Dear Alumni and Friends,

The seasons are changing in South Dakota, and changes are also coming to the medical school.

Of course, our most exciting change is that we have welcomed a new class of first-year medical students. This is the largest class ever admitted, with 71 students. All students are from South Dakota or have strong South Dakota roots. In the latter category are young men and women who grew up in the state, went to school here, or have close relatives who are alumni of the school. We have come a long way since our first student, Dr. Lyle Hare, graduated in 1909. The field has changed dramatically, yet one constant is the strong sense of community that our alumni and supporters have created for the students. Although our tuition is among the lowest in the country, our students and those throughout the U.S. have an increasing burden of debt. We – the school, the faculty and the students – are deeply grateful for all who contribute to student scholarships. On these pages, you’ll hear from our students and from donors such as Dr. Edward Kaufman and Dr. Anton Schwarz.

Other changes are coming to the school through retirements of outstanding faculty leaders. In December, we will bid farewell to Dr. Ron Lindahl, the founding dean of Basic Biomedical Sciences, who led his talented faculty members through changes that would have daunted a lesser leader. As a result of Ron’s work, we have a modern curriculum that is delivered in a modern building. In March, we will welcome Dr. William Mayhan as the new dean of Basic Biomedical Sciences.

Change is also coming to the Department of Internal Medicine with the retirement of Dr. LuAnn Eidsness. As an internist myself, I understand the importance of the department and the complexities associated with leading it. Dr. Eidsness has led with distinction and has navigated the intricate terrain of curriculum reform with diplomatic aplomb. She will continue to teach and see patients, which is very fortunate for us all. In January, we will be joined by Dr. Russell Wilke who will take the reins as chair of the department.

This issue has many other gems, from Kathy Van Kley’s outstanding work with Native Americans to the large grant we received to increase biomedical research throughout South Dakota to Dr. Ridgway’s work with the SDSMA. You will read about distinguished alumni who have received awards, returned to the school of medicine to speak, or who have taken a moment to reflect on their careers. Change is inevitable, but it gives us an opportunity to reflect on the excellence of the past and look forward with optimism toward the future.

Mary D. Nettleman, M.D., M.S., M.A.C.P.
Vice President/Dean
Letter from the Dean

M.D. Pulse

Remembering and Honoring Our Heritage

Alumni/Giving

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The magazine of the University of South Dakota Sanford School of Medicine

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Contributions and feedback are welcome.

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Find us on Facebook
We salute you, and say good-bye

Dr. Ron Lindahl Retires

For the past eight years every first-year student in the school of medicine started their medical training in one of the classrooms inside the Andrew E. Lee Memorial Medicine and Science Building, on the southwest edge of the university’s campus in Vermillion.

Fondly known as “Lee Med,” this distinct, modern and spacious building has an interesting history, and much of its early record – the years when the building was planned and built – revolves around the contributions of Dr. Ron Lindahl, executive dean of the University of South Dakota Sanford School of Medicine, and dean of the school of medicine’s Division of Basic Biomedical Sciences. It is not hyperbole: If not for the efforts of Dr. Lindahl and a handful of other USD officials and faculty, there might not be a new Lee Med. Lindahl’s participation included direct and significant fundraising for the $37 million structure, almost-daily walkthroughs and inspections during the four-year construction process, and helping maneuver the project through a challenging labyrinth of bureaucratic obstacles.

Dr. Rod Parry was dean of the medical school during planning and construction of Lee Med, and he quickly acknowledged Lindahl’s critical role. “Dr. Lindahl,” said Parry, “monitored every step of the project from demolition of the original building to ribbon cutting of the new one.” Parry recalled Lindahl and USD colleagues Steve Waller and Robin Miskimins not only watchdogging construction but also preparing food or buying pizza for the construction crew while the structure was built. “About every other week for the entire construction process we grilled brats or burgers or brought in pizza for the architects, construction managers and workers,” recalled Lindahl. “It was a chance to stay in touch with the construction phase, and also to get to know and thank the folks working on the building.”

Despite his involved and rewarding work on Lee Med, Dr. Lindahl claimed his greatest satisfaction during his time at USD was helping bridge a gap between the medical school and other sciences at the university. “The highlight of my career,” explained Lindahl, “was transitioning the school of medicine from being a mere appendage of the university to being an integral part of the university.” Lindahl accomplished this by establishing relationships between professors and leadership in the College of Arts & Sciences with faculty and leadership in the school of medicine. “I was hired to help bridge the gap between the medical school and the rest of the campus,”
said Lindahl, “and we did it. The school of medicine is now a big part of the campus.”

Dr. Lindahl has aided students, the med school and the university since 1989, when he began his career at USD as a professor and chair of biochemistry and molecular biology. He earned his Ph.D. in genetics at Wayne State University in Detroit, and spent nearly 15 years teaching at the University of Alabama before arriving in Vermillion. In 1998 he was appointed dean of the med school’s Division of Basic Biomedical Sciences. Since 2004 he has also served as the school’s executive dean.

Dr. Lindahl’s final day at USD will be Dec. 18, 2015. On behalf of many, we say thanks and best of luck in a future that includes wood working and furniture building in a new, home-based shop.

“Lee Med is the birthplace of future health care providers, cutting edge biomedical research and outstanding educational opportunities. Lee Med succeeds because of the people who work and learn in it. It also succeeds because of its multi-functional design and simplicity.”

– Dr. Ron Lindahl

New Dean for Basic Biomedical Sciences

William G. Mayhan, Ph.D., has been named dean of the division of Basic Biomedical Sciences at the school of medicine.

An Omaha, Nebraska native, Dr. Mayhan received his Ph.D. from the University of Nebraska. His distinguished career includes teaching, research and leadership at the University of Iowa and the University of Nebraska Medical Center. Dr. Mayhan will take over as dean in March 2016, and he will come to the medical school from Louisiana State University (LSU) Health Sciences Center, Shreveport, where he serves as head of the Department of Cellular Biology and Anatomy. Steve Waller, Ph.D., will serve as interim dean after Dr. Lindahl’s retirement and before the arrival of Dr. Mayhan.

New Interprofessional Research Incubator at USD

Students from the school of medicine are working with students from other health disciplines to learn how to work collaboratively on research projects in a new program established by the USD Office of Nursing Research and Evidence–Based Practice. The “Pathway to Innovation” program introduces students from different health programs to design, implement and disseminate research projects. Students are recruited and mentored by seasoned faculty to work on funded research projects.

One project has undergraduate and graduate students from the Department of Nursing and students from the medical school working with the South Dakota Department of Public Health to manage and analyze cardiac care data in the state of South Dakota. Students are learning to manage and analyze large data sets, write reports about findings, and present those findings at conferences.

The program provides interprofessional training, and it aids students in developing skills in research and scientific inquiry. Research results improve public health and health care.

Dr. Haifa Samra, Associate Chair of Research & Evidence-Based Practice in the Department of Nursing, reviews research data with student researchers Max Fuller, student in the USD Sanford School of Medicine, and Kim Lowmiller, undergraduate USD nursing student.
The University of South Dakota Sanford School of Medicine (SSOM) has been awarded $446,671 as part of the National Workforce Diversity Pipeline Program, for the first year of a multi-year grant to help identify, mentor and encourage young Native Americans to pursue careers in health care. The program is delivered by the U.S. Department of Health and Human Services. The grant funds SSOM’s Native American Healthcare Scholars Program (NAHSP), which focuses on career and academic mentoring, as well as career awareness-building activities for selected upper-level high school students from the Red Cloud High School on the Pine Ridge Reservation, and Wagner Community School, on the Yankton Sioux Reservation.

According to Dr. Gerald J. Yutrzenka, associate dean for Diversity and Inclusion at SSOM, “The Native American Healthcare Scholars Program is a part of the school of medicine’s strategic diversity plan and, importantly, contributes to the medical school’s efforts to further diversify the health care professions. We are working to assist Native American high school students who have demonstrated an interest in becoming a physician or in pursuing careers in one of the other health care professions.”

“If the program’s Native American high school students decide to attend USD, which we hope they will all do,” said Yutrzenka, “we will then have the opportunity to continue to foster their development as they move along their career paths.”

The program begins in Red Cloud High School and Wagner Community School this year, and will continue into 2020.

