REDUCING THE TOLL OF TOBACCO
Features

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**Call for Nominations**

**Distinguished Alumni Award** | **Deadline: April 6, 2012**

Information about the award is available at: [www.mayo.edu/alumni/awards-distinguished.html](http://www.mayo.edu/alumni/awards-distinguished.html)
Some people call it the special sauce. I’m referring to the difficult-to-define attribute that differentiates Mayo. Patients refer to it. Students and staff members refer to it. Alumni refer to it. Mayo’s Program in Professionalism and Ethics is attempting to ensure this value thrives and survives far into the future. A 12-point Mayo Model of Professionalism articulates the behaviors that help the Mayo community deliver the patient-centered care celebrated in the Mayo Model of Care.

My time at Mayo Clinic (PDN ’89) had a lasting effect on me. Specifically, it taught me to practice team medicine, the advantages of multispecialty group practice, the importance of physician leadership in medicine and reason the needs of the patient should come first. Mayo-trained physicians have influenced the practice of medicine and replicated the Mayo Model of Care around the world. The values the brothers Mayo built the clinic on are alive and well through Mayo alumni. Everyone who trained at Mayo takes a bit of it wherever they go. I trust you will be as interested as I am in learning the steps Mayo is taking to formalize professionalism training to perpetuate this distinction.

Also in this issue of Mayo Alumni is a story about Mayo’s relationship with Altru Health System of North Dakota, led by alumnus Dr. Casey Ryan — the first affiliate in the newly established Mayo Clinic Care Network. This is an exciting endeavor for sharing Mayo Clinic’s medical knowledge with community providers. I, for one, am eager to see how this network unfolds over the next couple of years.

Time for a plug. If you haven’t done so already, consider nominating fellow alumni for the 2012 Distinguished Alumni Award. Details about the process and criteria are available on the alumni website.

S. Mark Laney, M.D.
President and CEO
Heartland Health
St. Joseph, Mo.

Eric Grigsby, M.D. (S ’86, ANES ’88), newly-elected president of the Mayo Clinic Alumni Association, led the Alumni Association Board in establishing a fund for international humanitarian endowment.

After a unanimous vote to establish the endowment, several members offered to help fund it.

“It was a pretty special moment,” says Dr. Grigsby. “The board’s actions speak to the commitment and enthusiasm the Alumni Association has for supporting care for underserved populations.”

The Mayo Clinic Alumni Association International Humanitarian Endowment will provide long-term, sustained support for alumni activity in medically underserved parts of the world. Endowment proceeds will help Mayo Clinic provide leadership and resources for alumni and students interested in providing care for underserved communities, and collaborate with other humanitarian efforts at Mayo Clinic and other organizations.

The endowment balance must reach $100,000 and be maintained for one year before proceeds can be allocated. For information, contact Robert Giere, alumni philanthropy, rgiere@mayo.edu.
No doubt, tobacco use is a significant worldwide public health problem. Without effective treatment strategies and tobacco control policies, tobacco use is expected to kill 1 billion people this century. Tobacco causes more deaths than malaria, tuberculosis and AIDS combined and is unique in being the only leading cause of death that is actively protected by lobbyists. How does one begin to make a drop in the ocean of the tobacco problem? Is it even worth the effort?
Richard Hurt, M.D. (’76), director, Mayo Clinic Nicotine Dependence Center, and a professor of medicine at Mayo Clinic in Rochester, thinks so. He enlisted Mayo Clinic’s support in forming Global Bridges: Healthcare Alliance for Tobacco Dependence Treatment, a worldwide, science-based initiative aimed at creating a coordinated global health care provider network that advocates for:

- **A reduction in the health burden of tobacco use through best practices in tobacco dependence treatment:** Build a network to share treatment and advocacy expertise and provide state-of-the-art, evidence-based training in tobacco dependence treatment and advocacy.
- **Effective tobacco control policies:** Via educational workshops, inform and inspire health care providers to become active in generating policy change. Global Bridges provides tools — data, studies and support — to enable the medical community to stand behind public policy change. This includes facilitating implementation of the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) Article 14 (page 4) in every nation.

