Discovering and sharing knowledge to advance health
MESSAGE FROM THE VICE CHANCELLOR AND DEAN

Dear Friends of UC Davis Health System,

I’m very pleased to share the 2006 Annual Report with you. As you read it, I hope you’ll agree that we are an institution on the rise in education, research, clinical care and community engagement – the four pillars of our strategic plan.

In regards to our core educational mission, I’m proud to announce the opening of our new Education Building and E. William Blaisdell, M.D., Medical Library on the Sacramento campus on Dec. 11, 2006. The new state-of-the-art facility will serve all four years of medical students, giving them the tools, opportunities and healthy learning environment they need to succeed as physicians and leaders in health.

Turning to research, our funding has reached an all-time high of more than $120 million, with nearly $87 million coming from the National Institutes of Health. (In the past five years, we jumped from 62nd to 44th in the NIH rankings of 123 medical schools.) In addition, we recently received one of the first 12 nationwide NIH grants to ensure that medical research remains focused on its end goal: improved patient care. This prestigious award allowed us to create our new Clinical and Translational Science Center, initially funded for five years at $25 million.

In terms of clinical care, our hospital has broken records this year for the number of patients we are serving. Importantly, our efforts in quality and patient safety are rising in tandem. We were recognized by the influential Leapfrog Group, who puts our Medical Center on its “top 50” list from a quality survey of 1,263 hospitals.

And, we continue to reach out to engage our community to work with us to improve public health and reduce health disparities in the geographically and culturally diverse region we serve.

In this year’s report, you’ll see a perfect example of how we’re leveraging our fourfold mission to advance health through our new Vascular Center, led by renowned interventional cardiologist John Laird.

Vascular disease impacts us all. High blood pressure, peripheral vascular problems, heart disease, obesity and diabetes affect more people every day. Minority communities are especially hard-hit, making our work here even more important.

Under Laird’s guidance, we have brought together outstanding vascular specialists, cutting-edge techniques and innovative, comprehensive and interdisciplinary approaches to care. This collaborative team of physicians, researchers and
community members is working together to understand and treat vascular problems from a broader perspective than ever before.

In the pages that follow, you’ll read about an endovascular specialist whose virtual training courses for new surgeons are resulting in better patient outcomes.

You’ll learn about a cardiologist who is reaching out to prevent heart disease among women-at-risk, especially the elderly, minorities and those living in rural areas.

And you’ll discover the many unique collaborations that are arising here at UC Davis. For example, a physicist and an endocrinologist are working side-by-side to use laser technology to understand cholesterol’s role in deadly atherosclerotic plaque formation. Their goal is to identify ways to diagnose vascular disease earlier, when it is most treatable.

All of these efforts are happening right here, right now, and it’s just the beginning.

I’m proud of what we’ve accomplished in the past year. Our future is exciting because of the people who work here and the individuals in our community who support us. Together, we bring caring and hope to those we serve.

I am convinced that our new Vascular Center’s efforts – and, in fact, the efforts of the entire UC Davis Health System family – will continue to uncover global solutions that help patients everywhere.

Sincerely,

CLAIRE POMEROY, M.D., M.B.A.
Vice Chancellor, Human Health Sciences
Dean, School of Medicine
New medical center CEO optimistic about future

Ann Madden Rice, a health-care executive with a strong track record in hospital operations and financial management, took over the helm as chief executive officer at UC Davis Medical Center in October.

Formerly the chief operating officer at the University of Iowa Hospital and Clinics, Rice was selected for the UC Davis position after an extensive nationwide search. As CEO of UC Davis Medical Center, she oversees the 577-bed, acute-care hospital and its affiliated outpatient centers, including a primary care network of physician practices in 10 Northern California communities.

Rice was attracted to the health system’s vibrant vision to advance both the science and humanity of medicine. “I am delighted to have joined this community and to continue the mission of providing exceptional care in a state-of-the-art clinical setting and preparing tomorrow’s generation of caregivers and scientists who will deliver even greater medical advances,” she said.

Rice is a fellow of the Healthcare Financial Management Association and a diplomat of the American College of Healthcare Executives. She also was an instructor at the University of Iowa College of Public Health. She received her bachelor’s degree in industrial administration in 1979 from Iowa State University and her master’s degree in accounting in 1983 from the University of Iowa.

“Ms. Rice is known for her ability to collaborate with a wide array of individuals and organizations. She is deeply committed to serving the community and supporting our academic missions,” said Vice Chancellor and Dean Claire Pomeroy. “Her expertise will serve us well as we meet the growing health-care needs of Northern California and beyond.”

Prohibiting receipt of gifts, samples from pharmaceutical companies

Joining a nascent national movement, UC Davis Health System has adopted new measures to reduce the influence of the pharmaceutical market on physicians and other staff. The new measures, which become effective July 1, 2007, ban health system employees from accepting free drug samples, food, beverages, pens, notepads and other marketing items, and bar sales representatives from serving in preceptorships at the health system. A Vendor Relationships Subcommittee has been established to review and recommend policy changes for all potential conflicts of interest in relationships with vendors, including equipment manufacturers, implant and device suppliers, medical supply providers, pharmaceutical suppliers, and others.
Biophotonics headquarters dedicated

Researchers affiliated with the UC Davis Center for Biophotonics Science and Technology have a new, state-of-the-art facility to investigate the use of light in biology and medicine. Dedicated in January 2006, the Oak Park Research Building serves as a research hub for the National Science Foundation-funded center, which includes roughly 100 investigators at nine institutions across the United States.

Education Building now open

Medical students attended their first classes in the new Education Building in January 2007. The state-of-the-art, four-story building, which includes the F. William Blaisdell, M.D. Medical Library, unites all four years of classes into one central location, providing students with a more collaborative and dynamic educational environment. Located on the UC Davis Sacramento campus, the 121,000-square-foot building includes an expanded library, classrooms, lecture halls, clinical skills training and assessment facilities, computer labs, and small- and medium-sized teaching rooms.

Expanding outpatient services

UC Davis Health System and Catholic Healthcare West, which locally operates Mercy hospitals, are developing a joint outpatient medical facility to bring more physicians, medical technology and primary- and specialty-care services to Lincoln, Rocklin and Roseville in South Placer County, one of the fastest growing areas in California. Known as the Placer Center for Health, the new 66,000-square-foot facility will provide each organization offices for primary- and specialty-care services and share access to an outpatient pharmacy, clinical laboratory and array of diagnostic imaging services. Construction is under way.

Classes began in the new Education Building in 2007.
Rethinking standard HIV therapy

Satya Dandekar, professor and chair of medical microbiology and immunology, and her team of researchers have discovered that the human immunodeficiency virus, the virus that causes AIDS, is able to survive efforts to destroy it by hiding out in the mucosal tissues of the intestine. They also found that HIV continues to replicate in the gut mucosa, suppressing immune function in patients being treated with antiretroviral therapy – even when blood samples from the same individuals indicated the treatment was working. Her study, published in the Journal of Virology, suggests that patients being treated with antiretroviral therapy should be monitored using gut biopsies and that the gut’s immune function be restored through earlier antiretroviral treatment and the use of anti-inflammatory medications.

Volume control for nerve cells

James Trimmer, professor of medical pharmacology and toxicology, and his team of researchers have discovered that proteins that regulate brain-cell activity by controlling the flow of potassium ions behave more like volume controls on stereos rather than on/off power switches. The research, published in the journal Science, provides a new model for the behavior of critical gatekeeper proteins found in neuronal membranes and is the first to combine mass spectrometry-based proteomics and ion channel biophysics to the study of living brain cells.

Stem cell experts recruited

Renowned human stem cell researcher Jan A. Nolta joined UC Davis as director of the university’s new stem cell research program, while her colleague, Gerhard Bauer, serves as the program’s specialized cell and gene therapy laboratory director. Nolta and Bauer are based on the UC Davis Sacramento campus, where new state-of-the-art stem cell research facilities are being built. Nolta was scientific director for Washington University’s cell processing and gene therapy, Good Manufacturing Practice facility. Bauer was at Washington University’s Siteman Cancer Center and has extensive experience in developing clinical applications of cellular therapies.

Making electronic pacemakers obsolete

Ronald Li, an associate professor of cell biology and human anatomy, is bioengineering cells that may one day provide a more permanent, reliable and less invasive alternative to the electronic pacemaker. His most recent research is bringing that goal closer to a reality. Leading an international team of scientists from UC Davis, the University of Hong Kong and Johns Hopkins University, he custom-designed and tested a...
protein and gene-delivery system that successfully restored normal heart rhythms in pigs, reducing their dependence on the implanted device. More than 2.2 million Americans are affected by irregular heartbeats, and more than 250,000 have artificial pacemakers implanted each year.

**Secondhand smoke damage to lungs of unborn, infants**

A team of UC Davis researchers described in unprecedented biochemical and anatomical detail how cigarette smoke damages the lungs of unborn and newborn children. The findings, published in the *American Journal of Respiratory and Critical Care Medicine*, illustrate with increased urgency the dangers that smokers’ families and friends face, and provide further proof that secondhand smoke’s effects on children are not minor, temporary or reversible. The authors, who include pediatric lung specialist Jesse Joad, urge pregnant women to avoid exposure to secondhand smoke, and caution parents to protect their children from cigarette smoke.

**Tamoxifen doesn’t benefit most women with breast cancer risk**

The research of Joy Melnikow, professor of family and community medicine, has found that most women at high risk for breast cancer do not increase their life expectancy by taking the drug tamoxifen. It also shows that the drug is an extraordinarily expensive cancer-prevention strategy, costing as much as $1.3 million per year of life saved. Her study, conducted with colleagues at UC Davis, UC San Francisco, the University of Pittsburgh and McMaster University in Ontario, Canada, and published in the journal *Cancer*, suggests that the current counseling guidelines for physicians to recommend tamoxifen should be revised.

