While we’ve worked hard to ensure that we’ve properly identified everyone in this issue, it’s possible we may have made a mistake. In which case, we are truly sorry and ask that you send us an e-mail at KUWICHITA@kumc.edu to let us know.

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Many as 250 students — up from 110 — within six years.

Full, four-year campus in Wichita on the horizon

Back in the ’60s, Kansas needed more doctors. In response, KU leaders and Kansas legislators made plans to expand the KU School of Medicine class and identified Wichita as the ideal place because of its size and central location as well as the community’s desire for a medical school.

Thirty-five years later, the Wichita Campus has been proven successful with almost half of all Wichita graduates going on to practice in Kansas. While nationally, only 29 percent of practicing physicians graduated from a school in the same state.

Kansas needs more doctors

Yet, we still need more doctors.

• Kansas is below the national average for physicians per 100,000 population in all areas except for the Northeast with under-served populations prominent in rural areas.

• In rural Kansas, family doctors are nearing retirement age at an alarming rate.

• Kansans are living longer, so they require more care.

Expanding in Wichita is a good investment

Once again, KU is planning to purposefully expand its School of Medicine class size to meet the state’s needs by admitting students likely to remain in Kansas and training them outside of the Northeast region, specifically in Wichita.

By expanding to a full, four-year curriculum on the Wichita Campus and adding more students in the 3rd and 4th years, we can serve as many as 250 students — up from 110 — within six years.

We need your support to make it happen

To expand the Wichita Campus, we’re going to need additional faculty and administration, new technology and equipment, as well as some overhead. While some assume we’re fully funded by the state, it’s just not true. Our financial supporters include the hospitals, residents, grants, and private donors. With the state of Kansas low on funds, we’re going to have to rely on tuition from the students and philanthropy from our supporters to fund the expansion.

With the state of Kansas low on funds, we’re going to have to rely on tuition from the students and philanthropy from our supporters.
Since that first graduating class of 14 students in 1975, the KU School of Medicine–Wichita has remained focused on its mission to educate doctors for Kansas.

Consider the supporting numbers

- Nearly half of Wichita’s more than 1,600 graduates have gone on to practice medicine in Kansas.
- Locally, right at 50 percent of the practicing physicians in Sedgwick County graduated from the KU School of Medicine–Wichita and/or one of its residency programs.
- And, nearly 70 percent of Kansas counties currently depend on physicians who have completed their residencies in Wichita or Salina.

“We have a rich, rich history,” said Dean H. David Wilson, MD, “with lots of terrific plans ahead of us as we mark the 35-year anniversary of our first graduating class.”

Success leads to expansion

The establishment and growth of the medical school is a remarkable story of perseverance and dedication. The first administrative home was in a small house on East 17th Street, when the school’s first class had 15 students and the school had a budget of about $150,000. This year’s class has 55 students, and the school has a budget of more than $15 million in state funds and tuition alone.

In addition, the campus is expanding to make room for the KU School of Pharmacy–Wichita (a satellite of the school in Lawrence). The KU Wichita Medical Practice Association has medical practices located across the city. And the new KU Wichita Center for Breast Cancer Survivorship has opened to serve the local community as well as rural Kansas.

Building on the Wichita Campus’ success, the University of Kansas is developing plans to educate even more doctors for Kansas by increasing the number of students in Wichita.

Recognizing that the state of Kansas, as well as the nation, is in need of more physicians, particularly for rural areas, the KU School of Medicine–Wichita is working to add the first two years of medical school and even more 3rd- and 4th-year students at the Wichita Campus — a longtime goal of many supporters.

School gets its start

In the late 1960s, national studies identified a growing shortage of physicians in Kansas as well as across the nation. Facing political pressure, Kansas legislators looked at expanding medical education programs, including establishing a school in Wichita.

Ervin Grant, who was a legislator in the early 1970s, recalled discussions among some legislators who believed getting a school in Wichita would be the best way to retain doctors for Kansas. Plus, he said, Wichita was a good choice because of the number of large hospitals in the city and the availability of patients.

“There were so many other things going on at the time in the Kansas Legislature,” explained Ervin, of El Dorado, “but securing a school to train physicians for Kansas was a priority.”

In September 1971, the Board of Regents authorized the creation of what was originally called the Wichita State University Branch of the KU School of Medicine and recommended funding for a year. Cramer Reed, MD, who was Dean of the WSU College of Health Related Professions, was named the first Dean of the medical school.