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**Kathy Van Kley**

lends her talents and passions to programs that encourage Native Americans to pursue careers in health care. Working within the school of medicine’s Office of Diversity and Inclusion, she assists Dr. Gerald Yutrzenka, associate dean for Diversity and Inclusion, organizes and directs the week-long USD Healthcare Career Summer Camp for high school students interested in learning about careers in health care, and assists with recruitment of high school students from South Dakota and Nebraska for the Indians Into Medicine (INMED) Summer Institute located at the University of North Dakota. She also advises the USD chapter of the American Indian Science and Engineering Society (AISES), and works closely with USD’s Native Student Services office to assist recruiting and retaining Native American students. Van Kley graduated from USD with a degree in Therapeutic Recreation, worked for a number of years in long-term care, and is entering her sixth year at the school of medicine working with INMED and other programs aimed at assisting Native American students.
After a dozen years and numerous meaningful accomplishments, Dr. LuAnn Eidsness, ’87, is retiring as chair of the medical school’s Department of Internal Medicine. “The department,” observed Dr. Mary Nettleman, dean of the medical school, “has flourished under her leadership. As a leader, educator, and role model LuAnn strengthened the entire school.” Dr. Eidsness’s final day as department chair is Dec. 31, 2015.

During her tenure as chair Dr. Eidsness expanded the Internal Medicine department by adding fellowships in geriatrics and cardiology to complement an internal medicine residency. She is also credited with developing a palliative care and bio-ethics curriculum at the medical school. “Her work in ethics and professionalism has been especially valuable, and has influenced a generation of young physicians,” said Dr. Nettleman.

Dr. Eidsness will continue to teach at the medical school following her retirement as department chair. “We are fortunate that she plans to continue to teach, and grateful that we will be able to continue to work with her,” said Dr. Nettleman.

Dr. Eidsness maintains an active, Sioux Falls-based practice at Sanford USD Medical Center, with a sub-specialty in hospice and palliative medicine, and she is the medical director of both hospice and palliative care at Sanford, Sioux Falls. She is also the medical director of ethics at Sanford USD Medical Center, DeGroot Center for Ethics.

New Chair of Internal Medicine

Russell Wilke, M.D., Ph.D., F.A.C.P., has been named the new chair of the medical school’s Department of Internal Medicine. Wilke, a general internist, also holds the position of enterprise director of pharmacogenetics at Sanford Imagenetics, and he will continue his work there. A more detailed profile will be presented in the next issue of South Dakotan M.D.
What is the single most important health problem facing South Dakota residents today?

Dr. Ridgway:
I would say access to care across the entire state. We have incredible medical facilities in Rapid City, Sioux Falls, Yankton, and other larger communities, but we also have an incredibly rural state. The existing physicians are getting older and retiring, and we’re going to have a significant issue with providers being spread across rural South Dakota to provide care into the future.

What can be done about it?

Dr. Ridgway:
This is where I can bring in my background to speak. I am the dean of faculty affairs with the University of South Dakota Sanford School of Medicine. Gov. (Dennis) Daugaard and the legislature recently approved expansion of our medical school class, and we accepted our first expanded class this past year. This means we have more students who will receive their medical degrees, but that’s just the start.

What’s going to bring them back to rural South Dakota? Two years ago we initiated a new program called the FARM program. It’s called Frontier And Rural Medicine. After students complete what we call basic sciences foundation training, they then have to do clinical training. In the past, they would go to one of our three clinical campuses: Rapid City, Yankton or Sioux Falls.

Now we have smaller communities (FARM sites) that take students, and these students are basically welcomed and incorporated in the community. They spend nine months with the health care providers learning the basics of pediatrics, internal medicine, obstetrics, surgery, and other clinical disciplines.

They volunteer to be considered for this program, which means they may likely want to come back to South Dakota. More importantly, communities are just opening their arms and want them back, and students are saying “We’re seriously going to think of this.”

By exposing them to the benefits of a rural practice, that’s a start.

Now what can we do when they finish medical school? Well, once you finish four years of medical school, you have to do residency training, a minimum of three years.

We have expanded many medical school class sizes across the country, but guess what? Residency programs have basically not increased substantially in number since 1997 when the (federal) Balanced Budget Act went into effect.

Residencies have essentially been funded by Medicare dollars, and that was frozen in 1997. So what we have are increasing numbers of students graduating, but without a concomitant increase in residency slots for them.

The South Dakota State Medical Association is
working with our Legislature in trying to push for federal funding for new residency programs or at least to expand existing ones.

You cannot practice medicine with an M.D. degree. You have to have completed a residency program in a specific discipline to be able to practice medicine. Last year, we had approximately, across the nation, around 400 U.S. trained medical students that did not have residency positions.

So it’s one thing to increase our medical students, but we’ve got to get them trained in residencies, and then we need to get them back to South Dakota. Here’s a little statistic we’re proud of.

Across the board, of students who graduate from the University of South Dakota Sanford School of Medicine, approximately 42 to 45 percent come back and practice in South Dakota. However, if they do their residency in South Dakota, after graduating from our school, 77 percent will come back to the state. That’s a big number. So obviously we like to try to get our students in our residency slots for the higher likelihood of getting them to return.

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Medical School Receives $14.4 Million Grant

USD Sanford School of Medicine will use a $14.4 million grant from the National Institutes of Health (NIH) to lead a biomedical research effort that will also fund projects at seven other public, private and tribal South Dakota colleges and universities.

The medical school will receive about $1 million per year for five years and the seven partner institutions will be able to access a total of about $1.5 million each year over the same time, which will enable them to sponsor undergraduate research fellows for developing biomedical research projects, said Barbara E. Goodman, Ph.D., professor of physiology at the medical school and director of the South Dakota Biomedical Research Infrastructure Network, who oversees the grant.

The seven predominantly undergraduate partner schools are Augustana University, Black Hills State University, Dakota Wesleyan University, Mount Marty College, the University of Sioux Falls and tribal colleges Sisseton-Wahpeton in Sisseton and Oglala Lakota in Kyle on the Pine Ridge Indian Reservation.

The grant continues a program started in 2001, and is funded through NIH’s Institutional Development Award (IDeA) program, which was designed and mandated by Congress to help redistribute NIH support to 23 underfunded states and Puerto Rico.
Dr. Loren Tschetter, clinical professor emeritus in the Department of Internal Medicine at the University of South Dakota Sanford School of Medicine, has been inducted with the 2015 class into the South Dakota Hall of Fame.

Dr. Tschetter, an instructor at the medical school from 1975 until his retirement in 2008, is a fourth generation South Dakotan and a graduate of Sioux Falls Washington High School. He attended the medical school from 1964 to 1966 before graduating from the University of Kansas Medical School in 1968. After a fellowship in Internal Medicine/Hematology at the Mayo Clinic and military service at Fort Leavenworth, where he ascended to the rank of major, Dr. Tschetter and his young family moved to Sioux Falls in 1974 to begin a medical practice. Three years later he joined six other physicians practicing in the north central region of the United States to form the North Central Cancer Treatment Group. Their goal was to provide innovative cancer treatments to the citizens of North and South Dakota, Minnesota and Iowa.

Also in 1977 Tschetter helped establish the first Institutional Review Board (IRB) for oncology trials in Sioux Falls. According to the report issued by the South Dakota Hall of Fame, Dr. Tschetter headed formation of the clinical trials research program in the region, and this led to investigational cancer treatment drugs and innovative treatment programs that helped establish improved standards in cancer treatments. He was also a member of the Eastern Cooperative Oncology group (ECOG), the national Surgical Adjuvant Breast Project (NSABP), and the National Cancer Institute Clinical Trials Support Unit (CTSU). These three groups provided clinical trials for patients.

Those studies, Tschetter would later observe, led to new and improved cancer treatments and better outcomes for patients. During the era that Tschetter was involved in cancer research, the mindset of physicians and oncologists working to treat cancer victims evolved from treating and delaying the inevitable to increasing curability rates after curative surgeries (adjuvant therapies).

Dr. Tschetter was also a leader of the Sioux Community Cancer Consortium, a program of the National Cancer Institute that was established to support oncologists in a community and organize the infrastructure necessary to conduct clinical trials.

He is a fellow in the following: The American College of Physicians, the American Society of Hematology and the American Society of Clinical Oncology.

Dr. Tschetter retired from clinical practice in 2009, and the following year he retired as principal investigator of the Clinical Trials Research Program.

In 2010 he received the prestigious Harry Hynes Award from the National Cancer Institute for his commitment by a community investigator in clinical research. The co-author of 79 publications reporting the results of community trials, Tschetter remains active in the medical community, currently serving as chair of the Sanford System Institutional Review Board (IRB) for oncology trials, and performing research audits throughout the U.S. for clinical trial programs of the National Cancer Institute. He is a board member of the Cancer Prevention and Control IRB at the National Cancer Institute.
Two nationally-known neuroscientists who happen to be graduates of the University of South Dakota Sanford School of Medicine (two-year program) were featured speakers at the Oct. 1, 2015 John H. and Amy Bowles Lawrence Foundation Symposium, held at the Health Science Center, on the medical school campus in Sioux Falls. The symposium was titled Research Frontiers in Cerebrovascular Disease and Disorders, and featured a variety of other presentations from University of South Dakota faculty and researchers.