Global Bridges sprang out of an education grant from the Pfizer Medical Education Group to the Mayo School of Continuous Professional Development and Mayo Clinic Nicotine Dependence Center. A first-of-a-kind project, Global Bridges was officially established in June 2010 in partnership with the University of Arizona and American Cancer Society. Today, Global Bridges has substantial in-kind support from Mayo Clinic, the American Cancer Society and King Hussein Cancer Center and financial support from several benefactors.

Mayo Clinic hosts Global Bridges, which adapts to regional needs to enhance access to proven treatment methods throughout each of WHO’s six regions. In May 2011, Global Bridges held its first strategic planning meeting in Rochester. Participants from nine countries on five continents learned about the alliance’s progress (pages 6–7).
“We estimate that the providers we’ve trained so far in treating tobacco dependence could impact 400,000 patients,” says Dr. Hurt. “It is too early to know the true effect on patients — if they will respond, if they will quit tobacco use — but it’s a good start. We have a good start in several WHO regions, and we are seeking partners in the other regions. We’re starting at ground zero with some countries, both in educating professionals and the public. The energy from people eager to make a dent in the problem is palpable, and the openness to policy change is unprecedented. Global Bridges would welcome participation by Mayo alumni from any region of the world.”

“The energy from people eager to make a dent in the problem is palpable, and the openness to policy change is unprecedented. Global Bridges would welcome participation by Mayo alumni from any region of the world.”

Richard Hurt, M.D., director, Mayo Clinic Nicotine Dependence Center

The World Health Organization (WHO)
Framework Convention on Tobacco Control (FCTC)

- Developed in response to the globalization of the tobacco epidemic.
- Adopted by the World Health Assembly (the decision-making body of WHO) in 2003.
- Is an evidence-based treaty that reaffirms the right of all people to the highest standard of health.
- Is one of the most rapidly and widely embraced treaties in United Nations history.
- Is the first international treaty negotiated under the auspices of WHO.
- Provides a roadmap to decrease tobacco use, including implementing evidence-based treatment, raising tobacco taxes, creating smoke-free workplace laws and placing limits on tobacco advertising.

To date, 174 of 192 countries have committed to FCTC and protecting their populations from the harm of tobacco use.

About FCTC Article 14

- Focuses on designing and implementing effective tobacco-dependence treatment programs, including services in national health and education programs, health care facilities for these services, and collaborating to facilitate accessibility and affordability of treatment, including pharmaceutical products.
Executive team

Richard Hurt, M.D. (I ’76), Chair
Expertise: Internationally recognized expert on evidence-based tobacco dependence treatment, research and education
- Director, Mayo Clinic Nicotine Dependence Center
- Professor of Medicine, College of Medicine, Mayo Clinic
- Consultant to U.S. Food and Drug Administration and many international ministries of health
- Past Chair, Minnesota Partnership for Action Against Tobacco
- Author or co-author, more than 200 scientific publications on nicotine dependence

Thomas Glynn, Ph.D.
Expertise: Advisor on emerging research and policy issues in international cancer prevention and control, particularly in middle- and low-income nations
- Director, Cancer Science and Trends; Director, International Cancer Control, American Cancer Society
- Associate Director, U.S. National Cancer Institute’s Cancer Control Science Program
- Consultant on cancer control to National Academy of Sciences, National Research Council and Robert Wood Johnson Foundation
- Senior Scientific Reviewer, U.S. Surgeon General’s Reports on Tobacco and Health

Scott Leischow, Ph.D.
Expertise: Translation of clinical smoking cessation pharmacological research into community practice
- Professor, Colleges of Medicine and Public Health, University of Arizona
- Associate Director of Biobehavioral and Social Sciences Research, Arizona Cancer Center
- Past Chief, Tobacco Control Research Branch, National Cancer Institute
- Arizona Prevention Center Researcher of the Year
- Senior Advisor for Tobacco Policy, Department of Health and Human Services
- Past President, Society for Research on Nicotine and Tobacco

J. Taylor Hays, M.D. (EM ’91)
Expertise: Recognized expert on tobacco dependence and its treatment, including pharmacological and behavioral therapies and research on the genetic basis for tobacco use and dependence
- Associate Director, Mayo Clinic Nicotine Dependence Center
- Associate Professor of Medicine, College of Medicine, Mayo Clinic
- Consultant to Mayo Clinic Rochester Division of General Internal Medicine
- Master’s Faculty Privileges in Clinical and Translational Sciences, Mayo Graduate School