**Molecule that targets leukemia, lymphoma cells found**

Kit Lam, professor and chief of hematology and oncology at UC Davis Cancer Center, has developed a novel peptide that binds to the surface of leukemia and lymphoma cells with extremely high affinity, specificity and stability, and demonstrates remarkable promise as a tool to help image tumors and deliver anti-cancer drugs. The research was published in *Nature Chemical Biology*.

Kit Lam’s research brings promise for cancer treatment.

**M.I.N.D. researchers continue to search for autism clues**

UC Davis M.I.N.D. Institute researchers have found that the brains of males with autism have fewer neurons in the amygdala, a part of the brain involved in emotion and memory. The study, published in the *Journal of Neuroscience*, is the first neuroanatomical study to quantify a key difference in the autistic amygdala. David Amaral, research director, and former graduate student Cynthia Mills Schumann counted and measured neurons in the amygdala of brains of males who had autism and compared them to brains of males who did not have autism. They found significantly fewer neurons — cells responsible for creating and transmitting electrical impulses — in the whole amygdala and its lateral nucleus in the brains of people with autism.

M.I.N.D. researchers also launched the nation’s most comprehensive assessment of children with autism to detect the biological and behavioral patterns that define subtypes of the disorder. The Autism Phenome Project will enroll 1,800 children with and without autism who will undergo a thorough medical evaluation in addition to systematic analyses of their immune systems, brain structures and functions, genetics, environmental exposures and blood proteins. Children will be 2 to 4 years old when they begin participating in the study, and their development will continue to be evaluated over the course of several years.
Susie Durant is at risk. The 67-year-old great-grandmother has high blood pressure, high cholesterol and a family history of heart disease. Plus, she is African-American, an ethnic group prone to cardiovascular problems.

It’s not fazing her much. When she learned about her blood pressure, she started exercising. And when she learned about her cholesterol, she changed her diet. Throughout it all, she continued to plan for the future. Presently, she is a full-time accounting student at American River College in Sacramento.
Born in Louisiana and a resident of California since she was a teenager, Durant admits to suffering from hypertension but insists that at 193 pounds she is not overweight. She said she has never experienced any indication of heart trouble, such as chest pain, and didn’t even know about her high cholesterol until she had a blood test a couple of years ago. “I’ve never had any symptoms,” Durant said.

Durant is hardly alone. Cardiovascular disease typically does its damage silently, and despite the best efforts of medical science, heart attacks and strokes remain the number-one and number-three leading killers of Americans today. While American Heart Association estimates show that deaths from cardiovascular disease fell 22.1 percent between 1993 and 2003, the bad news is that cardiovascular disease still claims twice as many lives as all cancers combined.

To reduce the number of deaths from heart disease, UC Davis physicians have teamed up with physicists at Lawrence Livermore National Laboratory to discover better ways of monitoring the
activity of cholesterol, triglycerides and other lipoprotein components in the blood, which play a key role in atherosclerosis, the hardening of blood vessels due to plaque formation.

“We know some of the first metabolic changes that lead to plaque formation occur in adolescence, yet there are no biological markers that allow physicians to accurately diagnose and prevent the eventual progression of disease at this early stage,” said John Rutledge, professor and chief of endocrinology, clinical nutrition and vascular medicine at UC Davis Health System.

“Our goal is to use lasers to develop a more sensitive clinical test to identify specific lipoproteins in the blood that lead to first deposits of plaque. Armed with this information, physicians could diagnose patients decades before clinical symptoms develop and begin aggressive intervention to prevent, or even reverse, disease.”

One of the major technical challenges has been the inability to visualize and dissect an inherently complex and dynamic process, which involves cells of the blood vessel wall, soluble lipoprotein particles, and cells of the immune system. But a new light-based technology called Laser Tweezer Raman Spectroscopy (LTRS) is allowing UC Davis scientists to characterize and distinguish individual cells and their components more closely and more thoroughly than has been possible using traditional biological methods.

Thomas Huser, a biophysicist at Lawrence Livermore and an associate professor of internal medicine at UC Davis, is a specialist in LTRS. He is collaborating with Rutledge to study the many lipoproteins that circulate in the blood to better understand their individual role in the development of atherosclerosis.

“We’re using laser light to optically suspend lipoproteins so they can be sorted by their chemical makeup,” said Huser. “Our ultimate goal is to identify specific lipoproteins in the blood that accurately predict the early onset of heart disease.”

For the novel spectroscopy studies, the researchers work with plasma from patient blood samples and analyze a suspension containing lipoproteins in a special laser microscope developed by Huser and colleagues. They specifically measure the amount of light scattered by molecular bonds in a lipoprotein particle – its Raman signal. As each lipoprotein emits a unique signal that reflects its biochemical makeup, the researchers are able to identify, sort and biophysically characterize them.

By evaluating blood samples from patients before and after they eat a meal with known quantities of saturated and unsaturated fats, they also are able to see how fat in the diet altered Raman signals.

“Until now, lipoproteins have only been studied in massive quantities,” said Huser. “Standard tests ordered to measure cholesterol levels, for example, are purely biochemical. They only measure the proportion of lipoproteins. The ability to distinguish individual lipoprotein chemical signatures and determine which ones have the greatest effects on the blood vessel wall has important research and clinical implications.”

More detailed studies will likely give scientists a better idea about how some kinds of lipoproteins, such as low-density lipoproteins, form artery-clogging plaques while other types, such as high-density lipoproteins, seem to prevent them. The eventual goal, Rutledge said, is to be able to stratify people into groups with varying risks of disease.

While the current technology will aid in more detailed studies of lipoproteins, it currently is too slow to perform clinical tests. “We are working with industry to automate this technique,” said Rutledge, who is also co-vice chair for research in internal medicine and holds the Richard A. and Nora Eccles Harrison Endowed Chair for Diabetes Research.

Huser added that the team of researchers intends to study blood samples from patients with cardiovascular disease using LTRS and compare them to healthy patients to look for other potential biomarkers. This work has already begun, and
Huser said he already has seen some promising candidates for new biomarkers.

“We have good evidence,” Huser said, “but we need to perform more clinical studies that include a more diverse patient population before we know for sure whether we have found a better predictor of heart disease.”

The newly established Tatarian professorship is funding research that may lead to novel treatments for cardiac arrhythmias – malfunctions in the electrical impulses to the heart.

Among people with heart ailments, sudden cardiac death due to abnormalities in cardiac rhythm is one of the most frightening prospects. Despite the availability of medications for various heart conditions, few drugs are effective for treatment of cardiac arrhythmias.

UC Davis research physician Nipavan Chiamvimonvat, a specialist in cardiac rhythm abnormalities, is investigating the cellular and molecular mechanisms leading to arrhythmias. She is conducting electrophysiological studies of membrane proteins implicated in irregularities in cardiac rhythm.

Chiamvimonvat holds the Roger Tatarian Professorship in Cardiovascular Medicine, established this past May by the estates of H. Roger and Eunice Elizabeth Tatarian of Fresno. Eunice died in 2005. Her husband, Roger, who had been editor-in-chief of United Press International as well as a Fresno Bee columnist, had died 10 years earlier.

Endowed professorships, which can be established with a gift of $1 million or more, provide a continual source of funding for a designated program through interest earnings. The Roger Tatarian Professorship financially supports Chiamvimonvat’s effort to develop a multidisciplinary and collaborative research initiative in cardiovascular biology at UC Davis.

Chiamvimonvat hopes such a program will lead to development of new treatments for cardiac arrhythmias. Her initiative embodies training of undergraduate and graduate students and research fellows to encourage them to further advance cardiovascular medical research.

A color-enhanced angiogram of the heart shows a plaque-induced obstruction (top center) in a major artery, which can lead to a heart attack.
In October, the National Institutes of Health named UC Davis as the recipient of a prestigious grant that will transform how clinical and translational research is conducted, enabling researchers to provide new treatments more efficiently and quickly to patients.

The NIH Clinical and Translational Science Award is the centerpiece of the NIH’s new roadmap initiative to ensure that basic research results in real advances for patient care. UC Davis will receive $24.8 million over the next five years to expand the innovative and collaborative components of its research enterprise and to establish UC Davis’ Clinical and Translational Science Center.

In awarding the grant to UC Davis, NIH highlighted the university’s strengths in three key areas:

- Its innovative telecommunications technology, which has evolved into one of the broadest efforts in the world to reach geographically dispersed and ethnically diverse populations;
- Its collaborative culture, which has fostered one of the most extensive and interdisciplinary life science environments in the country; and
- Its UC Davis Clinical Research Investigator Services Program (CRISP), where solutions to some of the barriers that prevent the translation of research gains into medical practice have been explored and tested.

The new center has an organizational structure that is researcher-friendly and incorporates the best features of existing partnerships.

A $24.8-million award will speed development, delivery of discoveries to patients
The UC Davis Clinical and Translational Science Center is a place where experts in fields ranging from engineering to pediatrics will find it easier to work together to discover better ways of treating and curing disease.

The center incorporates other UC Davis strengths, including extensive collaborations across UC Davis colleges, centers and academic departments, and strong relationships with institutional partners, such as the U.S. Department of Veterans Affairs Northern California Health Care System, Lawrence Livermore National Laboratory and Shriner’s Hospital for Children. It also features an expanded community engagement program emphasizing trust and respect and the use of tele-technology to reach diverse patient populations.