Attention to student needs

Randall Fahrenholz, MD (W75), a physician with Greeley County Health Services, which serves three counties in western Kansas, was one of the first graduates from the Wichita school. Dr. Fahrenholz recalled when leaders from the KU School of Medicine in Kansas City informed students about the new school for 3rd- and 4th-year students in Wichita.

With the help of Ernest Crow, MD, center, Mike Wilson (W93), Paul Joain (W93), and Lisa Parrish (W94) (left to right) learn medical procedures thanks to an early simulator. Today, Dean H. David Wilson, MD, is leading the effort to develop a regional simulation center to bring together area simulators under one roof so resources can be shared and teams can train together.

In 1975, construction of the 30,000-square-foot, $3.5 million Kansas Health Foundation Center for Primary Care and the Daniel K. Roberts Center for Research began on the Wichita Campus. Today, the campus is adding 26,000 square feet to make room for the KU School of Pharmacy–Wichita, a satellite of the program in Lawrence, as well as additional classrooms.

KU Wichita Campus sees the opening of the Daniel K. Roberts Center for Research.

In 1977, medical school moves to 1010 N. Kansas, previously the county hospital.

First class of 14 students graduates from the Wichita branch after just 18 months of training.

RICH HISTORY and an EXCITING FUTURE

With the help of Ernest Crow, MD, center, Mike Wilson (W93), Paul Joain (W93), and Lisa Parrish (W94) (left to right) learn medical procedures thanks to an early simulator. Today, Dean H. David Wilson, MD, is leading the effort to develop a regional simulation center to bring together area simulators under one roof so resources can be shared and teams can train together.
and asked for volunteers to attend. Dr. Fahrenholz, a self-proclaimed "farm kid" who grew up in central Kansas, signed up.

"I was very eager to come," he said.

Those who came were treated "as royalty in a way." Some of his fondest memories included visiting Dean Reed and his wife, Geney, at their home. "Everyone supported us," Dr. Fahrenholz recalled, "and made us feel very welcomed."

Hazel Fenske, who was among the first medical school staff members, recalled those early years interacting with students. "It was a new adventure for them," she recalled, "but it was also a new adventure for all of us."

Hazel built close relationships with students, always greeting students with a smile and calling them by their first names. She also helped secure places for the students to live and often served as a liaison between administrators and students.

"I’m most proud that I could relate to the students," she explained. "I was so glad that they could come to me."

George Minns, MD (W7b), was a student in the school’s second class. As with Dr. Fahrenholz, he recalled warm welcomes from everyone.

"Everyone created an environment that made you say, ‘This feels comfortable’,” Dr. Minns recalled. "You had a feeling when you came here that student education was central.”

As associate-dean Academic and Student Affairs, Dr. Minns continues to emphasize the personal attention he valued as a student.

"Growing stronger" in 1977, the medical school — by then known as the KU School of Medicine—Wichita — was again on the move. Class sizes exceeded 40 students, and the school moved from Fairmount Towers to what had been the county’s E.B. Allen I Hospital at 1010 N. Kansas, where the school is still located. The move was supposed to have been temporary, but in 1978 the Kansas Legislature established the former hospital building as the permanent home of the medical school and provided $4.2 million for renovations.

According to Lorence Valentine, who was among the early staff members at the school and is now executive director of the Department of Surgery, recalled sending staff members to visit other schools across the country.

"I wanted to find out, ‘What is it they teach, how do they teach things?’” he explained. "That’s how we wrote our curriculum.”

As a result, Dr. Farha quickly saw the value of what Wichita instructors were providing their students: quality clinical training.

"That has always been a strength," he commented. "Students come here knowing they will gain valuable clinical experience.

Jan Arbuckle, associate dean for Administration, who joined the medical school in the late 1970s, recalled how the 1980s and 1990s were a time of maturation as the school’s culture began to develop "from a little ‘mom and pop’ to a more professional, progressive school and organization.”

More attention was given to issues of transparency, which Jan said are crucial to furthering the mission of the medical school.

"Personnel need to know what’s going on," Jan commented. "In order to sustain the mission, you have to take your people along with you and make them part of the solution.”

As the school grew in reputation, it attracted more medical experts and professionals, according to Dr. Minns, resulting in an even better education for students.

When he was a student, "most departments consisted of a chair, and that may have been all full-time," Dr. Minns said. "Now, we have 60-some part-time faculty and that’s been consistent."

"I believe the presence of the school in Wichita has helped in the recruiting and maintaining of good physicians.”

