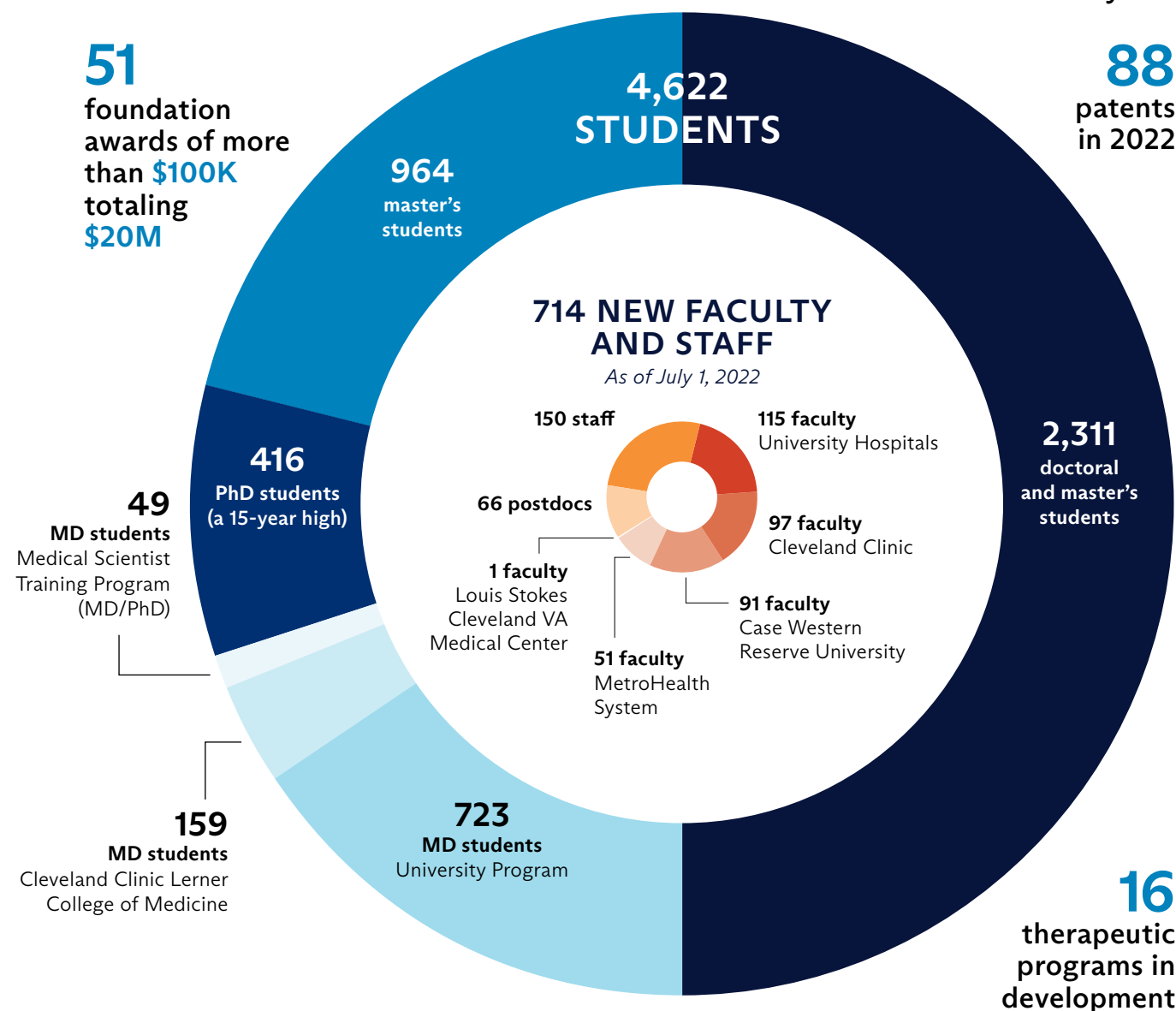
\$400M+  
in active research funding

51  
foundation awards of more than \$100K totaling \$20M

RESEARCH AND GRANTS

280+  
grants in past two fiscal years

88  
patents in 2022



FACULTY HONORS

11 new endowed chairs

2 new Distinguished University Professors

11 elected in 2022-23 to the National Academy of Inventors as fellows and senior members



# Outstanding achievements

Students and faculty earn national honors and appointments

School of Medicine students **Lauryn Bailey** and **Benjamin George** each won trainee research prizes from the **Radio-logical Society of North America** for their work in non-small cell lung cancer. They presented their work at the society's annual meeting in November. Bailey's work included the development of a multi-modal deep learning framework for outcome prediction in non-small cell lung cancer undergoing stereotactic body radiotherapy, while George's work focused on studying the role of invasive nodal staging and 18F-FDG-PET avidity in the prognostication of patients undergoing stereotactic body radiotherapy for non-small cell lung cancer.

Professor of Surgery **Edward Barksdale, MD**, was one of 24 individuals inducted last fall as full members of the **American**



**Barksdale**

**College of Surgeons' Academy for Master Educators**. This honor marks the highest level of achievement for surgeon educators within the American College of Surgeons and covers all surgical specialties.

Four medical students—**Monica Chavan (CWR '19; GRS '22, bioethics; MED '23)**, **Amelia Clarke (MED '23)**, **J. Gabriel Lopez Rivera** and **Maria Claudia Moncaliano**—and Associate Dean of Curriculum **Amy Wilson-Delfosse, PhD**, earned first place at the **Student National Medical Association** Region V Medical Education Conference for their poster, "A Pre-Clinical Elective for Student-Faculty Collab-

oration in Curriculum Development in Diversity, Equity, and Inclusion."

Last August, two School of Medicine faculty members were awarded Case Western Reserve's highest faculty honor: the title of Distinguished University Professor. **Pamela B. Davis, MD, PhD**, the Arline H. and Curtis F. Garvin, MD, Research Professor, and **Jonathan Karn, PhD**, the Reinberger Professor in Microbiology, were awarded the honor during fall convocation. Davis, who served as dean of the medical school from 2007 to 2020, is renowned as an extraordinary leader



**Davis**



**Karn**

of the school and also has passionately worked to advance cystic fibrosis research and bring novel therapies to clinical trials. Karn, who is also director of the university's Center for AIDS Research, is an internationally recognized molecular virologist who initially built his career on conducting pioneering basic research on the study of transcriptional control in HIV and has become increasingly involved in translational research.

A group of Case Western Reserve University PhD and medical students advanced to the Augmented Intelligence for Health Bowl finals, which took place in May. This national competition, sponsored by **Northwestern University's Feinberg School of Medicine**, tasks multidisciplinary teams with identifying a problem, pitching a creative solution—specifically addressing health disparities—and presenting their proof of concept. Team members were:

- **Razaq O. Durodoye**, MD/PhD student;
- **Christopher M. Maatouk**, MD student;
- **Jacob James Rich**, PhD student;
- **David M. Selvaraj**, PhD student in the Clinical Translational Science Program;
- **Jacqueline K. Shaia**, PhD student in the Clinical Translational Science Program; and
- **Scott Williams, PhD**, professor in the Department of Population and Quantitative Health Sciences (faculty advisor).

**Mark Griswold, PhD**, the Pavey Family Designated Professor of Innovative Imaging and faculty director of CWRU's Interactive Commons, won the Distinguished Investigator Award from the **Academy for Radiology and Biomedical Imaging Research**. This award

was established in 2012 to acknowledge and celebrate high levels of achievement in the field of academic imaging research.

**Karen Mulloy, DO**, associate professor of family medicine and community health, won the 2023 F. Marian Bishop Educator Award from the **Association for Prevention Teaching and Research** for her contributions within the Master of Public Health program.

**Goutham Rao, MD**, the Jack H. Medalie Professor in Home-Centered Health Care, was appointed to the **U.S. Preventive Services Task Force** for a three-year term that began Jan. 1. The task force is an independent, volunteer panel of national experts in disease prevention and evidence-based medicine who make recommendations about clinical preventive services and health promotion to improve the health of all Americans.

Fourth-year medical student **Jasmine Robinson (MED '23)** served as chair of the Health Policy and Legislative Affairs committee of the **Student National Medical Association (SNMA)**. Robinson was elected to the role during the 2022 SNMA Annual Medical Education



**Robinson**

Conference, the largest gathering of underrepresented minority medical students in the U.S. As an MD student, Robinson was active with admissions, education, diversity initiatives and volunteering in Cleveland, and she worked on international research projects in Peru and Zimbabwe. She intends to pursue a career in obstetrics and gynecology.

**Adrienne Simmons (CWR '19; GRS '23, bioethics; MED '23)** won third place in **Alpha Omega Alpha Honor Medical Society's** Helen H. Glaser Student Essay Award competition. The contest aims to encourage medical students to write creative narratives or scholarly essays relevant to medicine. Simmons' essay, titled "Sociomedicine: Explanations for Race Disparities in Infant Mortality," was published in the autumn issue of *The Pharos*, the society's quarterly journal.

## THE ANATOMY OF A SOFTWARE STARTUP

Since developers, artists and faculty at Case Western Reserve University's Interactive Commons launched HoloAnatomy® in 2019, the software has transformed the way students at the School of Medicine—and nearly 20 other institutions—learn anatomy. By putting on their Microsoft HoloLens mixed-reality headsets, students can explore and understand the human body in 3D, moving organs virtually or zooming in for a closer look.

At Case Western Reserve alone, more than 370 medical students—plus more at the dental school—use

the software, including the newly launched HoloAnatomy Neuro Software Suite. And its reach is expected to grow dramatically with the launch of Illumis Inc., a startup dedicated to rapidly scaling the platform and accelerating product innovation.

"Now universities can reduce the expensive, time-consuming task of obtaining cadavers," said Illumis CEO Mark Day, "and students can enter a world of new possibilities where they learn faster, retain more vital information, and transcend the classroom with unprecedented

collaborative potential."

It's an investment that pays off: More than a dozen pilot studies showed medical students learned anatomical content twice as fast compared to cadaver dissection and retained information 44% better.

"We believe," said **Mark Griswold, PhD**, the Pavey Family Designated Professor of Innovative Imaging and faculty director of Interactive Commons, "the HoloAnatomy suite will forever change the way students learn the fundamentals of human anatomy."





# ROOTED IN COMMUNITY



**Aiming to reduce barriers to equitable care,** faculty and students are leading community-based initiatives that blend neighborhood voices, inventive research and a common vision for a more just future

BY DANIEL ROBISON

It's a Saturday afternoon, so Urban Kutz Barbershop is packed as usual. Across the barbershop on Cleveland's west side, there's a familiar frizzle of trimmers and lively banter on sports and family. There's also another topic at the forefront of conversation among a group gathered at the shop: prostate cancer. "Anytime we talk about health, I want the authentic barbershop feel because people open up," said shop owner Waverly Willis, a cancer survivor and member of the Case Comprehensive Cancer Center's (Case CCC) community advisory board. This group of community members guide researchers on projects at the cancer center, which itself is a collaboration among Case Western Reserve, Cleveland Clinic, University Hospitals and MetroHealth Medical Center. "So even when we talk about tough topics, the place is rocking and rolling."

*Continued on page 21*





The Cleveland African American Prostate Cancer Project educates barbers in the community about prostate cancer. The barbers then take that knowledge and discuss it with patrons in their shops. From left: Sydney Evans, a community navigator for the project; 'Dre the Barber' from Major League Barbershop; and Jayte Tolbert, a barber at Major League Barbershop. (Photo by Angelo Merendino)

Continued from page 18

The group is part of a discussion and “listening tour” convened by the cancer center’s Cleveland African American Prostate Cancer Project. Participants share what they know (and don’t) about prostate exams, cancer risk, genetic testing and family history. They don’t hold back—volunteering their concerns about intrusive screenings and anxiety about impact on sexual performance. There is a lack of trust expressed toward the medical community. All the while, a Case Western Reserve University School of Medicine researcher facilitates discussion and jots down notes.