Lars Berglund, a physician-scientist and associate dean for clinical and translational research, is director of the center. Jill Joseph, professor of pediatrics, is associate director. The center is supported by a team of directors and co-directors, each of whom oversees nine programs and participates in a comprehensive committee structure to implement plans with institutional leadership, faculty, trainees, partner institutions and the community.
Research at UC Davis Health System relies heavily upon grants and philanthropic support. Contributions typically enhance existing research projects, but some substantial donations underwrite entire programs. That’s what a gift from the RDM Positive Impact Foundation has done.

RDM stands for Ron and Darin Mittelstaedt, an El Dorado Hills couple who created and wholly fund the foundation. They have allocated $300,000 per year for as long as five years — potentially totaling $1.5 million — to fund a new Tourette’s syndrome project within the UC Davis M.I.N.D. Institute, which was created to investigate neurodevelopmental disorders.

Led by Frank Sharp, an internationally renowned clinical neurologist and neuroscientist with the M.I.N.D. Institute, the ambitious project will include research and clinical components. Sharp’s research team seeks to develop blood tests that can distinguish between different types of Tourette’s syndrome and to identify the causes and treatments for different types of the disorder.

The Mittelstaedts’ involvement resulted from Ron’s participation as a member of the M.I.N.D. Institute Board of Directors. He had been invited to join the board because of his business acumen and commitment to the community. Mittelstaedt is founder, chairman and chief executive officer of Waste Connections Inc.

Finding common ground: Ron and Darin Mittelstaedt, parents of a son with Tourette’s syndrome, bonded with UC Davis M.I.N.D. Institute neuroscientist Frank Sharp, right, who also has a child with the disorder.
Mittelstaedt learned that Sharp is the father of a teenage girl who has the disorder. The girl is about the same age as Mittelstaedt’s elder son, Bradley, 14, who also has Tourette’s. He and Darin believed that Sharp’s research is leading to answers for those with Tourette’s.

“The relationship developed over many meetings and months,” said Mittelstaedt. “I asked Frank to tell me what he needed and how quickly he expected to proceed.” Mittelstaedt specified that any gift the couple made would be predicated on development of a business plan for the project, which he devised with Sharp and Robert Hendren, the M.I.N.D. Institute’s executive director.

The RDM Foundation gift, along with a $100,000 grant from the Tourette’s Syndrome Association, augments the salaries of seven participating researchers. The gifts also fund psychological testing, data management, blood draws and laboratory supplies.

Sharp, principal investigator, designed the studies and supervises the data analyses. He says that Tourette’s patients encounter severe difficulty in planning and completing tasks, including school work.

Bradley, whose nonverbal tics are largely controlled with medication, likely will volunteer for the research study even though his father does not expect him to benefit from it.

“The realistic chances that this study might directly help Bradley are low,” Mittelstaedt concedes. Nevertheless, he finds the project compelling. He believes Sharp’s understanding of Tourette’s transcends the clinical setting and encompasses the ways in which it affects social interactions and other functions of day-to-day living.

“Darin and I were drawn to the research study because it will be conducted by an individual who has deep personal interest, who knows how Tourette’s manifests itself in every aspect of the emotional lives of young patients as well as the members of their families,” Mittelstaedt said. “Doctors don’t ordinarily see that in a half-hour visit, but Frank Sharp, who lives with it, does. And I’m encouraged by the motivation that will bring to this project.”

Tourette’s syndrome is a neurological disorder that produces recurrent “tics,” including rapid eye blinking, grimaces or other involuntary body movements, or uncontrolled grunts or verbal outbursts. The disorder is commonly associated with obsessive-compulsive disorder and attention deficit hyperactivity disorder, and many Tourette’s patients encounter severe difficulty in planning and completing tasks, including school work.

The UC Davis M.I.N.D. Institute is dedicated to finding better treatments – and ultimately a cure – for neurodevelopmental disorders like autism and Tourette’s syndrome.
As a surgical fellow, Kevin Patel assisted in many open-heart and other vascular surgeries. But it was not until he attended a simulation-based training course at UC Davis’ Center for Virtual Care that he felt he really understood the less-invasive procedure known as endovascular surgery. The technique treats two major problems in blood vessels: aneurysms and occlusions.

“Before the course, I had been exposed to only a few endovascular cases,” said Patel, a vascular surgery fellow at the University of Southern California. “I really wasn’t that familiar with the technology or the instruments, so coming to Sacramento and getting hands-on training with UC Davis’ life-like
The unique Vascular Surgery Fellows’ Endovascular Training program was largely developed by David Dawson, associate professor of vascular and endovascular surgery and member of the new UC Davis Vascular Center, and his colleagues William Pevec and Eugene Lee. The program is made possible in part by educational grants from Boston Scientific Corp., which has contributed approximately $100,000 over the past three years. Thanks to this support, Dawson, Pevec and Lee helped create a regional training facility within the Center for Virtual Care for physicians like USC’s Patel, who want to expand their capabilities but have limited opportunities within their own institutions.

The center currently includes several high-tech simulation rooms, where UC Davis medical students, nurses, emergency medical personnel and physicians practice a variety of trauma, emergency or surgical procedures on sophisticated training mannequins.

The Vascular Surgery Fellows’ Endovascular Training Program provides a realistic setting for trainees to develop critical-thinking skills and learn a variety of endovascular techniques that are used in a real-time simulation of blood vessel disease.
Dawson and his colleagues saw the opportunity to expand the training of physicians beyond UC Davis Health System. The endovascular training program is convenient, inexpensive and only requires two days of a participant’s time. Its reputation has attracted young surgeons from UC San Francisco and Stanford, as well as from Southern California, Arizona, Oregon, Utah and Washington.

“More and more often, doctors need to develop new skill sets that are image-driven,” said Dawson. “I realized we were ideally positioned to fill a unique niche by offering complex medical training in endovascular procedures.”

Whereas traditional vascular surgery involves open surgery to repair blocked or weakened arteries and veins, endovascular repair involves a small incision in the skin, the placement of catheters, the insertion of stents (small, mesh-like tubes) to bypass aneurysms or balloons that inflate to open blocked vessels. Physicians must operate remotely, watching the movement of their tiny instruments and equipment on a video monitor.

UC Davis’ state-of-the-art, computer-controlled simulators create realistic scenarios for a surgeon. A patented mannequin called “Simantha” creates distinct and unique “clinical” experiences for each endovascular surgery fellow, all based on that individual’s response time, actions and decisions. The realistic environment allows users to “feel” lesions in blood vessels and hear patients talk about symptoms and comment during procedures.

Simulation training also allows physicians to gain experience and confidence in a realistic and safe environment, while providing the opportunity to practice a number of technical and problem-solving skills. According to Dawson – who gained an appreciation for simulation technology while in the Air Force and on a tour of duty with NASA – the system provides more opportunities to encounter and manage complications, such as stroke and other surgical issues, than are commonly seen in clinical practice.

“Our simulators can introduce layers of physiologic complexity, such as high blood pressure, that trainees need to monitor and treat medically,” said Dawson. “Even for experienced interventionists,
Nearly 12,000 physicians, technicians and other specialists observed UC Davis vascular specialists John R. Laird and Reginald Low, along with some of the world’s other leading endovascular interventionalists, perform live surgeries in October 2006 for the Transcatheter Cardiovascular Therapeutics meeting, the largest interventional cardiology conference in the world.

The presentation of 100 live surgical cases from around the world was the main feature of the 2006 TCT meeting in Washington, D.C. UC Davis Health System was among the nearly 30 medical institutions from 10 countries whose surgeons were invited to perform procedures broadcast to the TCT attendees at the Washington Convention Center.

Operating from the cardiac catheterization labs at UC Davis Medical Center, Laird and Low performed a repair of degenerated vein grafts on patients who had undergone coronary artery bypass graft surgeries previously at other hospitals. They used newly designed stents to protect the patients from plaque (fatty deposits) breaking off and traveling to downstream blood vessels, where they could possibly cause a heart attack.

They also performed procedures on patients with peripheral arterial disease, also known as atherosclerosis or hardening of the arteries. One patient had a severe blockage in the abdominal aorta, the main vessel carrying blood to the legs. The other had a severe blockage in a femoral (thigh) artery. Laird and Low used a new laser catheter to improve blood flow to the legs and allow the patients to walk farther without pain.

Following the completion of their live cases, Laird and Low provided a quick review of their cases and long-term prognoses for their patients.
simulation can be a tool to help refine techniques, gain experience with challenging anatomy or learn some new technique for managing specific situations."

Beyond just a high-tech way to learn, research suggests that simulation training does offer an efficient and effective way to enhance a surgeon's skills. A recent study from England indicates that it appears especially helpful for inexperienced surgeons who want to expand their endovascular interests. A pilot study done by Dawson in 2004 reported that trainees found the simulators a positive addition to traditional teaching methods and clinical experience.

Dawson is evaluating recent results of the endovascular program, which has provided training to more than two dozen surgery fellows from around the West. A preliminary analysis suggests that simulator training improves various endovascular skill sets for surgeons, including reducing the length of procedure times and improving the ability to choose appropriate instruments. Trainees also were faster at responding to adverse events programmed into the simulation and better at using proper amounts of surgical contrast agents when completing procedures.

“To be a leader in simulation-based endovascular training here in the western United States, we need to show what we’ve accomplished and what we can do. Scientific evaluation of our methods and results helps us do just that,” Dawson said.

In March, Dawson presented his group's findings at the Annual Meeting of the Society for Clinical Vascular Surgery. The study was accepted for publication last fall in Vascular Surgery.

