

VANDERBILT

FALL 2026

MEDICINE



Growth.
Change.
Evolution.

Strategic innovation
fuels success under
Jeff Balser's watch

THE BODY RECONCEIVED

VI4 Artist-in-Residence
program student and
artist Xinxin Lou depicts
a human body's cells as
a universe.





20

Carrigan Cox was one of the first patients to benefit from the expanded, renovated pediatric cancer outpatient clinic and infusion space.

ON THE COVER

Jeff Balser, MD, PhD, President and Chief Executive Officer of Vanderbilt Health and Dean of Vanderbilt University School of Medicine

ONLINE EXTRAS

news.vumc.org/medicine-magazine

 **An Art/Medicine Connection**
View works from the Vanderbilt Institute for Infection, Immunology and Inflammation Artist-in-Residence (VI4-AiR) program.

 **Autism and Avatars**
Explore more research about how avatars might help those with autism.

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VANDERBILT MEDICINE

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A letter 40 years in the making

DAVID BAILEY



Vanderbilt is a beacon for people who never stop looking for a better way — to care, discover or educate — to improve the world around them. It's a passion that has driven Vanderbilt Health and Vanderbilt University School of Medicine for more than a century and will propel this storied institution into the next era.

I'm inevitably asked what makes me the proudest as I step away. It's not any single discovery or program — though we've had our share of both. It's the people. Your character makes it all possible: a place that is brilliant and

creative without sharp elbows, that treats geniality not as a weakness but as a strength, deliberately built and handed down for generations. Our caring nature runs every bit as deep as our intellectual curiosity. And the synergy of those attributes makes it possible for thousands to selflessly work together and overcome impossible challenges; it provides for those chasing the next landmark finding to lift up and support those who make it a priority to sit with a frightened family.

I've had the honor of living inside that culture for most of my life, and I'm endlessly grateful that opportunity came my way. I came in the 1980s as an MD/PhD student, left for training, and came back eight years later in no small part because of the wonderful way Vanderbilt had nurtured and inspired me as a student. That was 1998, and I never left again. Along the way, my wife, Melinda, and several other family members have attended Vanderbilt, and three graduated from different Vanderbilt schools on the same day. This place gets into you. It becomes part of how you think, part of what you expect of yourself and the people around you — far more than a résumé line, something ingrained and deep-rooted.

Now it's time to hand it forward. David C. Miller, MD, MPH, is a gifted clinician, investigator, educator and leader — but more than that, he is warm and generous. If you've spent any real time here, you know that's the personality our place requires. It isn't a job description you can fake your way into. It's a fit, or it isn't. David fits.

This isn't goodbye. Melinda and I will always find ways to celebrate your many successes and support you in the inevitable struggles. It's a relay, and I'm passing the baton to someone who will run it well. Thank you for the trust you've placed in this institution and for being part of the Vanderbilt story. ■

Jeff Balser, MD, PhD

*President and CEO, Vanderbilt Health
Dean, Vanderbilt University School of Medicine*

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news.vumc.org/medicine-magazine



CONVERSATIONS AROUND THE MEDICAL CAMPUS



We want to hear from you! Connect with us on Facebook, X, YouTube, Flickr and Instagram.



Comments on the SPRING 2026 issue of *Vanderbilt Medicine*:

WARM FLEECE MEETS COOL SCIENCE

A fascinating example of how unconventional biological systems can drive biomedical innovation ... The collaborative work led by Vanderbilt University Medical Center highlights how basic biology, community partnerships and translational research can converge to advance applications in cancer detection, infectious disease, and rare disorders.

– *Vahid Ahmadianpour, National Institute of Genetics Engineering and Biotechnology, Iran*

I was lucky enough to be able to visit the alpaca farm with my sons and meet many involved with the lab last year ... The hats that

are made of the fleece are also INCREDIBLY soft, almost unbelievably so!

– *Allison Stillwell Young, MS, BSN, RN, research nurse specialist at Vanderbilt-Ingram Cancer Center*

IN MY LIFE (FACILITY DOG SQUID AND FACILITY DOG COORDINATOR LESLIE GRISSIM)

We're so proud of this amazing #facilitydog team!

– *Canine Companions*

Ivan's Voice loves Squid and Leslie! They both have made such a difference in his life! Squid wags his tail every time he sees Ivan, and Ivan brightens up when he sees Squid! These two bring so much joy and love to these patients!

– *Cheyenne Asher*

We love Squid! He lifted our spirits during some very dark moments in our 67-day stay. Good boy, Squid!

– *Kelsey Vincenti*

JOIN THE CONVERSATION

Share comments on *Vanderbilt Medicine* magazine via our website, news.vumc.org/medicine-magazine, or email the editor at jill.clendening@vumc.org.

QUOTABLE:

"This stresses the need to understand some of those core characteristics so that we can not only reverse these trends, but also improve treatment."

ANDREANA HOLOWATYJ, PhD, MSCI, Assistant Professor of Medicine, Division of Hematology and Oncology, on studying tumors to address rise in rectal cancer in young adults
NBC News, April 22

"Effective weight loss for many could bring about improvements in asthma [and] may also work to target inflammation or those sorts of airways-specific effects that really contribute to a patient's asthma."

KATHERINE CAHILL, MD, Medical Director of Clinical Asthma Research, on a new study about the impact of GLP-1s on asthma
WKRN, May 12

"The response to dietary fibers, including their effect on the gut microbiome, is highly individual."

HEIDI SILVER, PhD, RD, Research Professor of Medicine, on fiber's benefits
Prevention, June 12

Find us on Instagram at www.instagram.com/vumedicine



vumedicine

Students in our ENT interest group bravely practiced their nasoscopy skills alongside @VanderbiltHealth's superstar ENT faculty. #vumedicine



vumceye

Residents from interns to PGY-4 gained more hands-on experience practicing skills ranging from lens loading to phacoemulsification! Grateful for all the peer mentorship & the incredible faculty who came to teach.

#vanderbilteyeynstitute #OphthoResidents #PhacoWetLab



vumedicine

Across VUSM, students are finding ways to support patients beyond the clinic. Students from VMS Knits, Kern National Network (KNN) and Radiology Oncology Interest Group came together to make cards and friendship bracelets for children undergoing radiation therapy. #vumedicine



**A CLOSER
LOOK**

Vanderbilt University
School of Medicine faculty
welcome graduates to
Commencement 2026 at
Langford Auditorium.



Skilled transplant teams save hundreds of lives

Vanderbilt Transplant Center celebrated as No. 1 in the nation

Faculty, staff and friends of the Vanderbilt Transplant Center gathered at Geodis Park in Nashville for the No. 1 in the Nation Celebration, marking Vanderbilt Health's status as the largest transplant center by volume in the United States.

The Vanderbilt Transplant Center performed 960 solid organ transplants in 2025, the most ever completed by a single center in one year in the United States. This was made possible by the selfless acts of organ donors, from friends and family members who donated live kidneys and partial livers, to deceased donors of hearts, lungs, livers, kidneys and pancreases, who in their last acts gave the most personal gifts.

The gala featured remarks from the leaders who built the trans-

plant center, beginning with former U.S. Sen. Bill Frist, MD, founder of the Vanderbilt Transplant Center.

"The vision was simply this: instead of isolated programs of kidneys (done at the time), hearts (done at the time), and then lungs and later livers — bring them all under a single roof with a single mission, religiously centered on the patient and their family," said Frist, who founded the center with Hal Helderman, MD, in 1989.

In 1993, Frist stepped down to run for the U.S. Senate (and was later elected), and he handed the reins of the transplant center for the next 18 years to C. Wright Pinson, MBA, MD, an innovative liver transplant surgeon who is now President of the Vanderbilt Health Affiliated Network, senior counselor to the President and CEO of Vanderbilt Health, and longtime former deputy CEO.

"It is truly remarkable to gather and celebrate what this Vanderbilt Transplant Center has become," said Pinson. "This moment, this celebration, is a testament to decades, literally decades of dedication, innovation and belief in what this academic medical center could achieve when its mission was clear and the people became united."

Current and former leaders of the Vanderbilt Transplant Center gather to celebrate the center's 960 solid organ transplants in 2025.



ERIN O. SMITH

Heidi Schaefer, MD, Medical Director of Adult Solid Organ Transplant and a transplant nephrologist, played a key role alongside her surgical and medical colleagues in growing the kidney transplant program from about 100 kidney transplants in 2004 to nearly 400 per year now.

"I have the honor of speaking about where we are today, and it's hard to describe it as anything other than remarkable," she said. "This past year, we became the No. 1 transplant center by volume. We are home to the largest heart transplant program in the country, and as of last week, we are now the largest lung transplant program. These are extraordinary statements, and they matter because volume reflects trust. It reflects referrals, outcomes, access and belief by patients, by families and clinicians — that this is the place where the toughest cases can come and receive exceptional care."

Joseph Magliocca, MD, Director of the Vanderbilt Transplant Center, Professor of Surgery and Pediatrics, and Surgical Director of the Pediatric Liver Transplant Program, talked about where the transplant center is going.

"Vanderbilt Health is writing the future of transplantation with cutting-edge research," he said, "breakthrough innovations in organ preservation; scientists working on cures for certain liver diseases that would actually obviate the need for transplantation, which could potentially be extrapolated to other organ systems; developing world-class data systems and resources to learn from our vast experience; supporting organ failure patients as a bridge to transplant or to actually avoid transplantation altogether."

"What never changes, really, is the reason we're driven to do these things," added Magliocca, holder of the Cindy and Dave Baier Directorship. "And the most important driving force is how we can make things better for our patients."

It takes a highly specialized, multidisciplinary team of about 150 people to work on a single transplant. The transplant teams include physicians in each organ specialty, surgeons, anesthesiologists and nurse anesthetists, intensivists, nurses, nurse practitioners, pharmacists, social workers, financial coordinators, nutritionists, organ procurement coordinators, preservationists, perfusionists, and operating room staff, among others.

Giving an emotional salute to this team was Seth Karp, MD, Chair of the Section of Surgical Sciences, H. William Scott Jr. Professor of Surgery, and Director of the Vanderbilt Transplant Center from 2012 to 2023. Karp is stepping down in October and moving to Boston to accept a new position as Chair of the Roberta and Stephen R. Weiner Department of Surgery at Beth Israel Deaconess Medical Center and Surgeon-in-Chief at Dana-Farber Cancer Institute.

Karp distilled the success of the Vanderbilt Transplant Center into one word — "yes."

"I think what we have created with Dr. Frist, Dr. Pinson, Dr. Helderman, Dr. Magliocca, Heather (O'Dell), and all the other leaders here, they created a place where people say 'yes,'" Karp said. "'Yes' is the most important chain there is. The chain breaks if even one person says 'no.' For us, 'yes' is developing a new model for transplant that we



Members of the legendary Soul Incision band — including C. Wright Pinson, MBA, MD, on the drums — provide the musical backdrop for the Vanderbilt Transplant Center Celebration.

heard about from Dr. Frist, using an integrated model of care. 'Yes' is an advanced practice practitioner, spending three hours on a Saturday, managing blood sugar to prevent an ED visit. 'Yes' is a financial counselor spending hours with a patient to make sure that they can care for their organ. 'Yes' is a social worker, seeing one more caregiver to find a patient's support. And there is never just one more. It's one more, one more, and one more, and one more."

O'Dell, MSN, ANP-BC, MMHC, Executive Director and Associate Operating Officer of the Vanderbilt Transplant Center, echoed those remarks.

"To everyone here, and to the teams who are covering units, managing calls, supporting patients and families, even as we celebrate, thank you," she said. "This work is demanding, and it's profoundly meaningful. What you do changes the arc of people's lives." ■

Matt Batchelder

"This moment ... is a testament to ... literally decades of dedication, innovation and belief in what this academic medical center could achieve when its mission was clear and the people became united."

C. Wright Pinson, MBA, MD, former Vanderbilt Transplant Center Director

+ BY THE NUMBERS

10% of all jobs in the area are filled by Vanderbilt Health and Vanderbilt University employees.

43,000 employees make Vanderbilt Health one of the region's largest employers.

Post-op kidney injury risk model could aid prevention

Vanderbilt Health researchers used data from roughly 60,000 Tennessee surgical cases to train risk models for postoperative acute kidney injury (AKI), a common surgical outcome associated with increased mortality, increased hospital length of stay and readmission, and increased health care costs.

Matt Shotwell, PhD, Associate Professor of Biostatistics and Anesthesiology, Joel Bradley III, MD, Assistant Professor of Surgery in the Division of General Surgery, and colleagues undertook supervised machine learning on routine preoperative data captured in a national surgical registry.

The team's winning model achieved areas under the receiver operating characteristic curve (AUC) of 87% and 88% across validation sets from Tennessee and from the nation, respectively; AUC, with scores from 50%-100%, gauges how well a model ranks patients according to risk. The study was published in the *Journal of the American College of Surgeons*.

Throughout, the study used data from the American College of Surgeons National Surgical Quality Improvement Program, which samples data from hospitals in the U.S. and Canada. The study's external validation set included nearly 1 million cases.

The team's winning machine learning-derived model is an additive logistic regression and thus readily interpretable — no black box here: The chief predictors included inpatient status, ascites, renal failure, preoperative creatinine, sepsis, and physical-status classification (per the American Society of Anesthesiologists' six-point grading system). ■ Paul Govern

One-fifth of cancer drugs denied Medicare coverage were overturned when reviewed

A study of cancer drugs denied by Medicare Part D insurance plans found that more than one-fifth of denials were overturned upon review by a contracted reviewer. This suggests there are a considerable number of inappropriate denials.

The study, led by Youngmin Kwon, PhD, a postdoctoral research fellow in the Department of Health Policy at Vanderbilt Health, implemented natural language processing to analyze the text of second-level appeals of cancer drugs denied under Medicare Part D, the supplemental plans that cover prescription drugs. The study was published in *JAMA Network Open*.

"Cancer drugs are expensive, and their use is closely monitored and controlled by insurance plans," Kwon said. "They also belong to a protected drug class in the Part D program, meaning that plans must cover all or nearly all of these drugs. While plans cannot broadly exclude coverage, they can deny coverage of drugs that are not deemed medically necessary."

The most common reason for initial denials was "non-medically acceptable" indications, or drugs prescribed "off-label," which generally means using a drug outside its formally approved indication by the Food and Drug Administration.

When treating cancer, prescription drugs are often combined or used for cancer types or populations that aren't always specifically included in the FDA-approved labeled indication. To govern coverage of off-label use, Medicare relies on clinical compendia that summarize supporting clinical evidence or other peer-reviewed studies of medications prescribed off-label.

"Off-label prescribing is exceptionally common in oncology, especially for treating rare or treatment-resistant cancers," Kwon said. "Because it does not follow the 'standard' treatment protocol, insurers may have a greater justification for heavily scrutinizing off-label use and refuse coverage."