This conversation, and dozens of others in nearby neighborhoods, is part of the first phase of a \$2.75 million project funded by Bristol Myers Squibb Foundation. Over a three-year period, School of Medicine and Case CCC researchers seek to increase the number of Black men screened for prostate cancer and develop a sustainable model similar communities can follow.

The need for a project like this is clear: Black men have an 80% higher risk of dying from prostate cancer than white men in Cuyahoga County (where Cleveland is located), according to Case CCC data.

Willis and the rest of the cancer center’s community advisory board, which includes voices and partners from diverse communities around the region, helped shape the vision for the project.

In recent years, the board members—many of whom are cancer survivors—have helped the center prioritize research and service projects, especially focusing on those that address the striking toll many cancers have disproportionately waged on underrepresented minority and medically underserved populations.

Many of these efforts place a strong focus on battling entrenched race-based biases and structures that manifest as negative determinants of population health, especially in urban settings. Research projects must also contend with longstanding mistrust of the medical community among underserved populations, which can limit the reach and impact of such efforts.

The Cleveland African American Prostate Cancer Project seeks to take a different ap-

proach: directly engaging with the community it seeks to serve. By vouching for researchers’ intent, Willis earned buy-in from his customers. This listening-tour phase of the project specifically seeks to leverage the trusted relationship of barbers in urban settings, where minority men are known to be less likely to seek regular medical check-ups than their suburbanite peers.

“Your barber is your confidant, your counselor, knows your secrets,” said Willis. “They trust me, and I use that relationship to my advantage to encourage healthy habits. Barbers have so much more power than making people look good.”

Patrons of Urban Kutz are no strangers to frank discussions of health. Since Willis opened the first location in 2008, he has been unfailingly forthright with others about his own issues—from overcoming alcohol and drug addiction, to losing nearly 200 pounds through diet and exercise, to lowering his blood pressure enough to forgo medication. He’s also a cancer survivor. In fact, it was an impromptu urine test at a local health fair that led to his kidney cancer diagnosis.

After he recovered from cancer, Willis arranged for nurses to take willing patrons’ blood pressure while waiting for haircuts—a practice still ongoing today. Once the customer is in the chair, Willis may offer counsel on nutrition or how to stop smoking. It’s personal for him, having lost several family members and shop regulars to preventable conditions or late-stage cancer diagnoses.

As a member of the cancer center’s community advisory board, Willis pushes for researchers and public health efforts to meet people where they are—and understand where they’re coming from.

“You have to have boots on the ground in the community—liaisons between the medical world and the neighborhood,” said Willis. “People will talk about prostate cancer at my shop because they trust me, and I trust Case [Western Reserve]—and so they trust Case [Western Reserve].”

In the coming months, researchers will bring a mobile medical van to the barbershop to offer prostate specific antigen (PSA) tests to identify signs of cancer, as well as conduct



**Black men have an 80% higher risk of dying from prostate cancer than white men in Cuyahoga County, according to Case CCC data.**

Continued on page 22



Continued from page 21

screenings to identify genetic variants that make some more susceptible to the condition.

“Our close relationship with trusted community advocates changes the conversations we’re able to have and creates new opportunities,” said **Erika Trapl, PhD (CWR ’00; GRS ’04, ’07, epidemiology and biostatistics)**, principal investigator of the prostate cancer project and an associate professor in the Department of Population and Quantitative Health Sciences. “If we can make it easier to catch cancer earlier, we can make a dent in mortality rates.”

Research projects aiming to address dis-

parities in health and care are now among the university’s and medical school’s most pressing goals. Serving as an anchor for many initiatives to improve community health—often with the support and participation of neighborhood-based advocates and organizations—the medical school has teamed with dozens of partners at the national, regional and hyper-local level in recent years.

“Not only does this type of engagement redefine the way we develop and conduct research with the community,” said Trapl, “it puts people—our neighbors—at the center of the work and makes us think differently about how our systems can better support them.”



*Karlton Cherry visits Major League Barbershop for a beard touchup. (Photos by Angelo Merendino)*



*Milano, owner of Major League Barbershop, cuts a patron's hair.*



*Calvin Tornos, a community navigator with the cancer center's Cleveland African American Prostate Cancer Project, uses a puzzle to teach Major League Barbershop's Bobby Bushay and Milano about prostate cancer.*

## Partnerships where patients are

There's urgency to this work, faculty say—there are lives that can be saved and improved today. But they are also quick to point out the need for patience and sustained dedication to build trust and conduct effective research. Both, if done well, can produce better health outcomes that disrupt stubborn trends stemming from centuries-deep sources of inequality.

“Our work must be driven by listening,” said **Lisa Navracruz, MD**, an assistant professor in the School of Medicine's Center for Community Health Integration. “Instead of telling communities what they need, we need to involve community voices who know their needs best.”

Among the projects at the medical school that blend a short- and long-term approach is Cardi-OH, a CWRU-led collaboration among Ohio's seven medical schools to improve hypertension management and reduce risk of cardiovascular disease—the No. 1 cause of death among the state's residents. Communities of color face the highest risk, with up to four times more complications and deaths from heart attacks, strokes and other conditions resulting from chronic high blood pressure, data shows.

Cardi-OH “collects and disseminates clinical pearls and emerging practices that may not be fully known that can make significant impact if adopted widely in clinical settings,” said **Shari Bolen, MD**, the Alfred F. Connors Sr. Professor in Health Services and Population Health Research at the university and founding director of Metro-Health System's Population Health Research Institute, as well as co-leader of the Ohio Department of Medicaid-funded Cardi-OH. “We are turning research into practice, establishing protocols and consistency around care, so there are fewer missed opportunities.”

The initiative recently expanded by focusing on ways to combat factors driving type 2 diabetes risks, such as lifestyle and diet.

Continued on page 24





Continued from page 23

## Growing nutrition equity

Communities subjected to decades of disinvestment tend to have fewer sources of fresh, nutritious foods. There are also higher rates of hunger.

Recently, the Foundation for Food & Agriculture Research awarded an additional \$1 million toward an ongoing School of Medicine project seeking to study how changes to local food systems—how food is grown, processed, prepared, sold and even disposed of—can support health in areas denied consistent access to sources of nutrition.

“If we can make changes ‘upstream’ in a broken food system, we can change its downstream outcomes, such as improvements in obesity, blood pressure and other aspects of health related to food,” said **Darcy Freedman, PhD**, the Mary Ann Swetland Professor in Environmental Health Sciences and lead investigator of the research study.

Known as the **Nourishing Power Network**, the community-university-partnered project, which has attracted more than \$2.1 million total from nearly 20 funders, will advance community-led initiatives that promote healthy food traditions and access for Black, Latinx, Asian and Indigenous communities in local food systems.

“Food justice and equity means more well-nourished people expressing themselves culturally in food decisions, individually and for the community overall—with more agency over where their meals come from,” said Freedman.

## Following the data

In pursuing new ways to create healthier communities, Freedman and other School of Medicine researchers have drawn on an inventive research technique known as “community-based system dynamics.”

By combining “narrative and numbers,” the method helps researchers better understand the lived experience of individuals and communities, said **Peter S. Hovmand, PhD**, the inaugural Pamela B. Davis Professor of Medicine in the Center for Community Health Integration.

“It’s a participatory method that draws on the wisdom of those living with issues that researchers are trying to solve,” said Hovmand, who is also a professor of biomedical engineering and has a secondary appointment with the Jack, Joseph and Morton Mandel School of Applied Social Sciences.

Through workshops and other direct engagement, researchers try to map the outcomes that systems (e.g., health, education or food systems) create on their own and together. Data collection and analysis methods, paired with computer-based modeling and simulation, identify possible “leverage points”—essentially small changes that can have an outsized impact on systems producing undesirable results.

“We’re looking for the unseen, perhaps simple, answers that can contribute to solving complex problems,” Hovmand said.

In Northeast Ohio, using this approach has yielded a variety of insights—including how community health workers play a vital role in effective chronic disease health management.

A significant focus of a new five-year, \$2 million research project at the School of Medicine will invest in community health workers, known as patient navigators, and study how they can help patients become more punctual in starting and completing cancer treatment.

“Our focus is on helping people who fall through cracks,” said **Jennifer Cullen, PhD**,

the James T. Pardee–Carl A. Gerstacker Professor in Cancer Research, who is co-leading, with Trapl, this Merck Foundation funded-study.

As one of seven sites part of the national project, the Case CCC is directing the coalition of community partners that will each serve a distinct population in Northeast Ohio, including the Care Alliance Health Center, El Centro de Servicios Sociales, Cleveland Clinic, University Hospitals Health System and Seidman Cancer Center, and The Gathering Place.

Nearly 40% of Americans will be diagnosed with some form of cancer in their lifetimes, according to the National Cancer Institute—and while overall survivorship has improved in recent decades, members of minority and medically underserved populations die from the disease at disproportionately high rates. They often lack access to the basics—cancer screenings, treatment and recovery resources—and care also becomes fragmented due to the complexity of modern healthcare systems.

A significant portion of the study will look at how patient navigators can effectively usher patients through each step of their cancer journey—from screenings to diagnosis, to seeing specialists, to surgery, recovery and psychosocial support—and minimize the amount of time between each step.

“Delays create more late-stage diagnoses, which are harder to treat effectively,” said Cullen.

“Early-stage detections increase when barriers, including an all-too-common lack of transportation, are removed.”

As the work unfolds, researchers at the seven sites will continually meet and pool findings, which could eventually inform new ways of delivering cancer care services unique to—and effective for—certain communities and populations.