John Hallenbeck, ’64 M.D., chief of stroke research at the National Institute of Neurological Disorders (NINDS) at the National Institutes of Health, presented “Translational Studies in Stroke.” Mark J. Fisher, ’73 M.D., professor of neurology, anatomy and neurobiology, and pathology and laboratory medicine at the University of California, Irvine, also spoke.

Dr. Hallenbeck is a recipient of the Mihara Cerebrovascular Disorder Research Prize. He led a team that revealed that inflammatory and immune system responses were involved in strokes. This breakthrough greatly aided the medical community in its understanding of strokes. His NINDS laboratory is studying the cellular regulation of ischemic tolerance and inflammatory and immune mechanisms in the initiation and progression of stroke, and is also investigating how to suppress and prevent strokes. While visiting South Dakota he received a distinguished alumni award from the University of South Dakota. The career of Dr. Fisher includes starting one of the first stroke programs – at the University of Southern California – on the West Coast. His stroke research has received 30 years of funding from NIH, and he currently directs a stroke research laboratory of vascular neurobiology, teaches stroke neurology to medical students and residents, and heads a stroke prevention clinic. He has recently assumed leadership to initiate the clinical stroke program at VA Long Beach Healthcare System, a major affiliate of the University of California, Irvine.
The University of South Dakota Sanford School of Medicine welcomed the Class of 2019 to the medical school with its annual White Coat Ceremony on July 22 in Sioux Falls. An excited crowd of family and friends helped the new students mark this special occasion. This is the largest class – 71 students – in the institution’s history. The event featured inspirational, encouraging remarks by several medical school leaders, and the traditional presentation of a physician’s white coat to each student.

Sixty students in this class graduated from high schools in South Dakota, and 30 of them (42 percent) come from communities with populations of fewer than 10,000. Three of the students are enrolled in the school’s M.D./Ph.D. program.

Mary Nettleman, M.D., dean of the University of South Dakota Sanford School of Medicine, saluted the incoming students for their admission and provided perspective on their new responsibilities. “The white coat program is where we acknowledge that these students are now more than just students,” said Dr. Nettleman. “They are now physicians in training. And society places fairly weighty expectations on physicians. We recognize that these expectations are valid and important, and we embrace those expectations as these students enter this profession. This event is really the beginning of their professional careers.”
Class in School History

Ruthellen Anderson*, Harrisburg, SD
Anna Bahnson, Hartford, SD
Janice Baumberger, Indianapolis, IN
Kristin Belsaas, Rapid City, SD
Breann Bowar, Faulkton, SD
Alexander Brech, Philip, SD
Brody Brisk, Rapid City, SD
Nicole Buchele, Milbank, SD
Erik Burnison, Huron, SD
John Chandler, Rapid City, SD
Elliott Czarnecki, Sioux Falls, SD
Hanna Distel, Box Elder, SD
Steven Donahue, Plymouth, MN
Jillian Draine, Spearfish, SD
Liam Duffy, Rapid City, SD
Jeffrey Edman, Sioux Falls, SD
Bradley Eichhorn, Sioux Falls, SD
Emily Endres, Watertown, SD
Sarah Fisher, Chamberlain, SD
Laura Fox, Monroe, WA
Luke Fuhrman, Canistota, SD
Cody Geffre, Pierre, SD
Matthew Gerlach, Plankinton, SD
Nicholas Goodhope, Sturgis, SD
Angelina Gould, Aberdeen, SD
Eric Habbe, Rapid City, SD
Joshua Hanscom, Sioux Falls, SD
Alex Heard, Edgerton, MN
Brian Hokeness, Adrian, MN
Rebecca Jarratt, Sioux Falls, SD
Samuel Jensen, Sioux Falls, SD
Jake Johnson, Harrisburg, SD
Kristopher Johnson, Holmen, WI
Ryan Jorgenson, Brookings, SD
Joseph Kolba, Sioux Falls, SD
Katherine Kondratuk, Cameron, WI
Luke Lansman, Harlan, IA
Mark Larson, Shoreview, MN
Matthew Larson, Brandon, SD
Skye Lawlor, Rapid City, SD
Erik Manke, Brandon, SD
Keegan Mechels, Lennox, SD
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Nicholas Purcell, Rapid City, SD
Joshua Rogers, Ft. Pierre, SD
Rebecca Runge, Wessington, SD
Sierra Schepper, Rapid City, SD
Alexander Sellers, Volga, SD
Ryan Shogren, Sioux Falls, SD
Benjamin Staum, Elk Point, SD
Emily Storm*, San Francisco, CA
Jessica Sundleaf, Sioux Falls, SD
Erin Terpstra, Lincoln, NE
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Abbey VanDenBerg, Sioux Falls, SD
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Abigail Wegehaupt, Parkston, SD
Carol Whitman, Rosebud, SD
Susan Wik, Faulkton, SD
Nathan Wunder, Sioux Falls, SD
Emily Wynja, Sioux Falls, SD
Nathan Zvejnieks, Rapid City, SD

* Physician Scientist Program - Class of 2022
Black Bag Chronicles

It was a time of narrow highways, dime stores and polite, patient telephone operators. It was also a time when doctors carried black bags to house calls. On the way in to see a patient they’d hurry by a nervous family. On the way out, they’d stop and chat, often answering questions about sicknesses and injuries. That black bag not only carried an abbreviated emergency room to the patient, it signaled a special visitor was present. Nowadays we refer to those doctors who performed house calls as old timers. The leather bags they carried are a legacy of a fondly remembered yesteryear when house calls were an important aspect of a doctor’s service.
Profile
Dr. Loren Amundson and His Black Bags

After two years of military medical service at Fort Hood, Texas (1957 to 1959), Dr. Loren Amundson practiced family medicine in Webster, South Dakota for five years. It was a typical small-town, rural practice, and house calls for a great variety of maladies and injuries were common.

As Dr. Amundson walked up a sidewalk or across a farm yard on his way to visiting a patient he toted an indispensable apparatus, an essential piece of medical paraphernalia: a sturdy-handled, black bag brimming with his tools of the trade. “Inside that bag,” Amundson recalled, “were simple medicines and instruments for listening to and pounding on patients.”

During the years he practiced as a family physician, from 1959 to 1974, Dr. Amundson used two different black bags. The first one was a gift from his godparents, and it was delivered as a gift as he studied in medical school in 1954. The second bag he bought later on, and it was larger than the first. By then his career as a physician was well underway, and using a black bag was routine and necessary.

“One house call happened for many reasons,” said Amundson. “Some cases were acute, and some were for lesser reasons.”

One memorable day in Webster, Dr. Amundson was called to a remote location in the countryside where a worker had fallen onto and had been swallowed up by a sand pile. Amundson traveled to the scene with an ambulance but didn’t need to employ anything he carried in his black bag because by the time he arrived the unlucky fellow had already been pulled from the sand and was dead.

On another day, while all three of the other physicians serving the Webster community were at a conference in Sioux City, Iowa, Dr. Amundson got a phone call from a farm family whose daughter had been electrocuted. The clock-radio they kept on a shelf near the bathtub in the kitchen had fallen into the water while the young girl was bathing. Again, Amundson drove to the scene but had no use for his black bag or its contents. Unfortunately, there was nothing to be done for the girl. Not long after returning to Webster he received a call from yet another farm family. Amundson quickly drove to the farm home only to discover that the boy—who happened to be a classmate of the electrocuted girl—had just died. Once again, the occasion was somber, and there was no need for the black bag. Amundson’s comforting presence was the best medicine for a family in moments like that.

At his Webster clinic Amundson charged patients $3 for an office visit. “I think we charged the same amount for each house call,” he remembered, “but I think that may have changed depending on the circumstance of the house call.”

In 1964 Dr. Amundson moved to Sioux Falls to join the Donahoe Clinic, and he continued making house calls and carrying his black bag with him during those house calls. But by the 1970s house calls had dwindled. In 1974 he was recruited by USD medical school dean Dr. Karl Wegner to establish a department of family medicine in the newly expanded four-year school of medicine. Amundson’s days as a practicing physician were coming to an end, but his memories of making house calls remained strong. “I still drive by homes in Sioux Falls,” he recently related, “and I remember making house calls there.”

Dr. Loren Amundson, a native of Colton, South Dakota, graduated from the University of South Dakota with a B.S. in Medicine in 1954. He completed his medical degree at the University of Wisconsin School of Medicine in 1956. The first black bag he carried was donated to the South Dakota Hall of Fame when Dr. Amundson was inducted in 1997.
First Graduate of the
Dr. Lyle Hare

Talented athlete, decorated physician, valued community leader

The first graduate of the University of South Dakota School of Medicine, Lyle Hare, worked his way through college and was a collegiate sports star. He would come to epitomize the notion of what it means to be a benevolent physician and a community-minded, public servant.

