

NORTH DAKOTA MEDICINE

University of North Dakota School of Medicine & Sciences



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HOMECOMING WEEK
PRESENTED BY



TUESDAY, OCTOBER 3

BLOOD DRIVE
WELLNESS CENTER
10 a.m. – 4 p.m.

WEDNESDAY, OCTOBER 4

HAWKS HOUR
BONZER'S SANDWICH PUB
4:30 - 6 p.m.

UND PEP RALLY
TOWN SQUARE, DOWNTOWN GRAND FORKS
6 p.m.

THURSDAY, OCTOBER 5

ALUMNI HONORS BANQUET
ALERUS CENTER
5:30 p.m. social | 6:30 p.m. dinner

UND VOLLEYBALL VS. SOUTH DAKOTA
BETTY ENGELSTAD SIOUX CENTER
7 p.m.

FRIDAY, OCTOBER 6

**FOREVER STARTS HERE:
A CELEBRATION FOR THE FUTURE**
UND MEMORIAL UNION
1:30 – 2:30 p.m.

SATURDAY, OCTOBER 7

UND HOMECOMING PARADE
UNIVERSITY AVENUE
9 a.m.

TAILGATE VILLAGE
ALERUS CENTER PARKING LOT
10:30 a.m.

UND FOOTBALL VS. WESTERN ILLINOIS
ALERUS CENTER
1 p.m.

UND HOCKEY VS. U OF MANITOBA
RALPH ENGELSTAD ARENA
6:07 p.m.

UNDalumni.org/events/homecoming

**UNIVERSITY OF NORTH DAKOTA
SCHOOL OF MEDICINE & HEALTH SCIENCES**

Vice President for Health Affairs and Dean **Joshua Wynne**

Editor **Brian James Schill**

Writers **Stacy Kusler
Jena Pierce
Jessica Rosencrans**

Contributor **Kristen Peterson**

Graphic Design **John Lee
Laura Stutrud**

Photography **Kristen Peterson
Shawna Schill
Wanda Weber**

ON THE COVER: Department of Sports Medicine student and UND student athlete on the UND campus.



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UND School of Medicine & Health Sciences
Office of Alumni and Community Relations
Attn: Kristen Peterson, 1301 N Columbia Rd, Stop 9037
Grand Forks, ND 58202-9037

E-mail: kristen.peterson@UND.edu
Phone: 701.777.4305

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University of North Dakota School of Medicine & Health Sciences

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As the fall semester gets into full swing, there are a number of exciting developments at your UND School of Medicine & Health Sciences (SMHS). First up is an update on faculty and staff recruiting at the School. As I've mentioned before, the supply chain problems we've all encountered in the grocery store and elsewhere are even more challenging for human capital – that is, people. As with virtually all academic healthcare institutions, we typically compete for people not only on a regional level, but indeed on a national and even international level. The UND SMHS has several searches underway for new faculty and staff members to fill positions that are open due to retirements, relocations, and programmatic growth. Here is an update on where we stand. First, here is the good news regarding recently completed – and very successful – searches:

- Dr. Sarah Nielsen is the new chair of the Department of Occupational Therapy following the retirement in June of long-time chair Dr. Janet Jedlicka.
- Dr. Andrew McLean is the inaugural Associate Dean for Wellness for the School.

And here is a status report on the other current administrative searches that are underway:

- Chair of the Department of Indigenous Health – A candidate visited the campus last month for a tour and interviews, and discussions are ongoing.
- Director, Center for Rural Health – Various candidates are being vetted, but the position remains open at this time.
- Deputy Director, Institutional Development Award (IDeA) Networks of Biomedical Research Excellence (INBRE) – One candidate has been fully vetted and we are in the final stages of contract negotiation.
- Wadhvani Family Endowed Chair of Translational Research – Several candidates are being vetted, but the position remains open at this time.
- Director, Master of Public Health program – Several candidates are being vetted.
- Associate Dean of Diversity, Equity, and Inclusion – Several candidates are being vetted.

A DIFFERENT SORT OF SUPPLY CHAIN

Thus, overall, I think the search teams have made good progress on most of these searches. We had hoped to have all of the positions filled by now, so we won't make that deadline; however, Jan. 1, 2024, still seems achievable for most of the searches.

The other exciting development relates to strategic planning. Effective organizations and institutions periodically evaluate what they've accomplished in the past, how they are positioned at present, and what they foresee as their possible role and impact in the future. UND recently completed its visioning effort with the release of UND LEADS. By focusing on five strategic pillars – learning, equity, affinity, discovery, and service – UND has looked into the future and formulated a path forward. The UND SMHS now is internalizing the UND LEADS structure into our operational plans, and we are establishing quantitative metrics wherever possible to assess how well we will be accomplishing the various goals associated with the UND SMHS version of UND LEADS. We plan to have our internal strategic planning process completed by the end of this calendar year.

North Dakota's higher education system engages in an analogous strategic planning process. Called Envision, the current look forward is through 2030. Recently, the State Board of Higher Education (SBHE) and the North Dakota University System (NDUS) decided to carry the process forward through 2035 with their Envision 2035 initiative that is starting now and will be completed by the spring. The effort "aims to anticipate the programmatic needs that will challenge future students as they ready themselves to enter the workforce. Nine priorities have been identified for study. Four pertain directly to Programs of the Future: Agriculture, Energy, Digital Sciences, and Healthcare. The remaining five groups pertain to the Student of the Future, Teacher of the Future, Infrastructure of the Future, Human Capital of the Future, and Values of the Future."

I have been asked to help lead the Healthcare study along with former SBHE Chair Dr. Casey Ryan and North Dakota State University Department of Public Health Chair Dr. Pamela Jo Johnson. We are being assisted by study group members that reflect the educational perspectives from across the NDUS, along with experts from North Dakota's healthcare delivery industry, the legislature, private industry, and – imagine! – a student to highlight the student perspective. As we solicit perspectives and information, the study group plans to meet four times before our preliminary report is due to the SBHE and the NDUS for a Nov. 1, 2023, conference in Bismarck when we and the other eight study groups will come together with the SBHE and NDUS leadership to further develop Envision 2035. It will be a challenge to try to imagine what the future of healthcare education will look like in 2035, but I certainly anticipate that some of the topics that our group will consider and discuss for inclusion in our report will be: 1) the role of artificial intelligence and machine learning in healthcare and healthcare education; 2) the role of telehealth and virtual care in all of their manifestations, including the use of wearable devices by patients; 3) healthcare workforce needs; 4) retention strategies for retaining NDUS healthcare graduates for practice in-state; 5) the role and importance of expanded public and population health programming in education; 6) how to prepare healthcare providers better for the growing challenge of elderly care; and others. It will be a challenge to keep the list of priorities succinct and the evaluation metrics as precise as possible. I am very confident, however, that our healthcare study group is up to the task!



Joshua Wynne, MD, MBA, MPH
Vice President for Health Affairs, UND
Dean, School of Medicine & Health Sciences

SETTING THE PACE

UND's Department of Sports Medicine celebrates 30 years of leading the nation in best practice care for student athletes

In the end, making history took only 25 words.

“This is to express support for the location of the Athletic Training Education Program in the School of Medicine at the University of North Dakota.”

With the single sentence, written by former UND President Thomas Clifford and delivered to then-Dean of what is today the UND School of Medicine & Health Sciences (SMHS), Dr. Edwin C. James, UND's Department of Athletic Training became the first such program in the nation to be housed within an accredited medical college.

Smiling at the 10 April 1990 memo that he collected as part of a fuller report on his department's history, Chair and Associate Professor in the Department of Sports Medicine Dr. Steve Westereng reflected on just how risky and profound such a move felt at the time.

“In 1991, nobody had done that,” explained Westereng from a meeting room on the third floor of the SMHS building in Grand Forks, clarifying that while his department was admitted to the medical college shortly after the Clifford memo, the athletic training program was not officially accredited until 1993. “This was the first athletic training program to go into a med

school. And now that's where everybody else is – it's actually a standard now. You should be doing this.”

'Unchallengeable authority'

Crediting former Director of Sports Medicine Jim Rudd and former Chair of the UND Department of Family & Community Medicine Dr. William Mann with making the move happen more officially, Westereng noted how the transition 30 years ago marked the first of what was to become many trendsetting decisions by the Department.

“In 2011 the NFL mandated all teams have a physical therapist on staff, whereas we already had this in place at UND since 2000,” Westereng continued, pointing out another innovation. “A more recent development was working with the Department of Physical Therapy on a Sports Residency for physical therapists who work within the UND Center for Sports Medicine and with the athletic training faculty on student athletes. This program is interdisciplinary, educational, and contributes to the service of area athletes.”

Here's another example:

Based on advice and input it received from the National Athletic Trainers Association, the NCAA approved, in 2016, new rules aimed at guaranteeing medical independence for athletic training and sports medicine staff.



As one NCAA report put it at the time, schools' sports medicine staff – team physicians and athletic trainers – must be given “unchallengeable authority” over the medical treatment and return-to-play decisions for injured athletes.

“While it is common and accepted for head coaches to hire and fire assistant coaches and certain support staff,” the report noted, “the new rules draw a line when it comes to medical staff, insisting that the employment, supervision and decision-making of team physicians and athletic trainers be made independent of coaches.”

That is to say, the NCAA recommended schools take both athletic training programs and injury reporting out of university athletics programs, advising instead that they reside in academic and/or health-adjacent departments.

“NCAA-mandated independent medical decision making in 2016, but UND was already there back in 1991 because of its placement in the School of Medicine & Health Sciences,” Westereng stated.

Indeed, UND Sports Medicine seems to have made a habit of being ahead of the curve.

30 years and a new degree

Thirty years after making its first pace-setting decision, then, North Dakota's premier athletic training program celebrates

the inaugural leg of its marathon at the School's 2023 Homecoming Week festivities, Oct. 1-6 on the UND campus.

As the star of the annual SMHS Homecoming Banquet this October, the athletic training program will be the focus of Westereng's keynote speech to UND alumni who are back in Grand Forks not only for Homecoming events but for the UND football and hockey games that will feature Department of Sports Medicine alumni, faculty, students, and staff.

Part of the festivities will include a celebration of the Master of Athletic Training (MAT) degree the department formalized in 2022 and which Westereng reports is going very well.

“The faculty have worked very hard to make this transition and we feel the first year has gone very well,” said Westereng, who started at UND in 1999 and has served as department chair since 2003. “Students are learning and engaged, and we're excited to see the development of our first MAT class as they close in on graduation.”