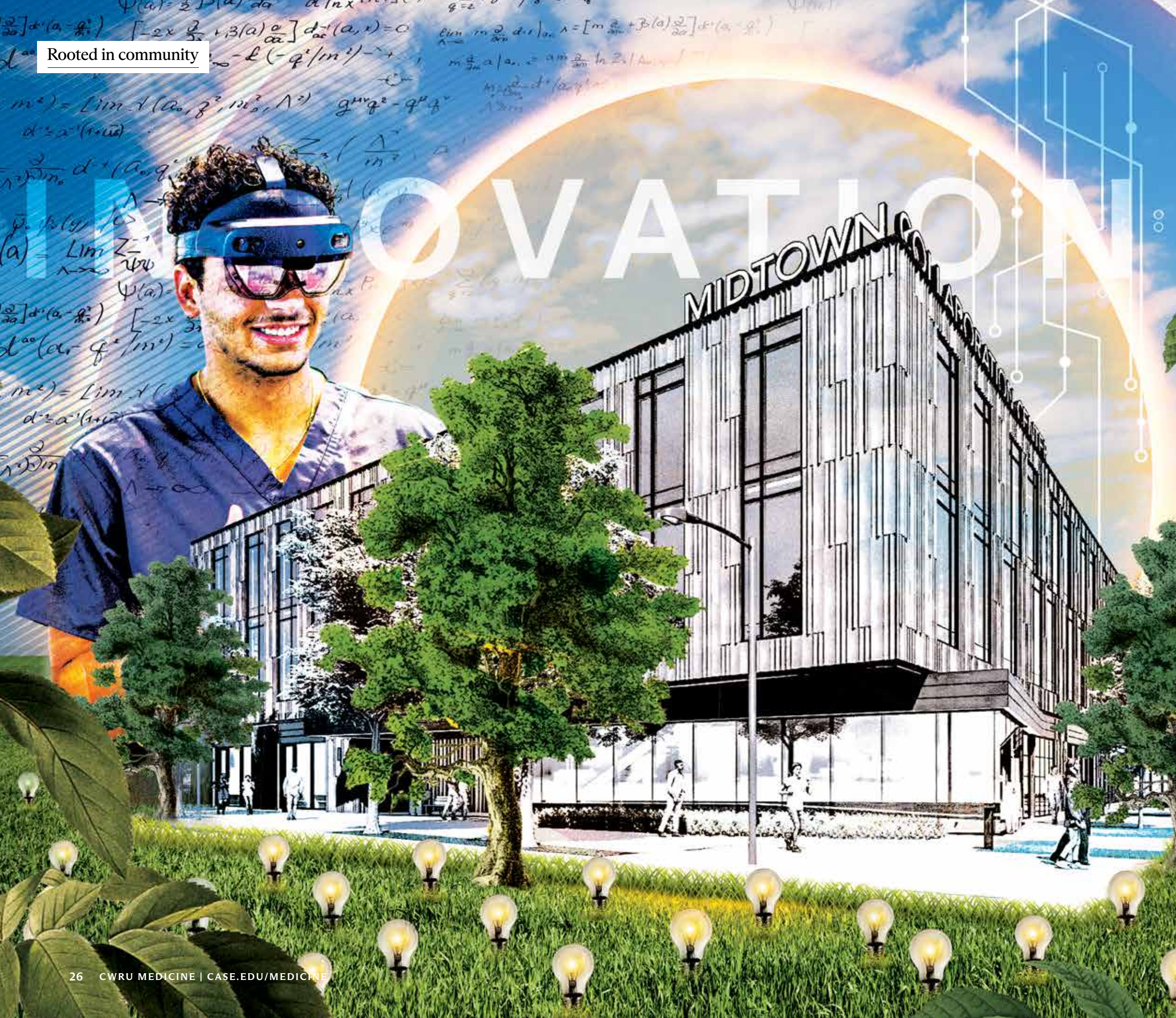
Rooted in community



Through workshops and other direct engagement, researchers try to map the outcomes that systems (e.g., health, education or food systems) create on their own and together. ... “We’re looking for the unseen, perhaps simple, answers that can contribute to solving complex problems,” Peter S. Hovmand said.

Continued on page 27





Continued from page 25

## New residences

While the School of Medicine is partnering with dozens of neighborhood-based organizations throughout the region, the university is also expanding its community health efforts by extending its physical footprint beyond Cleveland's University Circle neighborhood.

In 2019, the university and Cleveland Clinic opened their joint Health Education Campus in the city's Hough neighborhood. It has since become a health sciences hub—bringing together medical, physician assistant, nursing and dental students under one roof for classes and events—and spurred significant investment in the area.

Nearby, the Cleveland Foundation constructed its new headquarters that opened in fall 2022. The campus is already expanding—with the foundation announcing the development of the **Midtown Collaboration Center** in its namesake neighborhood. This multi-use project will house an array of community-based organizations, including CWRU's Population and Community Health Initiative, a collection of School of Medicine departments including Medical Education, Population and Quantitative Health Sciences, Case CCC and Nutrition, as well as new collaborative programs and projects with faculty from the Mandel School, the School of Law, and College of Arts and Sciences. Their shared goal: using academic and research activities to improve population and community health.

"The project itself is a mandate to be innovative with community engagement," said **Kristina Knight, PhD (GRS '03, public health)**, an assistant professor in the Department of Population and Quantitative Health Sciences and the university's faculty ambassador for the Midtown project. "We are being asked to dream big about how we can work with the community to address the social drivers of health at all ages and stages of life."

Ahead of the building's 2024 opening, Knight will steer implementation of health-based pilot programs launched in nearby neighborhoods that could be scaled up and operated from the new campus.

Continued on page 28



## A path for improving urban health

In each new MD class at Case Western Reserve University School of Medicine, six students are chosen for a four-year co-curricular program focused on serving medically vulnerable populations.

Known as the Urban Health Pathway (UHP), the track offers students chances to take part in early clinical work, guided by mentors caring for patients from under-resourced communities. In seminars and special learning opportunities, students learn about health policy and advocacy as they complete their MD requirements.

“We provide a path for students that highlights the joy, honor and privilege of working with patients—and how we can meet their needs in respectful, engaging ways that impact and change lives,” said [Lisa Navracruz, MD](#), faculty lead of the UHP, which is among eight pathways first-year students can apply to join.

A family medicine doctor in Cleveland, Navracruz connects community health-focused professionals from around the region with students who have an interest in performing similar work during their careers.

“We have built a community that supports the sparks of passion and purpose in students who are drawn to this work,” she said, “and there’s plenty of work we can do together.”

*Continued from page 27*

## Responding in real time

Meanwhile, on the west side of Cleveland, Case Western Reserve health sciences students operate the Student-Run Health Clinic in partnership with Neighborhood Family Practice. With faculty oversight, student-volunteers gain clinical training while responding to the community’s health needs.

“We can apply what we learn in the classroom to help people immediately,” said [Rose Hart](#), a second-year physician assistant student at the School of Medicine. “Experiences at the clinic are shaping how we will approach our professions with a broader perspective for serving patients and the communities they call home.”

Their work at Neighborhood Family Practice expanded in 2021 to include COVID-19 vaccinations—one of many ways in which members of the medical school community worked to fight the pandemic’s effects. Through city- and county-wide efforts with contact tracing, testing, vaccination and patient education, the data medical faculty and students collected made clear that COVID-19 infection rates, severity and death rates differed widely among populations.

“This was an acute instance of how health outcomes were driven by existing and ongoing inequalities, and many faculty and students involved in pandemic response worked to try to understand and offset these disparities in real time,” said [Heidi Gullett, MD](#), the Charles Kent Smith, MD and the Patricia Hughes Moore, MD Professor in Medical Student Education, who helped lead Cuyahoga County’s COVID-19 response as Board of Health director and a physician at Neighborhood Family Practice.

Efforts to battle COVID-19 were nimbler and more effective because they leveraged existing relationships and trust that had been built in neighborhoods around the region, said Gullett, who is co-chair of Health Improvement Partnership-Cuyahoga, a coalition of more than 300 organizations focused on facets of community health.

As a founding anchor institution of the coalition, the School of Medicine joined its members in 2015 to establish a shared priority: eliminating health inequities stemming from structural racism. This declaration has served to rally new collaborations to improve community health—especially among the region’s large hospital systems, said Gullett.

“Whether it’s COVID-19 or cancer or hunger, as a healthcare community, we share the same goal of targeting what systematically prevents people from reaching their fullest health potential,” Gullett added. “Moving these needles will take time—but the good news is we are rowing together, in the same direction, and committed for the long term.”



*Students and community partners attend the Interprofessional Education Collaborative Practice I Showcase in April. Through the IPE program, students learn about team-based care and challenges outside the classroom, and they present solutions-oriented projects for community partners. (Photo by Matt Shiffler)*

## Building on trust

Gregory Archer is a prostate cancer survivor and has taught science in Cleveland public schools for more than 20 years. His uneven experiences with healthcare—and the pronounced disparities in health outcomes for racial minorities compared to whites—contributed to Archer’s decision to join the Case CCC Community Advisory Board, where he serves with Waverly Willis and more than 30 others from around the region.

“We live among some of the best healthcare systems on the planet, and one of best medical schools in the country,” said Archer. “All communities should benefit from that—and I think they’re starting to.”

Knowing that the appropriate setting is crucial for the discussion of sensitive health matters, Archer hosted a listening session for the Cleveland African American Prostate Cancer Project at his church—traditionally a place where, like barbershops, Black Americans go for trustworthy information and genuine conversations about vulnerable topics, he said.

“When patients feel like we are seen as valuable, heard and acknowledged, it builds trust,” said Archer. “Trust opens the door for authentic communication, which allows us to become better decision makers for our own health.

“That’s all a good start,” he added. “It’s follow-up that will really make a difference.” 🌟

**“We live among some of the best healthcare systems on the planet, and one of best medical schools in the country. All communities should benefit from that—and I think they’re starting to.”**

*— Gregory Archer, member of Case CCC Community Advisory Board*



# Expanding perspectives

From analyzing petri dishes to providing patient care, students and recent alumni share their CWRU School of Medicine experiences | BY MARK OPREA

In just over a decade, the United States could face a shortage of 37,800 to 124,000 physicians, according to a 2021 report by the Association of American Medical Colleges (AAMC). The physician-scientist field is suffering a sharp decline as well, with National Institutes of Health data showing physician-scientists' percentage in the workforce falling from 4.75% to 1.5% since the 1980s.

Fortunately, medical school applications are on the rise, with a record-setting 18% increase to schools across the country in the early months of the COVID-19 pandemic and, when compared with pre-pandemic data, 4% growth in 2022-23, according to AAMC data. And while applications alone can't address the complications surrounding the shortage—more residency programs and congressional support to financially enable this expansion, for example, are required—the increased demand is drawing more, and stronger, students into the field of medicine.

At Case Western Reserve University School of Medicine, enrollment in all programs has increased by 11% during the past five years and 35% in the past decade, while MD applications have grown by 14% and master's and PhD program applicants are up 52% in the past five years.

With 25 degree options, including master's, PhD and certificate programs, plus three tracks to an MD, more than 2,300 students are realizing their educational goals at Case Western Reserve University School of Medicine.

Here are six of their stories.

PHOTOS BY MATT SHIFFLER

## Tamia Potter

2023 graduate, MD University Program

Tamia Potter was in high school when she realized healthcare was her calling. She earned her certified nursing assistant license by the time she graduated, and started working nights while completing her undergraduate studies at Florida A&M University.

Four years later, she was in Cleveland, starting Case Western Reserve's traditional University Program, when she encountered a tough paradigm shift.

Her previous education, she said, had not fully prepared her for the academic rigor of graduate school.

"I was studying like six, seven hours a day," Potter continued. "Most people I knew were not doing that their first week."

*Continued on page 32*



*Continued from page 31*

But the CWRU community, she said, got her through those early days. “I don’t think I would be as successful as I am if it wasn’t for how supportive the faculty and staff are,” she said.

Potter conducted her research—centering on neurosurgical trauma and recovery and quality of life outcomes for patients who have had neurosurgical treatments—at three hospitals: Cleveland Clinic (where she leads a lab), MetroHealth Systems and University Hospitals. Her long-term goal is to be a neurosurgeon specializing in cranial and spinal tumors.

While at CWRU, Potter appreciated that, even as a busy student, she was encouraged to devote time to interests outside her studies. “Case [Western Reserve] respects your time and allows you to explore all of the resources they have to offer,” Potter said.

Potter has served as a mentor for younger students. But for inspiration of her own, Potter looks to one of her role models: **Tiffany Hodges, MD**—an assistant professor of neurological surgery at the School of Medicine and one of University Hospitals’ first Black women neurosurgeons.

**Krystal Tomei, MD**, one of Potter’s mentors and an associate professor of neurological surgery at the School of Medicine, introduced Potter to Hodges. “Just seeing her in person made me realize that the dream I am chasing after is possible,” said Potter.

She’s well on her way: Potter matched at Vanderbilt University—making her the neurosurgery program’s first Black woman resident.

“There are 5,000 neurosurgeons in the United States,” she continued, citing a recent report published by the Association of American Medical Colleges. “And, as of 2020, only 33 of them are Black females. It’s crazy to know I’m going to be one of them.”



