Frontiers (2nd Quarter 2007) - Contributions: Our Community Shares its Time, Treasure & Talent

University of Tennessee Medical Center

University of Tennessee Graduate School of Medicine

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Contributions: Our community shares its Time, Treasure & Talent
Your Gifts Make A Difference.

Thank You.
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Your Gift Brings Our Community Together
Dear Alumni and Friends,

The University of Tennessee Graduate School of Medicine and The University of Tennessee Medical Center wholeheartedly subscribe to the tenets of being productive and being generous. In keeping with these convictions this issue of *Frontiers* showcases the many contributions our physicians, faculty, nurses, researchers, staff, and volunteers make to our community and to our patients and visitors on a daily basis.

In addition to providing excellent healthcare, solving the mysteries
of science, and preparing the next generation of medical and dental professionals, they provide thousands of hours serving our communities. They do so by serving on church boards, leading civic and social organizations, mentoring sports groups, and working with our schools. Many participate in local and international medical missions, staff medical clinics for the underserved, and support health fairs for senior citizens and others. While it is a cliché to say that actions speak louder than words, there is no doubt that these activities demonstrate the true spirit of volunteerism. The health and welfare of the community is greatly enhanced through their good deeds.

We are fortunate to be the academic medical center for our community—one of only 117 in the United States—and we take very seriously our responsibility to give back to those who look to us for care. Academic medical centers provide the most comprehensive and broadest array of healthcare services and care as well as specialized training for the physicians, nurses, and technicians of the future.

It is our privilege to applaud the nearly 4,000 individuals who make up the University of Tennessee Graduate School of Medicine and The University of Tennessee Medical Center for their tremendous contributions as employees and “givers” to the East Tennessee community.

Sincerely,

Joseph R. Landsman Jr.
President and Chief Executive Officer
University Health System Inc.

James J. Neutens, PhD
Dean
UT Graduate School of Medicine
Lifting Spirits
and Giving Back
Volunteers Make a Difference
What do a business leader, a retired attorney, a student, and a stay-at-home mom have in common? They all volunteer at The University of Tennessee Medical Center.

Unique as individuals, these compassionate people are connected by their desire to make a difference. They accomplish this every day, with a helpful act, a smile, or a kind word offered to an anxious patient or family member.

Mary Brown is the Medical Center’s director of volunteer services. She refers to the volunteers as “goodwill ambassadors.” “They are an extension of the Medical Center’s professional staff,” she says, “and they help in so many ways. Lifting spirits is at the top of their job priority.”

Volunteers deliver flowers, gifts, and mail, transport patients by wheelchair, help with departmental clerical work, give directions, and provide information about the hospital. They range in age from 14 to the mid-eighties. Some have been volunteering for more than 30 years. And that work adds up; an estimated 700,000 hours of service has been donated to the Medical Center since the volunteer program was founded 45 years ago.

According to Brown, the group of nearly 200 people is divided among Auxiliary workers, independent volunteers, and junior volunteers. The Auxiliary, which has its own board of directors, is designed for those seeking a long-term commitment. Volunteers with the Auxiliary operate the lobby gift shop and donate all gift-shop profits to the Medical Center. Over the years, its contribution has totaled approximately $2.5 million—money that has been used to purchase equipment and support nursing scholarships. The Auxiliary has also provided $250,000 to the new Neonatal Intensive Care Unit and $250,000 to the Preston Medical Library.

College students make up the majority of the independent volunteers, with high school students serving as junior volunteers. “Junior volunteers work in the summer and may continue with us after they’ve completed our orientation program,” says Brown. “Being here gives college and high school students the opportunity to see if the hospital environment is one where they might like to work after graduation.”

There is always a need for compassionate volunteers. To find out more, call 865-544-9515 or fill out an application online at utmedicalcenter.org/jobs/volunteering.

John Rosati
Sharing the Gift of Time

John Rosati’s broad smile and reassuring voice are a comfort to people who find themselves at The University of Tennessee Medical Center emergency department.

Rosati, or a fellow hospital volunteer, may be the first person you encounter at the ED, whether he meets you at the door with a wheelchair or at the registration desk.