Sara Bjerke, assistant professor in the Department of Sports Medicine, described how the years-long effort to convert a Bachelor of Athletic Training degree program into one of only a few MAT programs in the upper-Midwest will both boost enrollments at UND and diversify the applicant pool.



The new degree “will improve the care future athletes receive on and off the field,” Bjerke told *North Dakota Medicine*. Why? Because athletic training is no longer just for those of us in action on the field, court, or rink.

“Athletic training has moved from the sidelines to where now we’re in clinics, industrial settings, and really anywhere there are active people,” Bjerke said. “We’re much more ingrained in the healthcare setting generally. Being in the School of Medicine and Health Sciences, we’ve been the anomaly – historically – in that most athletic trainers were hired solely within university athletic departments. We’ve really been on the forefront of being within the healthcare setting, though – and we’re pushing even more.”

Part of that push, added Westereng, is giving more students more clinical experiences sooner, which today is also considered an industry best practice.

“We wanted to maximize the amount of clinical experience that a student garnered, so we designed the curriculum to allow students to get elective clinical rotations in any area of athletic training they are interested in,” he explained of a program that follows a medical preceptor model. That is to say: each of Westereng’s core faculty provide real-time athletic training services to area athletes, including at UND games, and follow

a problem-based learning outline. “We’re huge believers in the clinical education portion of our curriculum. A lot of other places have a couple of instructors and then students have clinical preceptors out in the field. But our UND athletic trainers also teach in our program. Research shows students who experience experiential learning with faculty learn more and retention rates go up.”

Such a move for more and better real-world training better aligns UND with developments in the profession industry-wide, Westereng noted.

And being housed within a medical college at a flagship university with Division I athletics gives UND athletic training students another advantage: currency of domain knowledge with top tier student athletes in nationally-known programs.

“It’s easy to forget some of those techniques and to lose touch with what our students really need to learn, and what they need to do to stay current,” added Westereng, thinking of programs whose instructors likely see less time with college and future-professional athletes on the sidelines. “It’s a huge benefit that we are able to use our expertise and then show the students what we’ve learned and what we’re learning on the field, because you learn something new every single day.”

By Brian James Schill



DAKOTA HEALTH

A UND School of Medicine &
Health Sciences Podcast

What's a biomarker?

What do family medicine and jazz have in common?

Where are scientists in the war against cancer?

These are just a few of the questions explored on Dakota Health, a new health and medicine podcast produced in-house at the UND School of Medicine & Health Sciences.

Each 30-minute episode of Dakota Health explores a specific healthcare topic with UND-based faculty, students, and staff from across North Dakota.

**Listen and subscribe wherever
you get your podcasts!**



ACTIVITIES OF DAILY LIVING

Students of the UND Occupational Therapy Doctorate program's Casper College cohort in Casper, Wyo.



As a product of the program in which she now teaches, Nicole Harris understands the challenge: how to provide occupational therapy to an overwhelmingly rural population.

“People worry about a level of saturation – that there’ll be no jobs – but they’re hiring for OT in every single town in Wyoming,” says the assistant professor from her office at the UND Department of Occupational Therapy’s (OT) satellite campus at Casper College in Casper, Wyo. “So, we need more students. We don’t have enough OTs, and we need to fill those positions.”

This desperate need for health providers in a state even more sparsely populated than North Dakota – which is to say, even more rural in scope – is at the heart of what led Tom Clifford,

Jr., the son of the former University of North Dakota President, Tom Clifford, Sr., and the late LeRoy Strausner, who served as Casper College’s President from 1991 to 2004, to push for an OT program in Wyoming back in the early-1990s.

To Breann Lamborn, it was this vision that has been vital to the provision of healthcare in Wyoming for three decades.

“We were the first OT program in the country that crossed state lines,” says Lamborn, a Casper-based associate professor of occupational therapy for UND. “And for many years we were the model for the proprietary programs that opened after us. Nobody had done it before.”



FROM PLAINS TO PEAKS

UND's satellite occupational therapy program in Casper, Wyo., celebrates 30 years of rural health delivery

The new Chair of UND's Department of Occupational Therapy, Dr. Sarah Nielsen, agrees, noting how UND has been identified by the Accreditation Council for Occupational Therapy Education (ACOTE) for its integrated model.

"Until recently, I did not understand the significant impact UND has had on additional location models," Nielsen says. "When I started on the ACOTE, I was placed on the policies and procedures committee specifically because of UND's role in setting the gold standard for additional locations. We are viewed as doing it right: one program with one curriculum where we collaborate every day."

Mirror site

The UND Department of Occupational Therapy satellite program in Casper turns 30 this year.

Putting such a milestone in context, Lamborn, who has been with the program almost from Day One, recalls how there was

no guarantee that the gamble Casper made on a distance degree would last more than a few years.

According to a document provided by the Department,

Strausner was first interested in starting an occupational therapy assistant (OTA) program in Wyoming, which had no OT or OTA training options at the time. He took the idea to Clifford, Jr., then-Chair of the Life Sciences Division at Casper College, who, given his contacts up at UND, connected with then-Chair of the Department of Occupational Therapy, Sue McIntyre. Asking McIntyre if she would consult

Casper on opening an OTA program, Clifford was surprised at McIntyre's modified "yes" response.

"Tom had been advising and guiding his students to North Dakota, which of course was his alma mater," explains Lamborn. "And Sue, being highly innovative, said 'Well, what would you think if we were just to deliver the bachelor's degree in OT to you, from UND?' That's how the ball got rolling for an OT program in Wyoming."

"...they're hiring for OT in every single town in Wyoming."

NICOLE HARRIS, ED.D., O.T.R./L.



“Possible locations for program implementation include social service agencies and youth community programs.”

BREANN LAMBORN, ED.D., M.P.A.

Founded in 1954 and continuously accredited since 1956, UND’s OT program established its “mirror” site officially in 1993, offering a Bachelor of Occupational Therapy degree in Wyoming. Today, the bachelor’s degree has been upgraded to an occupational therapy doctorate (OTD), which is the profession’s entry-level degree, and can be earned in both Casper and Grand Forks.

Despite the distance, though, the two student cohorts remain part of a single program with a single faculty.

“When the program started, the faculty in Grand Forks literally shipped teaching material to Casper and the instructors down there taught it,” adds Nielsen. “Then came video connection on large televisions that were rolled into rooms and we started some teaching to Casper at a distance. Fast forward to now: we have four full-time Casper faculty who have different expertise and teach students up here while Grand Forks faculty teach in Wyoming in an integrated way.”

And, Lamborn is quick to note, none of the above would have been possible without generous support from the UND administration, particularly that of SMHS Dean Joshua Wynne, who has helped oversee the partnership for almost half of its life.

“The administration’s commitment to the program here has been unwavering,” continues Lamborn. “That’s important to note and we can’t thank UND enough for what the support has meant for rural health across the region.”

Rural health needs

As Lamborn suggests, since 1993, the Casper program, which is housed in the least populous state in the U.S., has focused on producing therapists for rural practice.

“From the beginning, we intended the Wyoming program to fill a critical need in healthcare providers for rural practice – because there was no OT school even close to us at that time,” she says, citing research data suggesting that rural areas have an especially difficult time recruiting and retaining health providers. “We’ve always maintained that emphasis on offering this program with the hope, as in North Dakota, that students would come here and then they would choose to stay here and practice. Up to this point, we’ve been very successful with that. The majority of OTs in Wyoming are grads from our program.”

Harris serves as a case-in-point.

“I got my bachelor’s degree at the University of Wyoming, but, afterwards, I really wasn’t sure what I was going to do,” says Harris. “Then I found out about this program. I was a single mom and it was wonderful starting at the Casper OT program. Being able to still be close to family was helpful. After graduating with my OT degree, I practiced for a couple of years in home health and then saw the position advertised to work at Casper, so I applied.”

And here she is, teaching the students who will be Harris’s future colleagues.

Such potential colleagues include Casper-based OTD students Makenzie Kroupa and Josie Sylte.

A Rock Springs, Wyo., native, Kroupa said that having experienced the need to “travel several hours to receive any kind of medical care,” she felt compelled to become a health provider who would someday be able to offer better care closer to home for her clients.

“I chose occupational therapy because I liked how really versatile it is,” Kroupa smiles. “You can work with pediatrics, adults, and all these different diagnoses. You can work on everyday activities – leisure or after school activities – and I liked how I was going to have a wide range of possibilities of where I could work and grow.”

Nodding in agreement, Sylte, the Ipswitch, S.D., native who earned her undergraduate degree from UND before matriculating into the OTD program in Casper, adds that having a parent who is a rural occupational therapist allowed her to see, every day, the value-add that health providers bring to rural communities.

“I grew up sitting outside of my mom’s office when she was working at the schools, tagging along on some of her jobs,” Sylte states. “That helped me realize there’s a need for rural OT. I was

lucky enough to live half an hour from the biggest hospital in the area, but a lot of individuals that I know are two or three hours from the nearest big hospital. So, it’s hard for them to get services and I really liked the idea of being able to give something back to a rural community.”

This sentiment, says Nielsen, is part of what makes the program so valuable to both states.

“The beauty of this collaboration is that we have found similar issues in health delivery in both states, and we have also found that the ways each state addresses challenges varies,” she notes. “One of the most fascinating things we’ve learned is that Wyoming has incredibly innovative frontier service delivery strategies for education and healthcare. We then bring that knowledge back to our own state as we impact delivery in North Dakota.”

‘OT can really go anywhere’

Not content to stand on its laurels, then, UND’s satellite OTD program is looking to the future.

For the next 30 years, says Lamborn, the Casper College OTD program hopes to continue to grow, increasing the number of grads hired for OT positions across Wyoming. Echoing Harris’s quip that “we definitely still need more students” (the class size is currently 18 students admitted each year), Lamborn suggests that she also hopes to bring more off-campus fieldwork training sites into the system for her students.

“When our doctoral students complete their experiential placements, they’re designing some incredible programs for their capstone projects in areas where OT isn’t yet in place, but needs to be,” she says. “I have a student who created a mental health awareness and suicide prevention program for the Natrona County suicide task force targeted to adolescents.”

“I chose occupational therapy because I liked how really versatile it is.”

MAKENZIE KROUPA

Because OT is a “perfect fit” for such work, says Lamborn, “possible locations for program implementation include social service agencies and youth community programs. What we really try to encourage agencies and our students to understand is that while there are traditional placements for OT fieldwork experiences, OT can really go anywhere.”