## Emily Novak (GRS '22, biochemistry)

Rising second-year student, PhD  
Biomedical Sciences Training Program

Last spring, Emily Novak was in the final stretch of her master’s program in biochemistry at Case Western Reserve University when her appendix nearly burst.

“I had an appendectomy and missed the last two weeks of school before finals, without warning,” she remembered. After she recovered, she was grateful that her professors at the School of Medicine were ready to support her as she caught up and completed her academic work.

“I had a professor sit with me one on one and teach me everything I missed in lecture,” Novak said, “so I was not only prepared for the exam, but also truly learned the content.”

This experience coincided with Novak’s deliberation about where to earn her PhD—and the compassion and attention she received from faculty at CWRU played a large part in her decision to accept the offer from Case Western Reserve’s Biomedical Sciences Training Program, in which students explore various biomedical science areas before homing in on one for their PhD.

In her first year, Novak spent her mornings in classes and rotating across labs to determine her focus.

For instance, even though her main interest is pharmacology, she also joined a lab in the genetics department because they’re working on a potential cancer drug. “I bring a fresh perspective to this lab with my experience,” Novak said. “Biomedical research is very interdisciplinary, and I love that CWRU recognizes this and allows us to explore various disciplines.”

One day, Novak hopes to lead a team of researchers—perhaps at a pharmaceutical company pursuing drug discovery and development.

For now, she’s soaking up everything she can from the genetics lab and her pharmacology classwork. “People here genuinely care about what they’re researching—they’re not doing it to be well-known,” she said. “It’s cool to be a part of that.”



## Matthew Nagy

2023 graduate MD,  
Cleveland Clinic Lerner College of Medicine Program

The headaches started for Matthew Nagy halfway through his senior year of high school. Then, the stiff neck. Then the extreme sensitivity to light.

Nagy would eventually learn these were early symptoms of meningitis. He spent two weeks in the hospital recovering in the care of pediatricians—an experience that would help determine his career trajectory.

After earning his bachelor's degree and Master of Public Health from University of Michigan, he came to Cleveland Clinic Lerner College of Medicine of Case Western Reserve University, a physician-investigator track at the School of Medicine. There, he found a connected community that helped him get through the especially challenging first two years as a med student.

The faculty, too, have been instrumental in his success, which includes extensive research studies and a year in the National Institutes of Health's Cancer Data Science Laboratory. "I have found many great clinical and research mentors through CWRU and have been so thankful and impressed with their commitment and investment in me as a

student," the fifth-year student said.

Among them is **Seth Rotz, MD**, assistant professor of pediatrics and a member of Case Comprehensive Cancer Center, who helped Nagy connect his interests in cancer prevention and pediatrics while teaching him about the late effects of childhood cancer. And, after taking a course called "Artificial Intelligence in Healthcare," Nagy finally found his niche: the intersection of pediatric oncology and data science.

Recently, Nagy has been investigating machine learning biases in pediatrics—such as how certain oncological devices, like those that detect tumors, are often partial to adult patients. He intends to learn how to produce more accurate data to improve precision in pediatric tumor detection, which will be beneficial in both prevention and treatment.

"That's really important [to consider], as doctors," Nagy said. "Not only are we going to be treating illness, but also how can we keep our patients healthy—even after we've cured their cancer?"

Nagy's next step brought him back to the field where his passion for medicine first started: He earned a pediatrics residency at Boston Children's Hospital.



## Bryan Webb, PhD

Sixth-year student, MD/PhD Medical Scientist Training Program

By 2020, Bryan Webb, PhD, had been studying cancer biology in a lab for five years. By 2021, he was delivering babies in the maternity ward.

It's all part of the Medical Scientist Training Program (MSTP) at Case Western Reserve University School of Medicine. The first of its kind in the country, the MSTP is a combined degree program in which a student earns an MD and PhD in eight to 10 years—starting with two years of medical school before shifting to PhD studies and, finally, their last two years of med school.

During his lab work with **Ruth Keri, PhD**, professor of molecular medicine, Webb examined the function of a protein important for the growth of breast cancer cells. He observed that, when the protein's function was inhibited, the DNA was damaged, which led to difficulty going through mitosis and cell death. He also investigated the pathways used by breast cancer cells that allow them to become resistant to that same inhibition.

“But even if we inhibit a protein, chances are, unfortunately, that

cancer finds a way,” said Webb, who came to Case Western Reserve after completing his undergraduate degree at Washington University in St. Louis. “And because cancer can find a way, it's good for us to understand what ways cancer finds.”

After earning his PhD in 2021, Webb returned to his medical training, which he will complete in May. He has been thrilled by the diversity of patients he sees in his clinical rotations.

“I've been able to deliver babies at University Hospitals, manage the care of septic patients at MetroHealth [Medical Center], determine neurological deficits at the [Louis Stokes] Veterans Affairs [Medical Center] and plan treatment of cancer patients at Cleveland Clinic,” said Webb, who is interviewing for radiation oncology positions so he can focus on providing optimal patient care.

“It's not simply cells in a dish; it's not statistics,” he said. “It's a scared patient, wondering with their doctor ‘Is this the correct treatment for me?’

“As a physician,” he said, “that's what I want to help people with.”







## Nuanqiu Hou

2023 graduate, Master of Science in Applied Anatomy

Nuanqiu Hou was 8 years old when she decided she was going to medical school.

This was the early 2000s, and Hou was being raised by her grandmother in Shenzhen, China.

Years later, after working in a biomedicine lab at Brown University and earning her undergraduate degree from Rhodes College in Memphis, Tennessee, Hou applied to Case Western Reserve University School of Medicine's applied anatomy program.

She enrolled in the summer of 2021 and was quickly taken by the program's tight-knit cohort approach. "Everyone knows each other, shares resources with each other and studies together," she said. Her professors, she noted, are accessible, supportive and kind, especially her mentor and anatomy professor **Scott Simpson, PhD**.

Hou has been impressed by the practical experience and access to resources at the School of Medicine—especially the cadaver lab overseen by **Andrew Crofton, PhD**, professor of anatomy, as well as the classes.

Last fall, Hou took a musculoskeletal surgical anatomy course, where she and her classmates, including first-year orthopedic residents from University Hospitals, practiced placing implants in cadavers for a total ankle replacement, and pedicle screws for a spinal fusion. They observed total hip and knee replacements, and different approaches to repairing elbow and wrist injuries.

"The hands-on aspect was really fun," said Hou, "and it's a great motivation to observe how the little details we learned can have clinical importance and potentially impact patients' quality of life."

After graduation, Hou will gain even greater understanding as a clinical research coordinator in Memphis. It's a role that allows her to gain even more insight into medicine—the field she's longed to join since childhood and, even more so, since her grandmother's passing from lung cancer.

"She was my person," Hou said. "It's why I want to understand diseases—so that I can help other families through the pain we went through."



## Alec Dodson

Rising second-year student, Master of Science in Nutrition

Born and raised in Los Angeles, Alec Dodson was passionate about cooking and entertained becoming a chef, but ended up studying nutrition at California State Polytechnic University, Pomona.

But it wasn't until he worked as a dietary specialist for 2,000 kids with chronic illnesses at a summer camp that Dodson saw his future.

"That was my inspiration to get into medicine," he said. "It was my first time using my knowledge of nutrition and applying it to actual people."

After graduation, Dodson came across the research of **Stephanie Harris, PhD (GRS '07, '11, nutrition)**, associate professor of nutrition at Case Western Reserve University, on culinary lifestyle medicine.

It prompted an epiphany for Dodson. "Oh my gosh," he recalled thinking, "there's a way to incorporate two of my passions into the same thing."

Dodson applied to CWRU's Master of Science in Nutrition program last spring and, since then, has delved into the nature of how healthy eating can help prevent cancer and prolong survivorship. For example, survivors of colorectal

cancer may be more prone to developing gut dysbiosis and may need specific interventions to promote healthy bacteria. Dodson is also investigating the chemical properties of certain plants, such as tomatoes or leafy greens, to see how these kinds of foods can reduce inflammation and oxidative stress—and then how to best communicate recommendations for a revised diet to patients.

"Essentially we're taking different aspects of what it means to be a cancer survivor," he said, "and addressing them through dietary interventions."

What Dodson finds special about the School of Medicine, however, is the cooperative nature of the academic work he's doing—a quality he intends to look for as he applies to MD programs.

Before he graduates this spring, Dodson said he might return to that California summer camp—bringing with him a refined outlook on food education and nutrition.

"That's why I'm in this program right now," Dodson said. "There's chronic illness, and we do need medicine, but at the same time, there are additional ways to make people's lives better [through nutrition]."



# Research Updates

Breakthroughs from the labs of  
Case Western Reserve University School of Medicine

## CONTINUING RESEARCH INTO PRION DISEASES WITH \$20M IN FUNDING

As the only research center of its kind in the U.S., the National Prion Disease Pathology Surveillance Center at Case Western Reserve University plays a critical role in understanding how and why prion diseases—degenerative brain conditions found in humans and animals for which there is no known cure—develop and spread. Last fall, the center earned a five-year Centers for Disease Control and Prevention grant renewal of up to \$20 million to allow researchers to continue their work.

Prion diseases, such as the human-based Creutzfeldt-Jakob disease and fatal familial insomnia, and the animal-based “mad cow disease” and chronic wasting disease, develop when normal prion proteins in the brain change shape and clump together. This causes damage to the nerve cells and results in small, spongelike holes in brain tissue, which leads to memory loss, difficulty speaking and walking, and behavior changes—as well as accelerated death.

In CWRU School of Medicine’s prion center, which was established in 1997, researchers coordinate autopsies and neuropathologic examinations of suspected prion disease cases from across the country. They collect tissue samples and clinical information to monitor and investigate cases—especially those in which the disease may have been acquired from other humans or animals. They perform cerebrospinal fluid testing. And they operate a clinical reference lab for prion disease.

With the grant renewal, researchers will continue surveillance of existing and emerging prion diseases and will set up brain-tissue testing and use a new diagnostic test called real-time quaking induced conversion.