“I’m here to give back,” he says. “A family member of mine had to come here three times, and we were treated with dignity and respect by everyone here. I wanted to repay what the hospital did for us by volunteering.”

Rosati works in the emergency department one afternoon each week. In addition to transporting patients and working the desk, he answers the phone, gives directions to other parts of the hospital, and provides warm blankets for patients and family members.

“It’s amazing what a difference a big smile and a warm blanket can make,” he says. “I tell everybody I know, if you want to be fulfilled, volunteer some time here.”
“When my husband died unexpectedly, I didn’t know what to tell my kids. I didn’t know who to turn to to help them get through it. Our saving grace turned out to be Camp Rainbow. The comfort and hope they got from this program cannot be put into words.”

Camp Rainbow Parent

Camp Rainbow, a weekend camp for children who are dealing with the death of a loved one, is one of the many programs sponsored by the Physicians’ Medical Education and Research Foundation (PMERF). Since PMERF was chartered nearly four decades ago by a group of dedicated University of Tennessee Medical Center physicians, the not-for-profit foundation has been steadfast in serving the educational and research needs of the Medical Center’s residents, nurses, physicians, chaplains, and professors, as well as the funding needs of many community programs throughout the Knoxville area. “Without a doubt, this foundation is the one committee I enjoy serving on the most,” says Dr. Scott Stevens, PMERF board president. “What could be more rewarding than serving on a board whose only mission is to give away money to worthy individuals, groups, and community-service programs?”

The physicians who founded PMERF were pillars of the University of Tennessee Medical Center community, dedicated to championing the Medical Center’s mission—that of providing excellence in education, research, and patient care—in a range of ways, including their new foundation. They were motivated by a belief that the future of healthcare in the East Tennessee region would largely depend on the extent to which aspiring healthcare professionals could be encouraged and supported by funds raised and controlled locally. PMERF-funded efforts have also included medical research in the fields of cancer, hematology, nutrition, oral surgery, trauma, critical care, and endovascular surgery. This research has substantially contributed to medical literature, improved patient care, and led to the development of new techniques and devices used throughout the medical community.

The PMERF board is committed to raising awareness within the community and among Medical Center staff, nurses, researchers, chaplains, and physicians about its charitable work. To get more information about the grant-request process or to make a charitable, tax-deductible donation, please call 865-544-9003. The board invites grant requests and welcomes gifts of both time and resources.
“What could be more rewarding than serving on a board whose only mission is to give away money to worthy individuals, groups, and community-service programs?”

Scott Stevens, MD
PMERF Board President

PMERF Supports:

Since its inception, PMERF has contributed more than $4.4 million to community-service programs and to numerous research and educational programs and projects at the Medical Center. These include:

- Resident support (medical education conferences, visiting professors, educational materials and equipment)
- The A.W. Diddle Endowment and the A.W. Diddle Learning Center
- The Medical Explorations summer program
- Co-sponsorship of Camp Rainbow
- Pediatric community outreach
- Task force grants
- Preston Medical Library and Learning Resource Center
- KAMA Health Discovery grants
- The Knoxville Volunteer Emergency Rescue Squad
- The Reach Out and Read program
- The Dr. Robert F. Lash Memorial Endowment Fund
- The Dr. I. Reid Collmann Medical Student Education Endowment
- The Kevin Swabe Memorial Pediatric Resident Award Endowment
- Training equipment for the Emergency Department, Trauma/Critical Care, and LIFESTAR
- The Cancer Institute’s Breast Health Outreach Program
- Cancer Institute clinical trials
- The Medical Genetics Data Management System
- The clinical pastoral education residency program

PMERF has supported research, the Knoxville Volunteer Emergency Rescue Squad, the Reach Out and Read Program, and Camp Rainbow.
New digital X-ray systems provide patients and their dentists the ability to instantly view and discuss their case.
The recent facility renovations at the University of Tennessee Graduate School of Medicine’s General Dentistry Department integrate cutting-edge technology and state-of-the-art equipment to provide a positive dental-care experience for patients and a set of high-quality educational opportunities for residents.