Lyle Hare’s work ethic was evident early on. Hare came to USD from Spearfish, South Dakota and Spearfish Normal, an early title for what would later become Black Hills State University, where he was a student-athlete competing in football and basketball.

At USD, Hare, a dynamic fullback, was awarded athletic scholarships, earned all-conference honors twice, and was mentioned by some sports writers as an All-American prospect. He also performed impressively as a member of the USD track and field squad.

In addition to his studies and athletic obligations, Hare worked at a fraternity waiting tables and delivering laundry. It was a busy life, but he graduated on time, earning a B.S. degree in medicine in 1909. USD’s medical school, of course, granted only bachelor’s degrees in medicine through 1974, requiring students to transfer to four-year programs at other medical schools where one could complete an M.D. degree.

During the first year Hare attended the USD School of Medicine, the state’s Board of Regents budgeted a total of $1,640 for the med school. Hare and one other young man – Iver Storland, of Beresford, South Dakota- comprised the med school’s first student body.

Before Hare’s second year at USD, the Sioux City Medical School in nearby Sioux City, Iowa closed, and five students from that institution transferred to USD’s fledgling medical program. After completing his first two years of medical training Iver Storland transferred to Rush Medical College, in Chicago, to complete his degree. Lyle Hare finished his medical degree at the University of Illinois’ College of Physicians and Surgeons in 1911.

Years later Hare wrote a letter about his experiences at USD. “I had very little idea of what a medical course was, but I was determined to give it a try,” Hare penned. “Wisely, those in charge set the standards high so that students in later years would have no trouble getting into other schools. … the instructors did everything possible to help me learn, and for that I am still grateful. My work consisted of lectures, laboratory experiments and outside reading.”

After graduating from medical school, Hare did an internship at University Hospital in Chicago, and then he returned to South Dakota, joining the faculty and staff at Spearfish Normal as that school’s physician. He also served as head football coach until World War I.

During that war Dr. Hare was commissioned a first lieutenant in the U.S. Army’s Medical Corps, and was assigned as a doctor at a hospital in France. After returning to Spearfish, Dr. Hare resumed his work as college physician, a position he held for some 50 years. He also opened a medical practice in Spearfish, and he became a beloved “country doctor” and surgeon in the Black Hills region, traveling throughout the area on horseback, sleigh, and later, cars and even a plane. He cherished his home community, and served two terms as mayor of Spearfish from 1922-1926.

The State of South Dakota requested his expertise, and he was president of the South Dakota Board of Health for seven years and later president of the South Dakota Board of Charities and Corrections. In 1948 Dr. Hare was chosen by the South Dakota Medical Association as its “General Practitioner” of the year, and the following year the same organization selected him as its doctor of the year.
Students, staff, faculty and visitors at Black Hills State University are visibly reminded of his immense contributions to that institution. The football stadium there was named in honor of Dr. Hare in 1947, and that name – Lyle Hare Stadium – was also applied to a new stadium built in 1960, and then to the rehabilitated stadium that opened 45 years later. Hare was honored as an inaugural member of the university’s Hall of Fame in 1983.

Dr. Lyle Hare’s first wife died in 1918. Their daughter, Dr. Helen Jane Hare Gormley, followed her father’s footsteps into medicine, and attended the University of South Dakota School of Medicine from 1938 to 1940. She eventually opened a dermatology practice in Rapid City, becoming the first female physician in that city. Dr. Lyle Hare had remarried in 1925. His remarkable life ended in 1975, but his contributions live on.

Donald E. Young, former Spearfish mayor as well as a one-time student and long-time instructor at Black Hills State, wrote the following about Dr. Hare: “Though his name is enshrined at this football field, it is not the field that stands in his honor, it is the college. In those dark days of the Depression era, the college offerings had been reduced from four years to two years, and the actual existence of the college hung in the balance. It is more through the efforts of Dr. Lyle Hare, and the high regard in which he was held by his fellowmen throughout the State of South Dakota that the buildings still house a college instead of being converted to some other activity. Not only did the college survive, but the four-year program was restored, and as one member of that first four-year class in 1940, I can testify that, with World War II looming on our horizon, the opportunity to earn a degree cannot be underestimated.”

The Dr. Lyle J. Hare Scholarship Endowment was created in 1958 by friends and family of Dr. Lyle Hare as a memorial to him. This endowment funds scholarships for a selected incoming freshman student(s) enrolled at the University of South Dakota Sanford School of Medicine.
The next generation of U.S. physicians is being saddled with record debt amid a looming shortage of doctors needed to cope with a rising elderly population.

The burgeoning debt burden may be turning students away from primary care... toward more lucrative specialties and scaring off low-income and minority students fearful of taking on big loans.

– Bloomberg News
Rising Costs, Rising Needs

The value of scholarships and financial aid for medical students

by Peter Carrels

At USD Sanford School of Medicine scholarships are a priority. Our mission includes making medical school affordable for all in South Dakota, and we work hard to make sure financial need is not a barrier to becoming a doctor. Boosting scholarships reduces student debt, giving our graduates greater ability to pursue primary care, which pays more modestly than specialties.
Readers of this magazine who practice medicine aren’t necessarily surprised by the following information: According to the American Medical Association, no other post-secondary education costs more than a medical education. What is genuinely eye-opening is this statistic: More than 40 percent of all indebted medical school graduates carry debt balances incurred during their medical and pre-medical educations of more than $200,000.

In 2014, 86 percent of those graduating from a public medical school carried debt, and the mean total education debt burdening those students was $167,700. Private school grads carried even more debt. Eighty-two percent of those graduating from a private medical school in 2014 carried debt, and their mean debt load was about $190,000.

Consider this: For medical school grads in the class of 1992, the national median medical education debt was $50,000. If you do the math, the debt burden has considerably outpaced inflation.

It follows that debt is rising because the cost of medical education is also increasing. The Association of American Medical Colleges indicates the national median cost for a first-year medical student in 2014-2015 exceeded $53,000. The cost range for all of the nation’s medical schools is considerable, with some tuition/fee levels exceeding $70,000 annually.

In 1992 the median cost of tuition and fees for a freshman at a public medical school was about $6,800. Private school freshman paid a median of slightly less than $18,400.

Several things should be made clear. Not only does our institution – the University of South Dakota Sanford School of Medicine – offer a top-quality medical education to our students, we also rank as a reasonable and affordable medical school relative to the national average. Tuition/fees at SSOM are substantially less for South Dakota residents than those at most other medical schools. For the 2015-2016 school year, SSOM students qualifying for resident status paid about $31,362 per year. Non-residents pay significantly more, with tuition and fees reaching about $70,740. Approximately 90 percent of the medical school student body qualify for South Dakota resident status.

But SSOM students typically need significant assistance. “Our students need assistance,” said medical school dean Dr. Mary Nettleman, “because many of them do not come from affluent backgrounds, and their families cannot significantly support the expense of medical school.”

High costs and debt have two concerning impacts on medical schools and their students. Not only does the expense continued on page 22

‘The nation needs doctors, and young doctors and medical students need help.’
– Ben Meyer, fourth-year medical student, USD Sanford School of Medicine

‘Scholarships relieve a substantial burden on our students at a time when they are trying to concentrate solely on becoming a good physician.’
– Dr. Mary Nettleman, Dean, USD Sanford School of Medicine
Ben Meyer is a fourth-year medical student at the University of South Dakota Sanford School of Medicine who grew up in Sioux Falls and graduated from Gustavus Adolphus College in St. Peter, Minnesota. Not only is Meyer pursuing his medical studies, he is also involved in other matters related to medicine. He serves as one of his class representatives to the American Medical Association - Medical Student Section (AMA-MSS), and he is also vice chair of the AMA-MSS on Legislation and Advocacy (COLA), and an MSS Region 1 delegate to the AMA House of Delegates. Meyer has developed a profound interest in issues related to medical student indebtedness.

“Many of us face large levels of debt,” he said, referring to himself and to other medical students. “I actually entered medical school with significant educational debt, and I’m not alone in that. Many students take out large loans to attend medical school, and that exposes a student to risk, and that’s scary.”

“I’ve learned,” added Meyer, “that student debt for medical school has risen dramatically in the past 20 years.”

Meyer appreciates the helpful scholarships he has received while attending medical school, but points to a host of unmet needs. “For example,” he said, “in a student’s fourth year there are expenses related to interviewing for residencies.” He described travel and lodging expenses as examples of such expenses. “They can tally up quickly,” he added.