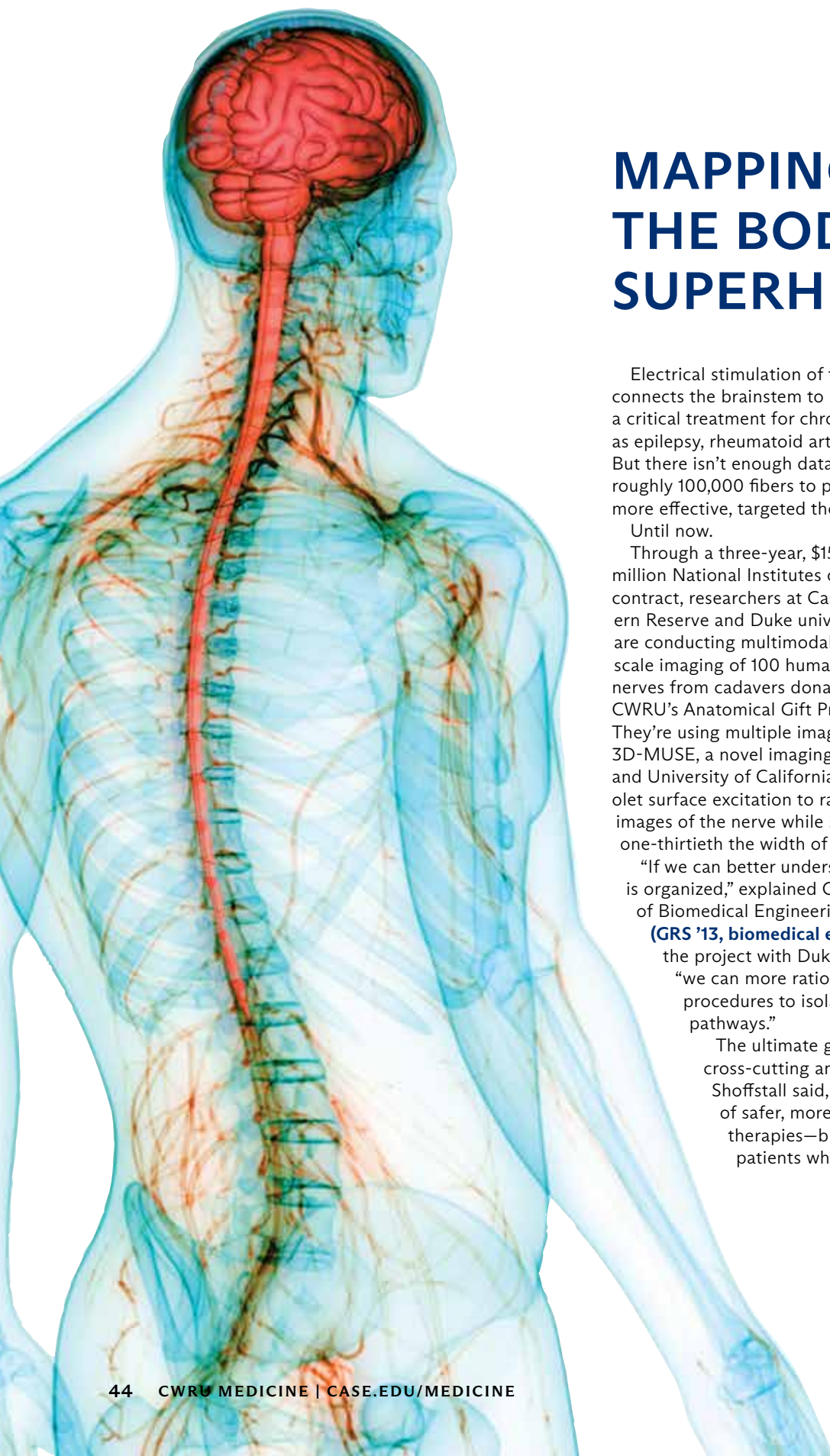
This testing method has “revolutionized the way the disease is diagnosed clinically,” said **Brian Appleby, MD**, professor of neurology and director/principal investigator of the center. “We are pleased to receive this grant renewal to continue this important research.”

Among their latest work: In a National Institutes of Health-funded study released last fall in the journal *Nature Structural & Molecular Biology*, researchers identified the structure of protein fibrils linked to a hereditary form of human prion disease. This insight, they said, reveals the mechanism through which prions can jump between some animal species while retaining a barrier between others.

The answer: Cross-seeding across species is restricted due to differences in the sequence of amino acids among species, according to lead author and postdoctoral scholar **Qiuye Li, PhD**.

“One of the major remaining questions in the field of prion diseases has been why these diseases are transmissible between some animal species but not others,” said senior author **Witold Surewicz, PhD**, the Robert F. Bennett, MD, Professor of Neurological Research in the Department of Physiology and Biophysics. “Our findings explain how this works.”





## MAPPING THE BODY'S SUPERHIGHWAY

Electrical stimulation of the vagus nerve—which connects the brainstem to most organs in the torso—is a critical treatment for chronic health conditions such as epilepsy, rheumatoid arthritis and heart failure. But there isn't enough data to map the vagus nerve's roughly 100,000 fibers to provide more effective, targeted therapies.

Until now.

Through a three-year, \$15.75 million National Institutes of Health contract, researchers at Case Western Reserve and Duke universities are conducting multimodal, multi-scale imaging of 100 human vagus nerves from cadavers donated to CWRU's Anatomical Gift Program. They're using multiple imaging technologies—including 3D-MUSE, a novel imaging tool developed at CWRU and University of California, Davis, that uses ultraviolet surface excitation to rapidly collect microscopic images of the nerve while slicing through it at about one-thirtieth the width of a hair.

"If we can better understand how the vagus nerve is organized," explained CWRU Assistant Professor of Biomedical Engineering **Andrew Shoffstall, PhD (GRS '13, biomedical engineering)**, who co-leads the project with Duke University's Nikki Pelot, "we can more rationally design devices and procedures to isolate and regulate its many pathways."

The ultimate goal of the "outstanding, cross-cutting and experienced team," Shoffstall said, is to speed development of safer, more effective neuromodulation therapies—bringing targeted care to patients who need it most.



Shoffstall

## UNCOVERING WHY WOMEN ARE MORE LIKELY TO DEVELOP ALZHEIMER'S

Alzheimer's disease afflicts females at roughly double the rate of males, and researchers from Case Western Reserve University School of Medicine may have the answer why—as well as a potential path to new medicines to treat the disease.

The female brain shows higher expression of the X-chromosome-linked enzyme ubiquitin-specific peptidase 11 (USP11) when compared to the male brain, according to the findings published in the journal *Cell*. This increase results in greater accumulation of a protein called tau, which is responsible for the formation of toxic

protein clumps inside brain nerve cells of Alzheimer's disease patients.



Kang

"When a particular tau protein is no longer needed for its nerve cell's function, it is normally designated for destruction and clearance," said co-senior author **David Kang, PhD**, the Howard T. Karsner Professor in Pathology. "Sometimes this clearance process is disrupted, which causes tau to pathologically aggregate inside nerve cells. This leads to nerve cell destruction in conditions called tauopathies, the most well-known of which is Alzheimer's disease."

So Kang and co-senior author **JungA Woo, PhD**, assistant professor of pathology, searched for why dysfunction in this typically balanced process might occur.

Their findings—that the female brain naturally expresses higher levels of USP11 than the male, and that USP11 levels correlate strongly with brain tau pathology in females but not in males—suggest that excessive activity of the USP11 enzyme in females drives increased susceptibility to tau pathology in Alzheimer's disease. However, the authors caution that animal models may not fully capture the tau pathology seen in humans.

"In terms of implications, the good news is that USP11 is an enzyme, and enzymes can traditionally be inhibited pharmacologically," Kang said. "Our hope is to develop a medicine that works in this way, to protect women from the higher risk of developing Alzheimer's disease."





# Restoring bodily function to patients across the country



**T**he groundbreaking technology Case Western Reserve and MetroHealth System researchers developed to help individuals regain bodily function after devastating injury or disease was an impressive feat. The next step: expanding access to those who need it.

Through a three-year, \$12.5 million grant from the National Institutes of Health, a team is developing the Cleveland Open-Source Modular Implant Innovators Community (COSMIIC). This network will give researchers across the country access to schematics for the implantable technology that can help patients experiencing paralysis from spinal

cord injury, stroke or other ailments regain bodily function. By making the technology more widely available, the researchers hope it could be expanded to a broader range of diseases and disabilities.

The concept is based on a modular implantable system developed by **Kevin Kilgore, PhD (GRS '87, '91, biomedical engineering)**, the P. Hunter Peckham, PhD, and George J. Picha, MD, PhD, Professor in Biomedical Engineering at CWRU School of Medicine; **P. Hunter Peckham, PhD (GRS '68 '72, biomedical engineering)**, a Distinguished University Professor Emeritus at Case Western Reserve and co-director of the MetroHealth Rehabilitation Institute; and

**Brian Smith**, director of active implant systems in the Department of Biomedical Engineering at CWRU. Kilgore, Smith and Cindy Chestek, PhD, associate professor of biomedical engineering at University of Michigan, lead the COSMIIC team.

"If we are successful, more patients around the country will have access to these life-changing innovations developed right here in Cleveland," said Kilgore, who is also a staff scientist in MetroHealth's Center for Rehabilitation Research and its orthopedics and physical medicine and rehabilitation departments. "Our goal is to empower researchers to offer hope to those who need it most."



## AN EYE TOWARD BETTER UNDERSTANDING THE CORNEA

The cornea is the most densely innervated tissue in the body, according to **Michael Jenkins, PhD (CWR '04; GRS '08, biomedical engineering)**, the Dr. Donald and Ruth Weber Goodman Professor of Innovative Cardiovascular Research at Case Western Reserve University School of Medicine. Yet there's a lack of knowledge surrounding how the eye's surface maintains structural and functional integrity—which is key to understanding many diseases.

Through a new five-year, \$7.3 million National Institutes of Health grant, Jenkins is leading a multidisciplinary team of researchers from CWRU and Cleveland Clinic aiming to identify new ways to study how the nervous system maintains eye health, as well as the impact of inflammation and pain.

The researchers are mapping elements of corneal nerves and supporting cells; studying the connection between corneal signaling and the brain's pain centers; and investigating eye surface control under different inflammatory and pain conditions to better understand the impact of treatment options.



Jenkins



# A positive effect of stress

**H**igh blood pressure, insomnia, even heart disease—the negative medical effects of stress on the body are generally well known. But what if some level of stress can actually protect your immune system?

A study by Case Western Reserve University School of Medicine researchers released in *Proceedings of the National Academy of Sciences* suggests this might just be the case.

After 56 days of stress, mouse models with Crohn's disease-like ileitis showed a significant increase in formation of intestinal tertiary lymphoid organs (TLO)—immune cells that develop in response to chronic inflammation or injury—in the colon as an immune response. However, the stress did not significantly increase small or large intestinal inflammation.

And when the mice received a

“second hit” of stress through a fecal microbiome transplantation, TLO formation didn’t increase. Instead, these mice had more cytokines IL-23 and IL-22, which are part of the TLO formation pathway. IL-22, in particular, plays a protective role in wound healing and tissue regeneration and can have both anti- and pro-inflammatory responses.

“Our findings demonstrate that psychological stress induces formation of TLOs by increasing the production of IL-23,” said senior author **Fabio Cominelli, PhD, MD**, the Hermann Menges Professor of Internal Medicine. “So do I want to be stressed? It all depends on the definition of stress. ... A little bit of stress is good in your life, but you want to be stressed in the right way.”



## COMBATING AN ‘URGENT THREAT’

In 2022, the U.S. saw nearly 2,000 clinical cases of *Candida auris* (*C. auris*), a multidrug-resistant yeast that causes serious infection and, in 30 to 60% of cases, death. While the number of cases remains small, it is 10 times larger than five years ago, as the fungus spreads in what the Centers for Disease Control and Prevention deemed in 2015 “an urgent threat.”

With a five-year, \$3 million-plus grant from the National Institutes of Health, Case Western Reserve University researchers are working on a drug therapy that not only may treat *C. auris* but also prevent it.

“What is different and particularly scary about *Candida auris* is that it can survive on skin and healthcare surfaces up to two weeks, allowing the spread from person to person in healthcare settings and nursing homes,” said **Mahmoud Ghannoum, PhD (MGT ’04)**—professor of dermatology and pathology at the School of Medicine and director of the Center for Medical Mycology at University Hospitals Cleveland Medical Center—who leads the research team with **Thomas McCormick, PhD**, associate professor of dermatology. “We hope to develop new antifungal compounds that will lead to clinical drugs through the research supported by this grant.”

## THE ETHICS OF “NUDGING”

The concept of “nudging”—subliminally and subtly encouraging people in their decision-making—has long been common practice. (Think: salad bars at the start of a buffet line to encourage healthier eating.)

But can that concept ethically be extended to encouraging participation in clinical trials through tactics such as skewing questions or adding checklist items on consent forms? Case Western Reserve University bioethics and law faculty earned a four-year, \$1.6 million grant from the National Center for Advancing Translational Sciences at the National Institutes of Health to determine the answer.

The study is led by **Maxwell Mehlman, JD**, a professor of law and bioethics at CWRU, and Kim Kaphingst, ScD, at the University of Utah, with CWRU School of Medicine Department of Bioethics, School of Law and Cleveland Clinic Lerner College of Medicine collaborators.