Being part of the next generation of surgeons means being trained in what many call the surgical wave of the future: minimally invasive techniques that involve the use of specialized instruments, tiny incisions, and guidance via computer monitors. For Kevin Patel, that wave began at UC Davis.

“Minimally invasive surgery was something completely foreign to me,” said Patel. “But unless you can get hands-on experience, you really don’t really know what it’s about. Those days in Sacramento made all the difference and I’m glad USC sent me to Sacramento because the program at UC Davis was an incredibly effective way for me enhance my skills.”

Simulation training offers a risk-free environment for learning such complex skills as balloon angioplasty and stent implantation.
Cold, wet and immobilized by a broken back, Susanne Lam spent close to two hours shouting for help after falling off a slope into a creek while snowboarding. After her rescue, the then second-year UC Davis medical student faced months of physical therapy and possible neurosurgery.

Yet Lam didn’t let her injury get her studies off track. She worked with School of Medicine staff to study at home. Her fellow students helped considerably, even proctoring exams at her home.

Now back at school, Lam is on schedule to fulfill her dream of becoming a doctor. Her tenacity and drive were recognized by the UC Davis Health System Leadership Council, which awarded her with one of four $3,200 scholarships at its annual “Evening with Medical Students” dinner. Medical students Roxanne Aga, Matthew Fentress and Onkar Singh Judge also were recipients.

The UC Davis Leadership Council is a volunteer group from the community committed to building awareness of and support for the health system. The council’s scholarships are one-year stipends that recognize a student’s extraordinary commitment to education and medicine. The awards help relieve the massive tuition burden for students, most of whom will graduate with a debt of $100,000 or more.

“The Leadership Council knows that scholarships are vital to helping students fulfill their dreams of becoming physicians and serving their community,” said Vice Chancellor and Dean Claire Pomeroy. “The council provides much-appreciated support, encouragement and inspiration for tomorrow’s health-care leaders.”

In addition to the Leadership Council scholarships, longtime member and retired radiologist Daniel Terry and his wife Virginia presented third-year medical student Katharine Willoughby with a $10,000 scholarship.

Suzanne Lam also was surprised with the Deans’ Scholarship, an annual award given to a medical student who has demonstrated exemplary courage and dedication to overcome special circumstances in his or her journey to become a physician. The scholarship is supported by contributions from deans and other health system leaders.

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Suzanne Lam also was surprised with the Deans’ Scholarship, an annual award given to a medical student who has demonstrated exemplary courage and dedication to overcome special circumstances in his or her journey to become a physician. The scholarship is supported by contributions from deans and other health system leaders.

Gold, wet and immobilized by a broken back, Susanne Lam spent close to two hours shouting for help after falling off a slope into a creek while snowboarding. After her rescue, the then second-year UC Davis medical student faced months of physical therapy and possible neurosurgery.

Yet Lam didn’t let her injury get her studies off track. She worked with School of Medicine staff to study at home. Her fellow students helped considerably, even proctoring exams at her home.

Now back at school, Lam is on schedule to fulfill her dream of becoming a doctor. Her tenacity and drive were recognized by the UC Davis Health System Leadership Council, which awarded her with one of four $3,200 scholarships at its annual “Evening with Medical Students” dinner. Medical students Roxanne Aga, Matthew Fentress and Onkar Singh Judge also were recipients.

The UC Davis Leadership Council is a volunteer group from the community committed to building awareness of and support for the health system. The council’s scholarships are one-year stipends that recognize a student’s extraordinary commitment to education and medicine. The awards help relieve the massive tuition burden for students, most of whom will graduate with a debt of $100,000 or more.

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One of UC Davis medical students’ biggest supporters was longtime Leadership Council member Hank Fisher, who passed away in August 2006. Fisher was instrumental in starting the Leadership Council Scholarship Endowment Fund.

“He was very interested in helping young UC Davis medical students who needed financial support to get through medical school,” said his wife, Nancy. “He would become very emotional when reading scholarship applications from medical students. He just couldn’t believe how some applicants had overcome incredible challenges in their lives and still had the drive to go through medical school.”

Fisher’s goal was to continue to build the Scholarship Endowment Fund so that many more UC Davis medical students could receive considerable tuition assistance.

“He worked hard to build the fund to what it is today,” Nancy said. “He would be so pleased and proud to see how the fund is becoming a significant source of support for them.”
Even though Lois Taylor felt no pain and was not aware of the problem, her daughter, Frankie Gonzales, saw that her mother's right leg and foot were extremely swollen, and the skin below the knee was cracked and draining fluid.

“Her toes were as black as black could be,” Gonzales said.

Gonzales was so concerned that she scheduled an appointment for her mother, 89, with her doctor, who referred Taylor to the UC Davis Vascular Center. There, David Dawson, an associate professor in the Division of Vascular and Endovascular Surgery, determined that she had very poor arterial circulation and,
John R. Laird, medical director of the UC Davis Vascular Center, is highly regarded for his work with endovascular treatment of peripheral artery disease.

as a result, had an ulcer that would not heal.

“Without more blood flow to the foot,” Dawson said, “a major amputation was inevitable.”

Despite the seriousness of her condition, Taylor insisted that she would not have it treated if hospitalization or major surgery were necessary. After assuring Taylor that he would try to address her problem with a minimally invasive procedure, Dawson performed an arteriogram, which showed extensive arterial disease. He also performed an angioplasty of Taylor’s posterior tibial artery, to improve her circulation.

Physicians at the UC Davis Vascular Center help patients like Taylor by using techniques that eliminate the need for major surgery and produce excellent outcomes.

“As new endovascular technologies have expanded, minimally invasive surgery to correct vascular disease has grown exponentially,” said John R. Laird, an internationally renowned interventional cardiologist and leader in the field of peripheral vascular intervention. He joined the UC Davis faculty last July to direct UC Davis’ new vascular center. “The demand and need for these kinds of procedures are sure to continue growing, as the baby-boom generation ages.”

The UC Davis Vascular Center provides state-of-the-art vascular care and promotes collaboration among the different specialties involved in treating patients with vascular disease. The center applies both established and

UC Davis alum Low heads up Cardiovascular Medicine program

A key member of the UC Davis Vascular Center team is Reginald Low, professor and chief of the Division of Cardiovascular Medicine. Low is a nationally recognized clinical investigator in cardiology who incorporates the best of leading-edge technology with the highest quality of patient care. His research focuses on coronary artery disease and developing minimally invasive methods of diagnosis and treatment.

Low joined UC Davis Health System in 2000 after serving as director of the Mercy Heart Institute in Sacramento. Low is a former UC Davis medical student, intern, resident and fellow.

He has a specific interest in using new, less-invasive diagnostic modalities to examine coronary arteries. Low also has been involved in the development of percutaneous coronary revascularization, a family of techniques that re-establish blood supply to the heart by using standard balloon angioplasty, intracoronary stenting and other approaches.
emerging diagnostic and therapeutic methods, increasing efficiency and reducing risks to patients. Among the specialties participating in the center are vascular surgery, cardiology, interventional radiology, endocrinology and nephrology.

“This center brings together a number of components that have traditionally been separated,” said Laird. “The many facets of a patient’s vascular disease will now be addressed as the systemic disease that it is, instead of being treated separately by various units. Through collaboration, we will exponentially improve the care we can provide.”

Laird’s clinical practice focuses on interventions for carotid artery disease, aortic aneurysm, renal artery disease and peripheral artery disease. His many areas of leadership and innovation include advancing the use of lasers in angioplasty. UC Davis Health System has acquired a laser, which allows the Vascular Center to perform laser atherectomies.

Treatments offered through the UC Davis Vascular Center include medical therapies, surgery and a variety of minimally invasive endovascular techniques, such as angioplasty using conventional balloon catheters, specialized cutting balloons and cryoplasty. Plaque removal with rotational or directional atherectomy and stent placement, using bare metal or covered stents, are other techniques used. The UC Davis experience with these minimally invasive techniques has been positive, with most patients returning home in less than 24 hours.

That’s good news for patients like Lois Taylor. Today, the ulcer on her leg is healed and “the swelling has gone down considerably,” she said. She continues living independently, more than a year after the procedure.

Near the end of her life, Margaret “Peggy” Humm told her two daughters something that “blew us away,” as one of them put it. She had given the UC Davis Hospice Program $50,000 to establish an endowment in memory of John Edward Humm, her son and their brother, who had died in 1999 at age 44 after an extended illness.

Had John outlived his mother, the money would have been his inheritance. Since he died before her, she decided to donate his portion of her estate to the university. Her daughters were surprised and impressed that their mother, a quiet woman who largely kept to herself, had done something so altruistic.

“It’s a nice surprise when one of your parents thinks outside the box of family to help others,” said Debra Fasolo.

Frederick J. Meyers, the hospice program’s longtime medical director, said that the program provides care for terminally ill patients who wish to remain at home. Donations to the program, including the money from the endowment made possible by Peggy Humm, support the training of faculty and staff in end-of-life care.

It also will help support an effort to expand services to a program that presently has 100 patients enrolled at any one time. Initially set up to provide care to those terminally ill with AIDS and cancer, the program is now improving access for patients with life-threatening illnesses such as heart and liver disease, Lou Gehrig’s Disease and Alzheimer’s, Meyers said. The program also serves children suffering from potentially terminal illnesses.

When asked why Humm made her donation, Meyers – noting that hospice provides unreimbursed care – said she “wanted to help patients in need who don’t have lots of resources.”
Her motivation was a little more puzzling to her daughters – but then they have long been puzzled by their mother, who lived in a well-kept home near Roseville.

Fasolo’s sister, Vickie Neves, went so far as to say that her mother’s reserved nature made her somewhat “mysterious.”