The substantial costs of attending medical school, warned Meyer, can affect who attends medical school. “The evidence is strong that high costs dissuade underrepresented minorities from applying to med school,” Meyer explained. “In South Dakota this might apply to students on reservations, and in the nation’s metropolitan areas it might apply to students from inner cities. This situation hurts the chances of diversifying the physician community.”

Meyer also pointed out that med school grads not only face daunting costs and loans, they are confronted by complex options to repay those loans. These options, he explained, can be confusing, frustrating and difficult to meet.

As part of his work volunteering as a student in AMA, Meyer has spent time in Washington, D.C. lobbying on med school issues, including rising costs and indebtedness. “I advocated for funding to assist residencies, and I opposed a proposed cap on forgiveness of med student debt. “The nation needs doctors, and young doctors and medical students need help,” said Meyer.
of attending medical school intimidate some prospective students, especially those from low-income circumstances, causing some prospects to lose interest in attending medical school, but the debt levels acquired by many students while attending medical school may encourage some students to steer away from selecting general or family practice medicine as a career and choose, instead, more lucrative specialties in order to more comfortably repay indebtedness.

Because a critical mission of the SSOM is providing the people of South Dakota with primary care physicians who practice in rural areas, the influence of high education costs and indebtedness is worrisome. These factors – overall cost and indebtedness – can impact significant aspects of our mission.

Another method of evaluating the expense of attending medical school is to examine the more complete costs related to attending medical school, including tuition, fees, health insurance and living expenses. Because of the rigorous academic requirements involved in attending medical school, students rarely work part-time to help ends meet. South Dakota residents pay, on average, $53,243 per year to attend medical school, buy health insurance, and pay living expenses. The national average is $62,008.

continued on page 24
Brooke Fischer and the Meaning of Scholarships

Brooke Fischer is a third-year medical student interested in pursuing a career as an anesthesiologist. She entered medical school after graduating from Mount Marty College in Yankton, South Dakota with minimal debt. Despite receiving numerous scholarships while attending medical school, her education-related debt has dramatically escalated. When she learned that the average indebtedness of University of South Dakota Sanford School of Medicine graduates was approximately $157,000, she admitted that she’d be in that range by the time she finishes her medical degree. “My debt is large, and it’s going to get larger,” Fischer explained, “but I try not to think about that because I’m focused on my dream of becoming a doctor. Most of my classmates feel the same way.”

Fischer is deeply appreciative of the many scholarships she has received. “About 25 percent of my education costs are covered by scholarships,” she reported. “I’m taking out loans to cover the rest.”

When Fischer evaluates the overall value of a scholarship she includes the costs of not receiving a scholarship. “It’s important to remember that when I receive a $1,000 scholarship, for example, it means I won’t have to take out a loan for that amount. And when you re-pay a $1,000 loan,” she explained, “you might end up paying twice that amount. So the $1,000 scholarship saves me $2,000.”

One aspect of the scholarship program administered by the University of South Dakota Sanford School of Medicine that especially impresses Fischer is the generosity of those who have strong faith in the potential of scholarship recipients. “I am so grateful that there are so many generous people who are willing to contribute to my education and to my future even though they have never met me,” said Fischer.

Med School Graduates with Educational Debt

<table>
<thead>
<tr>
<th>Debt Range</th>
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<tr>
<td>$100,000 or more</td>
<td>84%</td>
</tr>
<tr>
<td>$200,000 or more</td>
<td>79%</td>
</tr>
<tr>
<td>$300,000 or more</td>
<td>43%</td>
</tr>
<tr>
<td>$100,000 or more</td>
<td>10%</td>
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based on class of 2014 nationwide - information from the AAMC
These factors also contribute to student indebtedness. Although lower than the national averages, many South Dakota-resident SSOM students graduate with imposing debt. It is expected, for example, that the average debt reported by 2015 SSOM graduates was $157,306. The national average for 2015 graduates is more than $170,000. But the level of debt for SSOM students is a major concern. “Our students are among the most loan-heavy medical students in the country,” Dr. Nettleman acknowledged.

Students with extraordinary debt levels are also growing. In 2013 there were no SSOM graduates burdened by debt over $200,000 from medical school alone. In 2014 8.5 percent of our grad’s carried such a debt load, and among 2015 grad’s nearly 14 percent owed more than $200,000. These figures were all lower than national data.

A more comprehensive approach to evaluating debt is to look at total educational debt. This is the outstanding, total debt a student accumulates during both undergraduate and medical educations. Using this criteria, 34.9 percent of SSOM’s 2015 graduates are carrying educational debts greater than $200,000. This percentage exceeds the national figure by almost three points.

To address and ease issues of indebtedness, SSOM actively builds and maintains a scholarship fund for distribution to its students. Approximately 88 percent of SSOM students receive at least one scholarship from the medical school, 97 percent receive some form of financial aid, and 90 percent take out some type of student loan.

Edd Storey serves as the director of development for SSOM, a position he has held for the past ten years. Storey’s fundraising priorities are established by the dean of the medical school, Dr. Mary Nettleman, and the top priority she has identified is the funding of scholarships for students.

“There has always been a big need to fund scholarships,” said Storey, “and that need continues.” Storey explained that many prospective donors he meets are physicians or retired physicians, and they understand the financial stresses felt by medical students. “The people I approach to contribute to our scholarship funds and endowments and other needs,” explained Storey, “understand the commitment and passion that characterize our students as they pursue their desire to graduate from medical school and become physicians.”

Generosity by donors has been impressive, said Storey, adding that this reflects on the quality of the medical school and its faculty and leadership. Indeed, during the 2014-2015 school year the medical school distributed over $1.4 million through about 172 different scholarships to its students. Storey works closely with Dr. Nettleman to raise scholarship funds from alumni and friends of the institution.

“Scholarships are needed now more than ever before,” explained Dr. Nettleman, who sometimes accompanies Storey on trips to visit prospective donors to the institution’s scholarship fund. “Scholarships relieve a substantial burden on our students at a time when they are trying to concentrate solely on becoming a good physician.”

Dr. Nettleman points to a charged-up effort to expand scholarships. “When we expanded our M.D. class size from 56 to 67, starting with the incoming group in 2015, we also realized we needed to work harder to build our scholarships. Fortunately, we have many alumni who understand the importance of their generosity. They realize the school does not generate clinical revenues, and this adds to the critical need for them to contribute.”

Generosity, described Nettleman, is contagious. “Our students are dedicated to becoming good physicians, and they appreciate the help they get,” she explained. “Once they graduate and their careers are established they feel good about paying it forward. This is a reflection of the profession. Physicians believe in students because they remember being students. Our school relies on the generosity of its alumni, and our alumni have been champions of the school.”

“The people I approach to contribute to our scholarship funds and endowments understand the needs, commitment and passion that characterize our students as they pursue their desire to become physicians.”

– Edd Storey, Director of Development, USD Sanford School of Medicine
Randall Waldner grew up in Redfield, South Dakota, a small community in the north central part of the state, and when he completes his medical training, including a residency, he intends to return to his hometown to practice medicine.

“I bleed blue and white,” said Waldner, referring to Redfield High School’s school colors. “I love Redfield.”

Waldner was a star athlete during high school, and among his activities were twice winning state wrestling championships while competing for the Pheasants.

Waldner took advantage of a generous financial assistance program offered through a Redfield-based physician recruitment group that includes Community Memorial Hospital in Redfield, the City of Redfield, Spink County, and the Redfield Area Development Corporation, a local economic development organization. The group established a fund to encourage young physicians to practice in Redfield by covering their medical school costs. In return, Waldner signed a contract that commits him to practice for at least five years in Redfield.

“Without that contract,” explained Waldner, “my school debt at graduation from medical school would exceed $150,000, and it might be closer to $175,000.”

With the contract and accompanying commitment to practice in Redfield, Waldner’s indebtedness will be considerably less, and likely in the $50,000 to $60,000 range. He incurred much of that debt while pursuing his undergraduate degree at South Dakota State University.

Waldner signed a contract that commits him to practice for at least five years in Redfield.

“Without that contract,” explained Waldner, “my school debt at graduation from medical school would exceed $150,000, and it might be closer to $175,000.”

According to the AMA, reducing medical student indebtedness yields big benefits

• Promotes diversity within medicine, and may contribute to a reduction in the shortage of primary care physicians.
• Fair, low-interest rates, tax relief, tuition assistance, and loan forgiveness and repayment programs lower barriers to medical education for disadvantaged students.
• Borrowers with less debt are more likely to start careers in medical education and research, practice medicine in medically underserved areas, or enter careers in public health service.