However, the study found that 88% of successful appeals for off-label use were for medically acceptable indications already supported by a Medicare-approved clinical compendium or peer-reviewed scientific literature, suggesting that many requests for acceptable off-label use may have been denied. Further, appeals for off-label use were often denied due to clerical issues (72%).

Among drugs prescribed on-label but that were initially denied for failing to follow the preapproval process, 60% were ultimately approved. Kwon said these findings echo concerns that utilization management tools, such as prior authorization, are imposing barriers to necessary and evidence-based care.

"Patients and their providers may face considerable administrative burden in the appeals process for coverage of drugs that could be lifesaving. A simple mishap, such as forgetting to attach a lab result or a supporting citation, could mean weeks of delay."

The research was conducted in collaboration with researchers from the American Cancer Society, Emory University, the University of Pittsburgh, University of Hawai'i at Mānoa, and Wake Forest University. ■ Jake Lowary



+ BY THE NUMBERS

\$5 million

gift will establish Lily's Garden Pediatric Leukemia Program.

No.1

in U.S. for NIH support in internal medicine, emergency medicine, and ear, nose and throat research.

Q+A

Angela Jefferson, PhD, Professor of Neurology and Medicine, is founding Director of the Vanderbilt Memory and Alzheimer's Center (VMAC) and Director of the Vanderbilt Alzheimer's Disease Research Center. Jefferson, who holds the Herbert O. and Vineta Christopher Directorship, also leads the Vanderbilt Memory and Aging Project.

Q. What is the significance of VMAC being a National Institutes of Health-designated Center of Excellence?

A. This designation reflects years of commitment to building a highly collaborative environment where innovative, interdisciplinary research thrives, and discoveries can be translated into better care.

This is especially important because Tennessee has a high burden of Alzheimer's disease and related vascular risk factors. We have an extraordinary opportunity to serve our region through scientific discovery, community engagement, education and compassionate clinical care. It is an honor and a responsibility we take very seriously.

Q. What explains the increasing prevalence of dementia?

A. As advances in health care allow us to live longer, the number of individuals affected by dementia naturally increases. Chronic health conditions including high blood pressure, diabetes, obesity and vascular disease can contribute to dementia risk. In the past, many cognitive symptoms were also often dismissed as a normal part of aging. Now, biomarkers, brain imaging and clinical assessment allow us to identify Alzheimer's disease earlier and with greater accuracy.

Q. What do you see ahead in dementia research, diagnosis and treatment?

A. The pace of progress in dementia research and care is accelerating at a rate unimaginable a decade ago. Advances in blood-based biomarkers and digital assessment tools are transforming how we identify individuals at risk for Alzheimer's disease and related dementias. These tools have the potential to make diagnosis more accessible, scalable and precise across health care settings.

Treatment approaches are also becoming increasingly sophisticated. Current therapies primarily target amyloid, but there are promising therapies in development aimed at other biological processes involved in Alzheimer's disease, including tau and vascular pathways.

We are also gaining a deeper understanding of modifiable risk factors and the importance of prevention, particularly in midlife, reducing dementia risk before significant cognitive decline occurs.

Q. How has philanthropy impacted your work?

A. One philanthropic partnership that is particularly special to me is the Herbert O. and Vineta Christopher Directorship, which I was honored to receive several years ago. Mr. Christopher established this in memory of his late wife, Vineta, who battled Alzheimer's disease. Our shared goal is to advance research and care for patients and families facing these devastating illnesses and help change the trajectory for future generations.

Mr. Christopher's generosity extends beyond our center to include support for fellows in the Department of Otolaryngology-Head and Neck Surgery and investments in Vanderbilt Health's future through endowed and planned giving. Philanthropic partnerships like his are incredibly meaningful because they allow us to pursue innovative ideas, support trainees and early-career investigators, and accelerate discoveries. I am humbled by the trust donors place in our team and our mission.



Research Roundup

Sickle cell disease increases risk for blood disorder

Children with sickle cell disease are more likely than other children to develop a clonal growth of pre-cancerous blood cells called clonal hematopoiesis (CH), which is associated in older people with a higher risk of blood cancer, according to Vanderbilt Health researchers.

However, the clones in children with sickle cell disease did not expand as readily as they do in older people with CH, suggesting they may be more transitory and have different health consequences, the researchers reported in the journal *Blood*.

In addition, hydroxyurea, which reduces painful episodes and the need for blood transfusions in people with sickle cell disease, did not increase the risk of developing CH.

These findings shed light on disruptions in normal blood cell development (hematopoiesis) that may be shared by both diseases.

Study support was provided by National Institutes of Health grants R01HL168179, T32GM145734 and T32GM007347, and the Vanderbilt Undergraduate Summer Research Program.

Study shows heart drug may also limit spread of solid tumor cancers

Early clinical research by Vanderbilt Health and Cumberland Pharmaceuticals Inc. suggests that an investigational drug originally developed to treat cardiovascular disease may reduce the risk of metastasis of breast, lung and other solid tumors.

The pilot clinical trial of 29 patients with solid tumors at high risk of early metastatic recurrence confirmed that ifetroban, a thromboxane A2 receptor antagonist, was safe and well tolerated, and supported further development of the drug to prevent cancer metastasis.

While not statistically powered

for efficacy, the randomized, double-blind, placebo-controlled Phase 2a clinical trial also compared the percentage of patients who experienced a distant metastatic recurrence 12 months after the study's completion.

Seventeen percent of participants who received ifetroban experienced a distant metastatic recurrence, compared to 50% of those who received an inactive placebo. No deaths due to distant metastatic disease occurred among those who received ifetroban, while three deaths occurred in the placebo group.

Effort seeks to improve access to genetic experts in Southeast

Vanderbilt Health and the University of Alabama at Birmingham are launching a regional effort to make genomic medicine more accessible to clinicians and patients across the Southeast.

The Southeast Genomic Medicine Service, or SE-GEMS, is funded by a multiyear \$7.87 million award from the National Human Genome Research Institute. It will create a genomic eConsult service that allows clinicians to ask questions about genetic testing, test interpretation and next steps in care.

Genomic testing is becoming part of routine medicine, but many clinicians still do not have easy access to genetics experts. That gap is especially important in community and rural settings.

Through SE-GEMS, clinicians will submit questions through a structured intake system. A team of genetics and pharmacogenomics experts will review the request and return a concise consult note with their recommendations. The goal is to build a model that can support genomic medicine across the Southeast and eventually in other regions.

RESEARCHERS MAP HOW BRAIN'S WIRING CHANGES WITH AGE

In a study published in the journal *Nature*, Vanderbilt University and Vanderbilt Health researchers created the first growth charts for white matter in the brain over a human lifetime. The work brings together nearly two decades of Vanderbilt research collaborations, the university's extensive MRI data collections, and an advanced artificial intelligence-enabled computing platform.

White matter consists of bundled nerve fibers that transmit signals throughout the brain and the rest of the body. Rather than looking at the brain as a single unit, the researchers mapped 72 distinct functional "highways" — distinct white-matter pathways in the brain — and tracked how they grow and age from birth to 100 years old.

Just as height and weight charts help pediatricians monitor the growth of young children, white matter growth charts may one day be used by neurologists to track neural network development and detect abnormalities associated with brain disorders like Alzheimer's, Parkinson's or epilepsy before symptoms become apparent.

The study distilled and analyzed MRI data from nearly 42,000 brains, including more than 4 million individual images — an unprecedented dataset that has been a central focal point for Bennett Landman, PhD, a key contributor to the study whose work has helped standardize and align imaging data across multiple studies.

The study's authors have made the white matter charts and underlying computer code publicly available, giving researchers a new way to track how the brain develops, ages and deviates from typical patterns over time.

To create the white matter growth charts, researchers analyzed data from diffusion MRI, or dMRI, samples across 50 population studies of typically developing brains with no known neurological or psychiatric conditions — about 35,000 after screening for abnormalities. Key findings the Vanderbilt researchers uncovered were:

- Overall volume peaks in the early 30s.
- Pathway integrity plateaus in the 20s.
- Circuitry growth and decline happen independently.
- There's a deep link between maturation and aging.

The study was supported by numerous institutes and researchers at Vanderbilt, Vanderbilt Health, the National Institutes of Health, the National Science Foundation and others. ■

Ryan Underwood & Bill Snyder



+ BY THE NUMBERS

981 solid organ transplants in fiscal year 2026 at Vanderbilt Health.

1,200+ resident physicians currently practice at Vanderbilt Health's hospitals and clinics.

MY HEALTH AT VANDERBILT

My Health at Vanderbilt (MHAV) is an institutionally developed, secure patient portal. It was launched in 2003 and expanded systemwide across all Vanderbilt Health clinical specialties in 2007. MHAV enhances patient engagement and satisfaction by providing direct access to medical records, appointment scheduling, care team messaging, test results, medications, vaccination reminders and much more.

DELIVERING VITAL DATA TO MILLIONS OF USERS

MHAV has high activation and usage rates, making it a key patient engagement tool.

1.5 million*
number of unique users

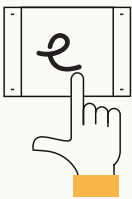
49**
average logins per patient

76%*
activation rate by Vanderbilt Health patients

36.65 million **
number of logins



412,983**
visits booked online by patients



2.83 million**
electronically signed documents



\$181.3 million**
in payments collected



329,565**
telehealth visits



703,689*
medication updates

* 2026, year to date as of July 21.
** Fiscal year 2026 (July 1, 2025-June 30, 2026)

In My Life

TRENT ROSENBLOOM, MD'96, MPH'01

Professor of Biomedical Informatics, Medicine, Pediatrics and Adjoint Professor of Nursing; Vice Chair for Faculty Affairs for Department of Biomedical Informatics; and Director of My Health at Vanderbilt, the online patient portal for Vanderbilt Health.

Rosenbloom earned his MD, followed by a residency in internal medicine and pediatrics, a fellowship in biomedical informatics, and an MPH, all at Vanderbilt University School of Medicine/Vanderbilt Health. His father (an early MD/PhD graduate) and grandfather also earned their medical degrees at VUSM.

Rosenbloom's research focuses on how medical providers interact with health information technologies when documenting patient care and making decisions, and how electronic health records can be leveraged to improve patient engagement.

His wife, Ellie, is a project manager for the NASA-supported Tennessee Space Grant Consortium at Vanderbilt's School of Engineering.

"My Health at Vanderbilt is one of the oldest patient portals in continuous use in the world. I can say 'in the world,' because we've been doing biomedical informatics so well, for so long. We also have the largest faculty of any biomedical informatics department in the world. My faculty affairs role is happy work. It's getting people hired, promoted, tenured, and, if appropriate, emeritus appointments."

Photos by Donn Jones, Erin O. Smith and Spencer Cox



Ellie and Trent Rosenbloom have three children: Shayna, Adena and Micah.



Rosenbloom meets with his colleague Susannah Rose, PhD, Director of the Center for Biomedical Ethics and Society.





He volunteers as a camp doctor for Camp Nebagamon in Wisconsin's Northwoods, a favorite from his own childhood. A splinter temporarily sidelined his son, Micah, this summer.



Fresh from the oven, flaky and light, Rosenbloom's sourdough croissants are in such demand he often bakes them weekly.



Rosenbloom loves endurance trail races. "You're out in the woods alone or with other like-minded people enjoying nature and trying not to fall on your face." Hatch Show Print posters for a Warner Parks race he founded 21 years ago, the Harpeth Hills Flying Monkey Marathon, line Rosenbloom's office wall.



Growth. Change. Evolution.

Strategic Innovation Fuels a Chronicle
of Success Under Jeff Balser's Watch

There are many important dates in Vanderbilt University Medical Center's storied history; however, steps taken April 30, 2016, have perhaps generated the greatest impact in the past half-century on shaping its future. That day, VUMC became a fully independent non-profit entity, legally and financially separate from Vanderbilt University.

Shortly before the separation was finalized, Jeff Balser, MD, PhD, President and Chief Executive Officer of Vanderbilt Health and Dean of Vanderbilt University School of Medicine, explained the need for VUMC's independence: "As the national health care economy re-structures to fewer health systems, we have a choice — leading such a health system or being part of someone else's system. We want to lead our system and control our destiny. We believe health care should be delivered a certain way."

For VUMC to separate itself in this way from the safe harbor of VU, one of the nation's oldest and most prestigious universities, was an almost unheard-of

concept at the time. Through an innovative process led by VU's Chancellor Nicholas Zeppos, JD, and Balser, along with teams from both parties, VU would no longer be responsible for operating a large, resource-intensive academic medical center, while VUMC gained operational and financial independence. This allowed VUMC to have self-governance through its own Board of Directors and the ability to pursue investment capital necessary to fuel growth in an increasingly competitive health care environment.

Today, VUMC, now referred to as Vanderbilt Health (VH), and VU are legally and financially separate entities, yet remain tightly connected in countless other ways through shared missions supporting academia and research.

Balser, whose corporate title changed from Vice Chancellor for Health Affairs to President and CEO on that day in 2016, has dedicated his 41-year career in health care to taking bold steps that have continued to advance VH and Vanderbilt University School of

Medicine into the nation's forefront.

After graduating from VUSM in 1990, Balser spent the next seven years serving as a resident, fellow and faculty member at Johns Hopkins Hospital where he was a cardiac anesthesiologist and surgical intensivist. He was recruited back to Vanderbilt in 1998 as a clinician, investigator, and as the first Associate Dean for Physician-Scientist Development.

Through years of serving in successively responsible leadership roles, including as the James Tayloe Gwathmey Professor and Chair of the Department of Anesthesiology (2001-2004) and Associate Vice Chancellor for Research (2004-2008), Balser was named the 12th Dean of VUSM in the fall of 2008. Months later, at age 47, he became the youngest person ever chosen to serve as the Medical Center's Vice Chancellor for Health Affairs (former title), assuming this role July 1, 2009. During the past 17 years, he has continued to serve in both roles as health system leader and dean.

Balser inherited an organization experiencing a financial crisis tied to the ailing U.S. economy. A deep recession caused by fiscal mismanagement across the home mortgage industry was gripping the nation. The recession's economic impact was so broad and deep that it also enveloped the health care industry. At that point, the Medical Center's days of cash on hand, a measure of organizational financial health, were fewer than 20.

Undaunted by the challenges ahead, Balser's vision for the future of VH was centered on the continued pursuit of excellence across all mission areas. He was also determined to lead the nation in developing the blueprint for personalized medicine, an emerging practice of medicine tailoring prevention, diagnosis and treatment to an individual's genetics and lifestyle.