Katherine Kemper
Expertise: Experienced global manager and marketer for tobacco control in for-profit and not-for-profit sectors
- Executive Director, Global Bridges
- Director, Latin America Programs, and Director, International Operations, Campaign for Tobacco-Free Kids
- Vice President, Global Smoking Control, GlaxoSmithKline Consumer Healthcare

Richard Hurt, M.D.  Thomas Glynn, Ph.D.  Scott Leischow, Ph.D.
J. Taylor Hays, M.D.  Katherine Kemper
Global Bridges progress to date

- Established Global Bridges partnerships in three WHO regions (at right).
- Developed projects and partnerships in other regions.
  - Created curriculum for tobacco treatment specialist training in Hong Kong.
  - Participated in key global and regional meetings attended by 5,000+ people from 50+ countries.
  - Expanded network of involved health care professionals by 1,000.
- Trained 5,800+ health care providers in 31 countries (includes training at the Mayo Clinic Nicotine Dependence Center). Training ranges from a one-hour webinar to an intensive weeklong program.

1 Latin American region
(represent 33 countries)

Partner organization: InterAmerican Heart Foundation, Dallas
The InterAmerican Heart Foundation promotes an environment conducive to the prevention of heart disease and stroke throughout the Americas, and is a leader in tobacco control research and advocacy throughout Latin America and the Caribbean.

Regional director: Gustavo Zabert, M.D., pulmonologist; Latin American Thoracic Society; Latin American Coalition for Tobacco Dependence Treatment

Conducted its first tobacco treatment specialist training for health care providers in April 2011. Tobacco usage is difficult to measure in Latin America, but rates are as high as 42.1 percent for males in Chile and 32.5 percent for females in Bolivia.
2 African region
(represents 46 countries)

Partner organization: University of Pretoria, South Africa
The University of Pretoria is a leading research university that collaborates with world-class partners to ensure continued excellence in learning and teaching. It houses research programs in cigarette and smokeless tobacco, and provides advocacy for tobacco control.

Regional director: Lekan O.A. Ayo-Yusuf, B.D.S., Ph.D., associate professor, University of Pretoria; member, WHO scientific advisory group on tobacco regulation

Tobacco use in many African countries is low compared to the rest of the world. Therefore, there is little in the way of tobacco control and treatment resources. Use, however, is trending toward a younger population. There is an opportunity to halt a potential tobacco epidemic before it takes hold.

3 Eastern Mediterranean region
(represents 22 countries)

Partner organization: King Hussein Cancer Center, Amman, Jordan
The King Hussein Cancer Center has been a strong advocate for tobacco control in Jordan and is the first medical center in the country to declare its campus 100 percent smoke-free.

Regional director: Feras Hawari, M.D., director, Cancer Control Office, King Hussein Cancer Center; chief of pulmonary and critical care service; director, respiratory unit and PFT/CPET laboratory

Conducted its first tobacco treatment specialist training session for health care providers in April 2011. Prevalence of tobacco use is high in most eastern Mediterranean countries, and only a few countries have structured tobacco dependence treatment services. Offering training is an important step toward addressing this need.
Former smoker committed to saving lives

Richard Hurt, M.D., director, Mayo Clinic Nicotine Dependence Center, and a professor of medicine at Mayo Clinic in Rochester, played basketball on a scholarship at Murray State University in Murray, Ky. When he quit playing basketball and joined a fraternity, he began smoking. From college and medical school to a stint in the U.S. Army and a fellowship at Mayo Clinic, he smoked three packs a day. He had his last cigarette on Nov. 22, 1975.

“I’m not sure I’d be alive today if I hadn’t quit smoking when I did,” says Dr. Hurt, who joined the Mayo Clinic staff in 1976.

In the mid-1980s, he realized Mayo Clinic had little to offer patients who wanted to quit smoking. Dr. Hurt began his efforts to develop the Mayo Clinic Nicotine Dependence Center, which came to fruition in 1988.