“The results of our six months of major renovations to every one of our exam rooms will be of significant benefit to our patients,” says O. Lee Wilson, DMD, associate professor and program director of General Dentistry at the Graduate School of Medicine. “Our facilities are not only more technologically advanced, but they look fantastic. We’re very grateful for the generosity of Dr. Phil Wenk and Delta Dental of Tennessee in helping to make this possible.”

Delta Dental of Tennessee contributed $300,000, half the total cost of the renovation. As the state’s largest and most experienced dental-benefits carrier, Delta Dental has once again demonstrated that it is committed to improving the oral health of all Tennesseans with its support of this project. Dr. Wenk, who earned both his BS and DDS degrees from the University of Tennessee and practiced dentistry in the Tennessee community of Clinton for more than 20 years, is president and CEO of Delta Dental of Tennessee.

“Our mission is to advance and promote oral health for all Tennesseans,” he says. “Through these renovations to the General Dentistry Department, we’re able to help improve the education of the residency students who we hope will continue to serve Tennesseans in their professional practice, as well as enhancing overall care for the patients who come to the clinic.”

Improvements to the General Dentistry practice include new digital X-ray systems in each exam room, which enable patients and their dentists to instantly view and discuss the patients’ X-rays. This advance greatly reduces the waiting time for both doctor and patient. The practice can now also store X-rays electronically, keeping them easily accessible for future reference.

Additionally, the General Dentistry practice is using new software that allows for more efficient record-keeping.

Data such as patient histories and appointment schedules can be accessed by administrators or by a dentist directly from the computer in an exam room. Other improvements to the 4,600-square-foot facility include new exam chairs, delivery systems, lighting, flooring, wall covering, and paint.

“These renovations will allow our general-practice residents to learn and deliver dental care with some of the latest innovations available for the operatory,” Wilson says. “The dental practice of the future is here today.” And that’s great news for the people of the Knoxville community.
Neighbors in Need

Medical Missions
Start at Home

Across the region every day, physicians, residents, faculty, and staff from UT Graduate School of Medicine are making a difference in our community. In a world where even those living next to us may be in need of a helping hand, this service takes on a very real and important meaning.

**THE PEOPLE’S CLINIC**

When Dr. Daniel S. Ely isn’t teaching resident physicians as an associate professor at UT Graduate School of Medicine or working at The University of Tennessee Medical Center as the chief of internal medicine, he is reaching out to the homeless in East Tennessee. Ely is also the medical director for The People’s Clinic, an outreach of Volunteer Ministries, located in Knoxville’s inner city.

This grassroots effort offers services to people who might otherwise be overlooked. “We often assist people who have fallen below the radar because they don’t have a permanent address,” Ely explains. “They have no home, no documentation, and no access to specialty care because they are not part of a health program.”

**INTERFAITH HEALTH CLINIC**

Another charitable clinic that receives help from many physicians and staff members is the InterFaith Health Clinic. A fixture in the Knoxville community for more than 16 years, the clinic provides affordable healthcare services to uninsured working, low-income community citizens.

Clinical services are made possible by charitable donations from individuals, foundations, and groups; by nearly 100 physicians who volunteer to see patients at the clinic; and by more than 400 medical specialists who see patients in their offices. More than 85 physicians practiced at InterFaith Health Clinic last year. Without this generous outreach, approximately 6,400 of the Knoxville-area needy might have gone without any healthcare or medications.

**KNOXVILLE AREA PROJECT ACCESS**

Several physicians participate in Knoxville Area Project Access (KAPA), which is celebrating its first year of providing healthcare services to uninsured Knox County residents. KAPA
is a broad community effort by the Knoxville Academy of Medicine and its foundation, area physicians, community leaders, regional health departments, and area hospitals.

Since March 2006, more than 600 physicians and healthcare providers have provided more than $1.4 million in services to more than 4,000 Knox County residents. Dr. John Lacey, chief medical officer and assistant professor at The University of Tennessee Medical Center, serves as KAPA’s medical director. “It is very meaningful that Knoxville has so many physicians who give their time and talent to help the community,” says Lacey proudly. “This endeavor is incredibly successful.”