Establishing and growing such partnerships with communities is particularly important for rural health

providers insofar as such partnerships both help expand and stabilize not only state educational programs, but the same rural health programs that even now are short on staff.

All of which, says Lamborn, is a way of restating that relationships with alumni – who often end up working in those community agencies – matter.

“We have benefitted so much from alumni support, especially in Wyoming, because a significant number of our supervisors at clinical sites are graduates of our program, either here or in Grand Forks,” she concludes. “Our alumni continue to give back to us through their willingness to be clinical supervisors for students. They see it as their responsibility to train the next generation of grads – and we can’t thank them enough for that.”

By Brian James Schill

Dr. Rachel Ness at the
Fargo Center for Dermatology
(Photo courtesy Fargo Center
for Dermatology)



WALKING ON

It's really quite simple, said Dr. Rachel Ness from her office at the Fargo Center for Dermatology (FCD).

"If you want to protect your skin, the most economical, smartest thing you can do is just good sun protection," explained the UND School of Medicine & Health Sciences (SMHS) alum, noting that even

if we can't alter our genetic profile, we can often control our exposure to the sun. "Whether it's in the form of protective clothing – a hat or long sleeves – or sunscreen, all of that is going to reduce your chances of getting melanoma, squamous or basal cell carcinoma, and other types of skin cancers."

Unfortunately, added Ness, even for those of us who don't take our skin for granted, it's easy to underestimate how damaging ultraviolet radiation can be. Although estimates vary – and hinge on the sun's position in the sky, cloud cover, and the fairness of the skin in question – overexposure can occur in as few as 10 to 15 minutes for some skin types.

But natural sun isn't the only problem, said Ness.

"I grew up in the era when the sun tanning industry really tried to convince us that a tanning bed tan was a healthy tan," continued the physician who earned her M.D. from UND in 2003 and completed a dermatology residency in Wisconsin before coming back to North Dakota. "And now I'm seeing all those patients who lived in tanning beds developing melanoma."

Skin cancer awareness

All of this is why Ness and her team of providers make community education as much of their goal as patient care. To that end, FCD has for more than a decade sponsored a free skin cancer screening each May that draws dozens of walk-in patients.

"If you want to protect your skin, the most economical, smartest thing you can do is just good sun protection."

RACHEL NESS, M.D.

This past May, though, Ness handled the event a bit differently. After hosting a meeting with fourth-year UND medical student Mitchell Gullickson and some of his colleagues, Ness agreed to make the annual screening, which the clinic coordinates in recognition of Skin Cancer Awareness Month, an educational event for UND's future physicians.

"Mitch came to me and said 'we would love to do something with you,'" said Ness of Gullickson and his team of UND medical

students. "This was the first year out of 15 that we've done such a partnership and it was a great community experience."

According to Ness, on the day of the free screening, the dozen or so UND medical students welcomed incoming patients and helped them register. Showing the patients to an exam room, the students helped educate walk-ins on skin protection and the basics of skin cancer. Later, with a provider's assessment in-hand, the students also helped explain to patients what the provider's report might mean – if any skin lesions concerned the provider or if they appeared benign, giving the student a chance to improve their communication and teaching skills in

SUNSHINE

UND medical students get hands-on dermatology education at the Fargo Center for Dermatology

the medical setting. If anything on a patient's skin did concern the provider, students provided patients with a "next steps" form and a list of phone numbers, recommending that they schedule a follow-up appointment with any dermatology provider in the region.

In all, the event saw nearly 70 patients that day.

"I remember having conversations with relieved patients who traveled from a long distance or cited financial concerns as their main reason for attending the event," said Gullickson, who hails from Fargo. "There was a deep sense of gratitude all around. Many of the medical students who volunteered their time with this event had a big exam the following day, so they showed real commitment to serving others by volunteering their time to help make this event a success."

One of those students was Apple Valley, Minn., native McKenzie Samson, who noted how she found the experience significant, even if she's not necessarily interested in specializing in dermatology.

"No matter what area of medicine you're in, I think it's important to practice working with patients – and just having that general knowledge," said Samson, who has her eye on anesthesiology. "Because you never know what kind of questions a patient might ask you. And the community engagement part of this is huge. We've been supported within our clinical rotations by area providers and patients, and I think it's always a great thing to be able to serve and to give back."

Six month wait

Encouraging students to understand dermatology better is especially important in a northern climate insofar as North Dakota, for example, both plays host to a predominantly fair-skinned population and is experiencing a major shortage of dermatologists.

"Right now, it's usually four to six months minimum in the entire state of North Dakota to see a dermatologist," Ness said,

admitting that her screening event is both good community care and is vital for some people. "This is a way of capturing 70 to 80 people who might not otherwise have access to care but were worried about a spot on their skin. That way, we can at least help triage some of those patients, and be more efficient with our medical education because now we have students who want to help."

As Ness described the situation, although interest in dermatology as a specialization is increasing among medical school graduates, the production of board-certified dermatologists is still slowed by the lack of dermatology residencies nationwide. The lack of residencies and dermatologists in most regions, including North Dakota, results in fewer rotations and dermatology-based electives for students, meaning fewer graduates get exposed to or seek out

dermatology as a specialization and the cycle repeats.

And because most physicians end up practicing close to or in the community where they completed their residency, added Ness, the lack of a dermatology residency in North Dakota contributes to the loss of at least some specialists to other states every year.

"It's also extremely competitive to get into one of the few residencies that do exist – there aren't a lot of slots available," she said.

"Dermatology continues to be one of the most sought-after specialties in medicine."

MICHAEL EBERTZ, M.D.

For his part, dermatologist Michael Ebertz, M.D., founder of Skin Care Doctors, P.A., in Minneapolis, Minn., agreed, adding that while there is a shortage of providers, particularly in the upper-Midwest, he remains hopeful.

"Dermatology continues to be one of the most sought-after specialties in medicine," said the 1992 SMHS grad, noting how there seems to be a greater interest in skin care today than a generation ago. "There is a high level of job satisfaction among dermatologists compared to many other specialties, which is a big reason for its popularity. The whole field of dermatology continues to grow and has been very exciting to be a part of. I

can hardly wait to see what the next 20 years will bring in terms of advancements and the great opportunities for patient care.”

Filling the gap year

All of this is why Ness not only sponsors the free screening but lectures on dermatology for the SMHS. It’s also why FCD maintains a robust Gap Year Internship program for prospective or wait-listed medical students.

As Ness described her Gap Year program, which she began shortly after founding her Fargo clinic, undergraduates taking a gap year between their undergraduate and medical schooling – or those who have been waitlisted for medical school – can apply to intern at FCD. At the Center, interns are trained in everything from patient admissions, preauthorizations, and scribing to drug interactions, blood draws, and same-day surgery processes.

“In this way, future med students spend a year getting clinical experience to really build their resume, and also to get letters of recommendation from us,” said Ness of a program wrapping up its eighth year. “The whole point is to give all of these young, ambitious people some great experiences. Even if none of these people intend to go into dermatology, they still spend a year working in healthcare. Part of the idea is that we then help them through their med school application process.”

This program is actually how Ness and Gullickson first met.

Joining the FCD as a Gap Year intern in 2019, Gullickson feels that the program put him ahead of many of his classmates during his first year of training at the UND SMHS.

“My passion for dermatology truly started during my time in the gap year program,” Gullickson admitted. “I felt much more prepared going into medical school following this position as I gained valuable experience with note writing, history taking, and dermatology-specific knowledge. Dr. Ness and the rest of the providers at the clinic do a phenomenal job of teaching, training, and mentoring the gap year interns. They understand that most of us will be providers one day as well.”

By Brian James Schill

■ '10s

Josalynne Hoff Rue, M.D. '16, was named Emerging Rural Leader by the Center For Rural Health in North Dakota. Hoff Rue practices family medicine at the Heart of America Medical Center in Rugby, N.D.

■ '00s

Karin Lokensgard, M.D. '06, recently joined Unity Medical Center in Grafton, N.D., as a family medicine physician at Grafton Family Clinic.

■ '90s

Joel Johnson, M.D. '93, has been named the 2023 recipient of the Outstanding Rural Health Provider award from the Center for Rural Health in North Dakota. As a result of the award, Park River, N.D., Mayor Dan Stenvold proclaimed May 11, 2023, as Dr. Joel Johnson Day in the city of Park River.

■ '80s

Keith Millette, M.D. '87, retired from medical practice in May 2023. He has cared for patients at Altru Health System’s Family Medicine Center in Grand Forks, N.D., for the past 32 years.



Josalynne Hoff Rue, M.D.



Joel Johnson, M.D.



SCRUB UP

Students from around the region at the Center for Rural Health Scrubs Academy on the UND campus in June 2023.



SCRUBBING IN AGAIN

The UND Center for Rural Health Scrubs Academy I returns to UND

Throughout the University of North Dakota (UND) School of Medicine & Health Sciences (SMHS) building, middle school students wearing green t-shirts could be seen walking the halls in groups and talking excitedly with one another this past June.

Despite their tender age, these students had gained firsthand knowledge of a plethora of healthcare careers via UND's Rural Collaborative Opportunities for Occupational Learning in Health (R-COOL-Health) Scrubs Academy I. Over the course of a few short days in this first of two such academies sponsored by UND's Center for Rural Health (CRH), these bright young students learned about medical procedures, exploring different health professions, and delving into future career opportunities.

Scrubs Academy I, a four-day/three-night health careers camp held on the UND campus for North Dakota students who have completed grades 6-8, saw its

triumphant return to Grand Forks on June 5-8 after being disrupted by the COVID-19 pandemic, with the last Academy having taken place in 2019.

Scrubs Academy serves as a mini-preparation program to strengthen academic skill sets associated with health disciplines, introducing adolescents to a higher education experience and fostering a relationship between the students and healthcare professionals. The Academy is funded by a State Office of Rural Health grant with additional sponsorships from Blue Cross Blue Shield of North Dakota and Visit Greater Grand Forks.

Academy activities

An overarching goal of Scrubs Academy is to encourage students from rural areas to pursue a career in healthcare and, eventually, become part of the rural health workforce. Through a rotating schedule, 77 academy participants were

introduced to 27 different health-related careers. Professions that the students explored included dentistry, neuroscience, respiratory therapy, speech language pathology, optometry, occupational therapy, emergency medical services, nursing, nutrition/dietetics, veterinary care, and animal assisted therapy, among others.

Hands-on activities are a key component of Scrubs Academy. While learning what each profession entails, the students were offered a chance to try their hand at a related science activity, including dissecting cow eyes, suturing pig feet, and hearing a baby's heartbeat in the womb.