Dr. Hurt explains his intense interest in tobacco dependence treatment. “Two of my grandparents were smokers, my parents were heavy smokers, and all of them died from tobacco-caused diseases,” he says. “My father was an only child. My mother had three siblings, and all died from smoking-related causes. That decimation of my family was avoidable. Tobacco companies knew cigarettes were addictive and caused diseases that kill 60 percent of their customers if the product is used as intended. I see the ravages of this problem in my practice every day. We owe it to our grandchildren to make the world a better place. We also owe it to children in the developing world. The work we’ve undertaken with Global Bridges can make a difference in their lives and reduce the toll of tobacco on entire populations.”

Dr. Hurt lauds Mayo Clinic’s support of Global Bridges. “Dr. Noseworthy [John Noseworthy, M.D.] took time to learn about the global tobacco problem and possible solutions, and he took our commitment to the Clinton Global Initiative,” says Dr. Hurt. “The institutionwide support for the battle against tobacco through the last two decades has been humbling and gratifying.”

“The institutionwide support for the battle against tobacco through the last two decades has been humbling and gratifying.”

Richard Hurt, M.D., director, Mayo Clinic Nicotine Dependence Center
Mayo Clinic announces Smoke-Free Worksite Challenge at Clinton Global Initiative

At the Clinton Global Initiative in New York City in September, Mayo Clinic announced its partnership with other organizations to develop a Global Smoke-Free Worksite Challenge.

The goal of the challenge is to expand the number of employees who can work in a smoke-free environment. The effort is a global partnership that includes private sector companies, nongovernmental organizations and governments. Partners are committed to making their worksites 100 percent smoke-free and helping others reach that goal.

“Mayo Clinic has had a leading role, as a large employer, in creating a smoke-free worksite for close to 30 years,” says John Noseworthy, M.D. (N’90), president and CEO of Mayo Clinic. “We are committed to the needs of our patients and employees, and we are excited to be a partner in this challenge to help make workplaces around the world smoke-free so all employees have the right to clean air.”

The challenge builds on the commitment Mayo Clinic brought in 2010 to the Clinton Global Initiative. That undertaking, called Global Bridges, has begun to build and energize a worldwide network of health care providers to lead development of tobacco control and treatment programs in their countries and regions.

“Secondhand smoke affects everyone,” says Richard Hurt, M.D., chair of the Global Bridges executive team and founding director of Mayo Clinic’s Nicotine Dependence Center. “This challenge protects workers from secondhand smoke. Smokers who work in a smoke-free environment are more likely to reduce their smoking and increase their chances of quitting smoking. Today, more than 30 countries around the world have smoke-free workplace laws, which is impressive. We’re hoping to increase that number dramatically with this initiative.”

More than 25 years ago, Mayo Clinic became one of the first medical centers in the United States to create a smoke-free workplace.

The Global Smoke-Free Worksite Challenge is a collaboration among the American Cancer Society, the Global Business Coalition on Health, Johnson & Johnson, Mayo Clinic, the Campaign for Tobacco-Free Kids and the U.S. Department of Health and Human Services.

At the Clinton Global Initiative in New York City in September, John Noseworthy, M.D. (second from left), president and CEO of Mayo Clinic, announced a partnership with other organizations to develop a Global Smoke-Free Worksite Challenge. Also pictured are (from left) Russell Deyo, vice president and general counsel, Johnson & Johnson; former President Bill Clinton; HRH Princess Ghida Talal of Jordan, chairperson of the Board of Trustees, King Hussein Cancer Foundation; John Seffrin, Ph.D., CEO, American Cancer Society; Regina Benjamin, M.D., U.S. Surgeon General; and Aigboje Aig-Imoukhuede, co-chairman, GBCHealth Initiative.
Beginning with the Mayo brothers, Mayo Clinic has an established history of collaborating with other practices and providers. As part of its strategic plan for the future, Mayo Clinic is transforming some of these relationships into a new business initiative called the Mayo Clinic Care Network.

In May, the relationship between Mayo Clinic and Altru Health System in Grand Forks, N.D., was announced. Casey Ryan, M.D. (GIM ’78), Altru’s president and a Mayo Clinic alumnus, explained to an enthusiastic crowd how Mayo Clinic is extending its knowledge and expertise to patients and providers throughout the Altru system.

“Altru and Mayo share the commitment that health care should be provided close to home whenever possible. This relationship means that Altru’s patients will have access to the highest level of clinical expertise,” says Dr. Ryan.