Part of KAPA’s success can be attributed to its state-of-the-art software system, which manages referrals and tracks physician and hospital commitments. Dr. John Neff, professor and director of the UT Graduate School of Medicine Pathology Residency Program and professor of pathology, played a significant role in selecting the system that keeps patients, referrals, and physicians on track.

“KAPA is based on a solid infrastructure, which is being recognized even beyond our state for its ability to match needs with resources,” says Neff. “I’m proud to be a part of a charity that is making such a huge difference in many, many lives.”

In past issues of *Frontiers*, we told you about contributions the UT Graduate School of Medicine community has made to tsunami relief efforts in Sumatra, surgical care in Zambia, and mission trips to locations as diverse as Guyana, El Salvador, Albania, Chile, and Thailand.

**What it’s all about**

When asked why so many in the UT Graduate School of Medicine community participate in outreach service, Neff offers a solid explanation. “There are more than 45 million uninsured Americans nationwide,” he says, “and that is unacceptable. It is reassuring to know that in our community people can access quality healthcare. This is what taking care of others is all about.”

To the physicians, faculty, residents, and staff of the Medical Center, we say, thank you. Thanks for taking care of us and those around us. Thank you for taking care of our community members who need a helping hand. Thanks for using your gifts of time and talent to reach out beyond the surroundings in which you live each day. Thank you for all you do.

*John Lacey, MD / Lea Anne Law*
You might find him out on his property at home, moving and placing heavy stones, crafting them into walls and paths, and gardening. From this view you see hands that are capable and experienced—and not afraid of dirt and grime. The startling blue eyes are keen on the work in progress. He could be any Southern gentleman, even a laborer, enjoying the outdoors and time spent with nature’s elements.

Luckily for all of us, he’s more than that. And for the past 40 years, he has served as head of the Human Immunology and Cancer/Alzheimer’s Disease and Amyloid-Related Disorders Research Program at the University of Tennessee Graduate School of Medicine.

Forty years…half of a lifetime. Alan Solomon, MD, has given most of his adult life as a physician and medical researcher in pursuit of answers to cancer and other devastating diseases. He came to UT in 1966, lured by the freedom in research at that time, the newness of the then-named UT Memorial Research Center and Hospital, and the beauty of the area.

**North and South**

A native New Yorker, Solomon grew up there and finished undergraduate studies at Bucknell University in Pennsylvania. He enjoyed a taste of the South in medical school at Duke University in North Carolina, from which he graduated in 1957. It was at Duke where he faced a fork in the road.

“When I was in medical school, some of the most inspiring teachers were what’s called clinical investigators. They were physicians who took care of patients and also did laboratory research. Seeing their excitement in...
what they were doing really intrigued me. I realized in order to make any progress in medicine, it had to be in research; otherwise, you do the same things day in and day out."

After graduating from medical school, he completed an internship at Mount Sinai Hospital in New York and then did something most medical school graduates at the time did not do: he chose to undergo four years of clinical training and another four years of research training. His research training took him to the National Institutes of Health’s (NIH) National Cancer Institute, where he became familiar with oncology—a relatively new field at the time—and to The Rockefeller University Institute for Medical Research.

Finally, he finished his self-imposed rigors of training and began working. Then the phone rang. “I got a call from Dr. Amoz Chernoff, who was director of the UT Memorial Research Center. I knew him from Duke. He asked if I would be interested in coming to Tennessee. At first I declined,” Solomon says, then adds with a chuckle, “but several months later he called again, and I agreed to come.”

The year was 1966. Medical research had few regulations, even allowing experimental work to be conducted on prisoners. Little was known about DNA, and without the internet, researchers had to rely on the medical library for research materials, which could take months to reach library shelves. MRI, CT, and PET scans did not exist, and anti-cancer drugs were only a dream.