The sessions showed strong partnerships with different health organizations around the state. The North Dakota State University group Bison Strides brought two mini horses to the academy to showcase the programs they offer: adapted therapeutic horsemanship, equine assisted

learning, physical and occupational therapy, and a military and veterans horsemanship program. The minis, named Tony and Spark, taught students how animals can help individuals with physical, cognitive, emotional, behavioral, and mental health challenges, and allowed students to experience a mock equine assisted learning session.

In addition to the action-oriented sessions, all participants were trained in Friends and Family CPR and completed Health Insurance Portability and Accountability Act (HIPAA) certification.

Learning by doing

The Scrubs program also hosts Scrubs Academy II for students who have completed grades 9-12, and Scrubs Camps, which are one-day camps held in local communities to introduce students in grade 5-12 to healthcare careers. Scrubs Camps, which began in 2009, are collaborations between a rural healthcare facility, a school district, and a local economic or job development authority.

Hannah Quinn, a registered nurse at Sanford Health Clinic in Grand Forks, attended Scrubs Academy I in 2013 and 2014. Her experiences opened her eyes to the variety of career paths available in healthcare.

“Before Scrubs Academy, I thought the only health career options were doctors and nurses,” Quinn shared. “Something that really struck me was how flexible nursing was. Gaining that insight helped me realize that nursing, and not becoming a doctor as I had originally thought, was the right decision for me.”

Quinn graduated from Northland Community College in East Grand Forks, Minn., earning an associate degree in nursing that later allowed for her certification as a registered nurse in 2023.

She plans to attend Bemidji State College soon to earn her Bachelor of Science degree in nursing, hoping eventually to become a nurse practitioner and work in geriatrics.

Aside from bringing clarity to her future career, Quinn also recalls that Scrubs Academy allowed her and her fellow campers to access the cutting-edge technology used in healthcare.

“The thing I remember most is being introduced to telehealth in 2013. They sat us down and explained how brand-new telehealth was,” she said. “Looking back and seeing how much it was used during COVID, it is crazy that I was part of one of the first non-healthcare populations to see it.”

Supporting the future of healthcare

Hospitals and other healthcare organizations have the option to sponsor students to attend the Scrubs Academy. These sponsorships help cover the \$275 registration fee for each student and can go towards students from the sponsoring organization’s service area or be used to fund students looking for financial aid. This year, eight organizations from around North Dakota sponsored a total of 36 students to attend the 2023 Scrubs Academy.

For First Care Health Center (FCHC) CEO Marcus Lewis, whose Park River-based facility sponsored 20 students to attend this year’s academy, Scrubs is vital.

“As anyone in rural healthcare can tell you, ours is one of the most rewarding careers that young professionals can choose,” said Lewis. “Getting our youth exposed to the expansive career fields offered at the academy only strengthens our communities and the collaborative healthcare models of the future.”

The 2023 Scrubs Academy was the first of its kind that Brittany Dryburgh, project

coordinator for the Scrubs Program, had been part of since she began working for CRH.

“It has been truly amazing to witness the generosity of our rural communities and their passion to support their students,” Dryburgh said. “Each of the rural facilities that sponsored students shared with me their hope that Scrubs Academy I would encourage students from their communities to explore healthcare careers and maybe one day join the healthcare workforce in the community that helped them attend the Academy.”

Lasting impact

Recalling her own Scrubs experiences, Quinn shares her gratitude for her family’s encouragement and for the opportunities given to her at Scrubs Academy.

“I always knew I wanted to work in healthcare, but I didn’t necessarily know what that would look like for me,” she said. “Seeing the difference in patient interactions between doctors and nurses helped me realize that I wanted to be a nurse. I want to support people and be there for those who don’t necessarily have anyone else to lean on.”

Lewis is optimistic that Scrubs Academy will leave a lifelong impression on the participants and, through them, positively impact rural communities.

“CRH has been a valuable partner and resource for us, and this value translated into a great program and experience for these kids,” he said. “Scrubs Academy planted a seed in each youth. We look forward to how these seeds blossom into future curiosity and we are excited to help grow these students’ individual passion for the care of their neighbors and families.”

By Jessica Rosencrans



UND health workforce experts share research and collaboration efforts with rural providers

WHEN IN R.O.M.E. . . .

The University of North Dakota Department of Family & Community Medicine (FCM) and the UND Center for Rural Health (CRH) have built a synergistic relationship that pairs research and service together to provide a stronger health workforce for the people of North Dakota.

It is this collaboration and support that drew Dr. David Schmitz to FCM.

“All of the workforce efforts that were happening within the Department of Family & Community Medicine have grown due to the partnership with the Center for Rural Health and the State Office of Rural Health,” said Schmitz. “That is part of why I came and interviewed for the job of department chair, because I knew that it was a great team focused on rural health and access to healthcare.”

FCM and CRH are housed within the UND School of Medicine & Health Sciences (SMHS), and the faculty and staff who work on these efforts recently shared their work with health professionals from across the state during the 38th Annual Dakota Conference on Rural and Public Health.

During this conference, which was held in Bismarck this past June, faculty and staff of the SMHS presented “Rural Workforce: Innovations and Outcomes in North Dakota.” Presenters included Schmitz, Dr. Kamille Sherman, assistant

professor of family medicine at the SMHS, and Stacy Kusler, workforce specialist at CRH. The trio presented to more than 50 professionals from critical access hospitals, rural health clinics, public health districts, and other organizations, all looking for tools to improve recruitment and retention of health workers for their facilities.

Two workforce-specific programs were shared: Rural Opportunities in Medical Education (ROME) and Community Apgar.

Rural Opportunities in Medical Education

The ROME program is a 20-28 week interdisciplinary experience in a rural primary care setting, open to Phase 2 (clinical training time with doctors throughout the state) students at the SMHS. The program began in 1998 with two students.

“We’re seeing that students who grew up in a rural community and attended a rural high school end up loving rural medicine.”

KAMILLE SHERMAN, M.D., F.A.A.F.P.

“It’s a program where students self-select,” said Sherman. “Students are choosing to learn in a rural setting. Typically credit is given in family medicine, internal medicine, pediatrics, surgery, and Ob/Gyn.”

Since celebrating the twentieth anniversary of ROME in 2018, the program engaged a research partner to look at data and outcomes from the program in order track where the students have come from, and where they go after they finish the program.

“One of the outcomes we found is that more than 60% of students who choose to do the ROME program came from zip codes that are not urban,” continued Sherman. “We’re seeing that students who grew up in a rural community and attended a rural high school end up loving rural medicine. Another outcome is that about one-third of students who self-select for this program ultimately choose family medicine as a specialty. A third outcome is that a quarter of students who finish this program choose to remain in rural communities after residency and starting a practice. This is significantly higher than the national average of where physicians choose to work.”



TEAM DAKOTA

From left-to-right: Stacy Kusler, Dr. David Schmitz, and Dr. Kamille Sherman at the 2023 Dakota Conference on Rural and Public Health

Original rural sites for the program included Williston, Dickinson, Hettinger, Jamestown, and Devils Lake. Since then, additional ROME sites have been added in Ortonville and Benson, Minn., as well as Grafton, N.D. Each medical school class has about 13 students enrolled in ROME and each class consists of an initial cohort of 78 students.

A Community Apgar score

Likewise, the Community Apgar Project originally began 12 years ago when Schmitz was working as a family physician in Idaho. At the time, there was a maldistribution of physicians in the state, and he and others wanted to know why.

“I was curious and wanted to help rural communities,” continued Schmitz, “so through a research and service project, I was able to help empower communities to be more successful in recruiting and retaining family physicians to rural communities.”

The Community Apgar project was born out of a desire to help communities understand what factors determine why some physicians choose one community over another, and what factors cause physicians to either stay or leave a community. The project helped communities showcase their own unique factors to appeal to, and match up with, the right physician for their area.

Schmitz brought this work with him when he moved to North Dakota in 2016 to chair the Department.

“In the end, this is really about getting the right match for the community. We have to give credit to the State Offices of Rural Health, both in Idaho and in North Dakota, because they have helped to fund this project over the past decade.”

Health Professions Education in Rural Communities

Originating as the Community Apgar Project, six different iterations of the research tool have been created, including the Health Professions Education in Rural Communities (HPERC) and the CEO Apgar. Each assessment consists of 50 questions, categorized into five sections of ten questions each.

One of the tools used to help in this process is the HPERC Community Apgar Questionnaire (CAQ), an objective measurement tool to assess the characteristics and parameters of rural communities related to successful health professions education.

“One of my jobs when I came here,” said Schmitz, “was to engage communities in North Dakota with regard to maximizing the opportunity to teach health professions students and resident physicians in rural places, because we know the more time these individuals spend in a rural environment the more likely they are to be more competent



COMMUNITY APGAR

Stacy Kusler explains the Community Apgar Questionnaire results at the Dakota Conference on Rural and Public Health.

and be confident about practicing in that rural area, staying in that rural area, falling in love with the rural area, falling in love with someone in that rural area. All of these things help with retention of professionals.”

“This questionnaire looked at the entire experience in the community,” said Kusler. “It is a warm fuzzy experience, or is it challenging to get there and do what the student needs to do? This is what we are evaluating.”

The questionnaires are done through interviews. All of the information gathered is confidential to that community. Then the data are assessed statewide to create aggregate data.

“This helps us take a pulse of common challenges, what things are going well, and finding best practices that can be applied to each unique community,” said Schmitz. “This is research but also service, helping get the right providers to the right communities.”

Top and bottom factors

The top scoring factors for North Dakota include: having clinicians willing to precept, quality of preceptors, teaching opportunities, and facility leadership. The bottom scoring factors included travel support, housing costs and scholarships, mental and behavioral health education, and significant other involvement.

“We would not have a community medical school without members of the communities willing to teach our students,

and that shows, being the top factor,” continued Schmitz. “And all of these factors together tell the story that we have a community medical school with willing clinicians, quality people who can teach, and facility leadership that support that process of education.”

The SMHS is a community-based medical school, which means students are largely training in communities throughout the state. Students spend the first 18 months of their training in Grand Forks. For the last two and a half years of training, they go to a home campus in Bismarck, Fargo, Grand Forks, or Minot. Family medicine students spend a minimum four to eight weeks in a rural community, and often they will stay there after graduation.

“We have a fantastic network of family medicine doctors across North Dakota, and often they help teach future physicians,” said Sherman.

‘Community is the curriculum’

Schmitz never forgets the importance of the community throughout his work with medical students and family practice residents.