George Farha, MD First Chair of Surgery

Adding value to the community

Joseph Meek, MD, who was dean from 1991 to 2001, was reminded of the importance of the medical school’s mission whenever he visited communities across Kansas.

"I’d go out to these communities, and I would see the desperate need they had for doctors," he recalled. "I think the thing that we are proud of, and should continue to make everyone aware of, is that we’re kind of the producers of the doctors in the state of Kansas. That’s been consistent.”

S. Edwards Dismuke, MD, MSPH, who was dean from 2001 to 2008 and currently serves as a professor in Preventive Medicine and Public Health, cited the establishment of a Masters of Public Health degree as well as the Kansas Health Foundation Center for Primary Care and the Daniel K. Roberts
“I do not think the medical school would be here today if it wasn’t for key physician leaders and key leaders in the Wichita community who really had the foresight and could see the value of having medical education.”

Lorene Valentine
Executive Director
Medical Practice Association

Center for Research in the mid-1990s as examples of how the medical school continued to evolve into a stronger entity.

“One of the things that’s fairly unique about this campus is we’re one of the few regional campuses in the country that has a Department of Preventive Medicine and Public Health,” said Dr. Dismuke, a former department chair.

As the medical school has grown, it has had a powerful impact on the community by growing the economy and helping to position Wichita as a leader in medical care.

“The medical school has been a very important part of allowing Wichita to become a major medical hub, and that’s something to be very proud of,” Dr. Dismuke said. “The medical school is part of why Wichita is such a big, successful medical center.”

“Dean Wilson has a great deal of comfort in his knowledge of medical education,” she said. “I think they set the foundation for the medical school to be what it is today.”

WSU study names the KU School of Medicine–Wichita an “economic driver,” bringing $35.6 million in total earnings to the community.

S. Edwards (W76) speaks to a group of elementary school students as part of a community education class in the Wichita community.

“Dean Wilson has a great deal of comfort in his knowledge of medical education and terrific experience managing and growing a medical school. I am so optimistic about the future of the medical school in Wichita because of his leadership.”

Lorene said many people deserve credit for helping the medical school overcome its challenges and prepare for the future.

“For all its growth over the past four decades, the school has matured, it has shown that the program is a stable program, it’s a viable program. It’s quite clear it’s a … we’ve moved beyond proving our stability, and KU is now looking at the next level and building on our achievements.”

Below, Dennis Moore (W87) speaks to students at Wichita Southeast High School in 1986. Wichita’s medical students have reached out to high school students in many ways over the years, most recently hosting a “Doc for a Day” program to give area high school students an opportunity to learn more about careers in medicine.

Daniel Stewart (W87) offers a pretend health check to a youngster along the Wichita River Festival parade route in 1986. Many students and residents, as well as staff and faculty, participate in the annual parade as a way to come together to promote the school and show their spirit.

“Dean Wilson has a great deal of comfort in his knowledge of medical education and terrific experience managing and growing a medical school. I am so optimistic about the future of the medical school in Wichita because of his leadership.”

Lorene said many people deserve credit for helping the medical school overcome its challenges and prepare for the future.

“I do not think the medical school would be here today if it wasn’t for key physician leaders and key leaders in the Wichita community who really had the foresight and could see the value of having medical student education,” she said. “I think they set the foundation for the medical school to be what it is today.”

Those leaders and other supporters helped the medical school overcome its challenges and prepare for the future.

“I remember the founding Dean, Cramer Reed, saying when the campus first started, there were a lot of naysayers, there were people who weren’t sure it would survive over three or four years,” Dr. Minns recalled.

“I think the school has matured, it has shown that the program is a stable program, it’s a viable program. It’s quite clear it’s a durable program, and I think we’ve moved beyond proving our stability, and KU is now looking at the next level and building on our achievements.”

Students prepared to “roast” the faculty at a special “Wednesday Night Live” in 1975. Such events helped to build a sense of community among students.

National Board of Medical Examiners Testing Center, one of seven in the nation, opens on Wichita Campus.

A groundbreaking is held for the Daniel K. Roberts Center for Research and the Kansas Health Foundation Center for Primary Care, the first new construction on the Wichita Campus.

KU School of Medicine–Wichita receives LCMC accreditation for maximum term.
GREGORY JOHN GEORGE, MD
School Alum 1987, Residency Alum 1990
Hometown: Wichita, KS
Residency: Anesthesiology, KU School of Medicine-Wichita
Current: Private practitioner at Wesley Medical Center–Obstetric Department; KU School of Medicine–Wichita Anesthesiology Clinical Assistant Professor

Most beneficial in Wichita:
The most beneficial aspect of my training was the variety and more than adequate volume of cases to which I was exposed. Additionally, the emphasis on didactics and the opportunity to train in a private practice setting was very helpful in preparing for my current position.