Debby Weiss
Senior Research Associate
UT Human Immunology and Cancer/Alzheimer’s Disease and Amyloid-Related Disorders Research Program

After spending the last 30-plus years (and still counting) in Dr. Solomon’s research program, I feel that I can convey, without reservation, my great admiration for him as a physician, a research scientist, and most importantly, a human being who has made and continues to make a difference. His knowledge, motivation, energy, and exceptional intuition have created an exciting atmosphere where those who work with him have the power to learn and grow. Personally, he has given me the opportunity (one that I had only envisioned during college) to do professionally what I love. Here’s to the next decade!
In this setting, Solomon set out to study a disease process called amyloidosis. “Amyloid” is the term for a misfolded, “gum-up-the-works” form of a normal or mutated protein. In this unstable state, the protein can form hair-like fibers, or fibrils, that are deposited into vital organs, like the heart, kidneys, and brain. This process leads to organ failure and eventually, death. Amyloid-associated diseases include Alzheimer’s, Type-2 diabetes, rheumatoid arthritis, and a kind of illness related to multiple myeloma called primary or AL amyloidosis.

**Microscopic Focus with A Vision for the World**

Solomon and the talented and dedicated investigative team in his Human Immunology and Cancer/Alzheimer’s Disease and Amyloid-Related Disorders Research Program are working to develop new diagnostic and therapeutic strategies for patients with amyloid-associated diseases. With grants from the NIH and public sources, they have discovered antibodies that can bind to amyloid, and through normal defense mechanisms, the body destroys this material. The researchers also have shown experimentally that when a radioisotope is attached to such antibodies, they can be used to visualize by PET/CT scans amyloid deposits in the body. An application has been made to the Food and Drug Administration for permission to test this agent in patients with AL amyloidosis. This study will be done in collaboration with The University of Tennessee Medical Center and the Graduate School of Medicine’s Department of Nuclear Medicine and the Cancer Imaging and Tracer Development Research Program, using technology found in only a few places in the world. The good doctors will trace the movement of the radio-labeled antibody through the body and see if it binds to the amyloid. This will be the first time in the U.S. that this type of study will be done.

Solomon’s enthusiasm shines as he describes the expectations of his work. “The first step is to determine if the imaging agent works. If it does, it will provide an invaluable diagnostic tool for doctors caring for patients with this disease. Also, it will move us further toward using the antibody for treatment, which obviously is our major goal.”

“For 40 years, Alan Solomon, MD has led the Human Immunology and Cancer/Alzheimer’s Disease and Amyloid-Related Disorders Research Program at the UT Graduate School of Medicine, all the while balancing the expectations of his work with his desire to keep a promise.”

“What we believe and given our track record, we are convinced that we can make a significant impact on these diseases to improve the prognoses and reduce the suffering of our patients.” He pauses. “Our hope is that if these illnesses cannot be cured at present, we will at least make them more chronic and improve the quality of life.”

“One of the highlights of the past 40 years is that the work has come to this point,” he states. “To see all those years in the laboratory being translated to the clinic is a major achievement.”

Solomon lists as another major accomplishment his chairing the committee to build the Knoxville Museum of Art. In his office, he proudly displays a photo of the ribbon-cutting ceremony, when the new museum opened in 1990. Being selected as an American Cancer
Society Clinical Research Professor in 1992 also tops the list, as do working with dedicated people in his laboratory and clinic and having the opportunity to influence many young people.

Is it time to retire? If you understand his drive, what brings him to work every day, you'll know the answer. Solomon recalls an experience many years ago that was a turning point in his life:

“A patient of mine was a public school teacher. She had amyloid disease and died 10 years ago. I was very fond of her and her family, and I went to her funeral. Afterward, opportunity to make the world a better place. Each person can do something to contribute to the healing of the world.”

Solomon's strong faith and clear vision were gifts from his parents. “My father's story is more interesting than mine,” Solomon concedes. “He came from a very poor immigrant family, and he had to drop out of school at age 12 to support his family. While he worked during the day, though, he found a way to go to school at night. He passed qualifying exams to attend evening law school, and eventually became a senior partner in a large law firm in New York.