In 2009, VH had approximately 16,000 employees, 1,840 faculty and \$2.2 billion in operating revenues. By 2015, just before the separation, the Medical Center had approximately 20,000 employees, 2,700 faculty and \$3.5 billion in operating revenues. Organizational growth was respectable and incremental, but sluggish due to restrained access to investment capital.

Another obstacle Balser inherited was the Medical Center's reputation as a place where smart people gathered, and the quality of care was high, but also where customer-friendly service was lacking. Consumer preference surveys at that time often had VH finishing behind Nashville's other health systems and the category of "other."

In 2009, VUSM's research funding from the National Institutes of Health (NIH) was \$289 million, which ranked 12th in the nation among schools of medicine, according to the Blue Ridge Institute for

Medical Research. By 2015, VUSM's funding had increased to only \$291 million.

In its independent structure since the 2016 separation, VH now has more than 45,000 employees, 5,000 clinicians and scientists, and its net revenues have grown threefold to surpass \$9.5 billion at the end of fiscal year 2026. Days of cash on hand have risen to more than 110, and total cash on hand and investments now exceed \$3 billion.

Under Balser's leadership, the health system has grown from two to six regional campuses with eight hospitals and more than 2,100 licensed beds. Annual visits at more than 200 ambulatory clinics located throughout a multistate region now exceed 4 million patients arriving from all 50 states.

Today, thanks in part to acknowledgments for quality, safety and innovation from entities such as the Centers for Medicare & Medicaid Services, The Leapfrog Group and others, VH is home to Tennessee's No.1 adult and pediatric hospitals and dominates a multistate region in overall consumer preference.

"Jeff strengthened every part of our mission while positioning the organization to thrive independently. His leadership was never just about growth; it was about building a durable academic health system capable of delivering exceptional care, advancing discovery, and training the next generation of physicians and scientists," said C. Wright Pinson, MBA, MD, President of the Vanderbilt Health Affiliated Network. From 2009-2025, Pinson served with Balser as VH's Deputy Chief Executive Officer and Chief Health System Officer.

As Dean of VUSM, Balser graduated thousands of physicians, physician-scientists and other health care professionals. In 2012, after years of

The evolving landscape of Vanderbilt Health



The Vanderbilt Health Main Campus in Nashville has seen extensive growth, including the Jim Ayers Tower and a four-story expansion at Monroe Carell Jr. Children's Hospital at Vanderbilt.



The 495,000-square-foot Jim Ayers Tower on 21st Avenue is the largest facility expansion to date. The tower began welcoming patients in October 2025.



The addition of Regional Hospitals has led to Vanderbilt Health now having more than 2,100 licensed beds.

innovation and development, VUSM unveiled a new, four-year model for medical education, Curriculum 2.0. The curriculum addresses the ever-advancing accumulation of knowledge in health care, transforming medical education at Vanderbilt while also impacting medical curricula nationwide by focusing on deeply integrated coursework requiring flexibility and teamwork on the part of faculty and students.

“Throughout his career, Jeff has demonstrated an amazing talent for expressing bold, clear, strategic ideas while positioning and enabling others to evolve and execute those strategies,” said Donald Brady, MD, Executive Vice President for Educational and Medical Staff Affairs at VH and Executive Vice Dean for Academic Affairs at VUSM. “That was true with Curriculum 2.0, our scholarship fundraising efforts, and now our move for more integration of information management and the use of artificial intelligence into medical education.

“His persistent mantra that the goal of VUSM is to train leaders — compassionate, servant leaders — has resonated with generations of medical students. Additionally, his own background as a physician-scientist and his support of our Medical Scientist Training Program has enabled it to flourish and become one of the premier such programs in the nation. Today, the medical school has a national and international prominence that has been achieved because of Jeff’s leadership and his ability to allow his leadership team to thrive.”

VUSM’s NIH funding over the last two decades has grown significantly, advancing from 24th at the turn of the century to now consistently ranking in the nation’s top 10. In 2025, with NIH support exceeding \$560 million, VUSM ranked seventh, despite federal slow-downs in grant awards, while VH’s overall discovery portfolio has grown to nearly \$1 billion in research grants and contracts. Also in 2025, the Departments of Medicine, Otolaryngology-Head and Neck Surgery, Hearing and Speech Sciences, and Emergency Medicine all ranked No. 1 in total NIH funding among peer specialty departments.

Over the past 17 years, Balser’s commitment to growth and innovation across all missions has fueled numerous organizational accom-

“Throughout his career, Jeff has demonstrated an amazing talent for expressing bold, clear, strategic ideas while positioning and enabling others to evolve and execute those strategies.”

- DONALD BRADY, MD

plishments. The Medical Center’s scientific discoveries, training programs and clinical advancements are responsible for multiple institutional strengths, such as the Vanderbilt Transplant Center becoming the world’s leading center for heart transplants and solid organ transplants in aggregate; being home to one of the Southeast’s highest-ranked children’s hospitals and the nation’s fifth largest neonatal intensive care unit; the Mid-South’s largest National Cancer Institute-designated Comprehensive Cancer Center; and the principal Level I trauma center in Tennessee and one of the busiest in the nation. Vanderbilt Health is also home to the region’s largest health professions training center with more than 1,300 physicians training in 200 specialties.

In 2007, as Associate Vice Chancellor for Research, Balser championed the creation of BioVU, which is now the nation’s largest, single-site DNA repository linked to de-identified health record information, containing more than 350,000 genetic samples. BioVU has proven such an asset that Vanderbilt Health developed a wholly owned company called Nashville Biosciences for engaging industry. It was the catalyst for an alliance of 10 major pharmaceutical companies, the Alliance for Genomic Discovery, investing over \$100 million to whole genome sequence BioVU samples. AGD companies and investigators across VH and VU are now using BioVU’s data to speed up drug discovery and development.

“Jeff recognized the potential of personalized medicine long before



Vanderbilt Health has more than 180 ambulatory locations caring for approximately 3.5 million patients annually.



Vanderbilt University School of Medicine offers many advanced degree programs, including the MD. They range from imaging science to medical physics.



Monroe Carell Jr. Children’s Hospital at Vanderbilt is more than 1 million square feet with 363 beds, making it the largest pediatric hospital in Tennessee.

it became a national priority. He understood that by linking genomic data with deeply characterized clinical information, Vanderbilt could create a resource that would fundamentally change how we discover disease mechanisms, identify therapeutic targets, and deliver more precise care to patients,” said Jennifer Pietenpol, PhD, Chief Scientific and Strategy Officer and Executive Vice President for Research for Vanderbilt Health.

“BioVU has grown from a bold idea into one of the world’s most valuable platforms for translational research, enabling discoveries that extend far beyond Vanderbilt and benefit patients worldwide. Jeff’s vision, commitment to innovation, and willingness to invest for the long term made that impact possible,” added Pietenpol, who holds the Brock Family Directorship in Career Development.

Vanderbilt Health’s steady investment in biomedical informatics and personalized medicine has allowed the institution to set the pace nationally in this field, leading to the 2016 announcement of a \$71.6 million NIH grant, the single largest award in Vanderbilt’s history, and for the Medical Center to become home to the Data and Research Center for NIH’s *All of Us* million-plus person precision medicine program, a responsibility it continues to hold today.

“Over the past 20 years, VUMC has risen to international prominence as a leader in personalized medicine,” said Dan Roden, MD, Professor of Medicine, Pharmacology and Biomedical Informatics, Senior Vice President for Personalized Medicine, and holder of the Sam L. Clark, MD, PhD Chair.

“That happened because we have had extraordinarily talented people collaborating across basic, translational, population and implementation science. But there are lots of talented people at lots of other institutions, so a very important and underrecognized ingredient for our success has been Jeff’s enthusiastic and visionary support, from the very beginnings of BioVU to the Alliance for Genomic Discovery, to the PREDICT program, to our participation in multiple national personalized medicine initiatives, like the Data and Research Center for *All of Us*, and many others,” he said.

“Without Jeff’s sustained institutional leadership, we would not have been able to build those programs and help shape the contemporary discipline of personalized medicine.”

Many former employees who reported directly to Balser have gone on to achieve top positions in academia, including becoming a university president, medical school deans, and directors of the National Cancer Institute and National Library of Medicine.

Recent examples of Balser’s lasting impact on the growth of VH include the 2025 opening of Jim Ayers Tower, the largest hospital construction expansion in Vanderbilt University Hospital’s history; completion of a four-floor expansion to Monroe Carell Jr. Children’s Hospital at Vanderbilt; and the addition of the 270-bed Vanderbilt Clarksville Hospital to the Vanderbilt Health system in February 2026. Plans are in place for construction of a new freestanding hospital in Murfreesboro, Tennessee, to be called Vanderbilt Health Rutherford County, and the conversion of a 350,000-square-foot office complex in adjacent Williamson County into a multispecialty clinic and ambulatory surgery center.

Earlier this year, Balser announced he will retire on Dec. 31. A national search to identify his successor was completed in July. David C. Miller, MD, MPH, Chief Executive Officer of Michigan Medicine and Executive Vice President for Medical Affairs for the University of Michigan, will join VH on Jan. 1, 2027, as President and CEO and Dean. ■

Welcoming a new leader

University of Michigan’s David C. Miller chosen to succeed Jeff Balser in January 2027

BY JOHN HOWSER + PHOTOGRAPH SUBMITTED

David C. Miller, MD, MPH, Chief Executive Officer of Michigan Medicine and Executive Vice President for Medical Affairs for the University of Michigan, has been chosen to succeed Jeff Balser, MD, PhD, as the next President and CEO of Vanderbilt Health and Dean of Vanderbilt University School of Medicine. Miller will assume the role at Vanderbilt on Jan. 1, 2027.

Miller’s selection as the new senior leader for Vanderbilt Health (VH) and Vanderbilt University School of Medicine (VUSM) finalizes an extensive national search by the VH Board of Directors to identify Balser’s successor.

“From an incredibly strong field of applicants, Dr. Miller’s personal warmth, prior leadership experiences, and commitment to organizational culture stood out. David has presented an exciting vision for advancing the Medical Center’s missions and is the ideal candidate to succeed Dr. Balser. We look forward to welcoming David, his wife, Inge, and family to the Nashville community,” said Edie Carell Johnson, JD, Chair of the VH Board of Directors.

“On behalf of the Board, I want to again express my deep appreciation to Dr. Balser for his many years of dedication to the Medical Center’s growth and success. Jeff will be remembered for his commitment to excellence and as a leader whose contributions will continue to impact generations of patients and families now and into the future.”

Miller has spent the bulk of his career with the University of Michigan and Michigan Medicine where he has held a variety of administrative and academic roles and has been instrumental in enhancing quality, safety and patient experience and expanding access to health care services across Michigan through operational growth and strategic partnerships.

Similar in size and scale to Vanderbilt Health, Michigan Medicine is a statewide academic health system with 12 hospitals, 5,800 clinicians, 2,500 physicians-in-training, 97,000 annual discharges, 4.7 million outpatient visits and \$820 million in annual research awards.

As the new leader of VH and VUSM, Miller will be responsible for shaping the institution’s core missions of advancing health care delivery, scientific discovery, health care training and education, and community engagement while championing a culture of collaboration, service and clinical excellence amid a period of rapid growth.

“Serving as CEO and Dean has been tremendously rewarding, and I’m forever grateful for everyone’s support. I want to congratulate Dr. Miller and welcome him into the Vanderbilt family,” said Balser. “David is a seasoned leader with deep, career-long experience in our core missions of health care, research and teaching. He

joins us at an exciting and transformative moment in history. I am confident he will sustain our positive momentum while nurturing the distinctive and caring culture we all treasure.”

Miller will be responsible for the development, implementation and fulfillment of strategies spanning VH and VUSM and will be central to maintaining the scholarly activities shared by the Medical Center and University.

“Vanderbilt University and Vanderbilt Health together form one of the largest and most eminent research enterprises in American higher education — one that turns discovery into better treatments and educates the next generation of physicians and scientists,” said Daniel Diermeier, PhD, Chancellor, Vanderbilt University. “Our School of Medicine sits at the heart of that work, which is why this appointment matters well beyond our campus. I am delighted to welcome Dr. Miller as its Dean and a partner in this transformative work, and I look forward to what we will accomplish together.”

Prior to his service as the CEO of Michigan Medicine, Miller served as Executive Vice Dean for Clinical Affairs for the University of Michigan Medical School and President of U-M Health, a clinical enterprise with approximately 20,000 employees caring for more than 1.3 million patients, where he oversaw all aspects of strategic, operational, clinical, cultural and financial performance. During his tenure at Michigan Medicine, Miller also led the clinical, business and cultural integration of the statewide academic health system.

Before serving as U-M Health’s President, Miller served as Chief Clinical Officer for Michigan Medicine’s University Hospital and the Frankel Cardiovascular Center. As a Professor in the Department of Urology, he also maintained a clinical practice focused on the diagnosis and management of patients with prostate cancer.

Miller has been awarded research funding for urologic cancer by the National Institutes of Health, the Agency for Healthcare Research and Quality, and the American Cancer Society. A frequently invited speaker on urologic cancer, Miller is the author or co-author of more than 300 peer-reviewed articles, editorials and abstracts. In addition to his clinical practice, Miller served as Director of the Michigan Urological Surgery Improvement Collaborative (MUSIC) from 2011 through 2020, a coalition of more than 40 urology practices improving urological care in Michigan.

“I am honored to be named the leader of one of the most highly regarded academic health care organizations in the country,” Miller said. “Vanderbilt is synonymous with exemplary patient care and world-leading innovation and medical education; I am humbled to be following in Dr. Balser’s footsteps. I am eager to begin meeting

faculty, staff and students to learn what makes Vanderbilt such an exceptional organization with an unparalleled culture. My wife, Inge, and I are also excited about getting to know Nashville and the entire state.”

Miller earned a Bachelor of Science from the University of Michigan, Doctor of Medicine from Washington University School of Medicine, and a Master of Public Health with an emphasis in epidemiology from the University of Michigan School of Public Health. His residency training in urology was at the University of Michigan, followed by a health services research and clinical fellowship in urologic oncology at the University of California, Los Angeles. ■



David C. Miller, MD, MPH



A photograph of a child lying on a gurney, wearing a blue hospital gown. The child's arm is visible, and there is a bandage on their shoulder. Medical equipment, including a yellow strap, is visible on the gurney. The background is dark and out of focus.

CARE REIMAGINED



Expanded pediatric hematology
and oncology spaces transform
the treatment experience for
patients, families and the teams
who care for them.

BY CHRISTINA ECHEGARAY + PHOTOGRAPH BY ERIN O. SMITH

When 5-year-old Carrigan Cox began experiencing unexplained leg pain in March 2024, cancer was the furthest thing from her parents' minds. The Smithville, Tennessee, kindergartner had always been healthy and active.