“You never knew what mom was thinking,” said Neves. As an example of how private she was, Neves said her mom never told anyone – even family members – how old she was. This didn’t change until the end, when her health was failing and Neves said she began to open up. (Humm was 64 when she died in November 2005 of liver disease.)

Humm’s tendency to keep her own counsel may have had something to do with what her daughters and a friend described as a difficult childhood. When she was 12, she was sent to a Catholic boarding school in her home state of New York. Her memories of that time were not particularly pleasant, recalled family friend Nancy Sills.

“They were really strict,” Sills said. But Humm had a talent – she was a whiz on roller skates. She was so good that after boarding school she competed in the roller derby circuit in her late teens. It was a high time for her. Not only did she travel the country, she traveled the world, skating with a club that toured Europe, Australia and other far-flung places.

Here again, her past throws light on a trait that became pronounced later in life – the fact that she was a homebody. Stability – and happiness – soon arrived for young Peggy in the form of a milkman named John Humm. She got to know him while he made deliveries to a Southern California donut shop that she was working in.

The two eventually married and were virtually inseparable the entire time they were together.

When her husband became ill with cancer – a disease to which he succumbed in 1995 – Humm had her first experience with hospice care. Not surprisingly given the closeness of her marriage, she also had to deal with quite a bit of grief. “When Dad passed, she was really lost,” Neves said.

Four years later, she suffered another blow when her son, John Edward, died. Tall and thin, with freckles and red hair, John Edward was quiet like his mother. He did a stint in the U.S. Navy, joining at the tail end of the Vietnam War. For years he prepared meals for senior citizens through a Meals on Wheels program in the Sacramento area.

When he fell sick, John Edward was largely taken care of by Neves and never received hospice care. Nonetheless, thanks to his mother, others will be able to receive such care through UC Davis.

Link leads high-tech interventional radiology division

Professor and Chief of the Division of Interventional and Vascular Radiology, Daniel P. Link specializes in radiological diagnosis and interventional evaluation of urinary and genital systems. He also provides angiography services and arterial embolization therapy. His research centers on blood-flow measurement techniques, with investigations into new embolic agents, combination embolic therapies, liver blood flow and microscopic anatomical changes of chronic arterial occlusions.

Link and his fellow interventional radiologists diagnose and treat patients with vascular disorders using radiographic and imaging techniques, including vascular angioplasty, embolic therapy for tumors and arteriovenous malformations, cyst or abscess drainage, and foreign-body retrieval.
UC DAvis CARDiOLOGiST AMPARO VILLABLANCA iS REACHiNG oUT TO WOMEN AT HiGH RiSK FOR HEART DiseASE – THOSE iN RiRUAL COMMiNUTiES, oR OF AfRiCaN-AMeRiCAn OR LATiNA DESCENT – TO SaVE LiViES.

Fel Ramey, former dean of the business school at California State University, Sacramento, felt a little more winded and fatigued than normal when she rode her bike for exercise. The mild symptoms were her only warning of heart disease.

“My family and friends told me not to worry about it – that I was in such good shape, my symptoms were probably just related to getting old,” she recalls.

But rather than brushing off the changes, the health-conscious college administrator and teacher saw her doctor. The decision saved her life.

Heart disease is the number one killer of women, but less than half of women recognize it
as their greatest health threat. Many are also unaware that while women may have the classic heart attack symptoms – chest and arm pain, a squeezing sensation in the chest and shortness of breath – others will experience only dizziness, nausea, fatigue or upper back pressure. 

Getting these messages out is the mission of the UC Davis Women’s Cardiovascular Medicine Program. The first of its kind in the nation, the program works to ensure more women know the early signs and symptoms of heart disease – and seek medical attention in time. The award-winning program, a model of interdisciplinary collaboration, focuses especially on reaching out to those women at highest risk for death from heart disease.

“One in three women dies of heart disease – more than those who die from all cancers combined. Yet most fail to make the connection between risk factors, such as high blood pressure and high cholesterol, and their own chance of developing heart disease,” says Amparo Villablanca, the program’s founder. “Our goal is to educate women about the signs and symptoms of disease, and encourage them to act immediately if they experience any symptoms.”

**Vulnerable groups**

Villablanca launched the program in 2004 with a goal of providing quality health care, education and outreach to women who are most vulnerable to heart disease, particularly those over age 60 who live in rural areas, are of Latina descent, or, like Ramey, are African American.

African American and Hispanic women are at high risk because they have high rates of the major risk factors for heart disease: obesity, physical inactivity, high blood pressure and diabetes.

Women from rural areas face a separate risk: Because they are less likely than their urban and suburban sisters to have access to heart care, they often wait too long before seeing a doctor – a delay that often costs them their lives.

For her vision and leadership in launching the Women’s Cardiovascular Medicine Program, Villablanca was selected by *Woman’s Day* as one of seven recipients of the magazine’s 2004 Red Dress Award, named in reference to the national symbol for women and heart disease awareness.

The honor is one of many to recognize Villablanca’s record of engagement in the community. She has been a national spokeswoman for the National Heart, Lung and Blood Institute for the past decade. Gov. Arnold Schwarzenegger tapped her to serve on the 12-member California Heart Disease and Stroke Prevention and Treatment Task Force, which is charged with developing a plan to reduce the morbidity, mortality and economic burden of cardiovascular disease statewide. As holder of the Frances Lazda Endowed Chair in Women’s Cardiovascular Medicine at UC Davis, Villablanca also has responsibility for addressing the under-recognition, under-diagnosis and under-treatment of cardiovascular disease in women in the greater Sacramento region, as
well as to improve the understanding of gender differences in heart disease symptoms, risks and outcomes.

**Telemedicine to endocrinology**
At its heart, the Women's Cardiovascular Medicine Program is a collaborative endeavor. It includes faculty and staff from the Center for Health and Technology, which is renowned for its telemedicine programs that extend health-care access to rural areas of California. Members also include faculty and staff from the Center for Reducing Health Disparities; Center for Health Services Research in Primary Care; Center for Women's Health, Division of Endocrinology, Clinical Nutrition and Vascular Medicine; and the Cardiac Rehabilitation and Coronary Heart Disease Reversal Program.

Already, the program has achieved remarkable successes. Last year, it was awarded a $150,000 grant from the U.S. Department of Health and Human Services, Office of Women's Health, to provide education, heart screenings, risk assessments, diagnosis and treatment for high-risk women regionwide. The pioneering program was also selected in 2005 as one of six model women's heart programs by the U.S. Department of Health and Human Services.

Under Villablanca’s leadership, the pioneering program has developed a wide variety of educational materials and innovative clinical care systems targeting rural and minority women. It also has hosted educational programs and events designed both to encourage more involvement among health-care professionals and to reach as many high-risk women as possible.

Fel Ramey spoke to women in red at National Wear Red Dress Day in February 2006. Ramey was diagnosed with heart disease.
Creating ambassadors

In February 2006, in observance of National Wear Red Dress Day, the program hosted an “ambassador” forum that brought together 300 community leaders and representatives of rural, African American and Latina populations.

Attendees from throughout the Sacramento area shared stories about heart disease and learned prevention measures. At the end of the forum, they returned to their own communities as ambassadors armed with life-saving information.

Ramey was among the speakers. The lifelong exercise enthusiast talked about her diet, which she has always watched closely, and her weekly fitness regimen.

“I never would have thought I could get heart disease, but I did,” she said. “Being in good shape and recognizing the symptoms early is what my doctor said saved my life.”

Thanks to the UC Davis Women’s Cardiovascular Medicine Program and ambassadors like Ramey, more women will live to tell this story.

HELPING HANDS FOR KIDS WITH CANCER

“Hope on Wheels,” a national tour sponsored by the Hyundai Dealers Association to raise awareness of the need for pediatric cancer research funds, made a pit stop at the UC Davis Cancer Center this past summer.

The tour features a white Hyundai SUV that travels the nation to collect painted handprints of cancer survivors and serves as a mobile symbol of hope for kids fighting cancer. When the Hope on Wheels tour ends, the SUV is colored with several hundred handprints, each bearing the name and age of its owner.

Ten-year-old Francesca Arnaudo, a UC Davis patient and survivor of two cancers, is the first National Hope on Wheels Spokes-Kid. She has traveled with her family on the Hope on Wheels tour to share her survival story with other children and families affected by cancer.

Friends from the People’s Folsom Lake Auto Group Hyundai dealership were on hand to meet the painted SUV at the Cancer Center. Locally, the auto group has adopted UC Davis Cancer Center’s pediatric cancer program as its charity of choice. During the second and fourth quarters of 2006 the dealership donated $25 for every car it sold. The first promotion raised $6,575.

The dealership maintains a colorful Hyundai Hope on Wheels vehicle in its showroom and has displayed photos of the original 2004 Hope on Wheels Tour stop along with information about UC Davis Cancer Center’s pediatric cancer program.

Cancer survivor and UC Davis patient Andrew Stockton lends a hand to pediatric cancer awareness.
An estimated 4 million Asian Americans and Pacific Islanders have limited English proficiency, a potential barrier to effective communication with health-care providers about cancer prevention, early detection and treatment.

Now there is a Web tool to ease that barrier. The Asian American Network for Cancer Awareness, Research and Training, based at UC Davis Cancer Center, in collaboration with the American Cancer Society, developed the Asian and Pacific Islander Cancer Information Materials site, located at www.aancart.org/apicem and www.cancer.org/apicem.