When speaking with her husband, I made a promise to him that we'd do something to affect this disease that took his wife. When I make a promise, I try to keep it. My patients are my greatest motivation. I have an obligation to them. I owe a debt of gratitude to these folks who truly have been partners in this research.”

FAITH AND FOUNDATION
“A central tenet of my Jewish religion is ‘to heal the world.’ Everyone, regardless of who they are, has the

A man with wisdom of what's important and the ability to strike a balance in life is Alan Solomon. Of all his accomplishments, the one that brings a sparkle to those blue eyes is his home and family. They are his support. His vest pops only a button or two when he speaks of his sons, wife, and home, where the world-renowned researcher and stonemason has found comfort—for 40 years.

The dedicated and talented investigative team of Dr. Solomon's Human Immunology and Cancer/Alzheimer's Disease and Amyloid-Related Disorders Research Program

You Can Help Continue the Research

To stay competitive and continue the life-changing research being conducted by internationally renowned researcher Alan Solomon, MD, he and his staff in the Human Immunology and Cancer/Alzheimer's Disease and Amyloid-Related Disorders Research Program at the UT Graduate School of Medicine need the best technology available anywhere. Right now, that means a laser capture dissection microscope and a powerful mass spectrometer. This advanced to quickly dissect amyloid in tissue—something no other technology can do—to establish what kind of protein forms the amyloid. Researchers would be able to analyze the tissue within minutes, as opposed to days—even months—with current technology, giving physicians an edge in determining diagnosis and treatment for patients.

Can you help?
For more information, please contact Dr. Alan Solomon, 865-344-9165, or asolomon@mc.ukmc.edu. Donations can be mailed to UT Human Immunology and Cancer/Alzheimer's Disease and Amyloid-Related Disorders Research Program, UT Medical Center, 1924 Alcoa Highway, Knoxville, TN 37920.
In the halls of the hospital, a pager goes off with a text message that LIFESAR will arrive in 10 minutes, carrying a 3-year-old girl injured in an auto crash and suffering cardiac arrest. Like clockwork, medical personnel run to take their places in preparation for the young patient’s arrival.

You might be surprised to find a member of the Pastoral Care department at The University of Tennessee Medical Center rushing to the trauma bay as a crucial part of the trauma response team. But these professionals provide timely spiritual care to patients and families—an important aspect of the healing process.

Established by the Reverend George Doebler in 1985, Pastoral Care started with a single employee with a goal of addressing the relationship between physical illness and the spiritual and emotional well-being of patients and their families. Within the first year, the overwhelming need for this service at the Medical Center was clearly evident, and additional positions were filled.

Today the department of Pastoral Care consists of six chaplains and four residents. The Medical Center’s chaplains do not impose a particular set of beliefs on anybody. “We help patients in their own spirituality. We don’t try to convert anyone to any certain belief,” says the Reverend Steve Sexton, director of Pastoral Care.

Chaplains interact directly with patients and minister to their emotional and spiritual needs. Their purpose is to treat the whole person and instill hope and faith in sometimes devastating and complex life circumstances, like withdrawing aggressive treatment. They make rounds, just as physicians and...

**Anne Sprouse: Making a Difference in the Lives of Cancer Patients**

Her warm smile and calm presence help to reassure patients and families at The University of Tennessee Medical Center’s Cancer Institute. The presence of Anne Sprouse can best be described as “like a ray of sunshine.”

A former teacher, Sprouse chose to become a chaplain at the Medical Center after her own experience with breast cancer. She explains that she wants to make a difference in the lives of patients and their families and believes that her firsthand knowledge of dealing with a potentially life-threatening disease allows her to relate more fully to what patients are going through.

The most rewarding thing about her job, says Sprouse, is being able to form relationships with patients, family, and staff. She typically follows patients from diagnosis through surgery and treatment and gets to know them at a very fragile but profoundly significant point in their lives. Her interactions with people who...
other healthcare professionals, seeing patients in emergency, critical, acute, and routine care situations. Pastoral Care also receives requests and referrals from physicians and nurses when they have a patient that could benefit from a chaplain’s visit.