Altru is the first member of the Mayo Clinic Care Network, with more to follow in 2012. This new service mark represents a broad span of connections to member health care organizations and a transformation of the way Mayo Clinic is delivering its medical knowledge to community providers.

Unlike Mayo Clinic Health System, which are owned by Mayo Clinic, members of Mayo Clinic Care Network like Altru are “non-owned” and will be autonomous but will benefit from more direct access to Mayo Clinic. Members pay an annual subscription fee to Mayo Clinic and are offered services that include e-Consults, AskMayoExpert, research protocols, quality improvement programs, continuing medical education and administrative consulting. Patients benefit from being able to receive care in their home communities as long as possible, transitioning to a Mayo Clinic site if they need advanced care and transitioning care back to local

**Altru Health System**
- Mission: “Improving Health, Enriching Life”
- Community-owned, integrated system
- Acute-care hospital
- Rehabilitation hospital
- More than a dozen clinics in the region
- Large home care network
- Congregate living facility
- 200 physicians and 3,800 staff
- Net operating revenue of more than $400 million
- President Casey Ryan, M.D. (GIM ’78): Completed a yearlong fellowship in endocrinology in New Zealand after his Mayo residency; with the Altru system since 1979
Kingman Regional Medical Center (KRMC), based in Kingman, Ariz., was named at publication time as a member of the newly created Mayo Clinic Care Network. “KRMC’s relationship with Mayo Clinic is based on cooperation and collaboration to improve the well-being of patients in our region,” says Brian Turney, CEO of KRMC. “We have been collaborating with Mayo for the past four years on multiple projects, including using telastroke (remote assistance by Mayo Clinic neurologists in managing stroke victims with telemedicine) in our Emergency Department and grand rounds with our medical education program. This is the next step in continuing that collaboration, and we are proud to ensure our patients have access to the highest-level of knowledge and expertise.”

“With Kingman just up the road from our Arizona campus, we are proud to formalize our collaboration with Kingman Regional Medical Center,” says Russell Heigh, M.D. (GI ’88), medical director, Mayo Clinic Care Network in the Southwest. “These types of relationships not only will benefit our patients in the region, but also will have a positive long-term benefit for the community and future patients of both institutions.”
In 2011, W. Bruce Fye, M.D. (CV ’00), a Mayo Clinic cardiologist, and his wife, Lois Fye, donated several hundred historic medical volumes from their collection to a “new” facility at Mayo Clinic — the Wilson House. This historic home was recently restored and made available to Mayo Clinic thanks to a collaborative agreement with the Sisters of Saint Francis, who own it as part of the Assisi Heights property. The books reflect the taste and interests of Dr. Louis and Maud Mellish Wilson, who built the residence and lived there in the 1920s and ’30s.

Mayo’s first pathologist when he joined the staff in 1905, Dr. Wilson was appointed director of what now is Mayo School of Graduate Medical Education in 1915. He was a national leader in clinical education until his death in 1937. Generations of alumni remember the Wilson Club, named in his honor and located on the site of the Hilton Building, as a popular gathering place for residents, fellows and staff. A renaissance scholar like his colleague Henry Plummer, M.D., Dr. Wilson had interests that ranged from agriculture to photography and marksmanship. Maud Mellish Wilson was a pioneering medical editor and founder of Mayo Clinic Proceedings.

An avid book collector, Dr. Fye possesses the most comprehensive collection of books and authors’ reprints related to cardiology and cardiovascular surgery in the world. His collection of books, journals and reprints on medical history, biography and bibliography is among the most comprehensive in existence. An article about Dr. Fye’s passion for book collecting and its role in linking the past and present in medicine can be found on the digital version of Mayo Alumni, available via the new app (back cover), or on the Mayo Clinic Alumni Association blog, http://alumniblog.mayo.edu.

“Books become friends which never fail.” — William J. Mayo, M.D.
Patients who have received care at Mayo Clinic commonly say, “They listened to me, explained things to me and treated me as if I were the only patient they had. It’s unlike any other medical facility I’ve been to.”

Physicians and scientists who trained or were on staff at Mayo Clinic commonly say, “I’ve been involved with many medical institutions, and there’s no other place like it. I’ve tried to take what I learned there and replicate it on a smaller scale everywhere else I’ve worked.”