Doctors initially explored several possible explanations for her symptoms, including a hairline fracture from a playground fall. But an MRI revealed concerning abnormalities and led to an urgent referral to Monroe Carell Jr. Children's Hospital at Vanderbilt, home to a nationally ranked pediatric hematology and oncology program.

Two days later, following a bone marrow biopsy, doctors diagnosed Carrigan with pre-B cell acute lymphoblastic leukemia, the most common childhood cancer.

"It was a shock for all of our family and especially for me and my husband, because that was not anywhere on our radar," said her mother, Whitney Cox. "And so we were, of course, just praying that it was going to be something different."

What followed was a treatment journey that would span 861 days, including 684 chemotherapy doses, eight blood transfusions, procedures, and countless clinic visits and hospital stays. Carrigan spent a lot of time at Monroe Carell.

During that time, Carrigan became one of the first patients to benefit from the newly expanded and renovated Pediatric Hematology/Oncology outpatient clinic and infusion space at Monroe Carell, designed to meet the unique needs of children, adolescents and families facing cancer.

The expansion comes at a critical time for Monroe Carell's childhood cancer program, which has doubled in size over the past 15 years and now cares for more than 250 newly diagnosed patients and more than 14,000 outpatient visits each year.

Debra Friedman, MD, MS, Director of the Division of Pediatric Hematology/Oncology and Deputy Director of Vanderbilt-Ingram Cancer Center.

ANNE RAYNER



The updated space was made possible through "A Campaign Against Childhood Cancer," a philanthropic initiative supported by individuals, families and businesses throughout the community. Campaign support also advances research and training initiatives.

"We are deeply grateful for the extraordinary leadership, advocacy and commitment of our campaign co-chairs, Allison DeMarcus and Kai-ley Hand, whose efforts helped make this vision a reality," said Juan C. Salazar, MD, MPH, Chair of the Department of Pediatrics, System Pediatrician-in-Chief and holder of the James C. Overall Chair in Pediatrics.

"This expansion was made possible by the remarkable generosity of our donors, families, businesses and community partners. Their investment will transform the experience of care for children and families facing cancer and blood disorders, while expanding our capacity to advance discovery, train the next generation of pediatric specialists, and bring innovative therapies to our patients," Salazar continued. "Most importantly, it allows us to provide children and families with exceptional, compassionate care when they need it most, while further establishing Monroe Carell as a premier destination for pediatric hematology and oncology care."

For Whitney Cox, the difference between the division's former outpatient space and the new space is striking.

"I was blown away the first time we walked into the new space," she said. "Having your own area, being able to spread out, watch a movie, eat together as a family, and just have some privacy during a long day of treatment — it makes such a difference."

Debra Friedman, MD, MS, Director of the Division of Pediatric Hematology/Oncology and Deputy Director of Vanderbilt-Ingram Cancer Center, has witnessed the incredible growth of the division in the past two decades that prompted the need for an expanded, updated space.

"When I came here in 2008, we saw about 90 new cancer patients each year and were caring for them in essentially the same space," said Friedman, who holds the E. Bronson Ingram Chair in Pediatric Oncology. "The timing was right to expand to meet the needs of our growing community. We are so grateful to the individuals, families and businesses who made this possible. These children and families spend many hours, many days and sometimes many years with us. Having a space that is comfortable, welcoming and designed around their needs truly matters."

Growing to Meet Demand

Ranked among the nation's best childhood cancer programs by *U.S. News & World Report*, the Monroe Carell team partners with Vanderbilt-Ingram Cancer Center, the only National Cancer Institute-designated Comprehensive Cancer Center in Tennessee that treats pediatric and adult patients in one location.

Monroe Carell also offers Tennessee's only childhood cancer program with all services under one roof. This includes all pediatric med-

ical and surgical subspecialties as well as experts in social work, psychology, child life, nutrition, pharmacy and more.

Because families come from across the country for care, the Division of Pediatric Hematology/Oncology has experienced record patient volumes in recent years, underscoring the need for additional clinic and infusion capacity.

Upon hearing the need, the community rallied around “A Campaign Against Childhood Cancer” to make the expansion possible.

The late Joey Jacobs and his family were among those who donated to the Campaign, making a leadership gift to advance the project. Within the updated space, The Joey A. Jacobs Family Lobby is named in his honor.

Joey Jacobs was a beloved pillar of the community, a veteran in the health care industry, and a committed advocate for Monroe Carell — serving on the Advisory Board for 15 years. His wife, Debbie, and sons, Brent and Scott, have since joined the board to carry on his legacy, along with the involvement of Brent’s wife, Katie.

“Joey was a deeply caring person who led by example,” said Debbie Jacobs. “He wholeheartedly believed in the responsibility and value of giving back, and I know that he would be overjoyed to see the way the community came together to make this space possible for children with cancer. Our family is honored to be part of a warm and welcoming space for families in their time of need. It is very special to commemorate Joey and his life in this meaningful way.”

Previously, outpatient infusion treatments were delivered in a large, shared room in the clinic. Children of all ages, from toddlers to young adults, received treatment side by side in recliners. While families and staff made the best of the space, it had outgrown the needs of the program.

Occupying the entire sixth floor of the Doctors’ Office Tower, the renovated outpatient clinic was designed with feedback from patients and families. Its direct connection to the hospital inpatient unit also enables seamless coordination and continuity of care for the hematology and oncology team.

The newly expanded infusion center includes 25 individual infusion spaces, along with dedicated rooms for specialized procedures such as apheresis. The clinic portion includes 25 exam rooms, more than doubling previous capacity.

“Patients have individual infusion spaces and privacy when they want it, but they can still interact with other patients when they choose,” Friedman said. “It’s open, airy and welcoming. The artwork is beautiful; the colors are calming, and it creates a much more relaxing environment for children who are undergoing difficult treatments.”

Because many children develop friendships during treatment, some infusion rooms were designed with partitions that can be opened when patients want to interact with one another.

“We really listened to what families told us was important,” Friedman said. “That feedback directly influenced the design.”

The space also includes a dedicated lab, Child Life areas, a space for physical and occupational therapy, consultation rooms, expanded gathering spaces, and amenities intended to make long treatment days more manageable. Each infusion room is also outfitted with individual televisions for patients to pick family-friendly movies.

For families like the Coxes, those details matter.

During active treatment, clinic visits often lasted the entire day, with Carrigan’s infusions sometimes ending at 6 p.m. Maintenance treatments and occasional blood transfusions can require hours in the infusion center.

A NEW SPACE

Top: An updated, centralized nurses’ station with low-profile walls means staff are always accessible to patients and their families.

Middle: Twenty-five, new infusion rooms provide calm privacy. Some rooms have partitions that can be opened when patients want to interact.

Bottom: A dedicated phlebotomy space in the renovated outpatient clinic allows more convenient blood draws during patient visits.

Photographs by Donn Jones





The Cox family of Smithville, Tennessee, includes, front row, Callahan, Carrigan and Clara, and back row, Brandon, Cora and Whitney.

"In the old space, you were right beside other families all day," Whitney Cox said. "There wasn't much room, and everyone was trying to manage their own situation. Now we can spread out, have a meal together, watch a movie and just focus on Carrigan. It makes those long days so much easier."

A Lift for Patients, Families and Staff

The new facility was designed not only to create a more comfortable environment but also to improve efficiency and patient flow.

Additional exam rooms help reduce wait times and allow more patients to be seen throughout the day. Larger rooms provide more space for families and care teams to have important conversations. The improved clinic layouts also help streamline appointments.

"The care our patients receive has always been exceptional," Friedman said. "Now we have a space that matches the level of care being delivered."

The expanded footprint also positions Monroe Carell for the future of pediatric cancer care and research. The program is leading the way in childhood and young adult cancer research through more than 60 active clinical trials and continued advances in precision oncology, including targeted therapies based on a tumor's genetic profile, new treatments for leukemia and other bone marrow disorders, and vision-preserving approaches for retinoblastoma.

Researchers are improving outcomes for children with sarcoma and advancing studies in survivorship, quality of life and palliative care. As one of only a few programs in the Southeast offering this level of personalized care, Monroe Carell is pioneering the use of circulating tumor DNA to detect cancer earlier and guide treatment more precisely.

Many of these emerging therapies, including advanced immunotherapies and cellular therapies, are increasingly designed to be administered in outpatient settings. The additional clinic and infusion capacity create new opportunities to provide treatments outside the hospital when appropriate.

"As therapies continue to evolve, more care can often be delivered in the outpatient setting," Friedman said. "Families want to spend as much

Ashley Frost, MSN, RN, CPN, Manager of Pediatric Hematology/Oncology and Outpatient Infusion.



ERIN O. SMITH



"Nobody wants to have a child going through cancer treatment, but if you're going to spend so much time in a clinic, having a place that's welcoming and comfortable means more than people realize."

– Whitney Cox

time at home as possible, and having this space allows us to offer more options while maintaining the highest standards of safety and care."

Beyond infusion and clinic services, renovation work has also modernized the 31 existing rooms on the 6A and 6B hematology and oncology inpatient units. Updates include brighter lighting, renovated cabinetry, improved sleeping accommodations for parents, and refreshed patient care areas.

The benefits of the reimagined spaces extend beyond patients, said Ashley Frost, MSN, RN, CPN, Manager of Pediatric Hematology/Oncology and Outpatient Infusion.

For the physicians, nurses, advanced practice providers, care partners and support staff who spend their days caring for children with cancer, the expanded facility represents a significant morale boost and enhanced experience.

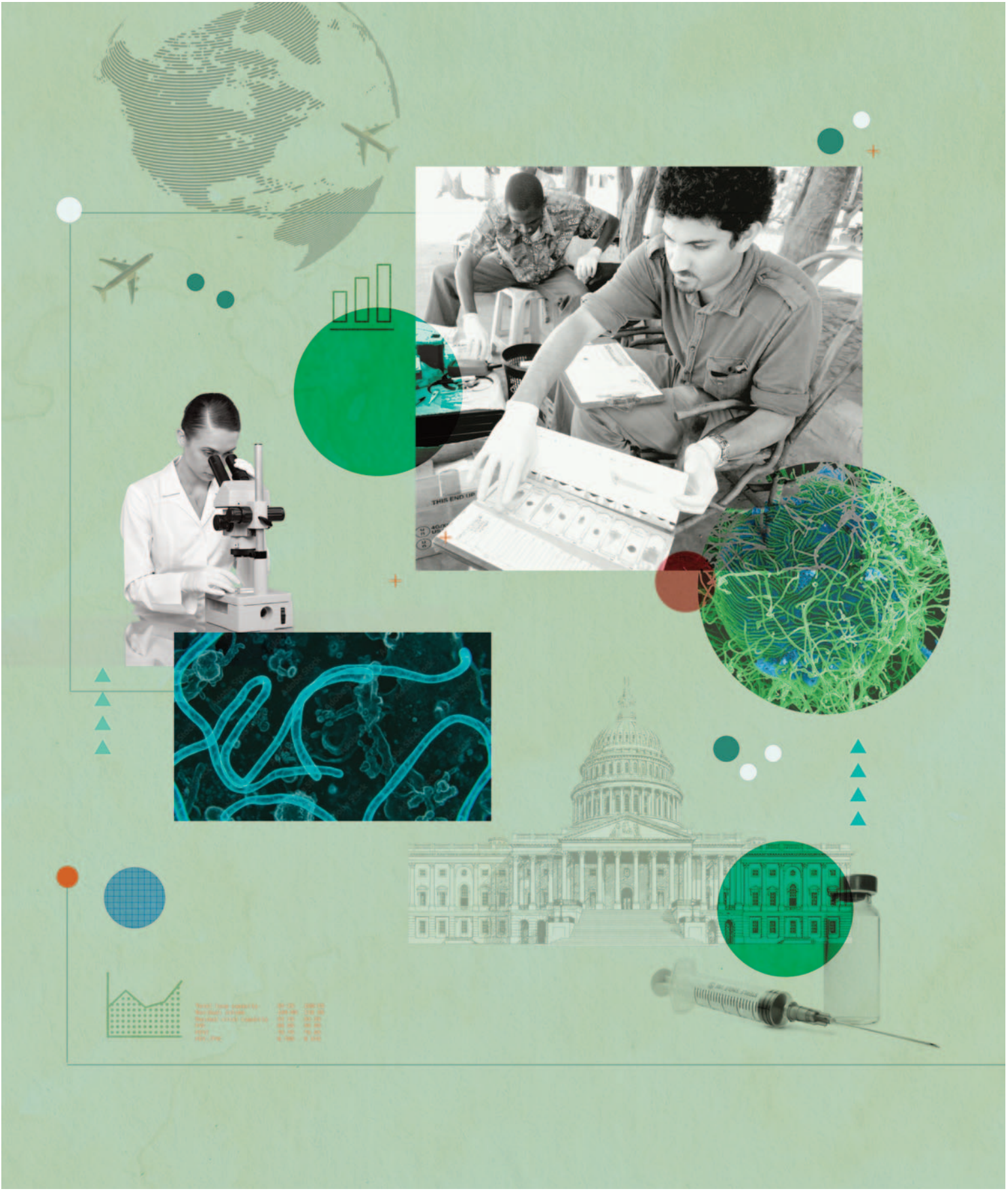
"The transition between different parts of the care experience is now much easier and more efficient, reducing stress and creating a well-coordinated journey for patients and families," said Frost.

"For care teams, the updated space supports better collaboration, workflow efficiency and patient-centered care, allowing us to focus more fully on delivering an exceptional experience and high-quality outcomes. Together, these features create a more supportive, comforting and enjoyable experience for children and their families while receiving care."

The Cox family has experienced the impacts firsthand.

Today, Carrigan is starting second grade and focusing on being a typical 8-year-old. She loves swimming, cheering on the sidelines and spending time with her siblings. She has been in remission since August 2024, but she continued treatment on maintenance therapy protocols. Her hair has grown back, and she is doing well. She rang the clinic's cancer bell Aug. 9 to signify the end of her treatments.

"We're so grateful for Vanderbilt, for her care team and for all the donors who helped create this space," Whitney Cox said. "Nobody wants to have a child going through cancer treatment, but if you're going to spend so much time in a clinic, having a place that's welcoming and comfortable means more than people realize." ■



Catalysts for change

(for three decades)

VANDERBILT'S MASTER OF PUBLIC HEALTH GRADS
ARE THE PROBLEM SOLVERS THE WORLD NEEDS

BY JILL CLENDENING + ILLUSTRATION BY DIANA DUREN

An

epidemiology and health policy expert with the U.S. Homeland Security Council fields a call from the White House to formalize next steps in the federal response to the Ebola outbreak, now the largest in the Democratic Republic of Congo's history.