The Web site is the first one-stop source for easy retrieval of authoritative cancer education materials designed for a lay audience. Materials are available in more than a dozen Asian and Pacific Islander languages, including Khmer, Chamorro, Chinese, Hawaiian, Hmong, Ilokano, Korean, Samoan, Tagalog, Tongan and Vietnamese. More languages and materials will be added as the site matures.

“The new Web tool will make it easier for physicians and other health-care providers to communicate cancer prevention and early detection messages to patients,” said Helen Chew, assistant professor of hematology and oncology and medical director for Sacramento AANCART.
“UC Davis Health System has medical interpreters who speak 18 languages, including the most prevalent Asian languages,” Chew said. “But this new resource will allow us to also give patients materials to take home, think about, discuss with family members, friends or traditional healers, and refer to as new questions come up. This will be a tremendous resource for all of us who take care of Asian and Pacific Islander patients who have limited English proficiency or who prefer to read materials in their native language.”

Since its launch in March 2006, the site has drawn 18,523 visitors who have accessed thousands of pages of cancer information materials, including such titles as “The ABCs of Hepatitis,” a two-page fact sheet in Thai on how to prevent chronic liver disease and liver cancer, and “A Beautiful Future: A Calendar for a Happy and Healthy Life,” in Vietnamese, containing a schedule of recommended cancer screening exams for adults. The APICEM site also has become a standard referral resource for the National Cancer Institute-sponsored Cancer Information Service hotline (1-800-4-CANCER).

“This confirms the urgent need for authoritative cancer education materials for lay audiences in Asian and Pacific Islander languages,” said Moon S. Chen, Jr., principal investigator of AANCART and associate director for cancer disparities and research at UC Davis Cancer Center. “Education and awareness are critical if we are going to reduce the unique, unusual and unnecessary cancer burden faced by Asian Americans.”

AANCART is an NCI-funded project to reduce cancer in Asian Americans and Pacific Islander Americans nationwide. It has been based at UC Davis since 2002.
UC Davis Health System received a “Negocios con Corazon” (Businesses with Heart) award from the Sacramento Hispanic Chamber of Commerce. The award recognizes businesses and nonprofit organizations making a positive difference in the community and helping to create a strong local economy.

“UC Davis Health System is committed to continue serving the health-care needs of our community and serving as an engine for economic growth in the Sacramento region,” said Vice Chancellor and Dean Claire Pomeroy, who accepted the award at the 34th annual Business Awards and Recognition Banquet in March 2006.

Those attending the banquet included Nancy Zarenda, past chair of the health system’s Community Advisory Board; Shelton Duruisseau, senior associate director, Hospital and Clinics, and executive associate director, External Affairs; and Sergio Aguilar-Gaxiola, director of the Center for Reducing Health Disparities.

Over the past 34 years, the chamber has recognized outstanding businesses, business men and women, and nonprofit organizations that are making a difference in the community. This year, it focused on businesses and organizations with a commitment to promoting a healthier lifestyle.
UC Davis Health System’s partnership with the Kiwanis Family House means a comfortable place to stay for patient families.

When a rare nervous-system disorder struck 5-year-old Solé Wagner, her parents were relieved to find out that UC Davis Children’s Hospital had specialists who could help. They worried, however, about how they could afford to stay near her bedside 100 miles from their Orland home – until they found out about the new Kiwanis Family House, which opened in 2006 on UC Davis’ Sacramento campus.

The Kiwanis Family House has been a partnership effort with UC Davis Medical Center for nearly 20 years. Since the original house opened on 48th Street, it has provided lodging for more than 12,000 families from 34 states and nine other countries. With only 13 rooms, however, it usually operated at full capacity.

The new, $5 million facility is three times as large as the original family house, providing up to 32 families at any given time with a comfortable “home away from home” while their loved ones are patients at UC Davis Medical Center. The 19,000 square-foot building includes kitchen facilities, common rooms, outdoor areas and hook-ups for recreational vehicles.

Solé’s parents, Robert and Christine – who have six children – appreciate Kiwanis for helping them meet ongoing family needs while staying near Solé at the same time. Guests like the Wagners have immediate access to their child’s bedside, free shuttle service to the hospital and a staff of caring volunteers available 24 hours a day, seven days a week.
**Leadership**

**Leaders on the Move**

**Judie Boehmer** assumed responsibilities for Children's Hospital and its pediatric inpatient services as an assistant director for patient care services. She also is responsible for Labor and Delivery and the Women's Pavilion, and provides guidance on hospital policy, procedures and infection control.

**Gail Easter** was named an assistant director for patient care services. She is responsible for the Center for Nursing Research, lift team and orthopaedic technicians and acts as a liaison with Labor Relations. Her new position also includes responsibility for nearly a dozen hospital units, along with social services, discharge planning and patient escort service.

**Christopher P. Evans** was appointed chair of the Department of Urology, succeeding Ralph W. deVere White, who stepped down after 21 years as head of the department. Evans maintains an active research laboratory focusing on prostate cancer.

**Jill Joseph**, a professor of pediatrics and one of America's leading researchers in pediatric health services and community health, was appointed associate director for mentoring and education for the newly established UC Davis Clinical and Translational Science Center.

**Jana Katz-Bell** was appointed assistant dean for administration for the School of Medicine. She acts as a liaison for the vice chancellor and dean’s office with units throughout the health system, as well as with the UC Davis campus and with key community partners. Her responsibility is to ensure effective communication, responsive infrastructure development and equitable resource distribution.

**Stephanie R.M. Bray** was appointed assistant dean for Health Sciences Advancement. She leads the health system’s fundraising initiatives and oversees donor relations, stewardship protocols, gift processing and fundraising goals.

**Edward J. Callahan**, professor of family and community medicine, was appointed associate dean for academic personnel. Among his many duties, Callahan oversees the evaluation of faculty performance; facilitates new recruitments and appointments; and oversees the school’s Academic Senate Committees on compensation advisory and faculty personnel.

**Paul A. Di Cesare**, former director of the Musculoskeletal Research Center and chief of the adult reconstructive services at the New York University Hospital for Joint Diseases Orthopaedic Institute, was named as the new chair of the Department of Orthopaedic Surgery. Di Cesare focuses his clinical practice on adult reconstructive surgery on the hip and knee, and has earned an international reputation for complex primary and revision surgery, as well as the treatment of periprosthetic infections.

**Jill Joseph**

**Christopher P. Evans**

**Edward J. Callahan**

**Paul A. Di Cesare**

**Stephanie R.M. Bray**

**Jana Katz-Bell**

**Nathan Kuppermann**
Well-known pediatric geneticist Simeon Boyadjiev Boyd joined UC Davis Children's Hospital this year as the first Children's Miracle Network Endowed Chair in Pediatric Genetics.

Boyd, who previously served at McKusick-Nathans Institute of Genetic Medicine at the Johns Hopkins Hospital, is past president and current co-director of the Society of Craniofacial Genetics. He has been credited with delineating several novel genetic syndromes in humans and recently identified the genetic cause of craniolenticulosutural dysplasia, a rare disease causing specific craniofacial abnormalities.

“We’re thrilled that Simeon has joined our team to direct efforts in pediatric genetics,” said Anthony Philipps, medical director of UC Davis Children’s Hospital and chair of pediatrics for the School of Medicine. “We’re certain he will make significant contributions to improving our understanding of the genetic causes of diseases in children.”

UC Davis Children’s Hospital is one of 170 hospitals in the nation that partners with the Children’s Miracle Network (CMN) to provide the best care for children when they need it. Funds are raised through a network of national and local corporate sponsors, special events and its annual Radiothon. CMN contributions to UC Davis support research into causes and treatments for childhood cancer, asthma, diabetes, obesity, autism and other disorders.

Boyd sees his transition to UC Davis as a unique opportunity to establish a strong genetic program with state-of-the-art clinical care for patients. “The endowed chair in pediatric genetics allows me to collaborate and provide genetic expertise to researchers throughout the UC Davis campus who are interested in the genetic analysis of human disease,” he said.

An expert in craniofacial birth defects, Simeon Boyd is the first person to occupy the newly established Children’s Miracle Network Endowed Chair in Pediatric Genetics.
**AWARDS**

**Sergio Aguilar-Gaxiola**, professor of internal medicine and an internationally renowned expert on mental health in ethnic populations, was honored in 2006 with a National Minority Health Community Leadership Award (Hispanic Community) from the U.S. Department of Health and Human Services’ Office of Minority Health. He also was named as one of the 100 most influential Hispanics.

**Helen K. Chew**, director of the Clinical Breast Cancer Program and assistant professor of hematology and oncology at UC Davis Cancer Center, is the 2006 recipient of the Sacramento region’s Joyce Raley Teel Award for outstanding dedication to the cause of breast cancer.

**Lawrence Morse**, professor of ophthalmology, received the inaugural Helen Keller Foundation/Pfizer Ophthalmics Research Award for his work in the field of age-related macular degeneration.

**Ezra Amsterdam** and **Garen Wintemute** were among the scholars chosen for the 2006 Academic Senate and Academic Federation awards at UC Davis. The honors reflect the breadth of faculty expertise and dedication to students and society. Amsterdam, a professor of cardiovascular medicine, was honored as a Distinguished Graduate, Professional Teaching. Wintemute, a professor of emergency medicine, was awarded for his Distinguished Scholarly Public Service.

**Zenja Watkins**, assistant professor of obstetrics and gynecology, was selected by the Sacramento Business Journal to receive one of its 2006 “Women Who Mean Business” awards for helping provide exemplary and compassionate prenatal, obstetrical and gynecological care.

**Robin Hansen**, professor of pediatrics and chief of the Division of Developmental Pediatrics, received the 2006 Outstanding Mentor Award from the UC Davis Consortium for Women and Research. The consortium is dedicated to supporting research by and on women and gender, and how such issues involve race, class, sexual and national identity.