Biggest influence: A handful of attendings who modeled a fierce energy for patient care and the ethics needed to be successful. They gave every rotation, test, etc., your utmost effort, as good performance and positive recommendations will open many doors. They were the example of my mentor, Dr. Conrad Osborne, a family physician dedicated to his patients, was integrally involved with the medical students and surgery residents, and demonstrated tremendous efficiency and technical expertise in the operating room. We were the hands-on practical training in the community hospitals with working doctors was invaluable.

Why Kansas:
I was in the fall of 2011.

Residency: Radiology, KU School of Medicine-Wichita
Current: Group working at Wesley Medical Center and Cypress Women’s Imaging; Chief of Mammmography for Radiology Residency at the KU School of Medicine-Wichita
Most beneficial in Wichita: For medical school, I believe the Wichita Campus is special due to its smaller campus and the number of volunteer faculty doing their job as teachers because they want to teach. This provides not only a great learning environment, but a sense of community. This is also true of the radiology residency which is an excellent program that provides well-rounded, competent specialists with as much hands-on experience as compared to other larger programs.

Biggest influence: I took with me something from all of those who taught me.

Advice for students: Study hard and keep an open mind with each rotation. Even if you are not interested in the rotation, you will be learning material that will later affect your specialty. All specialties play some role with another, and the knowledge you gain will make you better at what you choose to do in the future.

Medical advice: Communication among specialties is very important. Why Kansas: I love being part of the residency program, being able to do my part to give back to the medical school by teaching others.

Medical advice: Communication among specialties is very important to give the best care to your patients.

FRANIE H. EKENGREN, MD
School Alum 1997, Residency Alum 2000
Hometown: Hutchinson, KS
Residency: Family Medicine, Wesley Medical Center Family Practice
Current: Chief Medical Officer at Wesley Medical Center, Emergency Department Physician F.S.P.A. at Wesley Medical Center, Wichita

Most beneficial in Wichita:
The hands-on practical training in the community hospitals with working doctors was invaluable.

Biggest influence: Dr. John Hart was my teaching attending for three years. He led by example, showing me how to pursue the knowledge that I needed and how to express genuine concern for patients. He also modeled a fierce energy for patient care and the ethics needed to be successful. They gave every rotation, test, etc., your utmost effort, as good performance and positive recommendations will open many doors. They were the example of my mentor, Dr. Conrad Osborne, a family physician dedicated to his patients, was integrally involved with the medical students and surgery residents, and demonstrated tremendous efficiency and technical expertise in the operating room. We were the hands-on practical training in the community hospitals with working doctors was invaluable.

Why Kansas:
I was in the fall of 2011.

Residency: Family Medicine, Wesley Medical Center Family Practice
Current: Full-time family medicine practice with group of five family physicians covering Greetley, Wallace, and Hamilton counties in western Kansas

Most beneficial in Wichita: Personal interest and support of dedicated staff physicians who, along with the hospital staff and community, welcomed our arrival as a new beginning in Wichita.

Biggest influence: Hard to list, but I most appreciated the example of my mentor, Dr. Conrad Osborne, a family physician with Hillside Medical Center at the time. He exemplified personal interest and a professional relationship with his patients.

Advice for students: Strongly consider the possibilities of primary care practice in the rural areas of our state; the opportunities and benefits are great!

Why Kansas:
A great group of fellow physicians who support one another’s goals and aspirations; a supportive community with the visibility and opportunity to practice family medicine in its entirety.

Medical advice: Remember and apply your altruistic reasons for going into medicine.

MAURICE DUGGINS, MD
School Alum 1993, Residency Alum 1996
Hometown: Charlotte Amalie; St. Thomas USVI
Residency: Family Medicine, Via Christi-St. Joseph Residency
Current: Via Christi Family Medicine Faculty; KU School of Medicine-Wichita Family and Community Medicine Clinical Assistant Professor

Most beneficial in Wichita:
Real-life practice is easy to see and appreciate when training under the guidance of our great community doctors.

Biggest influence: Dr. John Dorsch always had a kind and a professional relationship with his patients.

Advice for students:
Embrace every opportunity to learn as you advance through your clinical rotations. Give every rotation, test, etc., your utmost effort, as good performance and positive recommendations will open many doors. They were the example of my mentor, Dr. Conrad Osborne, a family physician dedicated to his patients, was integrally involved with the medical students and surgery residents, and demonstrated tremendous efficiency and technical expertise in the operating room. We were the hands-on practical training in the community hospitals with working doctors was invaluable.