A New York City Department of Health and Mental Hygiene informatics specialist leads a team to develop and deploy Public Health Partners Connect, a data project that allows the department to identify and manage relationships with more than 20,000 external partners. This system supports NYC Vaccine Finder, launched during the COVID-19 pandemic. The online tool is now part of a comprehensive public health mapping tool, connecting 8.58 million residents with resources throughout the city.

A Tennessee Department of Health leader is the principal investigator for the Rural Health Transformation Program, overseeing the awarding and distribution of \$1 billion in federal grants to local initiatives to strengthen the state's rural health care infrastructure.

A Vanderbilt Health pediatric infectious disease specialist directs global infection surveillance and prevention research, leads vaccine trials, and serves as a principal investigator for the Centers for Disease Control and Prevention-funded New Vaccine Surveillance Network. The network assesses pediatric viral respiratory and gastrointestinal infections and vaccine impact in children.

These are just a handful of myriad examples of how graduates of the Master of Public Health program at Vanderbilt University School of Medicine are shaping and impacting

public health, conducting lifesaving investigations, implementing vital quality improvements, and guiding health care transformations to build healthier communities worldwide.

The MPH degree is one of nine professional degrees conferred by Vanderbilt University School of Medicine. It is also supported by the Vanderbilt Institute for Population and Public Health (formerly the Institute for Medicine and Public Health).

The two-year, interdisciplinary program, initially affiliated with the Department of Preventive Medicine, enrolled its first students 30 years ago in 1996. As of 2026, there have been more than 400 graduates. For the first 15 years, the program focused on preparing physicians and others with doctoral degrees for research and practice careers in academia and applied public health.

Then in 2010, concentrations in global health and epidemiology were established, and admission requirements were updated. The global health track admitted its first students in 2012.

"When we opened the global health track, we attracted a much broader group of students," said Christianne Roumie, MD, MPH, Professor of Medicine, Pediatrics and Health Policy, and Director of the Master of Public Health Program. "At the same time, we continued to focus on retaining our small, career-focused program where we give students individualized mentorship and leadership skills to create the new kind of public health professional that we envision going out into the world and representing the Vanderbilt way of doing

things. This is a small but mighty program."

In 2011 the Department of Preventive Medicine was renamed and its scope expanded. The new Department of Health Policy, led by founding Chair Melinda Buntin, PhD, became a base for health policy research and built on existing programs in population-based epidemiology and prevention. Continued recruitment of world-class experts has resulted in a strong primary faculty core of around 20, supported by secondary, adjunct and affiliated faculty. An MPH program track focused on health policy was subsequently added in 2016.

An intentional 2-to-1 student to faculty ratio, with an average annual MPH class size of 30, means the students in the MPH program develop close mentors and relationships with colleagues, said Roumie, who graduated from the program herself in 2005. That personalized approach is one that works well, she added.

"Just as Vanderbilt Health has a clear focus on personalized medicine, we do personalized MPH," said Russell Rothman, MD, MPP, Director of the Institute for Population and Public Health and Senior Vice President for Population and Public Health. "Some students are physicians in fellowship training, and they're getting this MPH to advance and build a career focused on research or the more clinical aspects of public health or population health. Some students are fresh out of undergrad; this is their final degree, and they want to go into the workforce. This is about building that pathway for each student to make sure that they have all the essentials for success — critical thinking, basic epidemiology, evaluation, public health, leadership skills and confidence."

JAY BALA, MPH'14, DRPH

Senior Director of Strategic Analytic and Informatics Initiatives



Pivoting from winemaking to health informatics

Jay Bala, MPH'14, DrPH, was working as a chemist for one of the world's largest wineries in California, when he realized he wanted to do something more. He knew people would still be drinking great wine, whether he was at the bench analyzing the vintage or not. Bala had a particular interest in global health, which drew him to apply for the global health track of the Vanderbilt MPH program. The program's smaller size and welcoming atmosphere were added bonuses.

"Wine was great, and I really enjoyed it, but at the end of the day, it didn't fulfill that itch of wanting to help and improve the world," Bala said.

For his public health practicum at Vanderbilt, Bala traveled to rural Zambia, where he tracked data on malaria and helped manage epidemiological surveillance for rural clinics. The experience solidified his love of informatics.

Today, he is the Senior Director of Strategic Analytic and Informatics Initiatives at the New York City Department of Health and Mental Hygiene, where he leads a team of data scientists, data engineers, analysts and public health professionals to develop data projects and infrastructure for the agency to be more efficient or agile when it comes to meeting the needs of the city's population. He maintains many connections he formed during his time at Vanderbilt.

"It's really nice to develop those relationships as you're learning about public health, and then later on, use them as a sounding board or a safe space when you have an idea around a project you'd like to launch," he said.

NATASHA HALASA, MD, MPH'04

Professor of Pediatrics, Monroe Carell Jr. Children's Hospital at Vanderbilt



Reimagining immunity and infection control

Natasha Halasa, MD, MPH'04, Craig-Weaver Professor of Pediatrics in the Division of Pediatric Infectious Diseases at Monroe Carell Jr. Children's Hospital at Vanderbilt, remembers discussing her career path with her pediatric residency mentors at Columbus Children's Hospital. She was interested in clinical research, and they advised her that to "really do clinical research well," she needed additional, formal training.

That made Halasa's next steps easy. She came to Vanderbilt to complete a fellowship in pediatric infectious diseases, guided by her mentor Kathryn Edwards, MD, Professor Emerita of Pediatrics, an in-

ternationally recognized expert in vaccinology. And she concurrently completed an MPH.

"The MPH was 100% instrumental in me having a better understanding of clinical research and how to think critically," Halasa said. "I learned how to review articles — to look at them critically to make sure the research is done properly. Do the results line up with their methods, and do their conclusions align with their results? And how to do my own clinical research and do it well."

And it's paid off. Since 2002, Halasa has been involved in pediatric vaccine trials, including infants and specialized populations, including immunocompromised hosts. She directs the Vanderbilt Infection Surveillance and Prevention Research Program, determining the burden of diarrheal and respiratory illnesses in children and specialized populations and finding ways to reduce their burden.

She is currently principal investigator of three National Institutes of Health grants investigating high-dose influenza vaccine versus standard-dose influenza vaccine in pediatric and adult solid organ recipients. She is the site PI for the CDC-funded New Vaccine Surveillance Network, and contact PI for the NIH-funded ECHO (Environmental Influences on Child Health Outcomes) biorepository.

"I always say that having an MPH sends the message that you think public health is important and that you received formal training for clinical research," she said. "There is definitely credibility that goes along with it."

RACHEL IDOWU, MD, MPH'14

Director for Bioresponse for the Homeland Security Council

Defending populations on a global scale

Rachel Idowu, MD, MPH'14, is a Director for Bioresponse for the Homeland Security Council within the Executive Office of the President. Her current assignment addresses the Ebola outbreak in the Democratic Republic of the Congo (DRC). She offers her expertise in guiding how federal funds are spent on outbreak response to reach the end of the crisis as quickly as possible.

"These outbreaks — whether it's Ebola in the DRC or the cyclosporiasis outbreak happening in the United States with lettuce, the question is" Idowu asked, "how do human beings come into contact with pathogens in nature? And what are the health systems that can put boundaries on how far and how quickly an outbreak spreads?"

"There are parts of the world where one or two cases happen, and the system is strong enough and responsive enough to identify it quickly, notify the right authorities, and put the tools in place to stop it. We're grateful when a system works like that, but ... sometimes the pace of how an outbreak spreads outstrips the government's ability to manage."

The United States is protecting its borders by directing federal resources to save lives and contain the virus.

"President Trump is serious about not wanting Ebola to come to the United States and is putting a lot of resources — financial as well as technical — into solutions inside the DRC so it can be controlled there," she said.

Idowu initially came to Vanderbilt for a general surgery residency, and never imagined a government career in Washington. She had

nudges from wise mentors early in her medical training who told her public health was the best fit for her big-picture mindset.

"They said, 'Surgery is great, but if you really want to change lives at national and international scale, you're going to need to do public policy or public health or something that gives you that 30,000-foot view over how health systems work' ... They were right."

After earning her MPH, Idowu joined the Centers for Disease Control and Prevention, and from 2012 until 2024, she helped more than 20 countries with limited resources organize and restructure their public health systems.

JW RANDOLPH, MPH'18

Deputy Commissioner for Public Health Infrastructure, Tennessee Department of Health



Strengthening the neighborhoods he knows

JW Randolph, MPH'18, grew up in rural East Tennessee, near the confluence of the Hiwassee and Tennessee rivers. His first job out of college was serving as an environmental and community advocate in Washington for Appalachian Voices, a nonprofit organization formed to protect the natural resources and people of Appalachia.

When his wife matched at Vanderbilt for her pediatric residency, they returned to Tennessee. For a few years, Randolph did similar public policy work at the Tennessee General Assembly before enrolling in the Vanderbilt MPH program.

"I backed into public health from doing public policy work," Randolph said. "I came to the MPH program to really learn more about how we can better use systems and ensure conditions that allow communities to thrive."

"Vanderbilt taught me to value data, but also the importance of relationships, communication and the lived experience of the communities we serve. Those principles still guide my work to strengthen Tennessee's rural health system, support older adults and caregivers, develop public health leaders, and build a culture within the Department of Health that's grounded in trust, compassion, service and excellence, which are our four values."

In 2018, Randolph joined the Tennessee Department of Health as a policy analyst. In 2024, he was named Deputy Commissioner for Health Strategy and Regulation and now serves as Deputy Commissioner for Public Health Infrastructure.

One of Randolph's key roles is overseeing the Tennessee Healthcare Resiliency Program, an initiative funding capital investments and practice transformations for rural and underserved communities. Backed by federal recovery and Rural Health Transformation funds, it aims to expand care capacity and modernize medical infrastructure statewide.

"My public health mission that I established as a student is 'first-world health outcomes for all people in my home state of Tennessee,'" Randolph said. "A billion dollars is not nearly enough to get us there, but we know that we have an opportunity to do good things with these public resources, and I'm grateful to the people that I built relationships with there, who I learned from and who continue to play a supportive role in helping the state of Tennessee do good things for our people."

Staying ahead of the curve - The prevention paradox

The world's public health landscape has shifted seismically over the past decade. The "prevention paradox" notes that it's only when things go wrong that you notice public health. Lessons learned from COVID-19 have fueled collaborations among local, regional, national and global stakeholders to improve public health outcomes and improve preparedness for the next pandemic. Environmental changes have spurred important initiatives to safeguard and sustain global health. Big data and new ways of using artificial intelligence have the potential to make disease prevention and tracking more effective and efficient. At the same time, funding has become increasingly uncertain for research, training and new population health initiatives.

A big impact on training the next generation of public health leaders has been the Department of Education's reclassification of many health care and public service degrees, including the MPH, which no longer qualify as "professional degrees" under federal student aid rules. This change, effective July 1, lowers the amount of loans for these programs, which can create financial barriers for students.

Leaders in public health education are adjusting course to stay ahead of the curve. Vanderbilt is part of the Association of Schools and Programs of Public Health, and the group's monthly check-ins and annual retreat are opportunities for stakeholders to strategize so the contingent of well-trained public health professionals remains robust.

"We're definitely doing a lot of self-reflection about what is the future for MPH degrees here and across the nation," said Rothman, who is also the Ingram Professor of Integrative and Population Health. "We are sticking to our 'North Star' of training students so that they understand the ways they can improve health for individuals, for families, for communities and for the public more broadly. At the same time, we are thinking about how to make our public health messages more aligned with the public. How do we partner with communities to help people understand the importance of public health?"

Securing funding for dedicated, endowed scholarships to attract a wider pool of MPH applicants and to support students throughout their training is a significant goal, Roumie said. Also, in addition to the traditional two-year MPH program, the idea of an accelerated pathway degree is being considered, as well as providing continuing education opportunities for public health professionals.

"We're exploring partnerships to help provide continuing education for the Tennessee Department of Health," Roumie said. "Many employees at both the state and the county health departments might not have a master's in public health; they might have a bachelor's degree in public health or another degree. They are really looking for knowledge to expand their skill set. So, we're partnering with them to provide training seminars, both some clinical training for those front-line county health professionals and public health content that addresses methodology and other helpful topics."

Roumie and Rothman agree that while there are many uncertainties as new health professionals are trained to tackle public health issues, the payoff of doing it right is well worth it. A significant way others can help is to support scholarships for MPH students.

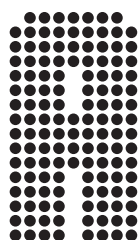
"Some of this has been very challenging, but we're using this as an opportunity to improve and expand ways that we train people for future public health roles, because when public health works well, it helps everybody," Rothman said. ■



SOCIAL MODE: ACTIVATED

Avatars help autistic adults connect with each other — and to the world

BY BILL SNYDER + ILLUSTRATION BY ADOBE STOCK



Adults with autism are working with engineers, computer scientists and psychologists at Vanderbilt University and Vanderbilt Health to design an augmented reality platform, populated by virtual avatars, which can strengthen their connection to each other and the world.

The participant-informed research, which was featured in April at an international Conference on Human Factors in Computing Systems in Barcelona, Spain, is at the forefront of efforts to help people with autism lead more fulfilling, happier lives.

Many adults with autism become socially isolated, lonely and depressed. In-person interactions can be stressful, in part because of differences in communication styles or sensory sensitivities.

But playing games using life-size avatars, or virtual representations of themselves, in an environment designed to be friendly to the needs of people with autism can make social interaction more comfortable. Augmented reality also can overcome distance and transportation challenges, such as difficulty with driving, that otherwise would prevent autistic people from meeting others in person.

The goal is to design a platform from which — like science fiction — adults with autism can transport realistic, three-dimensional avatars of themselves to another person's space, "as if they were sitting in front of each other," said Nilanjan Sarkar, PhD, who led the research.

Sarkar, Professor of Mechanical Engineering, holds the David K. Wilson Chair and is Director of the Robotics and Autonomous Systems Laboratory in the Vanderbilt University School of Engineering.

Leveraging a pilot grant from the Vanderbilt Kennedy Center, since 2010 Sarkar has received \$4.8 million in grants from the National Institute of Mental Health to develop adaptive response and co-robotic technologies, and virtual intelligent systems for people with autism.

He also has designed adaptive technologies for people with schizophrenia, dementia, and those recovering from a stroke to help them learn new skills, function better and connect with others.

"This ability to transport somebody to a different place, to be together ... has implications beyond autism," Sarkar said during a recent Conversation on Research in Intellectual and Developmental Disabilities hosted by the Kennedy Center.

In the future, avatars could enable colleagues in remote locations to work together on a project in a real conference room, in real time.

"The whole future of work can be influenced by the ability to do that," he said. "Of course, it's not that simple."

Designing useful adaptive technology is especially challenging for the more than 5.4 million adults in the United States who identify as being on the autism spectrum.