“When we think about nudging people to be subjects in medical trials,” Mehlman said, “it certainly raises a lot of questions.”



# Alumni and Friends

Creating connections among—and celebrating the achievements of—our graduates and donors



Alumni, students, faculty, staff and friends mingled and reunited at (above and opposite page, bottom) the Dean's Reunion Soiree and (opposite page, top) MedConnect Mentoring and Networking Brunch. (Photos by Dale McDonald)

## BACK TOGETHER

Reconnecting, exploring campus and earning honors at **Homecoming and Reunion Weekend**

As part of the first full-fledged Homecoming and Reunion Weekend since 2019, Case Western Reserve University welcomed alumni and friends to campus in October for four days of learning, networking and reconnecting.

In between Blue Bash—a new opening night celebration complete with entertainment, food and fireworks—and a Spartan football win versus St. Vincent College, attendees had the chance to take part in more than 100 other events, including ones especially for School of Medicine graduates.

Central to the school's programming were lectures and panel discussions to educate and inspire. The Dean's Distinguished Lecture, for example, featured **Yuling Luo, PhD (GRS '92, biochemistry)**, founder, chairman and CEO of the immunoassay and antibody technology startup **Alamar Biosciences**, and **Jay Short, PhD (GRS '89, biochemistry)**, chairman, CEO and co-founder of the clinical-stage cancer therapeutic company **BioAtla Inc.** and chairman and co-founder of biopharmaceutical company **Himalaya Therapeutics**. The two leaders discussed building and growing their organizations, the ups and downs of commercializing research, and how a Case Western Reserve education helped them along the way.

In addition, the MedConnect Mentoring and Networking Brunch included an interdisciplinary panel of experts who shared insights on the possibilities and challenges related to the evolving context of healthcare. Lawrence Caslino, MD, PhD, the Livingston Farrand Professor of Public Health at Weill Cornell Medical School, teamed up with Evelyn Duffy, DNP, the Florence Cellar Professor of Gerontological Nursing at Case Western Reserve's Frances Payne Bolton School of Nursing, and Scott L. Alperin, DDS (DEN '74), assistant clinical professor and staff surgeon



at CWRU School of Dental Medicine, to discuss how increasing corporatization, private equity investment and pressures on private practice are affecting healthcare organizations and the overall experience.

Plus, there were plenty of opportunities to network, reminisce with former classmates and faculty, and honor alumni and friends of the school. The premier event was

the Dean's Reunion Soiree, a cocktail reception to recognize the grand and reunion classes, leadership donors and scholarship supporters.

Also among the honorees: the 2022 Medical Alumni Awards, Lifetime Achievement Award and Case Medal for Excellence in Health Science Innovation winners, acknowledging outstanding commitment to the school, university and society (p. 52).

The award winners and attendees gathered at the Sheila and Eric Samson Pavilion at the Health Education Campus of Case Western Reserve University and Cleveland Clinic—a space that opened in summer 2019 and hosted only one homecoming before the COVID-19 pandemic began.

"We're back together in what is absolutely the best education facility in the country," School of Medicine Dean **Stan Gerson, MD**, said. "And the fact that we can share it with you is phenomenal."

### SAVE THE DATE

Homecoming and Reunion Weekend 2023 is set for **Oct. 12-15**



## HOMECOMING AND REUNION WEEKEND

# Honoring medical excellence

## 2022 alumni and achievement awards



**Janet V. Cross, PhD**  
(GRS '00, molecular biology and microbiology)  
**The Clifford J. Vogt, MD '34 Service Award**



**Nathan A. Berger, MD**  
**Lifetime Achievement Award**



**George Dubyak, MD**  
**Case Medal for Excellence in Health Science Innovation**



**David F. Ransohoff, MD**  
(MED '72)  
**Distinguished Alumnus Award (MD category)**



**Scott T. Weiss, MD**  
(MED '72)  
**Distinguished Alumnus Award (MD category)**



**Sanford Markowitz, MD, PhD**  
**Honorary Alumnus of the Year Award**



**Sadjia S. Greenwood, MD, MPH**  
(MED '58)—posthumous  
**Special Recognition Award**



**Absera Melaku, MPH**  
(CWR '09; GRS '13, anthropology, public health)  
**Early Career Leadership Award**



**Lawrence F. Brass, MD, PhD**  
(GRS '75, biochemistry; MED '77)  
**Distinguished Alumnus Award (medicine-related PhD or MD/PhD category)**



**Alexander Chung-Yu Tsai, MD, PhD**  
(GRS '04, epidemiology and biostatistics; MED '06)  
**Distinguished Alumnus Award (medicine-related PhD or MD/PhD category)**

Know someone deserving of these honors?  
Nominate them by emailing [somalumni@case.edu](mailto:somalumni@case.edu).

## AIR FORCE INVESTMENT CONTINUES PAYING DIVIDENDS

Fresh off the commencement stage with degrees in chemistry and economics from Ohio Wesleyan University, **Michael Wise** had his sights set on an MBA from the University of Michigan. Uncle Sam had different plans.

Sharing the experience of many of his 1960s-era peers, Wise found himself denied an extension from his local draft board. Knowing what was likely coming next, Wise enlisted in the United States Air Force, eventually becoming an officer. After six years in the military, including a year in Vietnam, Wise discovered his calling—pivoting from a pursuit of a business degree to a career in medicine.

"I had friends who were in medical school at Case Western Reserve," Wise recalled. "I was so impressed by the way medicine was taught there. The way the curriculum was set up is the way medicine should be taught."

Nearly 50 years later, with a successful and fulfilling career behind him, Wise, MD (MED '76), and his wife, Elizabeth, established a scholarship program for medical students at Case Western Reserve. After an initial \$2 million estate commitment in 2015, the couple recently pledged an additional \$1 million, with hopes that their contributions can help students gain an education unencumbered by financial strain.

"I was the first in my family to go to college," he said. "And I had the good fortune that the Air Force paid my way through, leaving me without the financial burden so many others have."

Wise, who initially left the service as a senior captain to pursue his medical degree, moved to Cleveland along with his wife, Elizabeth, and their young son. After completing prerequisite courses and being accepted into the CWRU medical program, Wise reen-

tered in the Air Force and attended classes while on active duty—serving summer months at the hospital on Wright-Patterson Air Force Base in Dayton, Ohio, while the Air Force covered his tuition.

Bringing years of military experience and a deeper life perspective to the classroom, Wise was grateful to have been one of many older students accepted to the school by then-assistant dean of students John Caughey, MD—who Wise felt was welcoming to applicants with unusual backgrounds.

Starting out in internal medicine, Wise quickly realized he wanted to spend more time with patients and took a residency in psychiatry. Eventually, he integrated the two—working with medically ill patients with psychiatric issues—en route to becoming a consultation psychiatrist. Wise also wrote and edited the first two textbooks on treating the medically ill with psychiatric issues.



**Michael and Elizabeth Wise**

Wise continued his Air Force career at Wilford Hall, a hospital located on Lackland Air Force Base outside of San Antonio, Texas, before retiring from the Air Force in 1987. He would later accept a teaching position at the University of Texas at San Antonio and serve as chair of the Department of Psychiatry & Behavioral Health at Ochsner Health in New Orleans before eventually retiring from the University of California, Davis.

When asked about the consideration he and his wife gave to helping aspiring medical students—who stand to benefit the same way he did—his advice to others was simple. "Do it!" he said. "For me, the way CWRU taught medicine made the most sense. I was able to thrive in that environment without the burden of debt."

**"I had friends who were in medical school at Case Western Reserve. I was so impressed by the way medicine was taught there. The way the curriculum was set up is the way medicine should be taught."**

—Michael Wise, MD



# A holistic

**Renowned infectious disease expert**  
gets her “dream job” advancing vital research  
and is honored by her alma mater

**W**ithin a few days of starting medical school, **Julie Gerberding** met her first patient: a young mother whose health Gerberding monitored from pregnancy through postpartum care, and into the initial years of the baby’s wellness visits.

It was precisely this early clinical experience, plus the school’s pioneering systems-based curriculum for studying disease, that had drawn Gerberding’s interest in Case Western Reserve University School of Medicine as a seventh grader in South Dakota.

“Being involved with patients so early in my training catalyzed my entire professional trajectory,” said Gerberding, MD (WRC ’77, MED ’81). “The experience placed patients at the center of my learning, an approach that remains part of everything I do.”

Also key to her success in medicine, government and industry? Integrat-

ing programs across disciplines.

Her work as an epidemiologist at San Francisco General Hospital and Prevention Center, which she established, drew the attention of the U.S. Centers for Disease Control and Prevention (CDC). Gerberding joined the agency in 1998 and gained national recognition in 2001 as a prominent CDC representative in front of Congress and the media during the anthrax attacks.

In 2002, Gerberding made history as the first woman to direct the CDC, overseeing a \$10 billion budget with a workforce of 15,000 people in more than 45 countries, and leading the agency through a strategic restructuring to expand research as well as preparedness and response to bioterrorism, pandemics, and other global health threats.

“At the time, the CDC worked in a very vertical fashion. In some ways, that’s good because you have deep scientific expertise,” said Gerberding. “But you also need to integrate



“Build  
bridges to  
bolder, broader  
breakthroughs.”

# approach

that expertise across the silos and that helps catalyze more innovative solutions to complex health challenges.”

When she became an executive leading the vaccines division at the multinational pharmaceutical company Merck in 2010, Gerberding increased global vaccine access and continued her career-long focus on implementing horizontal integration—convening groups that might not otherwise collaborate—to ensure the best outcome for patients and the business.

“That’s my comfort zone,” she said, “bringing in diverse points of view, disciplines and interests to create a ‘wise crowd’ that can solve really hard problems.”

## A new frontier

Last May, Gerberding took on a new challenge when she was named chief executive officer of the Foundation for the National Institutes of Health (FNIH)—a nonprofit chartered by Congress in 1990 to support the mission of the National Institutes of Health (NIH) and to, as Gerberding explains it, “build bridges to bolder, broader breakthroughs.”

“That is a slogan, but it’s also a concise description of our purpose,” Gerberding continued. “We build bridges across the biomedical enterprise, raise money, and provide resources that allow biopharmaceutical companies, patient organizations, foundations, and academicians to work in partnership with NIH to take on riskier

research and do it faster.”

Key to that work, Gerberding believes, is taking advantage of “team science” to accelerate the translation of emerging discoveries into solutions to the most vexing health challenges—like Alzheimer’s disease, cancers, and heart failure. The FNIH Bespoke Gene Therapy Consortium also helps bring hope to 25 to 30 million Americans living with rare diseases caused by genetic defects, but funding to study and treat these conditions is relatively scarce compared to more common illnesses.

Gerberding has received more than 50 awards and honors throughout her trailblazing career, including the United States Department of Health and Human Services Distinguished Service Award, placement on *TIME*’s 100 Most Influential People in the World list and repeatedly making *Forbes*’ 100 Most Powerful Women in the World list.

In 2021, Gerberding’s list of accolades grew when Case Western Reserve University School of Medicine named its newest academic society—small cohorts to which matriculating students are randomly assigned—for the university trustee.

“I’m honored to have my name associated with this brilliant framework for supporting students through their medical school journey,” said Gerberding, whose time at CWRU predated the academic society structure. “Practicing medicine is a privilege. It’s a lot of hard work, but in the end, I can’t imagine a more wonderful opportunity to be of service and feel purposeful while also finding great joy and experiencing life in all of its conditions.”