Why Kansas:
I was in the fall of 2011.

Residency: General Surgery, St. Francis General Surgery, St. Francis
Current: Professor and Chair of Surgery at the KU School of Medicine; General Surgery, St. Francis General Surgery, St. Francis

Most beneficial in Wichita:
The real-life practice is easy to see and appreciate when training under the guidance of our great community doctors.

Biggest influence: Dr. John Dorsch always had a kind and a professional relationship with his patients.

Advice for students:
Embrace every opportunity to learn as you advance through your clinical rotations. Give every rotation, test, etc., your utmost effort, as good performance and positive recommendations will open many doors. They were the example of my mentor, Dr. Conrad Osborne, a family physician dedicated to his patients, was integrally involved with the medical students and surgery residents, and demonstrated tremendous efficiency and technical expertise in the operating room. We were the hands-on practical training in the community hospitals with working doctors was invaluable.

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Advice for students: Strongly consider the possibilities of primary care practice in the rural areas of our state; the opportunities and benefits are great!

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A great group of fellow physicians who support one another’s goals and aspirations; a supportive community with the visibility and opportunity to practice family medicine in its entirety.

Medical advice: Remember and apply your altruistic reasons for going into medicine.

MARILEE MCBYOLE, MD
School Alum 1977, Resident Alum 1982
Hometown: Abilene, KS
Residency: General Surgery, St. Francis General Surgery, St. Francis
Current: KU School of Medicine-Wichita Surgery Associate Professor
Most beneficial in Wichita:
One of the most beneficial aspects of my training in Wichita was the great patient volume and the overall positive attitude.

Biggest influence: I was influenced the most during my training both as a medical student and as a general surgery

Why Kansas:
Wichita was special to me as it was in this community that I completed my training.

Medical advice: As physicians, try to put ourselves in the “shoes” of the patient and his/her family.

LISA STEPHENSON MAY, MD
School Alum 1999, Residency Alum 2005
Hometown: Wichita, KS
Residency: Radiology, KU School of Medicine-Wichita
Current: Partner with Wichita Radiological Group working at Wesley Medical Center and Cypress Women’s Imaging; Chief of Mammmography for Radiology Residency at the KU School of Medicine-Wichita
Most beneficial in Wichita: For medical school, I believe the Wichita Campus is special due to its smaller campus and the number of volunteer faculty doing their job as teachers because they want to teach. This provides not only a great learning environment, but a sense of community. This is also true of the radiology residency which is an excellent program that provides well-rounded, competent specialists with as much hands-on experience as compared to other larger programs.

Biggest influence: I took with me something from all of those who taught me.

Advice for students: Study hard and keep an open mind with each rotation. Even if you are not interested in the rotation, you will be learning material that will later affect your specialty. All specialties play some role with another, and the knowledge you gain will make you better at what you choose to do in the future.

Why Kansas: I love being part of the residency program, being able to do my part to give back to the medical school by teaching others.

Medical advice: Communication among specialties is very important to give the best care to your patients.

RANDALL FAHRENHOLTZ, MD
School Alum 1975, Resident Alum 1978
Hometown: Tribune, KS (currently); Sylvia, KS (childhood)
Residency: Family Medicine, Wesley Medical Center–Obstetric Department; KU School of Medicine–Wichita Anesthesiology Clinical Assistant Professor

Most beneficial in Wichita:
The hands-on practical training in the community hospitals with working doctors was invaluable.

Biggest influence:
From the school’s all-important mission of providing quality health care for Kansans.

Advice for students:
Take every opportunity to learn as you advance through your clinical rotations. Give every rotation, test, etc., your utmost effort, as good performance and positive recommendations will open many doors.

Why Kansas:
I love being part of the residency program, being able to do my part to give back to the medical school by teaching others.

Medical advice: Communication among specialties is very important to give the best care to your patients.
pathophysiology of illnesses from Dr. William Peery, to appreciate the effects of my daily decisions on the medical community from Dr. Garold Minns, and not to be the “candy man” from Dr. Brenda Schewe.

Advice for students: Engage fully in your education and dictate how it is perceived. Do not be afraid to say what you think as this is the time to make mistakes.

Why Kansas: I love it. Actually my wife, Lisa, lived in Wichita all her life, so this was our natural place to be.