"Many autistic people have a strong autistic identity," said Amy

“We wanted to create an environment where it’s light; it’s playful. That’s a friendly way of connecting with others.”

– Mahrukh Tauseef, graduate student in Electrical and Computer Engineering

Weitlauf, PhD, Associate Professor of Pediatrics at Vanderbilt Health, who co-authored the paper. “It’s how they experience the world, but the world is not always set up in accessible ways for them.”

Communication and social skills among this group vary widely. Some people with autism have difficulty understanding or responding to the cues of their neurotypical peers (those without autism). Even when people understand those cues, masking or hiding their autistic selves can be tiring and isolating.

“Autistic people want social connections in spaces and ways that are comfortable and affirming,” said Weitlauf.

Building and maintaining social relationships can also be an important part of finding fulfilling work. Fortunately, as the understanding of individuals with autism has advanced rapidly, so has the development of adaptive technology that can facilitate communication and connection.

Two-dimensional, video-based platforms like Zoom and FaceTime do not allow autistic individuals to filter out the stress-inducing environmental stimuli around them or achieve a realistic sense of presence. More appropriate may be augmented reality headsets and glasses, which use sensors, motion-sensing cameras and a processing unit to layer virtual imagery over real-world settings.

Another technological innovation, the MetaHuman software developed by Epic Games, merges virtual reality, human animation and video analysis techniques to create very realistic avatars.

A realistic setting

Sarkar has found that augmented reality telepresence is more acceptable to individuals with autism than virtual reality. “With virtual reality, everything is artificial,” he said. “Augmented reality blends the real with the virtual ... It’s much closer to real interaction.”

As an example, aspiring chefs can retain headset-projected instructions better if they are set against a realistic setting.

“Imagine trying to learn to cook a new dish,” added Weitlauf. “Having augmented support to cook that dish in my own kitchen instead of a virtual one ... I’m more likely to be able to do it again.”

The study reported in April recruited eight adults with autism through the Kennedy Center’s Treatment and Research Institute for Autism Spectrum Disorders (TRIAD). Weitlauf, who received her PhD in Clinical Psychology from Vanderbilt, is the institute’s Associate Director for Research.

Participants were invited to design their own avatars, which brought its own revelations, explained Mahrukh Tauseef, a graduate student in Electrical and Computer Engineering and the paper’s first author.

Not only did they want their avatar to look younger (no surprise), but they went beyond a mere photographic resemblance to build in features they felt were more “authentic” and representative of their true selves. Participants then helped design two interactive scenarios: a two-person game of checkers and a game of Apples to Apples, a popular, matching card game played by four avatars seated in a circle.

“It’s not about playing cards,” Tauseef said. “This is their

medium. They engage like this with each other ... We wanted to create an environment where it’s light; it’s playful. That’s a friendly way of connecting with others.”

Playing checkers proved to be difficult for the avatars. So, the engineers and computer scientists programmed the checker pieces to move when the avatar’s hand hovered above them.

The researchers found that participants were more engaged when playing checkers one-on-one. “There were too many people (in the card-playing group) to look at in one space,” Tauseef said. “The headsets and glasses we were using had a very narrow field of view.”

Anxiety and sensory overload also may have played a role. “Many autistic people are still very lonely in a group if there are aspects of the social interaction that are stressful,” Weitlauf said. “This system is an important step toward creating autism-friendly virtual spaces that promote comfort and inclusion.”

“Our findings,” the researchers concluded, “underscore the potential of augmented reality telepresence as an ... affirming communication medium that can support authentic self-expression and foster meaningful social presence, particularly in contexts where in-person interactions are limited.”

Vanderbilt co-authors included Zachary Warren, PhD, who holds the Donna and Jeffrey Eskind Family Chair in Autism Spectrum Disorder and who has worked with Sarkar for more than 20 years; Alexandra Watkins, PhD, postdoctoral fellow in Mechanical Engineering; software engineer Zalen Ingram; and graduate students Rendong Zhang and Ritam Ghosh.

The technology continues to advance. Sarkar’s lab is investigating affective computing, which combines cameras and microphones to detect changes in facial expression and tone of voice, eye movement trackers, and wearable heart rate monitors — all to help people with autism and their avatars read the emotions of others.

Also under development: haptic devices that apply force feedback on the hand, enabling users to “feel” the three-dimensional virtual objects their avatars are manipulating.

None of these developments are meant to replace real physical connection. Avatars will be most effective, Weitlauf said, when they work hand in hand with the humans who designed them and the humans who use them. ■

A study participant wears a head-mounted display to play checkers with the avatar of another using augmented reality telepresence. Proceedings of the 2026 CHI Conference on Human Factors in Computing Systems, April 2026. <https://doi.org/10.1145/3772318.3791141>







IT'S NEVER TOO EARLY FOR A MENTOR

Young man's dream of becoming a cardiologist
bolstered by one of Vanderbilt's best



"What do you want to be when you grow up?" is the eternal question asked of every child. For most, the answer is motivated by a family member's profession or a career they've seen on TV: perhaps a nurse, a teacher or a firefighter. Some children, though, are born with an innate calling that they can't ignore. Recently, one of these special young people came to Vanderbilt University on a quest to learn more about his career choice.

BY ERIN HODGE + PHOTOGRAPHS BY SUSAN URMY

late 2025, the Vanderbilt Medical Alumni Association (VMAA) received an email from South Carolina resident Kala Frye. She was requesting a small piece of Vanderbilt University School of Medicine swag for her then 9-year-old son, Shawn Jr. (S.J.), to take to his elementary school for “College Day.”

S.J. had decided he wanted to be a cardiologist, and he’d already chosen Vanderbilt as the academic standard for his future education.

“Vanderbilt is where the best cardiologists come from,” he announced, following an extensive internet search.

Inspired by his determination, the VMAA team recognized an opportunity to invest in a potential VUSM student. A hefty box of goodies was assembled, including a Vanderbilt-branded football (S.J. is a big sports fan), a Vanderbilt backpack to show off to his school friends, and a VMAA-branded tumbler for his mom.

After his successful College Day show-and-tell, S.J. came to his mom and dad, Shawn, with another request.

“S.J. has decided that he would like to spend his spring break in Nashville, touring the Vanderbilt campus. Do you think you could set us up with a tour?” Kala’s follow-up email read. The VMAA staff got to work planning a trip to remember.

When S.J. and his parents arrived on the Vanderbilt campus April 7, they were fully committed to the experience. Kala wore a jean jacket she’d hand-bedazzled in Vanderbilt colors, complete with “Anchor Down” across the collar. Shawn wore a Vanderbilt hat, and S.J. was decked out in head-to-toe Vanderbilt gear, including gold-and-black sneakers bought just the day before during their road trip to Nashville.

“He just had to have them,” said Kala, with a smile.

The family received the full Vanderbilt treatment. They visited the



bookstore before setting out for a tour of campus. When they worked up an appetite, VMAA staff met the family at the nearby Little Rey restaurant where they were joined by Sameer Sundrani, VMAA's student board representative and the 2026 VUSM class president.

S.J. munched on tacos while he asked Sundrani about life as a Vanderbilt medical student, what the application process was like, how difficult classes were and, most importantly, "If two vegans got in a fight, would it still be called a 'beef'?" They debated whether a hot dog is really a sandwich in between questions about Sundrani's undergraduate program at Stanford University and what he expects his life to be like when he returns to the school for his residency in neurosurgery.

Next, the Fries visited the office of André Churchwell, MD, a Vanderbilt Health cardiologist, esteemed faculty member, and trusted adviser to Vanderbilt University Chancellor Daniel Diermeier, PhD.



"Dr. Churchwell is not only one of the nicest people you will ever meet, but he is easily the best-dressed person on campus," Sundrani had informed S.J.

He did not disappoint. Churchwell greeted the group with a huge smile, dressed in bright, canary yellow dress pants. "Well, well, who do we have here?" he said in the baritone voice anyone who knows him would recognize with their eyes closed.

He gave S.J. a gentlemanly handshake and welcomed the family into his highly decorated office. Churchwell said he was inspired by the young man's questions, answering each of his pre-penned inquiries with a thoughtful response. Churchwell stressed the need to pursue relaxing pastimes to balance the intense work of a physician, and he showed S.J. the result of one of his passions, a collection of charcoal drawings.

"That one there is my lovely wife," he pointed to a framed, pencil-drawn portrait of Doreatha Churchwell that was nearly as tall as the boy. "And do you like superheroes?"

Churchwell sat with S.J. as he flipped through detailed sketches of superheroes.

"It's important to have hobbies, S.J.," he advised. "God, family and service; those things are the heart and soul of life ... With those, it is important to have things in your life which help you continue growing, stay grounded, and having fun."

Over the next hour, Churchwell shared stories of his family, including his father and siblings, all extremely accomplished, and of his time volunteering monthly at his grandchildren's elementary school.

After insisting on the opportunity to mentor S.J. and remain in close contact, Churchwell wished the family well, but not before sharing, "This is the kind of work we should be doing. ... This is such a special opportunity for young people, and a gift for those of us who have been around a long time, to pass on our insights to the next generation."

As the Fries walked toward their next event, a VandyBoys baseball game thanks to VMAA's friends in Vanderbilt Athletics, they commented on the gentleness and spiritual aura of the Vanderbilt cardiologist. They headed back to South Carolina the following day with several signed drawings, a signed copy of the physician's book, and a new baseball bat that "just so happened to be" in Churchwell's office.

Kala sent a glowing follow-up email which included photos of S.J. playing baseball in his hometown Little League — complete with gold-and-black cleats.

"They had to be gold and black this year," Kala wrote.

For S.J., the visit offered more than a campus tour. It provided a glimpse of the future he hopes to build for himself and a mentor more than ready to help him along the way. ■

Top: S.J. gets an early start on taking notes in preparation for his dream career as a cardiologist.

Bottom: The Fries enjoy their time with S.J.'s new mentor.

Left page: André Churchwell, MD, shows his sketches of superheroes to an enthralled S.J. The young man went home with several sketches to remind him of his visit.

Alumni notes

MD: VUSM CLASS • HO: HOUSE OFFICER • FE: FELLOW • FAC: FACULTY • BA/BS: VU CLASS

1960s

Richard (Dick) Johnston Jr., BA'57, MD'61, HO'63, Professor Emeritus of Pediatrics at University of Colorado School of Medicine and National Jewish Health, VMAA Distinguished Alumni 2008, Vanderbilt Distinguished Alumni 2016, and his collaborators Sir Nick Wald, DSc, and the late Godfrey Oakley, MD, MSPM, were recognized by Research!America with a Building the Foundation Outstanding Achievement in Public Health Award. The award recognizes individuals whose basic research discoveries have played a pivotal role in advancing public health.

SEND US YOUR NEWS

Email VMAA at medalum@vanderbilt.edu with alumni updates and photos.

demic and program development of the Alexander Institute for Conservation Leadership and the Sciences.

Gary Stiles, MD'75, HO'75, has released a new book "A Prelude to Immortality: Churchill's 'My Early Life.'" It tells the story of how Winston Churchill wrote an autobiography employing prose Stiles compares to lyric poetry to reinvent his public persona.

1980s

Agnes Borge Fogo, MD'81, HO'82, FAC, the John L. Shapiro Chair of Pathology and a leading expert in kidney disease at Vanderbilt Health, has received the 2026 Robert H. Heptinstall Lifetime Achievement Award from the Renal Pathology Society. She is a Professor of Pathology, Microbiology and Immunology, Medicine, and Pediatrics at Vanderbilt

Health and the author of two books on renal pathology.

Hugh Francis III, BS'80, MD'84, was selected as an inaugural Memphis Medical Society Hall of Fame honoree. He is a vascular and general surgeon with Memphis Surgery Associates with more than three decades of service to the Memphis, Tennessee, community.

Edith Colbert, BS'81, MD'88, and Dennis Colbert, MD, HO'84, celebrated the wedding of their son Dennis Colbert, BE'12, to Molly Pochedly at Garfield Park Conservatory in Chicago on Sept. 20, 2025.

Robert Ivy II, MD'88, HO'88, has retired after 31 years as a hand surgeon. He also served many years as President of the Knoxville Orthopaedic Clinic. He was selected by his peers for "Best Doctors in America" recognition and was consistently voted a Cityview magazine "Top Doc" by the community he served.

1990s

Jeffrey Balser, MD'90, PhD'90, will retire Dec. 31, after nearly two decades serving as President and Chief Executive Officer of Vanderbilt Health and Dean of Vanderbilt University School of Medicine. In 2008, he became the 12th Dean of VUSM since the school's founding in 1875.

John Layher Jr., HO'91, has joined Morgan Medical Center as a cardiologist.

Robert (Rob) Steele, MD'93, MBA, has been named the fifth President and CEO at Dayton Children's Hospital, effective July 1.

Peter Mathern, MD, HO'93 & '95, has joined the American Oncology Network Partner Practice, Cancer, and Blood Specialists of Arizona located in Flagstaff.

Anna Tanner, MD'95, HO'98, has published a book with the American Academy of Pediatrics: "Pediatric Eating Disorders: The Medical Care of Children and Adolescents."

Dipen J. Parekh, MD, HO'98, FE'99, has been named the inaugural Magnier Endowed Chair in Urology at the University of Miami Miller School of Medicine.

Brian Moore, MD, HO'99, has been named Chief Physician Executive and President of Ochsner Clinic at Ochsner Health, effective Jan. 1, 2027. He has been



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a physician with Ochsner for more than 15 years and has held multiple senior leadership positions.

Carl Schmidt, MD, HO'99, MCI'04, Professor of Surgery, has been named Chair of the West Virginia University School of Medicine Department of Surgery, effective July 1.

2000s

Marwan Khalifeh, MD'00, has been recognized as a 2026 Top Doctor by *Northern Virginia Magazine*, marking his fourth consecutive year to earn this peer-nominated honor.

Jesse Taylor, MD'00, has been selected as the new Surgeon-in-Chief and Chair of the Department of Surgery at Children's Hospital of Philadelphia, effective July 1. Taylor also holds the Peter Randall Endowed Chair in Plastic Surgery and serves as a Professor in the Division of Plastic Surgery at the Perelman School of Medicine at the University of Pennsylvania.

Yasmine S. Ali, BA'97, MD'01, HO'04, MSCI'07, FE'08, FAC, has published her second book, "The View from the Cliffs: A Novel." Known as "The Positive Cardiologist," she also hosts the podcast, "Positive Vibes: On the Sunny Side with Yasmine S. Ali, MD."

Samir M. Parikh, MD'01, has been named Chair of the Department of Internal Medicine at the University of Texas Southwestern Medical Center. He also holds the Donald W. Seldin Distinguished Chair in Internal Medicine and the Ruth W. and Milton P. Levy Sr. Chair in Molecular Nephrology.