What are the unique Mayo qualities they describe?

Most believe that the key tenet of the Mayo Model of Care — the needs of the patient come first — and the way it is woven into the fabric of the institution and lived by its employees is the factor that distinguishes Mayo Clinic.

If that is true, how does Mayo secure the future of that which sets it apart?

In 2008, the Mayo Clinic Program in Professionalism and Ethics was created to nurture and promote Mayo’s values to be sure they endure.

Nurturing the unique Mayo practices

Mayo Clinic Program in Professionalism and Ethics
“We can no longer take for granted that what makes Mayo so special will continue,” says Michael Brennan, M.D., director, Program in Professionalism and Ethics, and a consultant in the Division of Endocrinology, Diabetes, Metabolism, & Nutrition at Mayo Clinic in Rochester and a professor of medicine. “Rather, we must take deliberate, meaningful steps to make sure the values of professionalism are internalized by all who work here.”

The Mayo Clinic Program in Professionalism and Ethics works to advance professionalism through employee training and orientation, scholarly activity, and national and international conferences. The program developed the Mayo Model of Professionalism, with the goal of transforming into action Mayo’s patient-centeredness and the Mayo Model of Care. While the Mayo Model of Care defines the principles of patient care and the environment in which they occur, the Mayo Model of Professionalism identifies 12 elements that help the Mayo community to deliver this patient-centered care.

**Elements of the Mayo Model of Professionalism**

1. Engender trust and confidence by considering our patients foremost as people — people with illnesses; care about the person while caring for their illness.
2. Partner with our patients, respect their values, acknowledge their autonomy, protect their safety and preserve their confidentiality.
3. Provide care that is supported, to the extent possible, by valid and reliable evidence, while taking into account individual personal needs and preferences.
4. Be collegial and supportive of colleagues, master teamwork skills and acknowledge the contributions of all.
5. Celebrate diversity, and promote a respectful and trusting environment that is conducive to speaking up and listening.
6. Promote affordability of care through prudent use of resources.
7. Develop and practice superior communication skills.
8. Be disciplined in completing tasks and responsibilities and serve as a positive role model and mentor.
9. Continually improve skills, pursue scholarship, seek and generate new knowledge, and share it generously.
10. Be accountable and hold others accountable.
11. Attend to personal physical, emotional and spiritual well-being, and strive to achieve a healthy life balance.
12. Discourage cynicism, reject arrogance, engage actively in the life of Mayo Clinic, live its culture and values, and preserve its facilities and healing environment.

The Mayo Model of Professionalism is aligned with the institution’s operating plan, which seeks to create a health care workforce of the future that sustains Mayo’s values. The model is shared with every member of the Mayo community and included in orientation and training curricula materials. The commitments lend themselves to assessment and may be used in annual performance reviews and staff credentialing, recertification and medical licensure.

“Documentation of competence in professionalism is now a requirement for credentialing, accreditation and recertification,” says Dr. Brennan. “Interest in professionalism has increased among professional organizations, regulatory bodies and medical educators, in part, as a response to increasing commercialization of health care.

“It is important to evolve and change, but some aspects of the past are worth holding on to. The patient-centric values so eloquently expressed by Dr. Will Mayo in his Rush Medical School commencement address of 1910 are as relevant today as they were then. When Mayo was small, people tended to know each other, and younger physicians...”

Sharing what we’ve learned

The Mayo Clinic Program in Professionalism and Ethics provides training and consultation for other organizations.

“We’ve been asked to help others embed values similar to Mayo’s in their organizations,” says Linda Matti, administrator, Mayo Clinic Program in Professionalism and Ethics. “We work with these groups to understand their challenges with professionalism and guide them, based on our experience.”

Also available are continuing medical education courses offered at Mayo Clinic on professionalism and ethics topics.

For information about consultation and training, visit http://mayoweb.mayo.edu/professionalism/ or contact Linda Matti, matti.linda@mayo.edu.
and scientists rubbed shoulders with their elder colleagues on a daily basis. It was key to master both the art and science of medicine.”

Today, productivity demands, limits on trainee duty hours and greater reliance on electronic communication reduce face-to-face time with professionalism role models. According to Dr. Brennan, professionalism can be taught and learned through formal educational curricula, but nothing, he says, is more effective and influential than exposure to role models who have internalized and who express the values and behaviors of professionalism.