—Carey Skinner Moss



# Class notes

Includes items submitted to Case Western Reserve University School of Medicine in 2022



Have a new job? Earn an award? Recently marry, have a child, retire or travel the world? We'd love to hear from you! Share your updates with us at [case.edu/medicine/alumni](https://case.edu/medicine/alumni).



## Remembering alumnus, Nobel Prize winner Paul Berg

**Paul Berg, PhD (GRS '52, biochemistry)**, who became Case Western Reserve's first Nobel Laureate in chemistry in 1980 for his groundbreaking work in the biochemistry of nucleic acids, died in February. Berg's pioneering research on the insertion of DNA from *E. coli* bacterium into an animal virus, which became the first known instance of recombinant DNA, was a milestone in scientific discovery—one that launched the field of genetic engineering and led to medical advances such as hepatitis vaccines, synthetic insulin and human growth hormone.

Though Berg had never before heard of Western Reserve University, the Pennsylvania State University undergraduate was drawn to the school after reading literature by Biochemistry Chair Harland Wood on radioisotope technology.

"That was a fortunate choice; in fact," he shared in his Nobel Prize biography, "it changed the course of my career."

Berg later served on the faculties of Washington University School of Medicine in St. Louis and Stanford University School of Medicine. In addition to the Nobel Prize, he received the National Medal of Science and the National Library of Medicine Medal, and was inducted into a number of prestigious societies including the National Academy of Sciences and the American Academy of Arts and Sciences.

### 1960s

**Robert Resnik (MED '65)**, professor and chair emeritus of the Department of Obstetrics, Gynecology and Reproductive Sciences at **University of California, San Diego** (UCSD), was profiled in the December 2021 issue of *American Journal of Obstetrics & Gynecology* as part of a series titled "Giants in Obstetrics and Gynecology." He retired from UCSD in July 2021 after serving on the faculty since 1974.

### 1970s

**Adrienne Coqueran (MED '75)**, vice chair of admissions at **Eastern Virginia Medical School** in Norfolk, spent the first 10 years of her career in emergency medicine in New York and Virginia, then dedicated the following 30 to internal medicine in Virginia. Now, through her role and volunteer opportunities at Eastern Virginia, she is focusing on her

legacy in the medical field.

**Eric Kaplan (WRC '73, MED '79)** retired from solo colorectal surgery practice in 2019 after 36 years in the field. He now spends his time with his wife, Bonnie, and their seven grandchildren, as well as playing with his Shih Tzu and tending to his 1-acre property in Dallas, Texas.

**Beth Kauffman (GRS '73, nutrition)** spent the first 17 years of her career working in the Philadelphia area in federal public health nutrition programs before transitioning to teach high school- and college-level child-development courses until retiring in 2017. She enjoys spending time with her grandchild.

### 1980s

**Thomas Mote (GRS '77, biology; MED '81)** is a semi-retired anesthesiologist and cofounder of **Tumaini Global Health**, a

nonprofit that fosters global health education at the undergraduate level. Tumaini sponsors speakers at five universities, from which one student from each attends a global health meeting at Yale University. Mote and his colleagues hope to expand Tumaini to additional schools this year.

**Barbara Schach (MED '83)** recently retired from **Pacific Medical Centers** in Kirkland, Washington, after 35 years in internal medicine. She plans to spend her retirement years pursuing her passion for flying small planes, honing her instrument flight skills and exploring opportunities to use flying for public service.

### 1990s

**George Askew (MED '90)** became president and CEO of the **Meyer Foundation**, a Washington, D.C.-based nonprofit focused on investing in solutions to help economically disadvantaged people

thrive. He has decades of experience as a former pediatrician and leader in federal policy, local government agencies, and nonprofit management spaces, including deputy chief administrative officer for Health, Human Services, and Education for Prince George's County, Maryland; deputy commissioner of the **New York City Department of Health and Mental Hygiene**; and the first chief medical officer of the Administration for Children and Families in the **U.S. Department of Health and Human Services** during the Obama administration.

**Lisa Flowers (MED '92)** and **Jason Liebrezeit (MED '02)** received **Emory University** School of Medicine's 2022 Dean's Teaching Award. Flowers, a professor in the Department of Gynecology and Obstetrics, specializes in the treatment of women with abnormal pap tests, HPV-related disease, and pre-cancerous gynecologic conditions. She is active on national and state committees aimed at improving the quality and delivery of care and service to patients with cervical and breast disease, including work with the **American Society for Colposcopy and Cervical Pathology**, the **American Cancer Society**, and the **Susan G. Komen Breast Cancer Foundation's** National Hispanic/Latina Advisory Council. Liebrezeit, an associate professor of medicine, also received the Young Educator of the Year Award (given by Clerkship Directors in Emergency Medicine) as well as the Emory Emergency Medicine Resident Advocate Award. His research interests include the creation and evaluation of novel curricula for undergraduate medical education, particularly in the role of the final year of medical school.

**Terrence E. "Terry" Steyer (MED '94)** was named dean of the College of Medicine and vice president for medical affairs at **Medical University of South Carolina** (MUSC). After serving at MUSC early in his career, Steyer returned in 2014 as chair of the Department of Family Medicine and later became chief of the Primary Care Integrated Center for Clinical Excellence and president of **Carolina Family Care**. He became interim dean of the college last spring and, after a national search, earned the role on a full-time basis. Steyer is an active member of the **American Academy of Family Physicians** and the **Society of Teachers of Family Medicine**. He is an active researcher in the area of healthcare policy and leadership development for healthcare professionals.

### 2000s

**Todd Wood (MED '04)** is now executive medical director of the **Heart and Vascular Institute** and president of **The Heart Group of Lancaster General Health** in Lancaster, Pennsylvania, where he oversees the heart and vascular service line of surgical and medical specialists and serves as the managing partner of the cardiology practice of more than 55 physicians and nurse practitioners. He and his wife, Andrea Dooley-Wood, have two sons, Connor and Garrett.

### 2010s

**Raghav Tripathi (CWR '17; GRS '18, public health; MED '21)** is in his dermatology residency at **Johns Hopkins University** in Baltimore, following his preliminary year as a resident physician at **University of Iowa** in Iowa City. Tripathy married his wife, Ananya, a University of Iowa medical student, last summer.

## In memoriam

Information reported to Case Western Reserve University from June 1, 2022, to Jan. 31, 2023.

### 1950s

James P. Andrews (MED '50)  
Henry A. Essex (MED '50)  
Willard Gaylin (MED '51)  
P. Tennyson Williams (ADL '48, MED '51)  
John H. Morledge (MED '52)  
Randall H. Travis (MED '52)  
Reich L. Watterson Jr. (MED '52)  
Ira Burton Price (MED '53)  
John Floyd (MED '56)  
Alan D. Podis (MED '56)  
Theodore A. Russell (MED '56)  
Fred L. Fisher (MED '57)  
David G. Miller (MED '57)  
Robert E. Nenad (MED '57)  
Herman Buschke (MED '58)  
Sadja S. Greenwood (MED '58)  
George William Boll (MED '59)  
Edward F. Doehne (MED '59)

Florence Fonacier (GRS '59, nutrition)

### 1960s

Stephen G. Kent (ADL '56, MED '60)  
Herbert E. Allshouse (MED '61)  
Mary Lois Andersen (GRS '61, nutrition)  
John A. Fricker (MED '61)  
Robert C. Knowles (GRS '61, biochemistry; MED '64)  
David Gill Logan (MED '61)  
Dalton F. McClelland Jr. (MED '61)  
John G. Nemunaitis Jr. (ADL '56, MED '61)  
Donald J. Vinicor (GRS '61, biochemistry)  
Richard D. Jones (GRS '62, physiology)  
Allan Lerner (ADL '58, MED '62)  
Lawrence R. Burwell (MED '63)  
James A. Coil Jr. (MED '63)  
James A. Madura (MED '63)  
James E. Sampliner (MED '63)  
Ronald T. Rolley (MED '63)  
Sam E. Kinney (MED '64)  
Charles Theodore Kaelber (MED '65)  
Terrence J. Fagan (CIT '61, MED '66)  
Catherine Marie Herlihy Beyer (MED '67)

### 1970s

Helmi Asta Mason (GRS '71, nutrition)

Ann Palmer Kelly (FSM '59; GRS '72, molecular biology and microbiology)  
Thomas Jacob Martin (WRC '73, MED '77)  
Dennis Harold Nicholson (MED '76)  
John F. Campbell (MED '78)

### 1980s

Stephen James Ganocy (GRS '80, biometry; GRS '03, statistics)  
Antonino O. Motta (MED '82)  
Terry Lynn Sebben (GRS '85, biometry)  
Ely Samuel Simon (GRS '88, biomedical engineering; MED '89)

### 1990s

Suzette E. Damboise (MED '90)  
Rex A. Birkmire (MED '91)  
Laura M. Whitman (MED '92)  
Scott R. Lee (MED '98)

### 2000s

Anna Alden Lindley (MED '02)  
Timothy Paul T. Ramacciotti (MED '03)

### 2010s

Erin Jane Camp (GRS '10, nutrition)  
Marian Wahba Ghraib (MED '15)



IN OUR COMMUNITY

# Taking a different path

*Editor's note: Shortly before this magazine went to print, David Macinga passed away. We are honored to recognize Macinga's incredible career and remember his impact.*

As confirmed cases of COVID-19 rose in early 2020, so did the number of businesses switching gears in their assembly lines to help combat the pandemic. Breweries and distilleries produced hand sanitizer, luxury fashion brands made medical face masks and automotive companies manufactured ventilators.

But for leaders at GOJO Industries—the makers of Purell—their mission remained the same: “Saving lives and making life better through well-being solutions.”



DAVID MACINGA

17 patents as a co-inventor

35+ co-authored articles for peer-reviewed journals

60+ abstracts for infection control and public health conferences

“Our duty was immediately clear,” David Macinga, PhD (CWR '92; GRS '97, molecular biology and microbiology), the company's vice president of product development and regulatory affairs, said during an interview last fall. “We were able to act quickly by making significant investments to grow our manufacturing capacity and meet the skyrocketing need for our products.”

Being in a position to make an immediate difference is what attracted Macinga to the field 20 years ago.

Throughout his education at Case Western Reserve University—including his doctoral studies in the Biomedical Sciences Training Program—Macinga planned to enter academia. But a series of

opportunities led him to the industrial field, where he found he could make a “faster, bigger impact.”

Macinga joined GOJO in 2003 as a lab scientist developing antimicrobial and antiviral skin hygiene products, including the latest formula for GOJO's flagship product, Purell Advanced Hand Sanitizer. Until his death in June, he led a group of 60 scientists and regulatory specialists responsible for developing and commercializing topical antiseptics, hand hygiene solutions and surface disinfectants.

The latter two items became increasingly in demand during the COVID-19 pandemic. Across the board, supply chain shortages taxed the company, and Macinga's team was tasked with exploring and validating new suppliers for everything from bottle caps to alcohol.

“[The situation] was daunting, but it was also exciting to have that opportunity to step up and help,” he said. “As a PhD student, you have a limited amount of time to solve a problem by becoming the expert on a topic no one else has explored. I've carried that experience with me throughout every stage of my career, and it has helped me navigate the landscape of regulations, the business side of industry, product development and becoming a leader.”

Macinga said he hoped his experiences would inspire others to consider the potential impact they could have as researchers in industry.

“There is more than one path to reach your dreams,” Macinga said during his keynote address at Case Western Reserve University School of Medicine's PhD white coat ceremony last August. “Be open-minded. Look into other disciplines. The more you can see different points of view, different ways of seeing the world and different ways of defining yourself ... no matter where your journey takes you, you will be fully satisfied and you will be successful.”