Medical advice: Patients are always right.
Happenings

In December 2009, the skeleton of the new school takes shape. The 26,000-square-foot addition above the West Atkum will house labs, classrooms, and administrative offices.

The structure was entirely enclosed in February so work inside could move forward.

KU School of Medicine-Wichita students recently celebrated the five-year anniversary of the JayDoc Community Clinic where they provide treatment to uninsured patients under the supervision of a volunteer faculty physician. Open from 10 a.m. to 2 p.m. each Saturday inside Goodaluppi Clinic, 410 S. St. Francis, the JayDoc Clinic has provided care for more than 2,500 patients. Third-year student Matt Winans is pictured here working with a patient.

John Dorsch, MD, associate professor of Family and Community Medicine, is serving a three-year term as a representative of the Medical Society of Sedgwick County on the Board of directors for the Medical Services Bureau (MSB). The purpose of the MSB is to assist indigent patients in Sedgwick County with medications and vision examinations.

The Medical Society of Sedgwick County (MSSC) has named its officers for 2010: George Lucas, MD, President; Linda Francisco, MD, Vice President; Thomas Kryzer, MD, Secretary; and Hewitt Goodpasture, MD, Treasurer. Members of the board of directors are Michael Cannon, MD; Richard Claiborne, MD; James Gilksbaugh III, MD; Tanja Goering, MD; Rick Kellerman, MD; John Kready, MD; Roberta Loeffler, MD; George Randall, MD; and Estephan Zayat, MD. Dr. Kellerman is chair of Family and Community Medicine at the KU School of Medicine-Wichita. All others are active practice members. In addition, Dr. Kellerman, Dr. Goering, and Dr. Zayat are resident alumni. Dr. Kready is a student and resident alumnus.

Brooks Keel, PhD, Distinguished Professor in Obstetrics and Gynecology, assumed his post in January as the 12th president of Georgia Southern University in Statesboro, GA.

Dale Denning, MD, who completed his internal medicine residency in Wichita in 1984, recently became certified by the American Board of Phlebology. Dr. Denning opened Lawrence Vein Center in Lawrence, KS, in 2005.

The new facility functions as a community service program, which is open to the public and provides free services to individuals who are in need of vein treatments. The center offers a variety of services, including vein treatment, vein surgery, and vein consultation. The center also provides services to individuals with vein-related conditions, such as vein pain and swelling.

Jennifer Scott Koontz, MD, MPH (W95), who practices at Pinnacle Sports Medicine and Orthopaedics in Newton, KS, was part of a team of physicians who recently traveled to Haiti to help treat victims of the Jan. 12 earthquake. She spent about one week in Port-au-Prince. The Summer 2010 issue of KU Wichita will feature more information about alumni who went to Haiti to help. Dr. Koontz is pictured at left taking care of a child with pneumonia.

From right: Kim Audus, PhD, dean of the KU School of Pharmacy; Gov. Mark Parkinson; Mike O’Neil, Speaker of the Kansas House of Representatives; and Kathy Damron, KU director of State Relations, attend the “roof raising” for the new school of pharmacy on Sept. 30, 2009.

From left: John Dorsch; Richard Claiborne; Tana Goering; Rick Kellerman; Roberta Loeffler; George Randall; George Kready; Estephan Zayat; Linda Francisco; Thomas Kryzer; and Hewitt Goodpasture.

In memory

Ginger Sensesen, MD (W96), a KU School of Medicine—Wichita volunteer faculty member since 2001, died on Dec. 28, 2009, of breast cancer. Dr. Sensesen, a pediatrician, taught both pediatric students and family medicine residents in Salina, KS, where she practiced. She was 40 years old. As a student, Dr. Sensesen received the 1996 Drs. Richard and Diana Guthrie Award for Excellence in Pediatrics. Memorials have been established with The Palm Court Scout Ranch, 17 Deer Run Road, Cimarron, NM, 87714; and the Family Hope Center at First Presbyterian Church, 308 S. Eighth St., Salina, KS, 67401.
Alumni Reunion Weekend
October 8-9, 2010

Mark Your Calendar!
KUMC Alumni Association invites you to come home and rediscover the spirit of your campus with great activities planned for the weekend.

Full schedule of events and registration at www.kumc.edu/alumni

Join your fellow Wichita alumni for a cocktail reception with Dean H. David Wilson, MD, prior to the Alumni and Community Awards Gala on Saturday, October 9, 5:30 pm, at the Hyatt Regency Crown Center Hotel.

For more information call (913) 588-1255 or (888) 679-5951.