If you are interested in creating a scholarship to help our students, contact Edd Storey at Edd.Storey@usd.edu or call (605) 675-4805.
When Dr. Edward A. Kaufman was a boy growing up in Appleton, Minnesota, his family’s home on the edge of town was separated from the community’s hospital by a corn field. Both his parents - Edward John and Dorothybelle McCree - were physicians, and while his mother had turned her focus to raising three children and managing an active household, his father became Appleton’s favorite family doctor, whose life was dominated most days with caring for his patients from before sunrise to after sunset.

It was a demanding, rewarding life, Edward A. remembers about his father’s devotion to his work. “We recognized the sacrifices he made, that we all made, really, to serve the community with such a high level of commitment,” he later recounted.

The younger Edward recalled his family and him returning home after rare weekends away from Appleton. “The moment we’d turn on the lights in the house someone from the hospital would phone,” he explained. “It was as if the nurses were watching the house from across that field, waiting for my dad to arrive home so they could call. That reflected his importance for so many.”

Appleton today is somewhat different than Appleton of that earlier era. For starters, like many other small, rural communities, the town’s population - 1,400 - is appreciably less than the 2,000 who lived there in the 1960s when Edward A. knew it. The town’s schools are now consolidated with schools serving nearby towns, and many main street businesses have closed. One thing that hasn’t changed, however, is that this western Minnesota community and region has few doctors. It remains a challenge to recruit family practitioners who can embrace the arduous, ongoing responsibilities of delivering indispensable and versatile medical care in rural locales, as Dr. Edward J. Kaufman provided to the people of Appleton and the surrounding area for almost 40 years.

Edward A. paid close attention to his parents, deriving inspiration and a determination that led him to medical school. After acquiring a B.S. degree in 1970 from the University of South Dakota School of Medicine, he completed his M.D. training at the Boston University School of Medicine in 1972.

Dr. Kaufman discovered meaningful role models while at USD, specifically in pathology classes taught by Dr. Karl Wegner, Dr. John Barlow and Dr. George Knabe. “These gentlemen were highly influential. I admired them both for their knowledge and their leadership roles, and I discovered that I enjoyed the subject they taught. It’s often the case that we’re drawn to professions by the people who lead us there as much as we are by the field itself. Those men, through their...
Dr. Edward A. Kaufman (center) and his wife, Martha Kaufman (lower left), with student recipients of the Dr. Edward John Kaufman and Dr. Dorothybelle McCree Kaufman FARM scholarship. Students are, left to right: TiAnna Vogt, Adam Fitzgerald, Ami Garrigan and Elizabeth Westhoff.
knowledge, presence and accomplishments, led me to pathology,” said Kaufman, who served as class president while at USD.

Having done a clinical internship, Kaufman supplemented his income during his pathology residency in San Francisco working rotations as an emergency room physician. During that time he’d noticed a disconnect between hospital administrators emphasizing financial and business factors, and physicians and health care providers emphasizing patient care and patient needs. “It seemed as if the two viewpoints were never to meet, and I wanted to help bridge that gap,” he would later explain. “I felt strongly - then and still today - that physicians need to take more responsibility for the financial consequences of the care they provide, and I thought it more likely that a physician could successfully bring business perspectives to the practice of medicine than health care administrators.”

This left Dr. Kaufman pondering a non-clinical application of his medical skills.

He went back to Stanford University, where he’d earned his undergraduate degree. The young doctor was accepted into that university’s prestigious graduate business program, with a personal, professional goal to one day manage a large hospital laboratory, a position he felt would directly benefit not only from his medical training in pathology, but also from a bona fide business education.

A lifelong commitment to family, community and small town living seems to have agreed with Drs. Edward John and Dorothybelle McCree Kaufman. The two native Minnesotans met and married while in medical school at the University of Minnesota, and they returned to Minnesota after completing internships in California. Kaufman, a native of Appleton, Minnesota, a farming hamlet in the west central region of the state, brought his wife - a St. Paul native - to his hometown in 1937, and that’s where they raised their family and lived for some 62 years. Theirs was a union that endured and flourished, spanning 71 happy, satisfying years until Dorothybelle died in 2006 at the age of 96. Her beloved husband died six years later at 102.

Each had an impact on their community in a variety of valuable and lasting ways. They funded an educational wing on the local Methodist church, a building that eventually served as overflow classroom space for the community’s public elementary school. They sponsored scholarships at a local college that have benefitted more than 100 students, some of whom went on to become physicians serving small towns in the Midwest. They also led efforts to build a new community hospital and develop a local PBS television station - Pioneer Public TV - that serves western Minnesota and eastern South Dakota. Both of those facilities
Upon graduation from Stanford, Kaufman faced an array of opportunities, but he chose a position that dovetailed nicely with his original plan: He became the medical director for a medical laboratory in Minneapolis. The following year he went to work in the clinical laboratory division of SmithKline, where he would spend the remainder of his professional career.

His rise through that corporation’s leadership hierarchy was impressive, including stints managing the company’s labs in Chicago and Los Angeles, developing and leading the labs’ strategic planning and government affairs efforts, directing esoteric and clinical trials, and eventually serving as its national medical director. Along the way he influenced the company’s work with the National Football League to develop drug-testing procedures, worked on the effective and safe uses of patient data, and testified before Congressional sub-committees on matters related to clinical labs, testing protocols and data protection.

He also played a role negotiating a company compliance agreement that hinged on issues of medical necessity, and that led to his being named chief ethics and compliance officer for the laboratory’s parent company, international business giant GlaxoSmithKline, best known as a pharmaceutical company.

When named GlaxoSmithKline’s vice president to lead ethics and compliance affairs, Kaufman was the only non-lawyer serving in such a capacity among the world’s similar companies. “That position,” he acknowledged, “was the culmination of so many facets of my career and experience, including medicine, finance, decision theory, health care economics, quality management and, ultimately, patient care.”

In 2006, Dr. Kaufman retired. The M.D. with an M.B.A. had married his interests in medicine and business, and successfully ascended to a pinnacle of his profession in the health care industry.

But he never forgot his hometown of Appleton and the medical service his parents provided to rural residents there.

The senior Kaufman had been born in Appleton, and returned there after his medical training, joining his uncle in medical practice. As a doctor serving a small town he made house calls until his retirement in the 1970s, including performing home births, tending to victims of farm accidents, sitting overnight with dying patients and their families, and conducting in-school immunization programs. One resident said the senior Dr. Kaufman defined the community more than anyone else. “Dr. Ed,” she said, “represented what was stable and good about our lives in Appleton.”

From his father and mother, Edward A. learned about community service and philanthropy, too. His dad had been president of the local school board,
championed construction and obtained funding for a new hospital, and successfully lobbied to situate a public television station in Appleton. He and his wife Dorothybelle established five scholarships for students attending the University of Minnesota/Morris, a progressive, liberal arts college 30 miles from Appleton.

“My mom and dad raised their family in Appleton, and contributed their time and talent to making Appleton and the Appleton area a better place to live,” explained Edward A. “Having missed that opportunity myself, I want to support budding physicians who serve rural communities like my parents did,” he said.

The deep respect he developed for small town doctors by witnessing the work of his father is a key reason the junior Dr. Kaufman has created a scholarship endowment for the FARM (Frontier And Rural Medicine) program at the University of South Dakota Sanford School of Medicine. The FARM program prepares physicians to work in rural areas, much like Dr. Kaufman’s parents served in Appleton. The scholarship endowment supported by Dr. Kaufman’s generosity will annually assist eight to 10 medical students who participate in the FARM program with grants ranging from $2,000 to $2,500 per student, and it has appropriately been named the Drs. Edward John and Dorothybelle McCree Kaufman Frontier And Rural Medicine Scholarship Endowment.

The scholarship endowment is a welcome and important tool to sustain this meaningful program.

“Students participating in the FARM program must have a sincere interest in rural medicine in South Dakota and commit themselves completely to this program and their FARM community for their clinical year spent serving that community,” said Dr. Susan Anderson, program director for FARM. “The gift of the Kaufman scholarship will have a profound impact on these students. This scholarship will help lessen the financial burden of the students’ education while also encouraging the students in the pursuit of their future goals. Additionally, through this scholarship the memory of Drs. Edward John and Dorothybelle McCree Kaufman and the commitment they demonstrated to their rural community will be honored.”