“The community is the curriculum,” he said. “Engaging with the community and having our learners experience their education is what allows the workforce to fit into their roles after students finish the program. And we need to continue to collaborate with our other partners as well, and continue to do research and service that help communities recruit and retain hospital leadership, like CEOs. That’s a conversation that is helpful in being able to train family physicians to live in and be a part of those communities.”

In the end, all the efforts showcased during the trio’s presentation pointed at the recruitment and retention spectrum – from training students in rural health through ROME, to empowering rural facilities to focus on factors that make training a positive experience, to researching what factors make a rural community attractive for healthcare workforce.

While there may not be a one-size-fits-all approach to healthcare workforce issues, these tools provide support to help each community find their best solutions.

By Jena Pierce

COLORING THE WORLD WITH BIOMARKERS



Sandeep Singhal, Ph.D., is an associate professor in both the UND School of Medicine & Health Sciences Department of Pathology and the university's School of Electrical Engineering & Computer Science. Originally from India, Singhal arrived at UND in 2019 and has since brought a number of research grants to the university for his efforts in bioinformatics and artificial intelligence. As he describes below, researchers studying cancer today are finding important differences in cancer biology related to racial and ethnic diversity. His research is focused on identifying the key elements to understanding intrinsic and extrinsic factors that have a major impact on cancer diagnoses and which may affect patient response to treatment.

Thank you for your time, Dr. Singhal. Your focus is cancer and specifically biomarkers, yes? Help me understand how you got into that line of work.

My career path is a long journey that I covered in different continents of the world and tried to shape my career as a life-long learner. I have completed my bachelor's degree and two master degrees (Master of Science and Master of Technology) from

highly respected institutes in India. After my master degrees, I started my career as a software engineer and worked for a few industries at management level. At a certain point, I realized I wasn't so enthusiastic about this kind of work and wanted to learn more, so I started my education again and moved to Europe as a Ph.D. Scholar at the Jules Bordet Institute, Université libre de Bruxelles, Belgium, which is very well-known Institute in the area of the breast cancer. There I employed my computational skills, including data-science, machine learning, and artificial intelligence approaches, to develop computational solutions to breast cancer treatment management. I was involved in developing cancer biomarkers, which play an important role in deciding the treatment option for breast cancer patients and providing more targeted treatment with the least toxicity.

So, what exactly is a biomarker and what role do biomarkers play in health management?

A biomarker can be anything that we can measure as an indicator of changes in the biological process between the "normal" human being and the person who is moving towards the disease or going through some treatment. It can be as simple as blood pressure or it can be a glucose level which we use to track diabetes. Or, it can be more complicated. We can look at a gene, a set of genes, or proteins in a biological sample such as blood, urine, or tissue, to

help us identify whether a certain person is moving towards a certain disease, especially cancer. A biomarker may be a genetic variant, single gene, transcript, protein, or set of such molecules whose condition and quantity is related to the risk, incidence, or advancement of the disease. Cancer biomarkers can be divided into two types: biomarkers produced by cancer cells such as specific antigens of tumors; and antigens accompanying cancer produced by normal cells as a result of their response to pathological changes in the environment.

This sounds a lot like what we call translational research here at UND, where discoveries on the laboratory bench translate to bedside treatments for patients. So how might these biomarkers you mentioned be used in this bench-to-bedside strategy?

Clinical applications of biomarkers are extensive. They can be used as tools for disease risk assessment, screening and early detection of disease, accurate diagnosis, patient prognosis, prediction of response to therapy, and disease surveillance and monitoring response. My research is mainly focused on cancer biomarkers, especially breast cancer. To improve cancer treatment management, prognostic biomarkers are critically needed to aid physicians in deciding treatment strategies in a personalized fashion. With the help of biomarkers, clinicians stratifying patients and guiding treatment individualization



BIOMARKING

Dr. Sandeep Signhal (second-from-right) and members of his research team on the UND campus.

can help produce improved outcomes. If the person is diagnosed with cancer, biomarkers can help clinicians know what subtype of cancer they have – what kind of treatment will work best? For example, the Oncotype DX and MammaPrint assay are genomic tests that have been widely used clinically to predict the recurrence risk of patients with estrogen-receptor-positive (ER+) breast cancer. In the Oncotype DX genomic marker, the expression levels of 16 marker genes and 5 control genes are measured to calculate a recurrence score that can be used to stratify patients into three prognostic groups with high-, intermediate-, and low-risk. It has been

shown that high-risk patients are more likely to benefit from and should be treated with adjuvant chemotherapy, whereas low-risk patients do not benefit from chemotherapy and should thus not be treated with it to avoid side effects.

Part of your work includes exploring racial disparities in cancer diagnosis and treatment. Help me understand the impact that race and ethnicity have in diagnosis and treatment of cancer and the disparities we see in outcomes.

Racial/ethnic disparities in cancer survival in the United States are well documented, but the underlying biology is not well explored. Therefore, people may

experience the same disease differently because of a variety of lived experiences such as living conditions, as well as characteristics like race and ethnicity, age, and sex. In the growing technology era, it's essential that clinical trials and research include people with all those possible variables so that all communities can benefit from scientific advances. As researchers, we try to find if and how the biological processes of all ethnicities and races are different, and how this can be measured by different biomarkers. A large population of African American and European American breast cancer patients, who contributed to our study, helped us

to identify the role of racial diversity on different biomarkers. Based upon clinically available data, American African women have a higher death rate from breast cancer in the United States compared to European American ethnicity. Therefore, our studies were aimed to evaluate trends in survival and response to treatment, by race, for women diagnosed with breast cancer. This disparity is greatest in hormone receptor-positive subtypes. We uncovered some biological factors underlying this disparity by comparing functional expression and prognostic significance of several biomarkers, including master transcriptional regulators of luminal differentiation. Our study shows, even within clinically homogeneous tumor groups, regulatory networks that drive mammary luminal differentiation reveal race-specific differences in their association with clinical outcome. Understanding these biomarkers and their downstream effects will elucidate the intrinsic mechanisms that drive racial disparities in breast cancer survival.

And certain minority groups in the U.S. tend to have higher rates of certain cancers, yes?

As per the National Cancer Institute report among both men and women, non-Hispanic blacks have the highest cancer death rates both overall and for most cancer types. Then it's white, Asian or Pacific Islander, American Indian/Alaska Native, and Hispanic/Latino men and women. Recent trends show cancer death rates among black people declined over time, but still remain higher than other racial and ethnic groups. According to a Centers for Disease Control and Prevention report in 2022, American Indian people are more likely to get certain cancers (including lung, colorectal, liver, stomach, and kidney cancers) compared to non-Hispanic white people in the United States. These reports clearly indicate a

need to diversify oncological research to different populations along with novel strategies to enhance race/ethnicity data recording and reporting. Historically, all the biomarkers have been applied to all the population; most of them are not race- or ethnicity-specific. That's why we always encourage more and more people to come forward and participate in clinical trials, so we can understand these different biological processes and build better diagnostic tools and treatments for people.

You have many national and international collaborations, including at Columbia University, Stony Brook University, University of Southern California, and so on. So how does that kind of collaboration help improve the research? I'm assuming your research benefits greatly from such collaboration?

Yes. As we know, the technology is developing very fast, and there is hardly any single institute that can control the entire domain. Inter-institutional collaboration helps to gain needed resources and expertise which plays an important role in developing and diversifying basic, biomedical, and clinical research effectively. Fortunately, we have been able to develop a team of experts – which includes a clinician, pathologist, microbiologist, lab technicians, and bioinformaticians – to combine different outcomes on a single platform, and then look at it from all possible dimensions and perspectives. Together with increasing treatment options for any given disease, there is a growing challenge of selecting the most appropriate treatment for each patient. Therefore, we are working on artificial intelligence-based approaches that substantially expand our understanding of the tumor macroenvironment. This digital-pathology approach helps us to identify the optimal treatment regimen based on patient profiles.

On that note, you have a joint appointment with the College of Engineering and Mines here at UND to do bioinformatics and data science. Give me a sense of how data science works within your health research.

Data science is currently a major component of clinical-translational research as we have large amounts of data which is freely available, and it is not yet fully explored. Currently, more than seven million biological samples are freely available on the National Institutes of Health (NIH) website. So that's the area of research where we can test several biological hypotheses without spending a single penny. We are building a large in-house data platform together with analytical tools that can help researchers – even those who do not have training in the field of coding or data science. We have recently developed a cloud-based module with a Google team through an NIH grant. This is a multi-omics platform that we developed where researchers can evaluate genomic information together with the epigenomic information without writing any code or without having a high-performance computer – just using a Google cloud account. Researchers can simply upload their data and can perform the entire analysis (which is step-by-step guided) to generate the outcome.

*Interview conducted and edited for space
by Brian James Schill*

LEADERS TODAY AND TOMORROW

SMHS students across programs engage with their professions through multiple student interest groups.

Health career graduate programs – like medicine, physical therapy, and occupational therapy – all have inclusive, well-rounded curricula to prepare students for their future careers. Involvement in student interest organizations can enhance learning experiences by connecting classroom work with hands-on experiences or interactions with practicing professionals. While involvement in a student organization is a perk in itself, taking on a leadership role within organizations provides lifelong skills above and beyond the profession, paving the way for future leaders in healthcare.

Medicine

Emma Weisner is a second-year medical student working towards a future career focused on rural and women's health – areas that encouraged her application to the UND School of Medicine & Health Sciences (SMHS) in the first place. Knowing her career path will likely lead her to one or both of these areas, she immersed herself in SMHS interest groups that would deliver information and experiences beyond the classroom. Not only is Weisner a participant, but she is currently a student leader for three interest groups: the Rural Health Interest Group, American Medical Women's Association, and Physicians for Human Rights. As a leader of these groups, Weisner gets to be a part of bringing content "beyond the book" to her classmates. Events like hosting physician panels to hear from female physicians in practice or co-hosting skills clinics where students can learn about women's health in a simulated, hands-on environment help her to connect what she's learning in the classroom to what real-life practice could look like.

"Interest groups allow me to feel more engaged outside of the classroom," Weisner said. "It makes me feel excited about being in medical school, and enables me to look forward to the future."

Natalie Zinn is also a second-year medical student. Like Weisner, Zinn is leading multiple student organizations while studying for her degree. Zinn is at the helm of UND's American Medical Student Association (AMSA), which is a chapter of a national organization, and Root to Rise, a mentor/mentee

program aimed at helping high school students envision a career in medicine. While both organizations pique her interest, Root to Rise is what Zinn is especially excited about.