Also, the Medical Center staff themselves may need to call on a chaplain after a particularly stressful shift or situation that can come from working at an academic medical center and a Level I trauma center. The traumatic death of a patient, especially a child, often requires the help and comfort a chaplain can provide.

have mountains of hope and courage, she says, illustrate for her how much we have to learn about living.

The chaplains help one another out as well. Some cases or occurrences can be so devastating and stressful that it’s important to talk about them before going home.

What does Sprouse do to decompress after a busy day at work? She spends time with her family and friends, plays golf and tennis, and enjoys hobbies like photography. For her, that’s the best way to unwind.
In addition to providing services at the Medical Center, chaplains spend a substantial amount of time informing local clergy members about resources and services like hospice and bereavement counseling. They teach classes on how to deal with cancer and heart care, family systems, and depression. The Pastoral Care department recently started a unique program for churches and community groups as a way to take free medical education to people throughout the community.

**EDUCATION PROGRAM**
The trademarks of clinical pastoral education (CPE) at The University of Tennessee Medical Center include an integration of divinity and the behavioral sciences, as well as an ability to correctly assess and provide appropriate spiritual care. All CPE programs offered at the Medical Center are accredited by the Association for Clinical Pastoral Education Inc. The program was fully accredited in 1989 and reaccredited in 1999.

To become a chaplain, you must have a four-year college degree, plus have a master’s degree of divinity or the equivalent. Many chaplains are also board-certified by the Association of Professional Chaplains.

Heather Grieve

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The pastoral care team is not only there for patients and their families, but for the staff as well.
The main mission of more than 200 physicians and scientists on the UT Graduate School of Medicine full-time faculty is to educate medical students and resident physicians and dentists. But they make up only one part of the teaching team. The other integral part is faculty who contribute time and talent as volunteer faculty. The 186 physicians and dentists who are part of this group are motivated to give back to their professions, and teaching fulfills that need.

These volunteer faculty members understand that their clinical prowess can be passed from one generation to another through collaboration. They open their doors to students and residents not only to transfer clinical skills but also to show our learners how to be strong community leaders. They teach by example.

In a learning setting, resident physicians and students see patients who have longstanding relationships with their healthcare providers. They witness innumerable ways to handle a myriad of clinical problems. Also, they can observe how a physician interacts with staff ranging from front desk receptionists to nurse practitioners and physician assistants. They also get to see firsthand lifestyle stresses that occur naturally in several specialties.

The Graduate School of Medicine is grateful for the tireless efforts of these faculty members. In 2004, the Dean’s Office established the Excellence in Teaching Award for Volunteer Faculty, an award that recognizes a non-compensated faculty member who exhibits a strong commitment to teaching while serving as a role model to residents, students, and colleagues. Dr. Steven J. LoCascio and Dr. Eric Redmon won the award in 2004 and 2006, respectively.

Dr. Terry Bingham, the 2005 recipient, feels that exposing resident physicians to medicine in a small town allows them to better understand the challenges and rewards of a rural medical practice. “Teaching is a two-way interaction between the mentor and the learner. It’s give-and-take,” says Dr. Bingham, explaining why he chooses to be a volunteer faculty member. “I was well blessed when I received my training. I think I should pass that good fortune on to others. Why shouldn’t I?”

Dr. James J. Neutens, UT Graduate School of Medicine Dean, recognizes the contribution these clinical faculty members make to the Graduate School. “There is no doubt that they have pride in all that they do,” he says. “They should be proud of the tremendous contributions they make in helping us meet our mission. Given the financial issues facing medical education today, access to the expertise of our volunteer faculty is more than just a nicety. It is a necessity.”
It has been eight years since a small group of individuals devoted to the University of Tennessee Medical Center formed University Health System, Inc. (UHS). The same dedication, care, and diverse spirit with which members of the UHS board of directors started, continues to be at the heart of their work today.

Since its formation, the Medical Center has experienced tremendous growth, and the UHS board of directors is a key factor and supporter of that growth. The board of directors was instrumental in expanding the Medical Center’s campus through the building of the Cancer Institute and the Heart Lung Vascular Institute, renovating the Neonatal Intensive Care Unit and the Emergency Department, as well as establishing a pancreatic transplant program, and a state-of-the-art heart catheter lab.