“I know my parents would be delighted with this endowment,” Dr. Kaufman added. “Their devotion to Appleton and rural Minnesota is precisely what FARM hopes to inspire in its students – a desire to serve people in small towns and rural America.”
Sioux Falls Gathering Celebrates Scholarships

On June 17, more than 200 students and scholarship donors, as well as family and friends of the USD Sanford School of Medicine, gathered in Sioux Falls for the SSOM annual Scholarship Award Dinner. Dr. Robert Goodhope ‘78 shared with the audience the importance of scholarships and giving back. He and his wife, Suzi, established the Goodhope Family Endowed Scholarship in 2009, and earlier this year spearheaded the effort with fellow school of medicine classmates to create the Class of 1978 Endowed Scholarship. This scholarship was established to honor the memory of their deceased classmates, and the first Class of 1978 scholarship recipient was Janice Baumberger, Class of 2019, and daughter of two 1990 medical school graduates. The audience also heard from students Brooke Fischer, Class of 2017, and Kari Halvorson, Class of 2016, about the value of scholarships.

Dean Mary Nettleman presented the first recipients of the USD Sanford School of Medicine Award for Friendship to Dr. Arnold ’52 B.S.M.D. and Alanna Fenske. Through their generosity, a scholarship fund was established in 2008 – the Dr. Arnold W. and Alanna J. Fenske Scholarship Endowment – that provides scholarships for first-year students. This special award was given to the Fenskes for their extraordinary and unwavering support to medical students and also to the mission of the school of medicine.
Dr. Anton Schwarz’s Remarkable Life and Lasting Gift

Dr. Victor Huber is current recipient of Anton J. Schwarz Distinguished Professorship in Virology

An intense curiosity and an amazing personal story characterized Dr. Anton Schwarz, and each is integral to the legacy that accompanies his kindness to the University of South Dakota Sanford School of Medicine.

In 1997, the children of Dr. Schwarz helped finalize a generous, endowed professorship to honor their father and his passion for research in virology. Dr. Schwarz, who achieved a long list of significant research accomplishments, died earlier that year. He moved to Sioux Falls following a celebrated career, and had befriended Dr. Robert Talley, dean of the medical school. His conversations with Dr. Talley laid the foundation for his gift to the University of South Dakota Sanford School of Medicine, and reflected his desire to facilitate skillful, well-intended research work. The professorship is officially called the Anton J. Schwarz Distinguished Professorship in Virology.

Dr. Talley described the professorship as an intentional effort by Dr. Schwarz to aid important scientific study. “[Dr. Schwarz] specifically directed the award at the basic science of virology, knowing that the control of a disease entity will be its prevention,” explained Dr. Talley.

Dr. Talley described the professorship as an intentional effort by Dr. Schwarz to aid important scientific study. “[Dr. Schwarz] specifically directed the award at the basic science of virology, knowing that the control of a disease entity will be its prevention,” explained Dr. Talley.

Dr. Anton Schwarz was born in Germany in 1927, and earned his medical degree from Ludwig Maximillian University in Munich. Before beginning medical school he served in the German navy during World War II, and was captured and escaped three times from Russian prison-of-war camps.

After medical school he emigrated to the United States to perform internships and a residency. In 1954 he was recruited by famed medical researcher Dr. Albert Sabin to become his personal assistant. Dr. Sabin helped develop an oral polio vaccine. Dr. Schwarz also worked with Dr. Jonas Salk.

Soon after that, Dr. Schwarz was pioneering his own studies and research, and directing and making breathtaking discoveries. From 1960 to 1964 he served as senior virologist at Dow Chemical’s Pittman-Moore Company in Indianapolis, Indiana. In 1965, while directing the virus research department at Dow, he developed a live attenuated measles virus vaccine that was patented and called the Schwarz strain. He also developed the vaccine Lirugen, and it was used across the world in immunizations. In the 1970s Dr. Schwarz assumed global responsibilities at Dow for vaccine development and antiviral research. He completed his career with Schering-Plough, serving in several critical roles, before retiring in 1990 after working as the director of corporate medical science for eight years.

Dr. Schwarz died in 1997 at age 70 in Sioux Falls. He had relocated to that community because his children lived nearby.

Three individuals at the University of South Dakota Sanford School of Medicine have been recipients of the Schwarz research professorship. The first was Dr. Wendy Maury, who served as an assistant professor in the department of microbiology. Dr. Maury’s research focus was the HIV virus and the related equine infectious anemia virus.

When Dr. Maury’s award expired, the second Schwarz professorship was delivered to Dr. Keith Weaver, professor of Basic Biomedical Sciences. His research focused on the maintenance and transmission of molecular parasites in bacteria, like plasmids and phage. These agents can be either beneficial to bacteria, like plasmids that carry antibiotic resistance genes, or lethal to them, like lytic phage. During his time as a Schwarz researcher Weaver and his team studied toxin-antitoxin systems which function to force bacterial cells to retain these elements,
whether they are beneficial to them or not.

The most recent and current recipient of the Schwarz professorship is Dr. Victor Huber, associate professor in USD’s Basic Biomedical Sciences. Huber’s professorship commenced on July 1, 2015, and will run until 2018. A portion of Huber’s salary is paid by the professorship, but the scientist is especially pleased and honored by the award because of Dr. Schwarz’s reputation. “I was familiar with Dr. Schwarz and the ‘Schwarz strain’ before I was recognized by this professorship,” he explained. “It’s an honor because Dr. Schwarz was famous for his work on vaccines.”

Dr. Huber’s research deals with influenza viruses and the clinical translation of understanding these viruses. “Virologists study the impacts of a virus within their hosts,” said Huber, “and we’re looking at the clinical translation of our findings in an attempt to develop vaccines. That’s what Dr. Schwarz did as a virologist.”

According to Huber, the research happening in his lab at the University of South Dakota emphasizes the host immune response against influenza virus infection. “Of particular interest,” explained Huber, “are virus infections that predispose to deadly secondary bacterial complications, like pneumonia.”

Huber and his team, in collaboration with other researchers at USD and at distant sites, are working to define the virus, host and bacterial factors that allow for severe secondary bacterial infections to develop. “Our goal is to use our knowledge of host-pathogen interactions to either prevent or treat these infections,” said Huber. “Work in our lab has demonstrated that vaccination against either the virus or the bacteria can limit the development of secondary bacterial infections, an outcome that requires further evaluation in clinical settings.”

Huber’s important research, and the research of his predecessors, is testimony that the wishes of Dr. Schwarz and his family in creating the professorship are being met. Researchers at USD are pursuing meaningful objectives, and significant findings have occurred and are happening that can contribute to an improved quality of life for all people.
Help over the hurdles

Nearly 25 years ago I began my journey as a medical student in the USD School of Medicine - Class of 1995. It was an exciting time, but there were many hurdles over those four years. My husband, Todd, and I were married in my first semester. Fifteen months later, after a long pregnancy with three months of bed rest, we had our first daughter, Kaitlin. She became sick and unfortunately died of Group B Strep sepsis shortly after birth. This was likely the most difficult thing I have ever had to face. But out of trials came a much more compassionate physician, who found a love for babies (hence I am a neonatologist today). Her short life changed mine forever. Twelve months later, we had another daughter, Shanna (again following a long battle with preterm labor and bed rest). Through it all, I was blessed by countless people who reached out to help. This Thanksgiving season I wanted to take the opportunity to thank them for being there for me.

Medical school is a challenging time for all who enter. The academics are rigorous. Students have overwhelming school debt, little to no income and even less free time. Yet life does not stand still during these years. Joys and hardships continue to come and go. Many of my classmates had hurdles to overcome as well (illnesses, surgeries, single parenthood, financial hardships, etc.). I was fortunate to receive a great deal of support from family, classmates, faculty and alumni including some I never had the chance to meet. Scholarships that were created by many generous benefactors helped relieve some of our burden and gave me encouragement to keep going despite many obstacles. So I would like to personally thank all those families who helped establish the scholarships I was fortunate to receive: Gerald H. and Jackie Lofgren, Alma Carlson, Mary W. Hanson, Dr. Constantine Flevares and Amelia Hirrschoff. On behalf of the hundreds of grateful medical students who receive financial support, thank you to ALL who give towards scholarship efforts. Whether you give individually or as part of a group like the Alumni Relations Council, your gifts make a big difference, often bigger than you will ever know.

Thank you for your help over the hurdles!