"We had a pause on progress during COVID, but we're working hard to establish Root to Rise, and set a strong foundation for those who come after me," Zinn said. Root to Rise pairs medical students with high school students from across the state. "So far, we have over 12 medical students who have raised their hand to be mentors. Now, we are working on communicating more with high schools to find students to pair with them."

In addition to leading two student groups, Zinn takes advantage of what other interest groups have to offer.

"Different events from interest groups help make the classroom learning piece real and hands-on. It helps me understand why what we're learning matters," Zinn said.

Zinn's classmate Regan Lawrence hails from Stonewall, Manitoba. Another second-year medical student, Lawrence is fueled by her experience growing up in a rural town with only one doctor. This upbringing was a big inspiration for her to pursue medicine in the first place, and she is taking advantage of the speakers and experiences that multiple interest groups offer. Serving as a student leader for the Rural Health Interest Group, Family Medicine Interest Group, and the Health Promotions Project, Lawrence feels that making time for learning opportunities outside of the classroom is hard, but worth it. Interest groups will often host events during lunch hours or evening hours to avoid interfering with classes. This is also the time that students will often use to study.

"Like anything, you have to make time for it," Lawrence said. "With the volume of information we are learning in the classroom, you will never run out of things to study," she said, noting that taking a break from the books to attend an interest group event is good for mental health. "Events like this remind you why you're working so hard in medical school."



GO FM!

Members of the SMHS student-led Family Medicine Interest Group at an AAFP event in July 2023.

Being a student leader for the Family Medicine Interest Group also gave Lawrence the opportunity to travel to the American Academy of Family Physicians (AAFP) conference in July 2023 with some of her classmates. Similar to the interest groups, it's hard to take time away from studying to attend a conference, she said, but well worth the time and energy.

"I felt so refreshed and energized [after the conference], I could talk all day about it," Lawrence said.

Finally, Emilee Ohman is a student leader for the SMHS Geriatrics Interest Group, the Health Promotions Project, AMSA, and her class's Social Committee. As she enters her second year of medical school, Ohman knows that time-management will be important.

"It's a challenge to make sure each group is getting the appropriate amount of time and energy," Ohman said.

Specifically, working on the Health Promotions Project, a student-led community outreach effort, has been a heavy lift over the summer. The project, which plans to be up and running within the academic year, aims to coordinate UND students from multiple health professions in serving community members by connecting individuals to needed health resources.

Luckily, she has help and has learned how to use it.

"I have learned a ton about sharing workloads and delegating tasks," she said.

The fact that Ohman has four organizations under her guidance is certainly notable.

"I am sort of shy by nature, but these groups are a good way to push me out of my comfort zone," she said. "Leadership is important to the job I eventually want, and I think that a big component of leadership is teamwork. I learn more about teamwork than leading, actually, and one doesn't exist without the other."

Physical Therapy

Mandy Williamson and Karlie Wardner are both second-year Doctor of Physical Therapy (DPT) students and co-leaders of Physical Therapy Club (PT Club), a student organization aimed at connecting current and future PT program students. PT Club is open to students ranging from undergrads (typically in the pre-PT program track) to upper-level students in the PT program. For undergrads, the club provides mentorship and program application preparation by offering mock interviews. For students already in the PT program, the club offers networking and mentorship between new and veteran students, and access to guest speakers and community volunteer events. For Williamson and Wardner specifically, PT Club offers a chance to sharpen their leadership skills through managing the group's members, planning and scheduling events, and keeping track of the club's finances.

Their hard work comes with rewards.

"You really develop a sense of community through PT Club," Wardner said. "It helps to connect students from all graduating classes so we can learn from each other."

Williamson added that PT Club is "a great way to de-stress from class. Taking it outside of the classroom to hear from guest speakers helps us to see forward into our professional careers."

Occupational Therapy

Morgan Halliday is an Occupational Therapy Doctorate (OTD) student leading the program's Coalition of Occupational Therapy Advocates for Diversity (COTAD). UND's chapter is part of the larger national organization, which aims to increase diversity, equity, and inclusion within the OT profession. Halliday says that, through COTAD, she has learned to be more aware of cultural biases, and how such biases could alter future patient interaction.

"COTAD is a great opportunity to learn about the lives of people from all different cultures and backgrounds, and to be more aware and sensitive to what I might encounter in the future," Halliday said.

Classroom learning and experiential learning through interest group activities complement each other well. Through involvement as a leader or member, students can expand their knowledge, broaden their perspectives, and develop the skills necessary for success in their future careers.

By Stacy Kusler

Medical Doctor Class of 2027 begins studies at UND School of Medicine & Health Sciences



"I chose UND because I just really enjoyed the welcoming atmosphere the interview provided and I come from a rural community so I knew I would fit in well," said Madison Schumacher, a native of Tracy, Minn., confessing that she was drawn to UND in part because she loves wintry weather. "I'm super excited to be here and meet everyone and get into the swing of things, but definitely a bit nervous about the course-load at the same time."

Schumacher is one of 78 first-year medical students, members of the Doctor of Medicine Class of 2027, who began their journey to become physicians recently at the UND School of Medicine & Health Sciences (SMHS).

The students' first week was dedicated to orientation, including an introduction to UND's nationally recognized, four-year, patient-centered learning curriculum where biomedical and clinical sciences

are taught in the context of an interdisciplinary educational setting. Special emphasis is placed on students' new roles and expectations of them as health professionals.

Orientation week concluded with a White Coat Ceremony, wherein students recite the Oath of Hippocrates and receive their first white coats, which have been donated by the North Dakota Medical Association and a variety of donors.

"I am excited to be here because it's a privilege to be a physician and, in that role, be a part of a community," added North Dakota-native Aaron Vanyo, who earned a degree in nursing before matriculating with the SMHS. "This is the first step towards that."

Ranging in age from 21 to 38 years, and with an average age of 24, the vast majority of this year's entering students

are from North Dakota and Minnesota. The cohort comes to UND's medical school with experience in an array of fields, including: accountancy, biochemistry, biology, business, chemistry, computer science, economics, forensic science, nursing, microbiology, psychology, and women and gender studies.

Some of these first-year students already hold advanced degrees, including master's degrees in bioethics, epidemiology, microbiology, and public health, and one doctoral degree in biomedical science.

The UND M.D. Class of 2027 is as follows:

Maryam Al-Kaabi, West Fargo, N.D.
Allison Anderson, Montrose, Minn.
Megan Anderson, Bismarck, N.D.
Teagan Anderson, Horace, N.D.
John Atagozli, Tiffin, Iowa
Abigail Bartholomay, Bowman, N.D.
Kaitlyn Berwald, Vadnais Heights, Minn.



Cody Boyle, Grand Forks, N.D.
 Zachary Bueling, Horace, N.D.
 August Burg, Olathe, Kan.
 McKenzie Burian, Fargo, N.D.
 Charles Cameron, Bloomington, Minn.
 Kaleb Card, Fargo, N.D.
 Jordan Charlie, Albuquerque, N.M.
 Kaitlyn Bjerke, Fargo, N.D.
 Levi Coon, Helena, Mont.
 Elsie Dickerson, Butte, Mont.
 Dani Douri, Bismarck, N.D.
 Julia Edelstein, Omaha, Neb.
 Nathan Fix, Grand Forks, N.D.
 Madeleine Flanders, Houston, Texas
 Gavin Folkert, Elgin, Minn.
 Paxton Franke, Fargo, N.D.
 Peyton Frolek, Lidgerwood, N.D.
 Charles Garrity, Fargo, N.D.
 Freddie-Leigh Griffin, Mandan, N.D.
 Isaiah Germolus, Bismarck, N.D.
 Matthew Gillen, Parker, Colo.
 Sydnee Goetz, Gilbert, Ariz.
 Jade Goodwill, Saint Michaels, Ariz.

Spencer Gordon, Bozeman, Mont.
 Abbigail Grieger, Fargo, N.D.
 Brayden Groll, Dickinson, N.D.
 Alec Heesch, Christine, N.D.
 Saryiah Hossain, West Fargo, N.D.
 Lauren Jorda, Dickinson, N.D.
 Luke Kosel, Osage, Minn.
 Jessica Lanoue, Glenwood, Minn.
 David Lee, Billings, Mont.
 Elena Linster, West Fargo, N.D.
 Emily Lygre, St. Joseph, Minn.
 Audrey Marjamaa, Roanoke, Ind.
 Morgan Mastrud, Fargo, N.D.
 Alexis Meduna, Dickinson, N.D.
 Elena Miller, Shakopee, Minn.
 Ian Mills, Brooklyn Park, Minn.
 Jordan Moser, Roseau, Minn.
 Jimmy Ogden, Tahlequah, Okla.
 Jacob O'Hearn, St. Louis Park, Minn.
 Brian Olson, Lakeland, Minn.
 Paolo Panales, Minot, N.D.
 Dev Patel, Fargo, N.D.
 Karrah Peterson, Laurel, Mont.
 Paige Priest, Portland, Ore.

Karissa Prom, Fargo, N.D.
 Hannah Rathgeber, Dickinson, N.D.
 Bailey Riehl, West Fargo, N.D.
 Journey Roberge, Forest Lake, Minn.
 Mark Rohleder, Fargo, N.D.
 Olivia Rubald, Medina, Minn.
 Bianca Savant, Chicago, Ill.
 Myckynzie Schroeder, Chicago, Ill.
 Madison Schumacher, Tracy, Minn.
 Reese Siegle, Ada, Okla.
 Mona Sohrabi Thompson, Grand Forks, N.D.
 Jack Stensgard, Moorhead, Minn.
 Jewel Stone, Duluth, Minnesota
 Jakob Swan, Minneapolis, Minn.
 Jacob Teigen, West Fargo, N.D.
 Mason Trahan, Bismarck, N.D.
 Chase Urie, Proctor, Minn.
 Aaron Vanyo, Grand Forks, N.D.
 James Wagner, Stillwater, Minn.
 Karley Warner, West Fargo, N.D.
 Claire Westby, Lake Elmo, Minn.
 Samantha Weston, Fargo, N.D.
 Mia Wilkinson, Bismarck, N.D.
 Sandi Zukanovic, Fargo, N.D.



I PLEDGE MYSELF...
 Members of the UND M.D. Class of 2027 recite the Hippocratic Oath in Grand Forks in July 2023.