“This is why we are actively involved in career and leadership development of new Mayo faculty and staff,” says Dr. Brennan.

Mayo Clinic Program in Professionalism and Ethics
• Reports to Mayo Clinic Clinical Practice Committee
• Medical Director, Michael Brennan, M.D. (I ’75, ENDO ’77)
• Administrator, Linda Matti
• Associate Director for Ethics, Paul Mueller, M.D. (GIM ’95)
• Associate Director for Faculty Affairs, Fred Hafferty, Ph.D. (GIM ’10)
• Associate Director for Professionalism, Darcy Reed, M.D. (MMS ’00, I ’03)

From left: Fred Hafferty, Ph.D., Darcy Reed, M.D., Michael Brennan, M.D., Linda Matti and Paul Mueller, M.D.
The Program in Professionalism and Ethics sponsors the Communication in Health Care Program. A communication program is offered to all new physicians at every Mayo Clinic location and in Mayo Clinic Health System. Customized training is provided for students of Mayo Medical School and physicians in the Mayo School of Graduate Medical Education.

The Communication in Health Care Program in Rochester consists of basic and cross-cultural communication skills, with practice in the Mayo Clinic Multidisciplinary Simulation Center. The SIM Center is set up with outpatient and inpatient rooms, and actors portraying patients from different cultures and backgrounds in common clinical situations. Physicians practice communicating with patients in scenarios that include listening without interrupting, delivering bad news, describing procedures and operations, obtaining informed consent, providing patient education and responding to a range of emotions.

“We provide a safe environment for students and physicians to practice communication skills with patients,” says Jeff Rabatin, M.D., co-director of the Communication in Health Care Program at Mayo Clinic in Rochester and a consultant in the Division of Pulmonary and Critical Care Medicine. “Communicating effectively in a manner that puts the patient and family at the center of care requires tremendous skills that can be learned and practiced.”

Mayo feels strongly that physician-patient communication is essential to fulfilling the organization’s mission, and

**Communication in Health Care Program Co-Directors**

**Mayo Clinic Rochester**
Jeff Rabatin, M.D. (I ’95, THDCC ’97, THDCC ’99)  
*Division of Pulmonary and Critical Care Medicine*

Dan Hurley, M.D. (I ’83, ENDO ’86)  
*Division of Endocrinology, Diabetes, Metabolism, and Nutrition*

**Mayo Clinic Arizona**
John Fasolino, M.D. (I ’00, CMR ’01)  
*Division of Consultative Medicine*

David Gullen, M.D. (I ’97)  
*Division of Community Internal Medicine*

**Mayo Clinic Florida**
David Kostick, M.D. (OPH ’95)  
*Department of Ophthalmology, Cosmetic Surgery Team*

**Mayo Clinic Health System**
Alan Fleischmann, M.D.  
research indicates that effective communication increases patient and physician satisfaction and improves patient health outcomes.

Because communication is a core part of the Mayo Model of Professionalism, resources are dedicated to help ensure physicians have the opportunity to practice and acquire new skills of communication. Mayo is one of the few academic medical centers that require communication training for all new physicians to the organization.

Amy Conners, M.D. (R-D ’08, R-BR ’09), a consultant in the Department of Radiology and the Division of Breast Imaging and Intervention, participated in the Communication in Health Care Program in July. One lesson she took away from the training was that physicians often try to soften the blow of bad news with vague language.

Amy Conners, M.D. (above, right), practices communication skills in the Mayo Clinic SIM Center with an actor portraying a patient. (At right) During communication training in the SIM Center, a Communication in Health Care faculty facilitator observes the interactions with the actor-patient and notes feedback to convey to the physician during a debriefing that includes playback of a video recording of the session.

“Giving patients the best possible experience and the highest quality of care includes communicating directly, honestly and compassionately,” says Dr. Conners. “This has a huge impact on our relationships with them and on their outcomes. You can be the best doctor in the world but if you can't communicate effectively, you're not going to be very effective at helping your patients. They need great communication in addition to great care.”