**Richard L. Kravitz**, professor of internal medicine, received the 2006 “Article-of-the-Year” award from Academy Health, the national organization for health services research and policy, for his lead authorship in an article about direct-to-consumer drug advertising.

**Faith Fitzgerald**, professor of medicine and assistant dean of Humanities and Bioethics, was elected in 2006 to a three-year term as a regent of the American College of Physicians. Fitzgerald has helped build a medical humanities program at UC Davis where she also provides oversight for the bioethics program.

**Mark Servis**, chair of the Committee on Education Policy, received a 2006 Vice Chancellor’s Award for Faculty for coordinating the most significant changes in the medical school curriculum at UC Davis since its inception.
The collective and individual contributions by staff make a great difference in UC Davis Health System’s success. As a result of employees’ hard work, belief in the health system’s mission and commitment to making a difference, UC Davis Health System continues to lead the way in patient care, research, education and community engagement.

Many remarkable staff members were recognized this year for outstanding service, performance and achievements. For example:

**Tess Lopez**, a clinical nurse in the cardiothoracic unit, was honored with the Sharon E. Melberg Award for Primary and Relationship-Based Nursing for her extraordinary care and commitment to patients.

**Billy Page**, a physician in the orthopaedics department, received a Staff Assembly Recognition Award for his dedication to patients, including his delaying a scheduled vacation to help a patient with an injury that required specialized surgery.

**Wilhelmina Cottman**, an analyst with the Center for Health Services Research in Primary Care, was recognized with an Ambassador of Diversity Award for her work in diversity, cultural awareness and teaching culturally respectful communication.

**Allan Siefkin** was honored with a Vice Chancellor’s Award for MSP Physician of the Year for his leadership in the areas of medical staff organization, physician clinical practice, patient safety and quality.

**Roberto Quant**, an administrative assistant in the Department of Ophthalmology, was recognized with a Vice Chancellor’s Award for School of Medicine Staff for his organization and planning to maintain calm and success in a fast-paced department.

**Yolanda Henderson**, sexual harassment coordinator, received a Director’s Award for implementing a new training requirement for supervisors for sexual harassment education and conducting seminars for supervisors, managers and faculty.

**Jana Cinder** of Renal Services and **Linda Moe** of the Cancer Center Clinic were recognized with Nurse of the Year awards by Patient Care Services for their extraordinary patient care efforts.

These are just a small sampling of the many employees honored for going above and beyond to make UC Davis Health System an exceptional place. Each staff member is a critical part of the health system team. Having such a dedicated and skilled workforce makes it possible for UC Davis Health System to fulfill its mission.
ON THE LOOKOUT: QUICK-THINKING PARKING ATTENDANT HELPS FOIL CRIME

During her two-and-a-half years as a parking attendant for UC Davis Health System, Rachna Prasad has seen her share of unusual moments while at her post in the parking structure on Stockton Boulevard. Two of the most memorable were when she detained a customer attempting to use a counterfeit bill, and when her quick thinking and keen eye helped capture a man who had kidnapped his infant daughter from UC Davis Medical Center.

The rarity of being handed a $100 bill was the first thing that aroused Prasad’s suspicion about the currency handed to her. It also seemed suspicious that the customer was using it to pay for a $1 charge and, when she inspected the bill more closely, she noticed that the colors looked washed out.

Knowing she had to delay the man until UC Davis police officers arrived, Prasad told him that she was a new employee, and had to wait for change to be delivered. After the police arrived, they searched the man’s car and found an assortment of illegal drugs and weapons inside the car and its trunk.

In the case of the abducted baby, Prasad became suspicious when a driver had a baby girl lying on the front seat, secured by neither a seat belt nor a child safety seat. She contacted UC Davis police and gave them a description of the man and his vehicle. Minutes after the car drove away, the baby girl was the subject of a Code Rainbow, the medical center’s child-abduction alert system.

UC Davis police issued an Amber Alert, and within two-and-a-half hours, Jason Bentsen was arrested on Highway 50. He had left the hospital with his 20-month-old daughter after removing her security bracelet in her room on the pediatric floor.

Prasad was presented with a Director’s Award for her efforts. Although she knew nothing about UC Davis Health System before becoming one of its employees, Prasad plans on having a long career here and is on track for entering a training program for radiological technologists.

Criminals beware: Keen-eyed Rachna Prasad helps keep the medical center – and the community – safe.
Giving Back to "Our Hospital"

Longtime Health System Employee Supports Staff Giving Program

1976. “Rocky” made its debut in theatres, a stamp was 13 cents and America celebrated its bicentennial. It was also the year that Dennis Curry, now senior superintendent, began his career in the Plant Operations and Maintenance Department at UC Davis Medical Center. Much has changed in the past 30 years at the center, but one thing has remained constant: Curry’s dedication to what he calls “our hospital.”

While his tenure with UC Davis has allowed him to observe firsthand the hospital’s quality of care, Curry had an even closer look a few years ago when his father James was treated at the medical center for a heart condition. “The nursing and medical staff gave such wonderful care to my father,” he says. “The morning he died, they shared in our grief and tried to be ‘invisible’ but did their jobs so gently. I have never been more proud of my family and of the place where I work than I was at that powerful, spiritual moment.”

That experience, combined with his years of working at the medical center, had a profound effect on Curry. “UC Davis Medical Center is an important community resource,” he explains. “It’s my hospital. It’s your hospital. I wanted to give something significant back.”

That something is in the form of a monthly payroll-deducted gift through Voluntary DIRECT – the health system’s employee giving program – to the James E. Curry Cardiac Surgery Research Fund, which he started in memory of his father. Friends, family and co-workers have made contributions to the fund, which will support cardiac research by Nilas Young, chief of cardiothoracic surgery.

Curry is not only thankful for his experience with UC Davis, but also for the chance to express his gratitude and make a difference in the community. “All hospitals are not alike,” he says. “In my experience, UC Davis stands apart from the others. I know my gift will play a part in its future successes.”

Awards Honor Retired School Employee

The School of Medicine established an endowment to support the new Karen Eilers Awards for Staff Excellence, named for the UC Davis Health System employee who retired in 2006 after 34 years of service.

Awards will be given annually to members of the School of Medicine staff who exemplify the service, dedication and leadership demonstrated by Eilers during her career at UC Davis. The awards are intended to recognize individuals who devote their time and energy to improving the work environment and furthering the missions of the School of Medicine.

“Our staff is one of the School of Medicine’s most valuable resources, and I would like to give back by recognizing their exceptional contributions,” said Eilers. “We have a staff that is incredibly dedicated, committed and creative. It has been one of my goals to help others achieve their fullest potential, and these awards will support that.”

Eilers started working as an administrative assistant in the School of Medicine’s Academic Affairs office in 1972. Before her retirement, she served as chief administrative officer for the Office of the Vice Chancellor/Dean.

Staff and others who would like to contribute to the endowment may contact Narriman Shahrokh, chief administrative officer of the Department of Psychiatry and Behavioral Sciences, at (916) 734-3123 or narriman.shahrokh@ucdmc.ucdavis.edu.

UC Davis Health System
The UC Davis School of Medicine Alumni Association is a resource for student and resident alumni, and supports a variety of student programs. The association brings together alumni, faculty, house staff and medical students at annual gatherings such as its welcome reception for incoming medical students, welcome breakfasts for incoming house staff and fellows, Alumni Day reunions and award presentations. Awards to distinguished alumni are presented each year at Alumni Day.

Reunions and other events are planned for 2007. Contact Beth Abad at (916) 734-9416 or elizabeth.abad@ucdmc.ucdavis.edu for more information.
HOUSE STAFF PROFESSIONALISM AWARD

The UC Davis House Staff Professionalism Award, established in 2002, honors residents who exemplify what the American Board of Internal Medicine defines as someone who “aspires to altruism, accountability, excellence, duty, service, honor, integrity and respect for others.” Due to overwhelming support, two residents received the award in 2006.

Jeff Southard, M.D. Cardiology
Jeff Southard graduated in 1995 from UC Davis. He attended Georgetown University School of Medicine, where he later completed his internal medicine residency and a year as chief medical resident. Southard concluded a cardiology fellowship at UC Davis in June 2006, and will complete another year of training in interventional cardiology under the direction of cardiologist Reginald Low.

Mojca Konia, M.D. Anesthesiology and Pain Medicine
Mojca Konia graduated from medical school in Slovenia. With support of a scholarship from the Slovenian government, she worked on a year-long research project at Cedars Sinai Medical Center in Los Angeles while an internal medicine resident. She received her anesthesiology training at UC Davis Medical Center and will stay at UC Davis for a cardiothoracic anesthesiology fellowship. ■

MEDICAL STUDENT SCHOLARSHIPS

In August, the UC Davis School of Medicine Alumni Association held its annual Welcome Reception for the incoming class of 2010. Students, faculty, staff and donors mingled in a relaxed atmosphere and the alumni association presented scholarships to eight first-year students.

Eight students from the class of 2010 received $6,000 scholarships from the Alumni Association: Isaac Kim, Leslie Lane, John Nguyen, Joyce Orndorff, Adam Quest, Balvinder Rehal, Ryan Spielvogel and Tammy Wan. ■

Back row from left to right: Ben Rich, Bob Miller, Adam Quest, Ryan Spielvogel, Tammy Wan, Balvinder Rehal, Leslie Lane, Isaac Kim, John Nguyen, Joyce Orndorff, Amerish Bera and Jerry Armour. Front row from left to right: Vijaya Kumari, Ann Bonham, Patricia McNeill, Stephanie Bray, Ed Callahan, John Owings, Robert Hales, Chuck Bevans, Denise Satterfield, Tom Nesbitt, Claire Pomeroy, Nancy Ree Joye and Jessica Porter.
The Humanitarian Award, established in 1990, annually recognizes outstanding contributions by an alumna/us to the community through distinguished public service.