University of North Dakota Doctor of Physical Therapy Class of 2025 begins clinical studies

This summer, 50 physical therapy students, members of the Doctor of Physical Therapy (DPT) Class of 2025, began the clinical studies portion of their journey to become doctors of physical therapy through the University of North Dakota School of Medicine & Health Sciences (SMHS). The students, 31 women, and 19 men, hail predominantly from North Dakota and Minnesota, and most completed their pre-PT coursework at UND.



The students received their professional white coats at the Department of Physical Therapy's Entrance Into Professional Service Ceremony on Thursday, June 1, at the UND Memorial Union. The ceremony's keynote speaker was Dr. Renee Mabey, P.T., Ph.D., a longtime faculty at the SMHS who received her UND PT degree in 1975.

"We're excited for this group of students," said Cindy Flom-Meland, P.T., M.P.T., Ph.D., professor and chair of the SMHS Department of Physical Therapy. "They're embarking on their journey into the PT profession during a time of notable transformation, and in numerous aspects they exemplify the growing diversity and interprofessional essence of our field. This ceremony underscored the significance of professionalism in clinical practice and within the physical therapy profession. It was a wonderful celebration of student accomplishments to date."

The clinical experiences that students are entering are a crucial component of the UND physical therapy curriculum and take place at more than 300 clinical sites across the nation, the majority of which lie outside the Greater Grand Forks, N.D., area that UND calls home. These experiences meld

academic information with hands-on clinical experience.

The DPT students and their hometowns are the following:

- Victor Dean Anselmo, Warroad, Minn.
- Isaac Sheldon Balmer, Mora, Minn.
- Benjamin Berdal, Fargo, N.D.
- Sydney Marie Brininger, Detroit Lakes, Minn.
- Minda M. Caillier, West Fargo, N.D.
- Victor Carcoana, Fargo, N.D.
- Austin Wesley Clemetson, Casper, Wyo.
- Amber L. Darge, Eau Claire, Wis.
- Ashley Davis, Eagle Butte, S.D.
- Anna Catherine DeBilzan, Lino Lakes, Minn.
- Jocelyn Mabelle DeChene, Big Lake, Minn.
- Emily Elias, Maple Grove, Minn.
- Grace Ann Faiman, West Fargo, N.D.
- Carly Rose Fornshell, Bismarck, N.D.
- Emily Christine Frigaard, Dalton, Minn.
- Caleb T. Fritel, Argusville, N.D.
- Hannah Beth Haley, New Rockford, N.D.
- Harmony C. Hennings, Jamestown, N.D.
- Elizabeth E. Hodgson, Chinook, Mont.
- Cade David Johnson, Grand Forks, N.D.
- Page A. Johnson, West Fargo, N.D.
- Taylor Ann Johnson, Valley City, N.D.
- Katelyn R. Kedrowski, Bowlus, Minn.
- Cullen Krueger, Sauk Rapids, Minn.
- Maria Jean Leonard, Rolette, N.D.
- Erin Marie Leverington, Roseau, Minn.
- Joshua Martinson, Milnor, N.D.
- Jesse Roger Middendorf, Sauk Centre, Minn.
- Reid Milner, Duluth, Minn.
- Brock Michael Montgomery, Grand Forks, N.D.
- Olivia Sarah Motter, Cold Spring, Minn.
- Derek Thomas Newberger, Fargo, N.D.
- Alexis Margaret Nice, Ardoch, N.D.
- Karli Jean Nielsen, Jordan, Minn.
- Abigail Donna Nyquist, Isanti, Minn.
- Ethan Ross Rekedal, Willmar, Minn.
- Jordan Matthew Sailer, Minot, N.D.
- Kylie Ann Sickels, North Pole, Alaska
- Gracie Marie Slagter, Clara City, Minn.
- Emily Ann Stenhjem, Fargo, N.D.
- Katrina Raeann Sudia, Roseville, Calif.
- Molly Marie Sundbom, Fargo, N.D.
- Kenneth Jeffrey Sweetland, Moorhead, Minn.
- Caleb Jerome Swenby, Fertile, Minn.
- Austin Leo Urlaub, Devils Lake, N.D.
- Anna Mae Walz, Rice, Minn.
- Karlie Ann Wardner, Grafton, N.D.
- Erin Whipple, Coppell, Texas
- Mandy Marie Williamson, Grand Forks, N.D.
- Darrel Isaiah Wilson, Austell, Ga.

UND School of Medicine & Health Sciences announces Sarah Nielsen as Chair of Department of Occupational Therapy



Sarah Nielsen, Ph.D.

The UND School of Medicine & Health Sciences (SMHS) is pleased to announce that Sarah Nielsen, Ph.D., OTR/L, FAOTA, professor of occupational

therapy, as the School's new Chair of the Department of Occupational Therapy (OT). Nielsen succeeds retiring chair Janet Jedlicka, who held the position since 2006.

A graduate of the SMHS occupational therapy program who earned a doctoral degree in institutional analysis and adult education from the North Dakota State University School of Education & Human Development, Nielsen joined UND's OT team in 2007, when she began as an adjunct faculty. Having been promoted to Assistant Professor in 2011, Associate Professor in 2016, and Professor effective

July 1, she comes into the Chair position with a wealth of experience in both occupational therapy and higher education.

"Janet's tenure helped foster significant growth in academic scholarships for students and transitioned our educational programs at both the master and doctoral levels," said Nielsen of her predecessor, who helped UND move, over the course of a decade, to a Master of Occupational Therapy (MOT) degree and then to an Occupational Therapy Doctorate (OTD).

"Most of all, she has been an outstanding mentor and advocate for our faculty, staff, and students. She will be greatly missed."

A prolific researcher and award-winning instructor, Nielsen, who hails from Crosby, N.D., has many publications and conference presentations, most of which focus on OT education and OT for children with special needs.

"Sarah is an outstanding leader," added Jedlicka, who is passing to Nielsen UND's partnership with Casper College in Casper, Wyo., at which UND maintains a cohort of students. "She has a knowledge of issues affecting higher education and is knowledgeable of accreditation processes. She played a key role in leading the redesign of our entry-level OTD program, capitalizing on our strengths in building our new curriculum in a way that was innovative, timely, and efficient for students and faculty."

"It is an honor to be selected to serve as chair," concluded Nielsen. "I am excited to build upon the foundation laid by Janet, collaborating with our faculty and staff to ensure excellence in our missions to serve North Dakota and the region through teaching, scholarship, and service in the field of occupational therapy."

UND Medical Laboratory Science students receive scholarships for 2023-24

The Department of Medical Laboratory Science (MLS) at the UND School of Medicine & Health Sciences has awarded scholarships to several medical laboratory science students for the upcoming academic year. Funds for the scholarships are given from various private sources, endowments, and scholarship funds. Scholarship winners include:

Marcia and Gary Anderson

MLS Scholarship Award – Grace Boedigheimer and Gus Boedigheimer, Grand Rapids, Minn.

Janice and Clifford d'Autremont

Scholarship Award – Christina Greuel, Leonard, N.D.; Skyler Johnson, Fargo, N.D.; and Kayla Teigen, West Fargo, N.D.

Dr. Cyril J. Dillenburg Memorial

Medical Scholarship – Linnea Grotte, Thompson, N.D.

Jean Holland Saumur Award – Raelyn Brang, Cold Spring, Minn.

Janice Schuh-Horysh MLS Scholarship Award – Kaitlyn Cook, Thompson, N.D.; and Arturo (Art) DeLaCruz, Grand Forks, N.D.

Duane and Judy Lee Scholarship Award – Veronica Tilc, St. Francis, Minn.

Miltza (Mitzi) Luper Biochemistry Award – Hannah Laumb, Grand Forks, N.D.

Eileen Simonson Nelson Scholarship Award – Anna Irion, Richville, Minn., and Carrington, N.D.

Mary Noble Award – Rylee Bergeron, Lake Bronson, Minn.; Kimberly Briscoe, Grand Forks, N.D.; Megan Dauksavage, East Grand Forks, Minn.; Francisco Figueroa, Grand Forks, N.D.; Tucker Henkes, Fergus Falls, Minn.; Katheryn

Kilpatrick, San Angelo, Texas; Matthew Lannin, Lincoln, Neb.; Cara Maletz, Bozeman, Mont.; Kelsi Mansfield, Fountain, Colo.; Abigail Meier, Bismarck, N.D.; Maya Orvis, Crosslake, Minn.; Ashley Sanders, Fort Worth, Texas; Abby Toso, East Grand Forks, Minn.; Tori Wetterlind, Inver Grove Heights, Minn.

The Ralph and Hazel Rohde Award – Nora Barnes, Cannon Falls, Minn.

Mary Stanghelle Coleman MLS Scholarship Award – Madison Larson, Devils Lake, N.D.

Linnea J Veeder MLS Scholarship – Lillian Anderson, Wahpeton, N.D.; Justus Bradford-Boos, Baldwin, N.D.; Daylin Roberson-Kitzman, Bismarck, N.D.; Cambry Franke, Fargo, N.D.; Grace Helmowski, Casselton, N.D.; and Irenosen Itua, West Fargo, N.D.

Patrick M. Devig, BS Med '69, died in his home June 28, 2023, after a long battle with Lewy Body Dementia. Patrick Marvin Devig was born October 13, 1945, in Fremont, Neb., to Arlene (VanCamp) and Donald French. After graduating from Grafton High School in 1963, Pat earned his Bachelor of Science degree in natural sciences from UND in 1967. He attended the UND School of Medicine from 1967-1969 and received his M.D. from the University of Kansas in 1971. Following a one-year residency in Kansas, Pat joined the U.S. Navy as an ensign, serving active-duty state-side while he completed his two-year general surgery residency at the naval hospital in Great Lakes, Ill., and another at the naval hospital in Portsmouth, Va., in 1976. During that time, he treated members of the armed forces as they returned from Vietnam. Pat went on to complete his cardiothoracic surgery residency as a Commander at the naval hospital in San Diego, Calif., from 1976-1981, with a one-year pediatric cardiovascular surgery residency at the Boston Children's Hospital in Boston, Mass., in 1980. Following his 1981 honorable discharge from the Navy, Pat served as a prominent cardiothoracic surgeon at St. Lukes/Meritcare in Fargo, N.D. He moved to Grand Forks in 1987, where he started the heart surgery program at United Hospital/Altru Health System. There, Pat married Mary Ann Sather, Oct. 21, 1989. Together, the two adopted and raised a daughter, Vienna. He is survived by his wife Mary Ann; his children: Matthew (Dawn), Bradley (Stacy), and Vienna Devig and Rebecca (Joshua) Trumbo; five grandchildren: Zakary Devig, Heather and Grace Devig, and Benjamin and Allison Trumbo; three step-grandchildren: Tyler McKay (Delaney), Tanner Gaber (Katie), and Torii Guertin; and several dear cousins, nieces and nephews, and half-siblings; and in-laws Gordon and Margaret Sather.