Dr. Conners completed her residency and fellowship at Mayo Clinic and joined the staff in 2009. “I was impressed that my SIM Center training scenario was tailored to my subsection of radiology and very relevant to my daily patient interactions,” says Dr. Conners. “Mastering communication skills is a process of learning and building. I appreciate that Mayo allows us to spend a day focusing on it.”
Board of Trustees news

The Mayo Clinic Board of Trustees welcomed two new members, acknowledged an emeritus trustee and recognized named professors at its quarterly meeting in August.

New trustees

Michael Powell  
President/CEO, National Cable & Telecommunications Association  
Former chairman, Federal Communications Commission

Wyatt Decker, M.D. (MMS ’90, I ’93, EM ’97)  
Chief executive officer, Mayo Clinic Arizona  
Vice president, Mayo Clinic

Emeritus trustee

Victor Trastek, M.D. (S ’82, TS ’84)  
Former vice president and CEO, Mayo Clinic Arizona

Named professors

The Board of Trustees has honored six named professors.

Hirohito Kita, M.D. (IMM ’91)  
Division of Allergic Diseases  
Department of General Internal Medicine  
Department of Otorhinolaryngology  
Division of Pediatric Allergy, Immunology and Pulmonology  
Department of Immunology  
Mayo Clinic Rochester  
Walter and Leonore Annenberg Professor in Pulmonary Medicine

Walter Rocca, M.D., Ph.D. (MSEP ’97)  
Division of Epidemiology  
Department of Health Sciences Research  
Department of Neurology  
Mayo Clinic Rochester  
Ralph S. and Beverley E. Caulkins Professor of Neurodegenerative Diseases Research

Daniel Sargent, Ph.D. (HSR ’99)  
Division of Biomedical Statistics and Informatics  
Department of Health Sciences Research  
Mayo Clinic Rochester  
Ralph S. and Beverley E. Caulkins Professorship in Cancer Research

Alan Fields, Ph.D.  
Mayo Clinic Cancer Center, Mayo Clinic Florida  
Co-director, Cell Biology Program  
Monica Flynn Jacoby Professor in Cancer Research

Michael Yaszemski, M.D., Ph.D. (OR ’96)  
Chair, Division of Orthopedic Spine Surgery  
Department of Orthopedic Surgery  
Department of Physiology and Biomedical Engineering  
Mayo Clinic Rochester  
John and Posy Krehbiel Professor of Orthopedics Honoring Bernard F. Morrey, M.D.

John Miles, M.D. (ENDO ’80)  
Division of Endocrinology, Diabetes, Metabolism, and Nutrition  
Department of General Internal Medicine  
Mayo Clinic Rochester  
Earl and Annette R. McDonough Professor

For more information about these named professors, visit mayo.edu/alumni.

Obituaries

John Buckingham, M.B., B.S. (S ’77), died March 29, 2011.

James Dobyns, M.D. (OR ’68), died July 14, 2011.


Glen Lillington, M.D. (I ’57), died May 7, 2011.

Jack Mobley, M.D. (S ’56), died July 17, 2011.

Daniel Schadt, M.D. (I ’58), died Aug. 23, 2011.

William Shepard, M.D. (I ’60), died June 26, 2011.

David Shephard, M.D. (PUBL ’72), died July 17, 2011.

Tow Tan, M.D. (I ’06, HEMO ’10), died May 17, 2011.


Complete obituaries and the Update section, with alumni and staff news, are available on the Mayo Clinic Alumni Association website, mayo.edu/alumni.
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Mayo Alumni has launched its iPad® application, adding another platform on which alumni can receive news and stay connected with Mayo Clinic. In addition to providing the inside track on strategic initiatives at Mayo Clinic and highlights of newsworthy activities from Mayo alumni across the globe, the Mayo Alumni app includes many multimedia extras, including interactive news, video and photos.


“The number of physicians and scientists utilizing the iPad for their work is increasing daily,” Dr. Edell says. “With more than 30 million iPad sales estimated for 2012, and 84.4 percent of current iPad users saying reading news is one of the main tasks for which they use the iPad, the Mayo Clinic Alumni Association is meeting the demand of digital users through this new platform.”

The Mayo Alumni iPad app is available free from the iTunes® Store. A fact sheet about the app can be found on the Mayo Clinic Alumni Association blog, http://alumniblog.mayo.edu.
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