—Carey Skinner Moss

CASE WESTERN RESERVE UNIVERSITY

Oct. 12-15

HOME COMING & REUNION CELEBRATION  
students • alumni • parents & families

# WELCOME HOME.

Come back to Case Western Reserve this fall. Whether you join us on campus or online, the School of Medicine will provide multiple opportunities to connect, engage and share our progress.

Celebrate time-honored traditions, explore new facilities and spaces, and learn more about the future of CWRU.

Please plan to join us on campus, or online for select virtual events, **Oct. 12-15.**

Visit [case.edu/homecoming](https://case.edu/homecoming) for more information.

## Wine for Life

Join the Jed Ian Taxel Rare Cancer Research Foundation for an exclusive wine event to support rare cancer research at the National Cancer Institute (NCI) designated Case Comprehensive Cancer Center and its mission to advance research and improve patient outcomes. Guests will taste select wines and meet with winery representatives, all within the beautiful BurkleHagen photography studio in the heart of Cleveland's AsiaTown.

**November 10**  
BurkleHagen Studio  
1717 E. 36th St.  
Cleveland, OH 44114

For sponsorship opportunities or ticket sales, visit [case.edu/medicine/giving/strategic-events](https://case.edu/medicine/giving/strategic-events) or email [SOMevents@case.edu](mailto:SOMevents@case.edu).

Visit [case.edu/cancer](https://case.edu/cancer) to learn how the Case Comprehensive Cancer Center advances research and care. To learn more about the Jed Ian Taxel Rare Cancer Research Foundation, visit [jedcancerfoundation.org](https://jedcancerfoundation.org).

jedi rare cancer foundation





**CASE WESTERN RESERVE  
UNIVERSITY**  
School of Medicine

10900 Euclid Ave.  
Cleveland, OH 44106-7017

UMC-4732-01\_2023

# Fostering a legacy of excellence



## **Case Western Reserve University School of Medicine**

is renowned for developing leaders whose work and dedication will impact the field of medicine for generations to come—and your support can continue this tradition.

By making an estate gift to the School of Medicine—through a simple will bequest, by designating the school as the beneficiary of all or a portion of your IRA, 401(k), 403(b), or other qualified plan when it ends, or even through a gift of life insurance—your thoughtful philanthropy can support the area that is most meaningful to you.

You also can make a tax-friendly gift during your lifetime by transferring up to \$100,000 directly from your traditional IRA as a Qualified Charitable Distribution (QCD) to begin your personal legacy now.

From providing scholarship support to helping fund critical research to giving toward an area of greatest need, your gift can directly impact the School of Medicine and its future.

Learn how you can continue this remarkable legacy by visiting [plannedgiving.case.edu](https://plannedgiving.case.edu) or calling the Office of Strategic Giving at **216.368.4460**.

## How the University and SOM communicates with Stakeholders : Diverse and constantly changing

### University

Case Daily Think	(almost) daily each semester	Univ. Community all Stakeholders	online only print only?
Univ. Annual Report	in Jan	all Stakeholders	print/online

### SOM

<i>Med360 (monthly enews letter 2016-18)</i>	email
<i>The Pulse (Dec 2020)</i>	email
The Brief – internal SOM monthly newsletter (7/22 – to date)	email/online

<i>Medicus (weekly 2/18 to 2/19)</i>	<i>email</i>
<i>Medicus termly/quarterly (2008 to 2019)</i>	<i>print</i>

CWRU Medicine (inaugural issue, summer 2023)	students, alumni donors (not yet faculty or staff)	print
--	---	-------

*Annual Reports ( 2003, 2009, 2010-11, “175 yrs” 2018)*

**CWRU Medicine Inaugural issue**      60 pages

Students	~16 pages
Curriculum	3
Research Accomplishments	~12
A few stats	2
Community	~13 (incl. cover story)
Alumni pages	7

**typical / past annual report** ~ 44 pages [2009, FY11]  
(CCC 2022 Ann.Rep. is 22 pages)

Students	~1 , 2 pages
Curriculum/Education	4 , 4
Research	12+6* , 22
Stats (finances etc.)	6 , 4
Community	6 , 8
Alumni	0 , 0

\* Tech Transfer+Grants

showcase inter-school and cwru-hospital  
research

purpose: track numbers  
and strategic plan

ideally in fall (before end of year  
donations)

CCF mentioned 22, UH 14, Metro 9 and VA 2 times  
-mostly is association with faculty- in the entire document.  
...but not explicit pages/stories on affiliates

## **FCSC discussion:**

coordinate with Senate/University ? but not all Schools might want to have one  
Certainly impetus to have reports / publications rests within school or center (e.g. Cancer Center has annual report in 2022 and before).

Are we getting enough from the \$750k we are sending over to Central Marketing? (discussion beyond Faculty paygrade).

Additional resources for an annual report would not be much (~\$20-30k). Good for donors and for tracking success of strategic plan.

Opportunity to engage faculty and staff and showcase multi-affiliation collaborative nature of SOM  
-- can have a call through FC for news etc. items  
Provide advice what could be in an annual report.



**Proposed Motion:**

**Faculty Council asks the Dean's office to work with and provide resources to Central Marketing & Communication to publish an annual report on the School of Medicine which engages and recognizes Faculty and Staff in addition to the other stakeholders.**

# SOM Committee on Women and Minority Faculty Council Update

**November, 2023**

**Amy G. Hise, MD MPH (Chair)**



# SOM Committee on Women and Minority Faculty

## 2022-2023

### **Amy Hise, MD, MPH, Chair (2025)**

Department of Pathology – SOM  
Department of Medicine - VA

### **Nadim El Chakhtoura, MD (2025)**

Department of Medicine – VA

### **Katarina Greer, MD (2026)**

Department of Medicine – VA &UH

### **Vanessa Maier, MD, MPH (2026)**

Department of Family Medicine - Metrohealth

### **Devashis Mukherjee, MD, MS (2025)**

Department of Pediatrics and Neonatology – UH  
Rainbow

### **Patrick Osei-Owusu, PhD (2026)**

Department of Physiology and Biophysics-SOM

### **Lynn Singer, PhD (2024)**

Population & Quantitative Health Sciences,  
Pediatrics, Psychiatry and Psychology – SOM

### **Xueqin Ding, MD PhD, (2024)**

Anesthesiology & Perioperative Medicine - UH

### **Kimone Smith Lightford, MD, (2024)**

Department of Medicine - UH

Reema Gulati, MD (ex officio)

Pediatric Gastroenterology -- Metrohealth  
President, WFSOM

Cynthia Kubu, PhD (ex officio)

Department of Neurology – CCLCM  
Vice Dean for Faculty

Adrianne Fletcher, PhD (ex officio)

Jack, Joseph and Morton Mandel School of Applied  
Social Sciences  
Vice Dean of DEIE

# Committee on Women and Minority Faculty

- Meetings:
  - 09/14/22, 10/12/22, 11/09/22, 12/14/22, 01/11/23, 02/08/23, 03/08/23, 04/12/23, 05/10/23, 06/14/23 (all at 5 - 6pm: Zoom)
  - 07/12/23; 08/09/23; 09/13/23; 10/11/23; 11/08/23; 12/6/23; 01/17/24; 02/14/24; 03/13/24; 04/10/24; 05/08/24; 06/12/24
- Activities/Topics of Discussion:
  - Diverse representation in Provost's Office
  - Childcare/Eldercare
  - Met with Dean Gerson
  - Research with vulnerable groups
  - Meetings with chairs: Hope Barkoukis, Sherrie Williams
  - Salary equity
  - DSAP Priorities
  - Dean's ad-hoc committee APT
  - SOM Strategic Plan
  - Professional Conduct Committee/Climate Survey

# Committee on Women and Minority Faculty

- Activities/Topics of Discussion, cont:
  - Discussion with Diversity Stakeholders Series
    - Zhenghe John Wang, past president AFA
    - Jennifer Cupar, chair FS Committee on Women
  - Legislative actions, SB83, SCOTUS Affirmative Action
  - AAMC Salary reports; DEI Report
  - OUTlist/ALLYList
    - Met with Mailey Lorio, interim director LGBT Center
  - Faculty Development activities
  - Upcoming meetings:
    - Further meetings with stakeholders
    - Additional meetings with chairs
    - Review DES survey results
  - amy.hise@case.edu



# Awards and Honors Committee

---

Faculty Council 11/20/23

Lynn Singer/ William Merrick

**Faculty Council's Ad Hoc Committee on Awards and Honors**  
**Approved by Faculty Council 9-23-2019;**  
**Revised by Faculty Council 1-27-2020**

---

- created to increase the number of faculty who are nominated for awards and honors nationally and internationally.
- 1. To identify new and existing opportunities for faculty at every rank, and increase the number of faculty members at CWRU-SOM who receive awards/honors
- 2. To create a nomination process and assist faculty in determining if and when they should apply for various honors/awards
- 3. To recommend procedures for crafting materials including producing templates for some very important awards/honors



# Committee members

---

- Jennifer Bailit
  - Tina Lining
  - Lia Logio
  - William Merrick
  - Cynthia Rahn
- Susan Reichert  
Robert Salata  
Lynn Singer \* Chair  
Simran Singh  
Jim Young



# Committee charge

- Meeting every other week since March
- 
1. Develop a searchable listing of honors and awards, eligibility, frequency, deadlines (to the extent possible)
  2. Solicit nominations in conjunction with Department and Center Chairs
  3. Review materials submitted; edits based on opportunity or knowledge of the field
  4. Create a databank of materials for faculty to utilize as samples .
  5. Honor roll

# Progress to date

- Developed list of 100+ top awards (infinite number);
- Identified top faculty for eligibility based on Research.com, committee knowledge, Web of Science, etc.
- Committee members presented charge to constituent faculty at affiliates
- Vetting timelines for possible nominations
- Nominations so far: Gairdner (submitted); AAMC 2023 (submitted, not awarded), Alpert (in process, due Nov. 5); Wolf (in process); ASBMB Parasitology (in process); AAAS Fellow (in process); Avery prize (neonatology, in process); Merkin Prize: review; Marian Spencer Fay: review.
- Website created : [Faculty Awards | School of Medicine | School of Medicine | Case Western Reserve University](#)



# Identified barriers

- Need for administrative assistance (someone parallel to research awards)
- Lack of knowledge about individual achievements that have not already recognized for an award. This could be cumulative work or a single, ground breaking observation.
- Lack of knowledge about faculty membership in professional societies (working with FA for data to be included in FIS) as a large number of awards are society based.
- Faculty not involved in major professional societies: dues, etc., AAAS as example
- Timeline for submission vs. notification; often too late to submit, we are working on year later
- Faculty modesty, lack of willingness or time to create nomination; lack of understanding of need for engagement
- Letter writers/nominators need to be cognizant of the discipline AND able to write an interesting letter.
- Lack of diversity in identifying faculty



# What can Faculty do?

---

- 1. Identify yourself or other faculty for specific awards
- 2. Maintain memberships and leadership in appropriate professional societies
- 3. Insure you identify professional memberships and awards in FIS and acknowledge in annual reviews
- 4. Assist chairs and colleagues in writing letters of nomination; engage your emeriti to help
- 5. Review awards on an ongoing basis well in advance of nomination submission

# Awards under review

---

- UCLA Switzer: Individual whose recent work revealed new paradigms, biological processes , pathways, or origins of diseases...potential for continued.
- Eppendorf: neurobiologists <35 years old, 10 since degree
- Ruth Kirschstein: Biochem/Molecular bio/ ASBMB member
- FASEB—Federation American Societies Experimental Biology-Excellence in Science, Advocacy, Public Service