The board also supports providing additional services and technology to the region, such as CyberKnife, MiniMaze, and corporate education programs. And their leadership is vital for the Medical Center to obtain important recognitions like The Joint Commission’s Certified Primary Stroke Center.

“I am fortunate to be a part of a dedicated and diverse board of directors with a desire and interest to make a difference in the community,” says Bernard Bernstein, UHS board chairman. The 15-member board includes representatives from the community, health professions, and the University of Tennessee. They are extremely passionate about maintaining the hospital’s historic mission of patient care, education, and research.

Each member believes in the Medical Center’s mission, vision, and values and stays informed about general operations and the healthcare needs of the community. Thanks to their contributions, talent, and expertise, the Medical Center has been able to become a leader in healthcare for the region.
“I am fortunate to be a part of a dedicated and diverse board of directors with a desire and interest to make a difference in the community.”

Bernard Bernstein
In 2006 the University of Tennessee Medical Center and Graduate School of Medicine launched a new annual giving recognition society to commemorate our golden anniversary. The 1956 Society provides a venue in which friends of the Medical Center and Graduate School of Medicine can pledge their annual financial support for our mission of expanding the frontiers of medicine through exceptional patient care, medical research, and education.

With the inaugural launch of The 1956 Society, our members pledged more than $260,000 to support healthcare initiatives throughout the University of Tennessee Medical Center and Graduate School of Medicine. It is with the dedication of these generous members and of future members that we embark on the next 50 years of our journey as a leader in medical innovation.

To learn more about The 1956 Society or become a member, please contact Rachel Greene, Director of Annual Giving, at 865-544-6611 or rgreene@mc.utmck.edu.

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<th>September 7-8, 2007 UT Conference Center Knoxville</th>
<th>The Heart, Lung, Vascular: Advances and Basics for the Primary Care Provider conference focuses on providing physicians and other healthcare professionals the knowledge they need to better help their patients. Experts in the fields of cardiology, pulmonology, and vascular surgery will gather to present the latest on new equipment and drugs that healthcare providers can use in their daily practice.</th>
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<td>The 2007 John W. Whittington Lectureship Series: Prostate Cancer</td>
<td>November 1, 2007 Wood Auditorium, The University of Tennessee Medical Center November 2, 2007 Auditorium, Fort Sanders Parkwest Medical Center</td>
<td>All men are at risk for developing prostate cancer. In fact, about one man in six will be diagnosed with prostate cancer during his lifetime. The Food &amp; Drug Administration has just approved new drugs to combat this disease. The Whittington Lectureship Series will focus on the risk factors for prostate cancer and new treatment options.</td>
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In this 15th anniversary year of the UT Graduate School of Medicine, we salute the University’s contributions to the training of our nation’s physicians.

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From 1800-1850, becoming a physician required only an apprenticeship or a few months of training. That soon changed. In the late 1800s, UT led the way in improving medical education by requiring its aspiring graduates to study medicine for three years, including a residency program, and later, clinical and laboratory instruction and courses in histology, bacteriology, chemistry, and surgery were added.

UT’s influence on medical education reform was evidenced by its standing in 1911 as the country’s largest medical college.

UT continued making bold strides throughout the 1900s, and today, medical education has evolved into a highly demanding commitment of skills, desire, and talent. The UT Graduate School of Medicine offers a broad spectrum of medical and dental training programs, clerkships, residencies in 12 training programs, fellowships in eight specialties, and scores of continuing education opportunities that prepare medical and dental professionals for practice. Our residency programs and fellowships—far removed from the apprenticeships of pioneer days—require 3-8 years of post-graduate training to qualify for licensure to practice a specialty.

The training and requirements have changed, but one thing remains: men and women yearn to learn medicine, and UT continues to lead the way in providing that education.
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Our physicians remember why they became physicians: To heal. To help. To provide hope. Sickness, pain and suffering know no geographic boundaries. Fortunately, neither do physicians at UT.

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