Joshua Denny, BS'98, MD'03, HO'03, MS'07, has been presented the Distinguished Alumni Award by the Vanderbilt Medical Alumni Association.

Jeffrey (Jeff) Venstrom, BS'99, MD'04, has been named Chief Medical Officer at ClearNote Health, a privately held company dedicated to improving early detection of some of the deadliest forms of cancer.

Ruth Ann Vleugels, MD'04, MPH, MBA, has been named Chair of the Department of Dermatology at Penn Medicine, effective Sept. 1.

Uchechukwu Sampson, FE'05, MS'14, has joined Harris Regional Hospital in Sylva, North Carolina, as a cardiologist. Sampson has a broad background in cardiovascular medicine, research and academic leadership.

Dear Alumni,

As we reflect on another year, I'm filled with gratitude for the exceptional community you represent and the exciting times ahead.

I'm especially grateful to our Vanderbilt Medical Alumni Association (VMAA) Board of Directors. This fall brings significant transition as we say farewell to an outstanding group concluding their terms: Dr. Harper Stiles, Dr. Samer Hasan, Dr. Jerry Jaboin, Dr. Stephanie Kurita, Dr. Roman Perri, Dr. Mark Rawls, Dr. Airron Richardson, Dr. Robert Rosenfeld, Dr. Randy Saliars, Dr. Tim Schoettle, Dr. Monique Simpson, Dr. Gary Strong and Dr. Sameer Sundrani. I want to extend particular gratitude to our outgoing president, Dr. Elise Fallucco, whose leadership has been foundational to our progress. The unwavering commitment of this group has left a lasting impact.

I'm equally grateful for the continued success of our annual reunion program, now in its second year. This gathering continues to be a cornerstone event, bringing classmates from across decades together to reconnect and deepen their commitment to Vanderbilt University School of Medicine. A highlight of this year's weekend is recognizing VUSM Class of 2003 alumnus Dr. Josh Denny as our Distinguished Alumni recipient.

Thank you to all who participated in our recent alumni engagement survey. Your feedback will directly shape our programming and services as we continue evolving to better support you. We look forward to sharing these insights with our board this fall.

As we move forward, the VMAA remains committed to fostering lifelong relationships, supporting our alumni, and advancing the mission of Vanderbilt University School of Medicine through reunions, mentorship and community engagement.

With deep appreciation for your continued loyalty and partnership,

Sarah Creechmore Woodell



Kelly Stratton, MD, HO'07, has been named the new Associate Dean for Veterans Affairs at the University of Oklahoma College of Medicine.

Courtney Reynolds Schadt, MD'07, HO'07, FE'08, FAC, has returned to Vanderbilt Health as Associate Professor of Dermatology and Vice Chair of Education in the Department of Dermatology. She spent 15 years as faculty at the University of Louisville.

Erin Janai Coomes, AuD'08, has been named Associate Director for Resources at the VA Tennessee Valley Healthcare System. In this role, she helps guide resource stewardship, infrastructure modernization and operational alignment.

Jonathan (Jon) Kropski, MD'08, HO'08, FE'11, FAC, Professor of Medicine, has been appointed Di-

rector of the Division of Allergy, Pulmonary and Critical Care Medicine in the Department of Medicine at Vanderbilt Health. He holds the Elsa S. Hanigan Chair in Pulmonary Medicine.

Sara Nicole Horst, MD, FE'09, MPH'11, FAC, has been appointed Vice Chair for Clinical Informatics and Care Transformation in the Department of Medicine at Vanderbilt Health, a newly created position.

2010s

Katherine Alisa Kudyba Morone, MD'13, HO'15, has joined the Williamson Health Medical Group as an inpatient neurologist. Her addition strengthens access to high-quality neurological, internal medicine and primary care services for patients throughout Williamson County and Middle Tennessee.



ALUMNI PROFILE: NANCY CAMPBELL, BA'75, MD'01, HS'04

+
photo by John Russell
written by Danny Bonvissuto



SNAPSHOT

CHILDREN

Larrison, 47, and twins,
Martha and Liz, 42

HOBBIES

Multiple book clubs, playing bridge, mahjong and pickleball, attending library talks, gardening

FAVORITE VUSM MEMORY

"The first week, there was a picnic, and Roy and two of my daughters were in town, so they went with me. All these guys in my class were coming up and chatting ... one of them looked at my daughters and asked which one was going to be in his class. I said, 'Y'all, I'm so sorry. I'm the one in your class.'"

Driven by lifelong love of learning

Nancy Campbell, MD'01, grew up in Wilmot, Arkansas; population then: 700. "If you really wanted to go to college, and your parents could afford it, you went to boarding school," said Campbell, who attended St. Catherine's School in Richmond, Virginia. "In my town, there were six children in my class and only one girl my age. At St. Catherine's, I was suddenly surrounded by people who were my age and liked academics. It was a complete joy."

After high school, Campbell wanted to attend architecture school, "but my mother was determined I was going to Vanderbilt," she said. "So, I did; because that was back in the day when you did what your parents told you to do."

The summer before her freshman year, she met Roy Campbell, a junior at Davidson College in North Carolina. Two years later, her phone rang.

"It was Roy saying, 'I met you two years ago. Would you like to go out?' she said. "He lived in Greenville, Mississippi, about 50 miles from where I grew up. He drove over, picked me up for the date, and we were together from then on."

Campbell's affinity for math and science put her on a premed path. She received her bachelor's degree in 1975, married Roy, and they moved to Greenville.

"They didn't have a medical school, so I decided I would get involved in life there," she said. "I wanted to do good, and there were certainly lots of ways to get involved."

She worked on a National Council of Negro Women after-school program for at-risk girls, volunteered with the Symphony League, raised three daughters and took courses at the local community college. When the last daughter left for school, Campbell considered her future.

"Roy said, 'You should have gone to medical school. That's what you should do,'" Campbell said. "Immediately, I said, 'Oh no, I'm too old.'"

She retook organic chemistry at the community college to see if it sparked anything.

"Once I was back on the premed track, I decided to apply to medical school," she said. "Amazingly, several schools offered me admission; Vanderbilt was, by far, the best."

Campbell entered Vanderbilt University School of Medicine when she was 44, graduating at 48.

"I appreciate Vanderbilt taking me on as a student because I was outside the norm," she said. "It was just a wonderful spot. If you're lucky, you get to spend your 40s surrounded by brilliant, kind, energetic 20-year-olds."

Campbell finished her residency at Vanderbilt when she was 51, moved to Jackson, Mississippi, and practiced internal medicine for 20 years. After retirement, the Campbells moved to New Canaan, Connecticut, to be closer to their daughters.

"New Canaan is like camp for old people," she said. "You get up every day, and there are 30 different things you could do. I'm much happier when I'm busy, which is what got me to medical school in the first place. I used to tell people I thought I needed to be busier, then I overcorrected."

Daniel Tilden, MD'14, HO'14, MPH'22, has joined the Newman Regional Health Medical Partners as a telehealth endocrinology specialist.

Trisha Pasricha, MD'16, released her book, "You've Been Pooping All Wrong: How to Make Your Bowel Movements a Joy," a playful title with a serious message about the gut-brain connection.

Jourdan Holder, AuD'16, PhD'21, has joined Hearts for Hearing in Oklahoma City as Senior Director of Audiology and Research.

Claude Pirtle, MD'19, HO'19, FE'19, is the President and CEO of the Heartland Whole Health Institute. Pirtle was a leader expert in the keynote discussion during Google Health's 2026 "The Check Up."

Faculty Notes

Billy Hudson, PhD, FAC, Director of the Vanderbilt Center for Matrix Biology and the Elliott V. Newman Professor of Medicine, was awarded a 2026 Ellis Island Medal of Honor from the Ellis Island Honors Society. The honor was in recognition of his pioneering contributions to matrix biology and transformative discoveries in type IV collagen research.

David Parra, MD, FAC, Professor of Pediatrics, Medicine, and Radiology and Radiological Sciences, Director of Pediatric Noninvasive Imaging Services and Director of Advanced Cardiac Imaging, has been named Associate Director of the Division of Pediatric Cardiology at Vanderbilt Health.

Susannah Rose, PhD, FAC, Associate Professor of Biomedical Informatics and Health Policy, has been named Director of the Center for Biomedical Ethics and Society at Vanderbilt Health. Rose also serves as Vice Chair of the Artificial Intelligence Committee at Vanderbilt Health and Executive Director of the AI Discovery and Vigilance to Accelerate Innovation and Clinical Excellence (ADVANCE) Center in the Department of Biomedical Informatics.

Russell Rothman, MD, MPP, FAC, the Ingram Professor of Integrative and Population Health, Senior Vice President for Population and Public Health, and Director of the Vanderbilt Institute for Population and Public Health, has been honored with the 2026-2027 George Eastman Visiting Professorship at Oxford University. His one-year appointment begins in September.

Giving in Action

+ BARBARA AND BRYAN SIMMONS, MD'76

For infectious disease physician Bryan Simmons, MD'76, and his wife, Barbara, giving back is a way of honoring the institution that helped shape their lives.

The couple established an endowed scholarship at Vanderbilt University School of Medicine, endowed the Dr. and Mrs. Bryan and Barbara Simmons Chair in Infectious Diseases through their estate plans, and established a fund to support the Division of Infectious Diseases at Vanderbilt Health.

"We were concerned that there were not enough infectious disease physicians, even as demand for them has grown," Simmons said, citing challenges such as pandemics and antibiotic-resistant infections.

Inspired by a gift from former roommate Michael Lojek, MD'76, and meaningful experiences at Vanderbilt reunions, the couple decided to support the university that played a pivotal role in Simmons' career.

When Simmons arrived at VUSM in 1972, he entered an intellectually charged environment shaped by Nobel laureates Earl W. Sutherland Jr., MD, and Stanley Cohen, PhD. Mentors like William Schaffner, MD — a lifelong friend and colleague — made Vanderbilt formative in every sense.

Outside the classroom, Simmons enjoyed cycling in Percy Warner Park and building long-lasting friendships. A favorite memory came after commencement, when he and classmate Steve Wagner, MD'76, went camping across Alaska before beginning their medical careers.

"I'll remember that always," he said. "We went for six weeks and had a grand time."

Although he considered oncology, Simmons ultimately chose to specialize in infectious diseases. After Vanderbilt, he joined the Centers for Disease Control and Prevention as an Epidemic Intelligence Service officer. There, he helped develop CDC guidelines and earned a Commendation Medal for his contributions.

"It was fulfilling," he said. "My training at Vanderbilt gave me the needed credentials to be selected for that role."

Simmons later spent 32 years in private practice in Memphis. The family's 1984 move to the city brought a surprise Vanderbilt connection when Barbara unexpectedly went into labor on the way to their new home. She drove herself to Vanderbilt University Hospital, where Simmons had trained and where their son Ryan would be born.

The couple's commitment to service extends beyond medicine. In 2016, after a year of preparation and following Barbara Simmons' bilateral knee replacements, they completed the 500-mile Camino de Santiago across Spain in 37 days. Along the way, they raised funds to support nursing education at Methodist Health Systems.

For the Simmons, supporting Vanderbilt is both an expression of gratitude and a vision for the future.

"If Vanderbilt is going to remain cutting-edge, additional funding sources are required," he said. "Our senior year tuition was less than \$5,000, an amount many physicians earn in a week. With that in mind, I believe my education delivered a remarkable return on investment for me and my family. Vanderbilt changed our lives. Now is the time to give something back." ■ Payton Baggett

Reynolds



Barbara and Bryan Simmons, MD'76

Giving in Action

+ FRIEDA AND JOHN RADZYMSKI

In May 2026, as Frieda Garcia Radzyninski and John Radzyninski watched their daughter Alexia (Lexi) walk across the stage at the Vanderbilt University Commencement, they kept returning to the same thought: This would not have been possible without Frieda's dad.

Indeed, the life and career of her father, Francisco Antonio Garcia, MD, speak fully to the power of education. While growing up in the small town of Metapán, El Salvador, where the local school system stopped after primary school, Garcia went out of his way to attend school in a different town so he could continue his studies.

"Having lived in a country that was torn apart by war, my dad experienced situations where things could change — or be taken away — very suddenly," Frieda Radzyninski said. "From a young age, he understood that your education and experience become part of who you are; no one can take that away from you."

As a young adult, Garcia's commitment to education continued. He immigrated to the United States, where he continued his medical training and pursued his residency, later building a successful ophthalmology practice in San Francisco — near where he, his wife and the Radzyninski family live today.

To honor his trajectory, the family decided to establish a scholarship in his name at the Vanderbilt University School of Medicine in 2024.

"While Lexi was at Vanderbilt, we thought about my dad embarking on his university studies 70 years ago — how different his options were, and all that he has done to get where he is," Frieda Radzyninski said. "We knew we wanted to help other students studying medicine follow a similar path."

While the resulting Francisco Antonio Garcia, MD Scholarship includes an awarding preference for first-generation students who attended high school in Latin America, like Garcia, the family's goal is to help any student dedicated to medicine. "There is a need for more doctors and improved care across the country, so we want to do our part to support future physicians."

Their desire to give to Vanderbilt was also strengthened by Lexi Radzyninski's great experience as an undergraduate at the university, where she majored in Medicine, Health and Society and Spanish, and engaged in transformative study abroad opportunities in Peru and Spain. Together, these experiences inspired her to also pursue her master's degree at Vanderbilt.

"The university really wants students to thrive, and Vanderbilt has built the support system to make sure that happens," John Radzyninski said, noting that the couple was also impressed with the leaders they met at the School of Medicine, which offers the same close-knit dynamic and commitment to students' individual growth.

"Vanderbilt is a fine and exceptional institution, and my dad is a fine and exceptional human being," Frieda Radzyninski said, regarding their decision to give to the school. "Putting those two together makes sense."

"Dr. Garcia has done so much for others, and this scholarship is just one small part of his legacy," John Radzyninski added. "We are happy to honor him in this way." ■ *Lucie Alig*



Alexia Radzyninski, with her grandfather Francisco Antonio Garcia, MD

Rick W. Wright, MD, HO'88, MMHC'23, FAC, has been named President of the American Orthopaedic Society for Sports Medicine. Wright serves as the Dan Spengler, MD Professor, Chair of Orthopaedic Surgery, Chief Medical Officer and Senior Vice President for Clinical Affairs.

Losses

Henry Baggett, BA'79, MD, HO'84, died March 14. He was 68. Dr. Baggett is survived by his wife of 42 years, Lina; three children; and his siblings.

Thomas Hieatt Baker Jr., BA'53, MD'56, HO'59, died April 29. He was 94. Dr. Baker is survived by his wife of 69 years, Toby Lee; six children; 16 grandchildren; and 20 great-grandchildren.