**John Chuck, M.D.**

As the founder and CEO of Serotonin Surge Charities, John Chuck has been the driving force behind fundraising efforts that have provided support for community charities and, in particular, $180,000 in support of the School of Medicine’s student-run clinics and predoctoral training programs. Serotonin Surge Charities also supports breast cancer and student scholarship programs in the community. A 1989 alumnus of the UC Davis family practice residency program, Chuck is a family physician with the Permanente Medical Group and a clinical professor at the School of Medicine. He has been a popular preceptor at the school since 1990.

The Distinguished Alumnus Award, established in 1988, annually recognizes contributions to society and outstanding achievements by an alumnus/a.

**Garen Wintemute, M.D., M.P.H.**

One of the nation’s leading researchers in the field of epidemiology and prevention of firearm violence, Garen Wintemute has done more than any other individual in medicine to translate the results of such research into effective public policy. After completing his medical training at UC Davis, Wintemute entered the private practice of emergency medicine. During his first year, he worked for six months in Cambodia with the International Committee of the Red Cross. His experiences in Cambodia and as an emergency medicine physician changed his career. Determined to refocus his work on prevention and policy issues, he earned a master’s degree in international health and injury epidemiology. He then joined the faculty at UC Davis, where he is director of the Violence Prevention Research Program and a professor of emergency medicine. Wintemute published three of the first papers ever to consider firearm violence from a public health perspective. His accomplishments illustrate his effectiveness as a researcher, clinician, educator and an effective policy advocate.
ALUMNI DAY 2006


MEDICAL ALUMNI REUNIONS ARE A GREAT WAY FOR ALUMNI/AE TO RECONNECT WITH MEMBERS FROM THEIR CLASSES AND OTHER GRADUATION YEARS.

“The class reunions put on by the UC Davis School of Medicine Alumni Association are a terrific opportunity for alumni to see what is new at the school and catch up with classmates.”

— Denise Satterfield, president of the Alumni Association Board of Directors
SPRING BREAK 2006

Spring Break 2006, a food and wine fundraiser organized by Serotonin Surge Charities, was held at UC Davis Medical Center in April. The event raises funds for greater Sacramento area clinics that serve the medically uninsured and underinsured. More than 300 guests enjoyed the event, including Mayor Heather Fargo, Sacramento City Councilman Rob Fong, and former UC Davis Medical Center CEO Bob Chason. The event exceeded its fundraising goal of $100,000 for the second year in a row.

John Chuck, M.D., The Permanente Medical Group; Kathleen McKenna, The Permanente Medical Group; Tom Nesbitt, M.D., UC Davis Health System; Channa Kaneski, Kaneski Associates; and Carol Serre, Catholic Healthcare West.
PUTTING IT INTO PERSPECTIVE:

THE COST OF A MEDICAL EDUCATION

Based on the current 2006/07 academic year:

- A UC Davis medical education costs $180,837 for four years
- Students pay an average of $45,000 per year for tuition and living expenses
- Out-of-state students pay an additional $12,245 in non-resident tuition per year until classified as a California resident

Our goal – 100 percent alumni participation

Thanks to your support in 2005-06, we were able to award eight $6,000 scholarships at the Welcome Reception for the class of 2010.

UC Davis School of Medicine – An excellent return on your investment year after year.

Please use the enclosed envelope or contact Elizabeth Abad at elizabeth.abad@ucdmc.ucdavis.edu or (916) 734-9416 for more giving information.

“I just want to express my gratitude toward the Alumni Association and tell you that as a student, I appreciate your much-needed guidance and support.”

— Renu Rehal, MS1

“Thank you for the award of $6,000. It will surely help me curtail the substantial medical school debt that medical students of today unfortunately acquire over four years.”

— John Nguyen, MS1

“I wanted to thank you – all of you– for the unexpected gift of the scholarship award. The high cost of a medical school education was and is a daunting hurdle on the road toward a medical degree.”

— Joyce Orndorff, MS1
Discovering and sharing knowledge to advance health

The following people generously contributed to the 2005-2006 Alumni Scholarship Appeal:

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1981
Katherine J. Jones, M.D.
1983
Fred A. Norman, M.D.
1986
Michael E. Opalak, M.D.

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Mrs. Wendy Song
Dr. David Spiteri
Dr. Kathleen Taylor
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Dr. and Mrs. Earl Wolfman
Responding to the needs of a growing community

Growth is essential to UC Davis Health System’s mission of discovering and sharing knowledge and providing the highest quality care to our community. The centerpiece of UC Davis Medical Center’s ongoing construction schedule is the Surgical and Emergency Services Pavilion, now under way next to the main hospital. When completed in 2010, the pavilion will enhance operations, accommodate growth in key programs and create a state-of-the-art, healthy environment for patients, staff and visitors.

The 470,000-square-foot facility will include:

- New emergency room
- New operating rooms
- Surgical intensive-care unit
- 12-bed burn unit
- Cardiology services
- Pathology laboratory support
- Radiology services
- Cafeteria, kitchen and other facilities for Food and Nutrition Services

Because of strong financial management and planning, the health system is able to draw from reserves and projected revenue to fund a large portion of the pavilion. A $20 million fundraising effort is under way to fund the remainder.

At a special ceremony in June 2006, UC Davis Health System administrators, staff, contractors and representatives of the Office of Statewide Health Planning and Development signed the Surgery and Emergency Services Pavilion’s last steel beam, which was then hoisted in place within the framework.
Friends of Medicine was created in 2005 to honor and encourage those who have given financial support to the education, research and patient-care programs of UC Davis Health System. Friends of Medicine is the first-ever donor society at UC Davis Health System, and recognizes donors who make a one-time gift of $25,000 or more, or who have cumulative giving of $100,000 or more.

“WE ARE PROUD TO CONTRIBUTE TO ONE OF THE BEST CANCER RESEARCH PROGRAMS IN THE COUNTRY.”

— TRONG NGUYEN AND ANNIE NGO
“UC DAVIS CANCER CENTER IS MAKING BREAKTHROUGHS THAT OTHER INSTITUTIONS CAN LEVERAGE SO WE CAN EVENTUALLY FIND A CURE FOR CANCER.”

— BURT DOUGLASS

“OUR PURPOSE IS TO RAISE MONEY FOR BETTER TREATMENT AND AN EVENTUAL CURE FOR EPILEPSY. MY HUSBAND AND I WANT TO PROVIDE HOPE FOR OUR GRANDDAUGHTER, BRONTE, AND OTHERS LIKE HER.”

— MARY LOU AND CHRIS SORDI

“WOULD JUST LOVE TO SEE MORE PEOPLE BEING SAVED AND BEING CURED FROM CANCER. THAT’S WHY WE GIVE TO UC DAVIS CANCER CENTER. YOU DON’T WANT ANYONE ELSE TO HAVE TO GO THROUGH THE AGONY THAT COMES ALONG WITH A CANCER DIAGNOSIS AND CANCER TREATMENT, ESPECIALLY KIDS. I’VE VISITED THE CHILDREN IN THE PEDIATRIC WARD, AND, WELL, THAT EATS YOUR HEART OUT. SOMETHING HAS TO BE DONE.”

— JIM AND SALLY OTTO
The vital work of UC Davis Health System would not be possible without the caring generosity of its donors. Between July 1, 2005 and June 30, 2006, the health system was the grateful recipient of more than $23 million in private support. Your support and commitment are truly inspiring. Thank you!
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HONOR ROLL OF DONORS

After an extensive national search, Stephanie R. M. Bray was appointed assistant dean for Health Sciences Advancement at UC Davis Health System. Bray leads fundraising initiatives and oversees donor relations, stewardship protocols, gift processing and fundraising goals.

A fundraising professional with nearly 20 years’ experience working with local, regional and national nonprofit organizations, Bray first joined UC Davis as a development officer for UC Davis Cancer Center, overseeing a $35 million capital initiative.

Prior to her work at UC Davis, Bray served as director of major gifts for the Cancer Institute of New Jersey, part of the University of Medicine and Dentistry of New Jersey. She has also worked for the American Cancer Society; UNCF/The College Fund; and Recording for the Blind & Dyslexic, where she served as director of the group’s 50th Anniversary Capital Campaign to raise $35 million.
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Victor Chan, M.D.
Charles Chong, M.D. and
Rebecca Enex-Chong

“I THOUGHT HAVING CATARACTS MEANT NEVER BEING ABLE TO DRIVE
AT NIGHT AGAIN. BUT THANKS TO THE EXPERT CARE I RECEIVED AT
UC DAVIS, I HAVE THE VISION OF A YOUNG MAN. I HAVE AN ACTIVE
SOCIAL AND FAMILY LIFE, AND THE DARK DOESN’T KEEP ME AT HOME.”

— JIM STRENG, grateful patient

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2005 – 2006

BY THE NUMBERS

UC DAVIS HEALTH SYSTEM
PHILANTHROPIC SUPPORT BY PURPOSE
2005 – 2006

STUDENT SUPPORT
$1,272,647.25

INSTRUCTION
$448,374.25

CAMPUS IMPROVEMENT
$223,200.00

DEPARTMENT SUPPORT
$1,506,128.90

RESEARCH
$16,404,489.03

OTHER PURPOSES
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HONOR ROLL OF DONORS

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