Ralph Allen Heising, BS Med '53, beloved father, grandfather, great-grandfather, uncle, and friend died on May 3, 2023, at the age of 93 at home with his family at his bedside. Al was born on December 20, 1929, in Bismarck, N.D., to Earl and Ethel Heising. He attended Bismarck High School where he was quarterback and co-captain of the football team, as well as point guard for the undefeated 1947 all-state basketball team, graduating with honors that same year. He went on to attend the University of North Dakota, where he was a member of the Phi Delta Theta fraternity and the Blue Key Honorary Service fraternity. Al also played running back on the UND football team, achieving all-conference honorary mention. In 1953, Al graduated from UND with honors with a Bachelor of Science in Medicine degree, and went on to attend Harvard Medical School, graduating with his M.D. in 1955. Al completed his residency in dermatology at the U.S. Naval Hospital in Philadelphia, Penn., in 1959. In 1963, Al left the Navy and opened his private practice, La Mesa Dermatology, where he cared for thousands of patients until his retirement in 1994. Al was

preceded in death by his wife Nancy, his parents, brother John, and is survived by his four children, six grandchildren, and four great-grandchildren, along with several nieces and a nephew.

Curtis Lyle Hill, BS Med '61, age 91, of Portland, Ore., passed away peacefully March 11, 2023, with his beloved wife, Juanita Elizabeth Nye, at his bedside. Curtis was born Oct. 30, 1931, to Clifford and Lila, on a small farm near Veblen, S.D. He graduated from Lidgerwood High School in 1949, where he was a football quarterback. After high school, he served in the Marines. He later pursued his studies in mortuary science at the University of Minnesota and took a position at Thompson Larson Funeral Home in Minot, N.D., under Ed Fisher, whom he held in high regard. It was here that he met Ed's daughter Marcia. Curtis and Marcia married on Oct. 20, 1959. Curtis later went back to school at the University of North Dakota to pursue medicine. He and Marcia welcomed their daughter Beth into the world in Minot, N.D. Curtis then attended Harvard Medical School and graduated in the class of 1963. While attending Harvard, he and Marcia welcomed their son Tom in Boston, Mass. Curtis and Marcia drove across the country with their two young children to Portland, Ore., where Curtis pursued his residency at Oregon Health Sciences University (OHSU), specializing in neurosurgery. In Portland, Curtis and Marcia welcomed their daughter Jenny and later welcomed their son David. Dr. Hill completed his residency at OHSU in 1969. He began his neurological surgery practice with Drs. Davis and Dennis, and later launched his solo practice primarily affiliated with Providence Medical Center. He practiced medicine into his early eighties.

Sister Rebecca (Gail Marie) Metzger, OSF, BS OT '78, age 78, of Grand Forks, N.D., passed away Tuesday, Jan. 17, 2023, at home. She had lived with cancer for ten years, far surpassing expectations of her medical teams. Sister Rebecca, daughter of Joseph Leonard and Esther (Fischer) Metzger, was born on Oct. 4, 1944, in Langdon, N.D. She was the oldest of seven children and grew up on a farm west of Wales, N.D. Following high school graduation in 1962 Gail entered religious life with the Sisters of St. Francis at Hankinson, N.D. She was given the name Sister Rebecca when she became a novice on July 10, 1963. Over the next nine years Sister Rebecca was educated in the area of occupational therapy, culminating in a bachelor's degree from the University of North Dakota in 1978. She was a natural for the work her community asked her to do at St. Anne's Guest Home in Grand Forks. Except for five years in Cando, N.D., as the administrator of Towner County Memorial Hospital (1987-1992) Sister Rebecca served as St. Anne's activity director for seven years, then 44 years as the facility's administrator. Until the last weeks of her life she was still handling administrative responsibilities.

Dr. Neil Roger Thomford, age 91, passed away peacefully on April 25, 2023, in Perrysburg, Ohio. Neil was born July 22, 1931, in Red Wing, Minn., to Orie and Beatrice (Anderson) Thomford. Neil was raised in Zumbrota, Minn., and was a 1947 graduate of Zumbrota High School. Neil earned his medical degree from the University of Minnesota in 1955. Following graduation, he served in the U.S. Navy Medical Corp sailing the Pacific and Arctic Oceans. Often, the ship's mess hall became the operating room as members of the local populations, such as the Inuit, were medically tended to on board. After an honorable discharge, Neil returned to Minnesota for his fellowship in surgery at the Mayo Graduate School of Medicine. In 1966, Neil began his practice, and lifelong career as an educator of medical students and residents, in general surgery at the College of Medicine at The Ohio State University. In 1975, Neil was named the first full-time professor and chair of the Department of Surgery at the University of North Dakota. Shortly thereafter he was appointed interim dean of the University of North Dakota School of Medicine. In 1980, Neil became chair of the Department of Surgery at the Medical College of Ohio in Toledo, a role he held for most of his tenure prior to his retirement.

Robert Michael Weir, BS Med '67, lived life to the fullest. He died peacefully at home, just as he wished, on Jan. 14, 2023, amid family. Born in 1943 to Harriet (Rother) Weir and Dr. Paul Weir, D.D.S., in Dickinson, N.D., Bob was the eldest brother to four surviving siblings. He met his wife, Julianne (Rash) Weir, while an undergraduate at Northwestern University, and they married in 1970. In 1969, after medical school at UND in Grand Forks and Northwestern in Chicago, Bob entered the Public Health Service, spending a year at the PHS hospital in New Orleans, then two years in Shiprock, N.M., on the Navajo Reservation. With his service completed, he joined the Hettinger Clinic and Hospital in southwest North Dakota. Hettinger grew as a hub for medical care in the region, eventually growing to serve a 25,000 square mile area by traveling to innovative satellite clinics. As in Shiprock, Bob treated whoever came in by appointment and whoever arrived during overnight call. He treated trauma, invasive infections, and disease. He fixed hips and performed appendectomies. He followed pregnancies, did Cesarean sections and tended to "preemies." Those eight years of practice in applied medicine, and a good dose of common sense, made Dr. Bob a physician and diagnostician of unique quality. By 1977 Bob had decided to specialize and started his ophthalmology residency at the University of Minnesota, followed by an eight-month fellowship in Dallas, Texas. A short detour to southern California and then Bob and family moved to Dickinson to establish his ophthalmology practice and be near his roots. He operated his full solo practice for twenty-four years, incorporating it as Western Eye Clinic. Eventually, he shared his

offices with Al King, O.D., and then with his brother, John Weir, O.D. By 2005, while eyeing semi-retirement, Dr. Bob got a call to join Davis Duehr Dean Eye Clinic in Madison, Wis. Never on his radar, he took the leap and enjoyed ten years in medical ophthalmology with a concentration in neurology. It was like solving mysteries every day and he was well equipped! At the start of 2016, Bob and Julianne retired to Sedona, Ariz.

Robert Donald McBane, M.D., was born Sept. 15, 1930, in Rainy River, Ontario, Canada, to Dr. John Kenneth and Ethel (Cordick) McBane. He was the older brother to Mary who resides in Aylmer, Ontario. Donald was raised in Rainy River and enjoyed playing hockey and working alongside cousins who ran commercial fishing operations on Lake of the Woods. After attending three years of undergraduate school, he began medical school at the University of Manitoba at age 20 years. He completed his Doctor of Medicine degree followed by a residency in general practice with an emphasis in obstetrics at the St. Boniface Hospital in Winnipeg, Manitoba. He was a lifelong student of medicine and was board-certified by the American Academy of Family Physicians for forty years. He cared deeply for his patients and, in turn, they had great respect for him. He met his true love, Isabel Lillias Fairgrieve, at a college dance at the University of Manitoba. They married Sept. 1, 1955, after they both completed their educational goals. Donald was soon recruited to Towner, N.D., where he spent the first two years of his medical career. In 1958, he transitioned to the Lake Region Clinic in Devils Lake, N.D., where he practiced, serving as clinical faculty for the UND School of Medicine & Health Sciences, until he retired in 1995. Donald and Isabel had three children: Laurie, Robert II (Tamara), and John (Kathy). Donald delighted in spending time with his children, grandchildren, extended family, and friends. He and Isabel were enthusiastic UND hockey fans, active members in the Devils Lake community, and enjoyed exploring Ramsey County and surrounding prairie roads.



PARTING SHOTS

Did you attend an event related to the UND SMHS? Share it with your colleagues. UND SMHS alumni, faculty, staff, students, friends, and family are welcome to send a high resolution photo to kristen.peterson@UND.edu for possible inclusion in the next *North Dakota Medicine*.



EQUITY NOW!

UND Department of Internal Medicine residents at the Health Equity 5K fundraiser in Fargo, May 2023.



ALL ABOARD

Department of Physician Assistant Studies faculty Vicki Andvik (left) and Kristen Carr during a stop on UND's annual Alice T. Clark faculty bus tour.



SAYING GOODBYE

Faculty and staff bid farewell to former UND Department of Occupational Therapy Chair Janet Jedlicka (center) at her retirement reception in June 2023.



PASS THE MIC

SMHS Dean Dr. Joshua Wynne (right) thanks Dr. Marc Basson for his service at the latter's farewell reception in June 2023. A longtime faculty at UND, Basson is now Dean of the College of Medicine at Northeast Ohio Medical University.

NEXT GEN RESEARCH

Participants in the UND INBRE Summer Research Institute for undergraduate students mug for the camera in Aug. 2023.



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SAVE THE DATE!

For more information on these and other events, contact the Office of Alumni & Community Relations at 701.777.4305.



Sept. 21

Joggin' with Josh

Annual 5k/10k walk/run on a NEW route on the UND campus.
Register at med.UND.edu/events/joggin-with-josh

Oct. 6

Homecoming 2023

Celebrating milestone graduates and 30 years of our Athletic Training program! CE Symposium and Alumni Banquet to be held on Oct. 6 in Grand Forks.
med.UND.edu/events/homecoming

Nov. 4

UND and USD Alumni & Friends Reception

@AAMC Learn Serve Lead | Seattle, Wash. | Portland Room, Grand Hyatt hotel (721 Pine St)
Register at go.UNDalumni.org/und-usd-smhs

med.UND.edu