Gratefully,

Michelle Baack, '95 M.D.
President, Sanford School of Medicine Alumni Relations Council
Awards, Appointments & Honors

The Department of Family Medicine recently bestowed the following departmental awards:
• Megan Shuckman, M.D., Rapid City Family Medicine Residency Program teaching award
• Ben Liscano, M.D., Sioux Falls Family Medicine Residency Program teaching award
• Catherine Miller, CNP, Residency Teaching Faculty Award
• Charles Shafer, M.D., Educator & Scholar Award

The following SSOM medical students have been elected to national leadership positions within the AMA-Medical Student Section (MSS):
• Kelly Landeen, MS2: Member of Committee on Legislation and Advocacy (COLA) and Region 1 Vice-Chair
• Ben Meyerink, MS3: AAFP Student Representative to the AMA-MSS
• Collin Michels, MS3: Member of Committee on Medical Education (CME), served as 2014 Region 1 Vice-Chair
• Ben Meyer, MS4: Vice-Chair of Committee on Legislation and Advocacy (COLA), and Region 1 Delegate to the AMA House of Delegates

The Alpha Omega Alpha Class of 2016 inductees are:
• George Ceremuga, FARM site, Mobridge, now Rapid City campus
• Emily Gaster, Sioux Falls Campus
• Samantha Hersrud, M.D./Ph.D. Student, Rapid City Campus
• Bradley Iverson, Sioux Falls Campus
• Molly Soholt, Rapid City Campus
• Joseph Anderson, Sioux Falls Campus
• Joseph Coppock, M.D./Ph.D. Student, Sioux Falls Campus
• Jared Drenkow, Yankton Campus
• Alexandra Higgins, Sioux Falls Campus
• William McClain, Rapid City Campus
• Na Smith, Yankton Campus

Aaron Clem, fourth-year medical student, won the best poster abstract presentation at the Pediatric and Adult Interventional Cardiology Symposium (PICS-AICS) held in Las Vegas Sept. 18-21, 2015. Clem worked with a team including S. Awadallah, M.D., J. Srstka, B.A., and Z. Amin, M.D. Their work demonstrated the feasibility of using a visiting interventionalist to perform pediatric cardiac procedures.

LuAnn Eidsness, ’87 M.D. received an alumni achievement award from Augustana University on Oct. 21, 2015. A 1975 graduate of Augie, Eidsness was the first female chair of the Department of Internal Medicine in the Sanford School of Medicine, a position she has held for 14 years.

Keith A. Hansen, M.D., was awarded the SDSMA 2015 Distinguished Service Award on May 29, 2015 at the SDSMA Annual Meeting in Sioux Falls.
Stacy Kern, ’14 M.D., has been recognized as a national research award winner by the Society of Pediatric Research. Dr. Kern’s research addresses the impacts of maternal diabetes and fat intake on fetal health and the risk of cardiovascular disease in the developing offspring. Funding assistance for this research was provided by the University of South Dakota Sanford School of Medicine and Sanford Research. Dr. Kern worked with a team of research scientists in the Children’s Health Research Center in Sioux Falls.

Meg Hansen of the South Dakota Board of Medical & Osteopathic Examiners has been given the SDAHO Distinguished Service Award.

Curtis K. Kost Jr., R.Ph., Ph.D., associate professor of physiology and pharmacology in the Division of Basic Biomedical Sciences, received the Harry E. Settles Contributor of the Year Award from the Physical Therapy program of the USD School of Health Sciences for teaching Pharmacology courses to doctoral students in physical therapy.

Jason Lemke, M.S.Ed., was accepted into the 30th Class of Leadership Sioux Falls.

Jason Lemke, M.S.Ed., was named President-Elect of the South Dakota Association of Fundraising Professionals.

Ben Meyerink, Class of 2017, was appointed to be a member of the delegation to the AMA-MSS representing Region 1.

Terri Peterson-Henry has completed Hospice Medical Director Certification (HMDC).

Gary Timmerman, M.D., ’82 B.S.M.D. has been accepted as a Fellow in the Society of Black Academic Surgeons.

Dr. Henry Travers was elected to membership in the American Osler Society and appointed to its publications committee at the AOS annual meeting in Baltimore, Maryland, May 2015.

Dr. Henry Travers presided over the selection of two international fellows for the 2016 awards in September 2015.

The SSOM Frontier And Rural Medicine (FARM) program was recognized by Andean Health & Development with the “Improving Rural Health in the Americas” recognition award.

Gerald J. Yutrzenka, Ph.D., SSOM associate dean of diversity and inclusion, was recently appointed to a three-year term (November 2015–2018) as the national chair of the AAMC group on student affairs –Committee on Student Diversity Affairs (COSDA). As COSDA chair, Yutrzenka also serves as a liaison to the AAMC Group on Diversity and Inclusion (GDI) as well as occupies a seat on the national Steering Committee of the AAMC’s Group on Student Affairs (GSA). COSDA functions to provide guidance on medical student diversity, on a local, regional, and national basis, with respect to student recruitment, admissions, retention and graduation and contributes to efforts to diversify the nation’s physician workforce.

Gerald J. Yutrzenka, Ph.D., associate dean of diversity and inclusion, and Kathy Van Kley, SSOM Diversity Pipeline Programs, were the recipients of an $11,200 grant from the South Dakota Department of Health’s Office of Rural Health in support of the 2015 Health Care Career Summer Camp (HCSC). Now in its 9th year, the HCSC is a week-long camp that, through a combination of presentations, observation and hands-on activities, works to inform the 40 high school students, from South Dakota and
the surrounding region, about careers in health care profession.

In Memoriam

William Higgs ’65 B.S.M.D., Reno, Nevada, died on July 6, 2015.

Dean Larson ’78 B.S., ’82 M.D., Fort Myers, Florida, died on Sept. 3, 2015. He was a member of Sigma Alpha Epsilon.

Stephen Perlman, ’70 B.S.M.D., died on Jan. 28, 2015.

Publications


Stuart Inglis, Human Gross Anatomy instructor, along with medical students, published a case report on abnormalities they found during dissection: www.ejanatomyandembryology.edoriumjournals.com/archive/early_view_articles/04_A04_2015070007_CR_EV.pdf


Travers, Henry. edited volumes 1 and 2 of *The History of the World Association*.

Dr. Thomas Repas presented “Social Media and Medicine” at the American Association of Clinical Endocrinologists (AACE) 24th Annual Scientific and Clinical Congress in Nashville, Tennessee, in May 2015.

Dr. Henry Travers presented “William Osler and Stonewall Jackson: A Footnote to History” at the annual meeting of the American Osler Society in Baltimore, Maryland, May 2015.

Susan Anderson, M.D., and Edward Simanton, Ph.D. presented “Examining hospital-based learning needs of rural track LIC students,” at the CLIC conference.

Dr. Thomas Repas presented “Rumor Has It…Demystifying the Use of Basal Insulin in T2DM Management,” at CE symposium at the American Association of Diabetes Educators (AADE) 2015 Annual Meeting, New Orleans, Louisiana in August 2015.

Presentations

Honoring classes 1966, 1991 and 2006

SAVE THE DATE

University of South Dakota Sanford School of Medicine Alumni Reunion 2016
May 6, 2016

If you are interested in serving as a class agent or organizing a class-only social event, please contact Nicole Plesec at Nicole.Plesec@usd.edu or 605-357-1586.
Vision Statement of the University of South Dakota Sanford School of Medicine

The University of South Dakota Sanford School of Medicine will be a leader in educating students who with knowledge, skill, and compassion dedicate their lives to the well-being of their patients, their community, and their profession.

Mission Statement of the University of South Dakota Sanford School of Medicine

The mission of the University of South Dakota Sanford School of Medicine is to provide the opportunity for South Dakota residents to receive a quality, broad-based medical education with an emphasis on family medicine. The curriculum is to be established to encourage graduates to serve people living in the medically underserved areas of South Dakota, and is to require excellence in the basics sciences and in all clinical disciplines;

The University of South Dakota Sanford School of Medicine is to provide to its students and to the people of South Dakota excellence in education, research and service. To these ends, the school is to provide educational pathways leading to both the Doctor of Medicine and the Doctor of Philosophy degrees; and quality health care for the people of South Dakota is addressed by undergraduate, graduate and continuing educational programs as well as by basic and applied medical research;

The School of Medicine should serve as a technical resource in the development of health care policy in the state and provide extension and research initiatives to improve the health care of the citizens of the state.

Diversity Statement of the University of South Dakota Sanford School of Medicine

The University of South Dakota Sanford School of Medicine values diversity and its essential role in achieving the educational, scholarship, and service missions of the school. Therefore, the medical school is committed to both recruitment and retention of students, residents, faculty, and staff who through their diversity enrich the learning environment and promote inclusive excellence. We recognize diversity as relating to race, ethnicity, creed, rural background, socioeconomic status, gender, sexual orientation, age, and disability. In addition, we value persons with broad life experiences, with records of service to disadvantaged populations, and with other attributes that may enhance the learning community. The medical school has chosen three areas of emphasis on diversity to enrich the learning environment and promote inclusive excellence: American Indians, rural, and gender.

Mission Statement of the University of South Dakota Sanford School of Medicine Alumni Relations Council

The mission of the University of South Dakota Sanford School of Medicine Alumni Relations Council is to support the SSOM in the fulfillment of its mission and promote a mutually beneficial and enduring relationship between alumni and the School of Medicine, its students, residents, faculty and administration.