Robley Dunglison Bates III, MD, HO'73, died April 6. He was 83. Dr. Bates is survived by his three children; four grandchildren; and his beloved English setter, Doc.

Robert Verlin Beeler Jr., MD'49, died April 7. He was 101 years old. He is missed by all who knew him, particularly his neighbors and friends.

Stephen Beeman, MD'81, HO'81 & '82, died June 7. He was 70. Dr. Beeman is survived by his wife, Lynne Strickland; four children; two stepchildren; and several grandchildren.

Michael Wilbur Bertz, MD, HO'69 & '70, died May 29. He was nearly 90. Dr. Bertz is survived by his wife of 62 years, Carol; two children; and three granddaughters.

Willard J. (Willie) Blankenship, MD'59, HO'59, FE'64, died March 31. He was 91. Dr. Blankenship is survived by his former wife, Judi Williams; two children; and four grandchildren.

Susan Ann Buhrow, MD, FE'83, PhD'83, died Nov. 15, 2025. She was 69. Dr. Buhrow is survived by her husband of 35 years, Dr. Sidney Waldo (Wally) Whiteheart; two siblings; two children; and six nieces and nephews.

Robert John (Bob) Burckardt, MD'74, HO'74, died June 6. He was 78. Dr. Burckardt is survived by his wife, Sharon; four children; three stepchildren; seven grandchildren; and two siblings.

Faces & Places

Want to see your photo here? Send high-resolution images to medalum@vanderbilt.edu.



1. Vanderbilt University School of Medicine alumni view a historic photo displayed during Reunion 2025. The photos were part of a display honoring the 150th anniversary of the medical school. **2.** From left, Gloria Devitt, Elisha Tan, and Raha Sharaflari, MD Class of 2030, attend the Dean's Picnic at Loveless Cafe in Nashville. **3.** Vanderbilt alumni and family members at the annual Meacham Dinner. **4.** Jill Clendenen, Editor of *Vanderbilt Medicine* magazine, left, and Sarah Woodall, Senior Director of the Vanderbilt Medical Alumni Association (VMAA), catch up at the Almost Alumni Luncheon for the Class of 2026. **5.** Alumni and family members gather for the Vanderbilt Emergency Medicine Alumni Society inaugural gala, which included dinner and a silent auction, at Clementine Hall in Nashville. The event was hosted by the VMAA. **6.** Dean Amy Fleming, MD, center, visits with alumni, from left, Tom Klink, MD'19, MPH'19, Kaitlyn Weeber, MD'18, Tanya Marvi, MD'18, HO'21, and Rohan Bhalla, MD'18, HO'23, at a VMAA regional event in Denver, in May 2026. **7.** VUSM alumni in the Boston area enjoy an ice cream social hosted by the VMAA. **8.** John Cobb, MD'78, flashes the VU sign as he nears the finish of his 44th Peachtree Road Race in Atlanta on July 4.



ALUMNI PROFILE: MARIA AARON, BA'91, MD'95

+
photo by Daniel Varnado
written by Danny Bonvissuto



SNAPSHOT

FAMILY

Husband, Wayne, and children, Christina, 24, Ashley, 23 (BA'25), and Michael, 21

PETS

9-year-old Riley the vizsla

HOBBIES

Hiking, biking, hanging out with her children and making ophthalmology-themed candles like "Eye of the Pine" and "Lavender Lens"

FAVORITE VUSM MEMORY

Studying in the carrels on the second floor of Light Hall and drinking beer at SATCO (San Antonio Taco Company)

An ophthalmologist looks back at Vanderbilt years and forward through fundraising

Maria Aaron, MD'95, calls getting into Vanderbilt University "the pivotal point" of her life. Though her two older brothers left their rural Ohio hometown for The Ohio State University, she wanted to head south for her higher education.

She felt encouraged when a woman she met during her campus visit to Vanderbilt told her she was going to do great things.

"It's hard to get out of a small town," she said. "I saw a whole new world at Vanderbilt. It was a complete culture shock. People drove BMWs and Mercedes; I'd never seen cars like that in my life. I paid attention to what other people were doing and figured it out along the way."

Aaron hit the ground running at Vanderbilt as a dedicated student, sorority sister, and a football and basketball cheerleader. She considered applying for PhD programs in physics or chemistry and then spent a summer working in a lab. She soon "realized it was a very quiet profession" and decided to change course. In her junior year, she applied to Vanderbilt University School of Medicine and was accepted.

"When you're a kid from Appalachian Ohio, you're always questioning whether you're good enough to do anything," she said. "I wasn't sure if I was going to be successful, but I love caring for people and knew I'd get more joy out of giving than receiving."

After medical school, Aaron completed an ophthalmology residency at Emory University School of Medicine, got married at the end of it, and remained at Emory as faculty. And the couple had three children in three years.

"My husband and I wanted six children," she said. "After the third one, we knew there was no way. He worked for Delta Air Lines and traveled all the time. We ate a lot of candy for dinner and laughed because it was utter chaos."

In addition to her clinical ophthalmology practice, Aaron served as the Department of Ophthalmology Residency Program Director at Emory for 14 years, which grew into serving as the Associate Dean for Graduate Medical Education. She also served on the board of the American Academy of Ophthalmology and was in charge of planning the group's annual meeting.

Today, she practices ophthalmology two-and-a-half days a week and teaches at a county hospital one day a week. She travels almost every weekend of the year but still finds time to support VUSM as a campaign cabinet member, speaking at university events for the Dare to Grow campaign in Atlanta.

"Vanderbilt has opened so many doors for me," she said. "Everything was possible once I got there." ■

Captain Stephen Allen Butler, MD, HO'67 & '71, died Jan. 11. He was 84. Dr. Butler is survived by five children and 12 grandchildren.

Laura Nelle Connor, BS'75, MD'79, FE'79, died Feb. 22. She was 73. Dr. Connor is survived by her husband of 48 years, Dan; two sons; one daughter; and seven grandchildren, as well as three siblings.

Guy Nelson Copeland Jr., MD, HO'60, died Dec. 6, 2025. He was 89. Dr. Copeland is survived by his two children; five grandchildren; and two sisters-in-law.

Peyton A. Eggleston, MD, HO'65, died Jan. 7. He was 86. Dr. Eggleston is survived by his wife, Elaine; two children and two stepchildren; five grandchildren; and one brother.

Norman Bruce Frankel, MD, HO'65, died May 4. He was 85. Dr. Frankel is survived by his wife of 61 years, Barbara; three sons; and two grandchildren.

Edward G. Goldfarb, MD'58, died March 7. He was 91. Dr. Goldfarb is survived by three children; two stepsons; numerous grandchildren; and his longtime partner, Merilee Elliott.

Phillip Gorden, BA'57, MD'61, Director Emeritus of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) and 1990 recipient of Vanderbilt Medical Alumni Association Distinguished Alumnus award, died June 23. He was 91. Dr. Gorden is survived by his sons, Lee Gorden, MD'90 (Joan Gorden, MD), and Jed Gorden, MD'97 (Sara Manetti), and grandchildren, Isaac, Eliana and Satchel.

Daryl Granner, MD, MS, former Chair of the Department of Molecular Physiology and Biophysics in the Vanderbilt University School of Medicine and former Director of the Vanderbilt Diabetes Center, died April 17. He was 89. Dr. Granner is survived by his wife of 67 years, Nancy; two children; one brother; and four grandchildren.

Carroll McWilliams (Mac) Harmon, MD'83, HO'83, PhD'92, died Feb. 11. He was 68. Dr. Harmon is survived by two daughters and one son.

Louis Eugene Haun Jr., MD, HO'65, died Feb. 13. He was 85. Dr. Haun is survived by his wife of 62 years, Katharine (Kay); two sons; seven grandchildren; and his sister, Caroline Haun Nowell.

Charles Milligan Holman Jr., MD, HO'71, died April 13. He was 81. Dr. Holman is survived by his

wife, Juanita Jean Becker Holman; five children; seven grandchildren; and one great-grandchild.

Ellen Elizabeth Hrabovsky, BS'65, MD'69, HO'70, died April 9. She was 82. Dr. Hrabovsky endowed the Ellen E. Hrabovsky Scholarship at Vanderbilt University School of Medicine. In her later years, she transitioned out of medicine to obtain a master's degree in wood science and became an avid naturalist. Dr. Hrabovsky is survived by four siblings.

Farris Jackson Jr., MD'82, died June 4. He was 70. Dr. Jackson is survived by his wife, Nancy; four children; one grandson; and many nieces and nephews.

Charles John McAllister, MD, FE'76, died April 30. He was 79. Dr. McAllister is survived by his wife of almost 56 years, Diane; three children; seven grandchildren; and one sister.

Guat Siew Lee McKee, MD, HO'76, died June 16. She was 94. Dr. McKee is survived by her husband, Lonnie Clifford McKee Jr., MD; her daughter; two grandchildren; and extended family.

Michael McNalley, MD, HO'53, died May 16. He was 96. Dr. McNalley is survived by his wife, Iris; two children; two stepchildren; and several grandchildren and great-grandchildren.

Steven Richard Nyquist, MD, HO'77, died May 30. He was 78. Dr. Nyquist is survived by his wife of nearly 46 years, Mary Anne; two children; and one grandson.

Clarence Leon Partain, MD, PhD, Professor Emeritus of Radiology and Radiological Sciences, former Chair of Radiology and Director of the Center for Imaging Research at Vanderbilt University, died Jan. 28. He was 85. Dr. Partain is survived by his wife of 62 years, Judy; three children; one brother; one brother-in-law; seven grandchildren; and many cousins, nieces and nephews.

Louise Green (Weezie) Patikas, MD'65, HO'65, died May 10. She was 86. Dr. Patikas is survived by two children; four grandchildren; and several nieces and nephews.

James (Jimmy) Pirkle Jr., MD, FE'07, died April 8. He was 48. Dr. Pirkle is survived by his wife of 24 years, Stephanie; three sons; and three siblings.

Joseph Albert Pryor, MD, HO'65, died Feb. 13. He was 89. Dr. Pryor is survived by his wife of 69 years, Carol Ann Collins; two daughters; five grandchildren; and two siblings.

Jack Louis Sapolsky, HO'68, FE'69, died Dec. 19,



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—Kristie Muya, Class of 2027

2025. He was 86. Dr. Sapolsky is survived by his husband of 46 years, Richard Bordeaux; and his niece, Tiby Weinstein.

Robert G. Satterfield, MD, HO'70, died May 20. He was 80. Dr. Satterfield is survived by his wife, Pauline; a nephew and niece; as well as his extensive stepfamily.

William M. Schreiber, MD, HO'63, died May 13. He was 90. Dr. Schreiber is survived by his wife of 62 years, Sandra; two children; two grandchildren; and one brother.

Aristides (Ari) Sismanis, MD, FE'79, died March 20. He was 76. Dr. Sismanis is survived by his wife, Anna Rozaki-Sismanis, MD; three children; a sister; four grandchildren; and his large, extended family in Greece.

William Garrison (Gary) Strickland Sr., MD'84, PhD'84, HO'85 & '86, died Feb. 28. He was 69. Dr. Strickland is survived by his wife of 32 years, Joann; his mother, Jean Strickland; two daughters; a daughter-in-law; seven grandchildren; two siblings; and many nieces and nephews.

Rodney Allan Teasley, MD, HO'19, died Jan. 9. He was 57. Dr. Teasley is survived by his wife, Margaret; three children; his mother, Vivian S. Teasley; two siblings; three nephews; and one niece.

Jane Leslie Tyler, MD, HO'81, died Dec. 12, 2025. She was 73. Dr. Tyler is survived by four children; two grandchildren; two brothers; and five nieces and nephews.

Colonel Eric Turner Vaughn, MD, HO'91, died March 28. He was 65. Col. Vaughn is survived by his wife, Jennifer; two children; several nieces and nephews; and a large extended family.

Linton Burnside West Jr., MD'62, HO'62, died June 12. He was 89. Dr. West is survived by his wife, Marsha Ann Duffy; two children; two stepchildren; and several grandchildren.

Benjamin Conrad Wouters, MD'87, HO'87, FE'93 & '94, PhD'96, died March 9. He was 64. Dr. Wouters is survived by his wife, Lisa; three daughters, nine grandchildren; and many nieces and nephews.

Vanderbilt Emergency Medicine Alumni Society launched at Nashville gala

In April, the Vanderbilt Health Department of Emergency Medicine launched the Vanderbilt Emergency Medicine Alumni Society (VEMAS) at an inaugural gala at Clementine Hall in Nashville. The event brought together more than 250 guests for a truly memorable evening.

The event celebrated Corey Slovis, MD, Professor and Chair Emeritus of the Department of Emergency Medicine, whose 18 years of visionary leadership established the department as a national hub for emergency medicine education and clinical excellence.

Keith Wrenn, MD, who was also remembered during the event, joined the faculty when Slovis established the department in 1992 and was appointed as the first residency program director. Wrenn, who retired in 2019, died in June 2024.

The Emergency Medicine program welcomed its first class in 1993 with six residents and 10 faculty members and has since graduated more than 340 residents and fellows.

VEMAS unites graduates committed to advancing the specialty and strengthening the bonds forged during training. From resuscitations to research, night shifts to leadership, Emergency Medicine alumni carry Vanderbilt's legacy of excellence across the globe.

A moving moment during the April event came when country music artist Phil Vassar performed with his daughter and shared remarks crediting the Vanderbilt Emergency Medicine team with saving his life following a near-fatal heart attack in 2023. The evening also featured an elegant dinner and a silent auction to support the new alumni society.

"VEMAS represents our commitment to every physician who has trained here. The goal is a living alumni network — one that provides real mentorship and career connections for our residency and fellowship graduates while strengthening the education and research that drive our mission forward," said Erik Hess, MD, MSc, Professor and Chair of the Department of Emergency Medicine, and System Emergency Physician-in-Chief at Vanderbilt Health. ■

Alumni, faculty, staff and their families recently celebrated the launch of the Vanderbilt Emergency Medicine Alumni Society.



SUBMITTED PHOTOS

1956

BREAKING NEWS

The Federal-Aid Highway Act was signed by President Dwight D. Eisenhower, paving the way for construction of the U.S. interstate system.

SCIENCE

Scientists attending the Dartmouth Summer Research Project coin the term "artificial intelligence" and launch AI as a field of academic study.

ENTERTAINMENT

Elvis Presley made his U.S. television debut in January; his single "Heartbreak Hotel," re-released the same month, hit No. 1 by spring.



VUSM THROUGH TIME

Vanderbilt University Hospital's 25-bed polio ward, opened in 1953, was one of only 10 in the nation. Here, musician Pat Boone visits patients and Santa Claus bring toys and books to the children for Christmas.



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